

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Bleeding Precautions		
Order Start Date/Time: 12/28/2021 15:07 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Communication Orders
End-state Date/Time: 12/28/2021 20:40 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST		
Order Details: 12/28/21 3:07:00 PM PST		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 15:07:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 15:10 PST	Action Personnel: Chan D.O.,Larry
Communication Type: Written		
Order Details: 12/28/21 15:07:00 PST		
Review Information:		
Nurse Review: Not Reviewed		
Doctor Cosign: Not Required		
Comments:		

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 DOB/Age/Sex: 3/29/1946 76 years Male
FIN: 5314530 Admit/Disch: 12/28/2021 12/28/2021
Patient Type: Day Patient Admitting: Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Remove Bandaid From CCL Angiogram Cath Site Upon Discharge		
Order Start Date/Time: 12/28/2021 15:07 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Patient Care
End-state Date/Time: 12/29/2021 09:01 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST		
Order Details: 12/28/21 3:07:00 PM PST, On discharge		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/29/2021 09:01 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 15:07:00 PST, On discharge		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 15:10 PST	Action Personnel: Chan D.O.,Larry
Communication Type: Written		
Order Details: 12/28/21 15:07:00 PST, On discharge		
Review Information:		
Nurse Review: Not Reviewed		
Doctor Cosign: Not Required		
Comments:		

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Straight Cath if Unable to Void		
Order Start Date/Time: 12/28/2021 15:07 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Asmt/Tx/Monitoring
End-state Date/Time: 12/28/2021 20:40 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST		
Order Details: 12/28/21 3:07:00 PM PST, Once, PRN, 4 hrs after procedure		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 15:07:00 PST, Once, PRN, 4 hrs after procedure		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 15:10 PST	Action Personnel: Chan D.O.,Larry
Communication Type: Written		
Order Details: 12/28/21 15:07:00 PST, Once, PRN, 4 hrs after procedure		
Review Information:		
Nurse Review: Not Reviewed		
Doctor Cosign: Not Required		
Comments:		

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Vital Signs Routine Post-op		
Order Start Date/Time: 12/28/2021 15:07 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Basic Care
End-state Date/Time: 12/28/2021 20:40 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST		
Order Details: 12/28/21 3:07:00 PM PST, POST CATH LAB: Check Vital Signs, Puncture Site and Distal Pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine. For Radial access, include color, temperature and pulse oximetry (thumb or index finger) distal to compression band		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 15:07:00 PST, POST CATH LAB: Check Vital Signs, Puncture Site and Distal Pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine. For Radial access, include color, temperature and pulse oximetry (thumb or index finger) distal to compressi...		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 15:10 PST	Action Personnel: Chan D.O.,Larry
Communication Type: Written		
Order Details: 12/28/21 15:07:00 PST, POST CATH LAB: Check Vital Signs, Puncture Site and Distal Pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine. For Radial access, include color, temperature and pulse oximetry (thumb or index finger) distal to compressi...		
Review Information:		
Nurse Review: Not Reviewed		
Doctor Cosign: Not Required		
Comments:		

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5314530

Admit/Disch: 12/28/2021 12/28/2021

Patient Type: Day Patient

Admitting: Chan D.O.,Larry

Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Vital Signs Routine Post-op

Order Start Date/Time: 12/28/2021 15:07 PST

Order Status: Discontinued Department Status: Discontinued Activity Type: Basic Care

End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:

Ordering Physician: Chan D.O.,Larry

Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST

Order Details: 12/28/21 3:07:00 PM PST, POST SHEATH REMOVAL: Check Vital Signs, puncture site and distal pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine.

Comments: Check for bleeding, hematoma, pseudoaneurysm and retro-peritoneal bleeding. Check distal extremity for warmth, color, sensation and presence of pulse

Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM

Communication Type:

Order Details: 12/28/21 15:07:00 PST, POST SHEATH REMOVAL: Check Vital Signs, puncture site and distal pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine.

Review Information:

Doctor Cosign: Not Required

Comments:

Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry

Communication Type: Written

Order Details: 12/28/21 15:07:00 PST, POST SHEATH REMOVAL: Check Vital Signs, puncture site and distal pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine.

Review Information:

Nurse Review: Not Reviewed

Doctor Cosign: Not Required

Comments: Check for bleeding, hematoma, pseudoaneurysm and retro-peritoneal bleeding. Check distal extremity for warmth, color, sensation and presence of pulse

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders

Patient Care

Order: Vital Signs Routine Post-op

Order Start Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Department Status: Discontinued Activity Type: Basic Care
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 12/28/21 3:07:00 PM PST, WITH SHEATH IN SITU: Check Vital Signs, Puncture Site and Distal Pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine
Comments:
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 12/28/21 15:07:00 PST, WITH SHEATH IN SITU: Check Vital Signs, Puncture Site and Distal Pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 12/28/21 15:07:00 PST, WITH SHEATH IN SITU: Check Vital Signs, Puncture Site and Distal Pulse Q15min x4, then Q30min x4, then Q1hr x4, then Routine
Review Information:
Nurse Review: Not Reviewed
Doctor Cosign: Not Required
Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Ambulate		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Patient Activity
End-state Date/Time: 12/28/2021 20:40 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, As Tolerated		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, As Tolerated		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, As Tolerated		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Communication Order (ANTICOAGULANTS)		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Communication Orders
End-state Date/Time: 12/28/2021 20:40 PST		End-state Reason:
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, ANTICOAGULANTS, Anticoagulants must be held 48 hours prior to procedure: Eliquis, Xarelto, Savaysa, and Pradaxa, unless instructed otherwise by Cardiologist.		
Comments: For outpatient procedure, Pre Op Center to advise patient to verify hold instructions with Cardiologist, if not already verified. For inpatient, Notify Cardiologist when anticoagulants held and ask if IV Heparin required.		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, ANTICOAGULANTS, Anticoagulants must be held 48 hours prior to procedure: Eliquis, Xarelto, Savaysa, and Pradaxa, unless instructed otherwise by Cardiologist.		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, ANTICOAGULANTS, Anticoagulants must be held 48 hours prior to procedure: Eliquis, Xarelto, Savaysa, and Pradaxa, unless instructed otherwise by Cardiologist.		
Review Information:		
Doctor Cosign: Not Required		
Comments: For outpatient procedure, Pre Op Center to advise patient to verify hold instructions with Cardiologist, if not already verified. For inpatient, Notify Cardiologist when anticoagulants held and ask if IV Heparin required.		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

Report ID: 127045217

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders

Patient Care

Order: Communication Order (ANTI-PLATELETS)
Order Start Date/Time: 12/28/2021 11:56 PST
Order Status: Discontinued
Department Status: Discontinued
Activity Type: Communication Orders
End-state Date/Time: 12/28/2021 20:40 PST
End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST
Order Details: 12/28/21 11:56:00 AM PST, ANTI-PLATELETS, DO NOT HOLD the following anti-platelet medications prior to cath lab/PCI procedure: Aspirin, Plavix, Effient, and Brilinta
Comments:
Action Type: Discontinue
Action Date/Time: 12/28/2021 20:40 PST
Action Personnel: SYSTEM
Communication Type:
Order Details: 12/28/21 11:56:00 PST, ANTI-PLATELETS, DO NOT HOLD the following anti-platelet medications prior to cath lab/PCI procedure: Aspirin, Plavix, Effient, and Brilinta
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order
Action Date/Time: 12/28/2021 11:56 PST
Action Personnel: Madden RN,Lisa A
Communication Type: Written
Order Details: 12/28/21 11:56:00 PST, ANTI-PLATELETS, DO NOT HOLD the following anti-platelet medications prior to cath lab/PCI procedure: Aspirin, Plavix, Effient, and Brilinta
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Plan
Action Date/Time: 12/23/2021 13:25 PST
Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Communication Order (COUMADIN)		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Communication Orders
End-state Date/Time: 12/28/2021 20:40 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, COUMADIN, Coumadin must be held 3 days prior to procedure, unless instructed otherwise by Cardiologist.		
Comments: For outpatient procedure, Pre Op Center to advise patient to verify hold instructions with Cardiologist, if not already verified. For inpatient, Notify Cardiologist when Coumadin held and ask if IV Heparin required.		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, COUMADIN, Coumadin must be held 3 days prior to procedure, unless instructed otherwise by Cardiologist.		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, COUMADIN, Coumadin must be held 3 days prior to procedure, unless instructed otherwise by Cardiologist.		
Review Information:		
Doctor Cosign: Not Required		
Comments: For outpatient procedure, Pre Op Center to advise patient to verify hold instructions with Cardiologist, if not already verified. For inpatient, Notify Cardiologist when Coumadin held and ask if IV Heparin required.		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

Report ID: 127045217

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders

Patient Care

Order: Communication Order (TRANSPORT INSTRUCTIONS)
Order Start Date/Time: 12/28/2021 11:56 PST
Order Status: Discontinued
Department Status: Discontinued
Activity Type: Communication Orders
End-state Date/Time: 12/28/2021 20:40 PST
End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST
Order Details: 12/28/21 11:56:00 AM PST, TRANSPORT INSTRUCTIONS, Transport to Cath Lab without cardiac monitor
Comments:
Action Type: Discontinue
Action Date/Time: 12/28/2021 20:40 PST
Action Personnel: SYSTEM
Communication Type:
Order Details: 12/28/21 11:56:00 PST, TRANSPORT INSTRUCTIONS, Transport to Cath Lab without cardiac monitor
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order
Action Date/Time: 12/28/2021 11:56 PST
Action Personnel: Madden RN,Lisa A
Communication Type: Written
Order Details: 12/28/21 11:56:00 PST, TRANSPORT INSTRUCTIONS, Transport to Cath Lab without cardiac monitor
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Plan
Action Date/Time: 12/23/2021 13:25 PST
Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Communication Order (VOID INSTRUCTIONS)		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Communication Orders
End-state Date/Time: 12/28/2021 20:40 PST		End-state Reason:
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, VOID INSTRUCTIONS, Have patient void before pre-meds are given		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, VOID INSTRUCTIONS, Have patient void before pre-meds are given		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, VOID INSTRUCTIONS, Have patient void before pre-meds are given		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Consent On Chart For		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Communication Orders
End-state Date/Time: 12/29/2021 09:01 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, Right and/or left heart catheterization, left ventricular angiogram with selective coronary arteriograms, Possible percutaneous coronary intervention, Possible coronary artery bypass graft surgery, Stop		
Date/Time: 12/29/21 9:01:34 AM PST, 12/28/21 11:56:00 PST		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/29/2021 09:01 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, Right and/or left heart catheterization, left ventricular angiogram with selective coronary arteriograms, Possible percutaneous coronary intervention, Possible coronary artery bypass graft surgery, Stop		
Date/Time: 12/28/21 11:5...		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, Right and/or left heart catheterization, left ventricular angiogram with selective coronary arteriograms, Possible percutaneous coronary intervention, Possible coronary artery bypass graft surgery, Stop		
Date/Time: 12/28/21 11:5...		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

Report ID: 127045217

Print Date/Time: 2/24/2023 16:08 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Education General (Patient Education)		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Patient Education
End-state Date/Time: 12/29/2021 09:01 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, Stop Date 12/29/21 9:01:35 AM PST, Pre-Cath teaching		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/29/2021 09:01 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, Stop Date 12/28/21 11:56:00 PST, Pre-Cath teaching		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, Stop Date 12/28/21 11:56:00 PST, Pre-Cath teaching		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5314530

Admit/Disch: 12/28/2021 12/28/2021

Patient Type: Day Patient

Admitting: Chan D.O.,Larry

Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Notify Provider Laboratory Results

Order Start Date/Time: 12/28/2021 11:56 PST

Order Status: Discontinued Department Status: Discontinued Activity Type: Communication Orders

End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:

Ordering Physician: Chan D.O.,Larry

Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST

Order Details: 12/28/21 11:56:00 AM PST, PRN, K+ less than 3.5, Hct less than 30, PT greater than 15 sec, PTT greater than 45 sec, Creatinine greater than 1.7, Plt count less than 100,000

Comments:

Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM

Communication Type:

Order Details: 12/28/21 11:56:00 PST, PRN, K+ less than 3.5, Hct less than 30, PT greater than 15 sec, PTT greater than 45 sec, Creatinine greater than 1.7, Plt count less than 100,000

Review Information:

Doctor Cosign: Not Required

Comments:

Action Type: Order Action Date/Time: 12/28/2021 11:56 PST Action Personnel: Madden RN,Lisa A

Communication Type: Written

Order Details: 12/28/21 11:56:00 PST, PRN, K+ less than 3.5, Hct less than 30, PT greater than 15 sec, PTT greater than 45 sec, Creatinine greater than 1.7, Plt count less than 100,000

Review Information:

Doctor Cosign: Not Required

Comments:

Action Type: Plan Action Date/Time: 12/23/2021 13:25 PST Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Peripheral IV Insertion		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Asmt/Tx/Monitoring
End-state Date/Time: 12/29/2021 09:01 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, Left arm, Stop Date/Time: 12/29/21 9:01:35 AM PST, 12/28/21 11:56:00 PST		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/29/2021 09:01 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, Left arm, Stop Date/Time: 12/28/21 11:56:00 PST, 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, Left arm, Stop Date/Time: 12/28/21 11:56:00 PST, 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Prep		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Asmt/Tx/Monitoring
End-state Date/Time: 12/29/2021 09:01 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, Right Groin (Cath Lab Nursing Staff), Stop Date/Time: 12/29/21 9:01:34 AM PST, 12/28/21 11:56:00 PST		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/29/2021 09:01 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, Right Groin (Cath Lab Nursing Staff), Stop Date/Time: 12/28/21 11:56:00 PST, 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, Right Groin (Cath Lab Nursing Staff), Stop Date/Time: 12/28/21 11:56:00 PST, 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Patient Care

Order: Prep		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Department Status: Discontinued	Activity Type: Asmt/Tx/Monitoring
End-state Date/Time: 12/29/2021 09:01 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 12/28/21 11:56:00 AM PST, Left Groin (Cath Lab Nursing staff) when there is difficulty palpating right femoral site., Stop Date/Time: 12/29/21 9:01:34 AM PST, 12/28/21 11:56:00 PST		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/29/2021 09:01 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: 12/28/21 11:56:00 PST, Left Groin (Cath Lab Nursing staff) when there is difficulty palpating right femoral site., Stop Date/Time: 12/28/21 11:56:00 PST, 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 12/28/21 11:56:00 PST, Left Groin (Cath Lab Nursing staff) when there is difficulty palpating right femoral site., Stop Date/Time: 12/28/21 11:56:00 PST, 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient:	HANNA MD, ADEL SHAKER	DOB/Age/Sex:	3/29/1946 76 years Male
MRN:	918505	Admit/Disch:	12/28/2021 12/28/2021
FIN:	5314530	Admitting:	Chan D.O.,Larry
Patient Type:	Day Patient		
Attending:	Chan D.O.,Larry		

Orders

Patient Care

Order: Vital Signs Per Standards of Care
 Order Start Date/Time: 12/28/2021 11:56 PST
 Order Status: Discontinued Department Status: Discontinued Activity Type: Basic Care
 End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
 Ordering Physician: Chan D.O.,Larry
 Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST
 Order Details: 12/28/21 11:56:00 AM PST
 Comments:
 Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
 Communication Type:
 Order Details: 12/28/21 11:56:00 PST
 Review Information:
 Doctor Cosign: Not Required
 Comments:
 Action Type: Order Action Date/Time: 12/28/2021 11:56 PST Action Personnel: Madden RN,Lisa A
 Communication Type: Written
 Order Details: 12/28/21 11:56:00 PST
 Review Information:
 Doctor Cosign: Not Required
 Comments:
 Action Type: Plan Action Date/Time: 12/23/2021 13:25 PST Action Personnel: Gamboa RN,Veronica

Order: Quality Measures Immunizations Tracking
 Order Start Date/Time: 12/28/2021 11:27 PST
 Order Status: Ordered Department Status: Ordered Activity Type: General Assessments
 End-state Date/Time: 12/28/2021 11:27 PST End-state Reason:
 Ordering Physician: SYSTEM
 Entered By: SYSTEM on 12/28/2021 11:27 PST
 Order Details: 12/28/21 11:27:19 AM PST, Stop Date/Time: 12/28/21 11:27:19 AM PST
 Comments:
 Action Type: Order Action Date/Time: 12/28/2021 11:27 PST Action Personnel: SYSTEM
 Communication Type:
 Order Details: 12/28/21 11:27:19 PST, Stop Date/Time: 12/28/21 11:27:19 PST
 Review Information:
 Doctor Cosign: Not Required
 Comments:

Report ID: 127045217

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Radiology

Order: XR Chest 2 Views		
Order Start Date/Time: 12/23/2021 13:59 PST		
Order Status: Completed	Department Status: Completed	Activity Type: Radiology
End-state Date/Time: 12/23/2021 14:46 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Carpio ,Adriela E on 12/23/2021 13:59 PST		
Order Details: 12/23/21 1:59:00 PM PST, Routine, 12/23/21 2:46:50 PM PST, Reason: PREOP, PT ALSO HAS LABS, RSAM		
Radiology Rad Service Area, Rad Type, Procedures may not be covered due to dia, Required & Missing		
Comments:		
Action Type: Complete	Action Date/Time: 12/23/2021 14:46 PST	Action Personnel: Berry M.D.,Stuart D.
Communication Type: Written		
Order Details: 12/23/21 13:59:00 PST, Routine, 12/23/21 13:59:00 PST, Reason: PREOP, PT ALSO HAS LABS, RSAM		
Radiology Rad Service Area, Rad Type, Procedures may not be covered due to dia, Required & Missing		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Status Change	Action Date/Time: 12/23/2021 14:14 PST	Action Personnel: Batchelor RT,Michael D
Communication Type: Written		
Order Details: 12/23/21 13:59:00 PST, Routine, 12/23/21 13:59:00 PST, Reason: PREOP, PT ALSO HAS LABS, RSAM		
Radiology Rad Service Area, Rad Type, Procedures may not be covered due to dia, Required & Missing		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Status Change	Action Date/Time: 12/23/2021 14:11 PST	Action Personnel: Batchelor RT,Michael D
Communication Type: Written		
Order Details: 12/23/21 13:59:00 PST, Routine, 12/23/21 13:59:00 PST, Reason: PREOP, PT ALSO HAS LABS, RSAM		
Radiology Rad Service Area, Rad Type, Procedures may not be covered due to dia, Required & Missing		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/23/2021 14:00 PST	Action Personnel: Carpio ,Adriela E
Communication Type: Written		
Order Details: 12/23/21 13:59:00 PST, Routine, 12/23/21 13:59:00 PST, Reason: PREOP, PT ALSO HAS LABS, RSAM		
Radiology Rad Service Area, Rad Type, Procedures may not be covered due to dia, Required & Missing		
Review Information:		
Nurse Review: Not Reviewed		
Doctor Cosign: Not Required		
Comments:		

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5314530

Admit/Disch: 12/28/2021 12/28/2021

Patient Type: Day Patient

Admitting: Chan D.O.,Larry

Attending: Chan D.O.,Larry

Orders

Radiology

Order: XR Chest 2 Views (Chest 2 Views)

Order Start Date/Time: 12/22/2021 14:19 PST

Order Status: Canceled Department Status: Canceled Activity Type: Radiology

End-state Date/Time: 12/22/2021 14:19 PST End-state Reason:

Ordering Physician: Chan D.O.,Larry

Entered By: Voss RN, Kimberly A on 12/22/2021 14:19 PST

Order Details: 12/22/21 2:19:00 PM PST, Routine, 12/22/21 2:19:00 PM PST, Reason: Pre-op for Anesthesia Clearance,

Transport Mode: Wheelchair, Phone Interview, Rad Type, Future Order

Comments: CCL procedure 12/28/21

Action Type: Status Change Action Date/Time: 12/22/2022 21:00 PST Action Personnel: SYSTEM

Communication Type:

Order Details: 12/22/21 14:19:00 PST, Routine, 12/22/21 14:19:00 PST, Reason: Pre-op for Anesthesia Clearance, Transport

Mode: Wheelchair, Phone Interview, Rad Type, Future Order

Review Information:

Doctor Cosign: Not Required

Comments:

Action Type: Order Action Date/Time: 12/22/2021 14:20 PST Action Personnel: Voss RN, Kimberly A

Communication Type: Written

Order Details: 12/22/21 14:19:00 PST, Routine, 12/22/21 14:19:00 PST, Reason: Pre-op for Anesthesia Clearance, Transport

Mode: Wheelchair, Phone Interview, Rad Type, Future Order

Review Information:

Doctor Cosign: Not Required

Comments: CCL procedure 12/28/21

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Radiology

Order: XR Chest 2 Views (Chest 2 Views)		
Order Start Date/Time: 8/6/2021 12:28 PDT		
Order Status: Canceled	Department Status: Canceled	Activity Type: Radiology
End-state Date/Time: 12/22/2021 14:21 PST	End-state Reason: Duplicate Order	
Ordering Physician: Chan D.O.,Larry		
Entered By: Andrade-Escarcega RN, Maria on 8/6/2021 12:28 PDT		
Order Details: 8/6/21 12:28:00 PM PDT, Routine, 12/22/21 2:21:49 PM PST, Reason: Pre-op for Anesthesia Clearance, Transport Mode: Wheelchair, Phone Interview, inguinal hernia repair 8/12/21, dx right inguinal hernia, Rad Type, Future Order		
Comments:		
Action Type: Cancel	Action Date/Time: 12/22/2021 14:21 PST	Action Personnel: Voss RN, Kimberly A
Communication Type: Protocol		
Order Details: 08/06/21 12:28:00 PDT, Routine, 08/06/21 12:28:00 PDT, Reason: Pre-op for Anesthesia Clearance, Transport Mode: Wheelchair, Phone Interview, inguinal hernia repair 8/12/21, dx right inguinal hernia, Rad Type, Future Order		
Review Information:		
Doctor Cosign: Electronically Signed, Chan D.O.,Larry on 12/23/2021 16:20 PST		
Comments:		
Action Type: Order	Action Date/Time: 8/6/2021 12:30 PDT	Action Personnel: Andrade-Escarcega RN, Maria
Communication Type: Protocol		
Order Details: 08/06/21 12:28:00 PDT, Routine, 08/06/21 12:28:00 PDT, Reason: Pre-op for Anesthesia Clearance, Transport Mode: Wheelchair, Phone Interview, inguinal hernia repair 8/12/21, dx right inguinal hernia, Rad Type, Future Order		
Review Information:		
Doctor Cosign: Electronically Signed, Beseth M.D., Bryce D on 8/6/2021 13:54 PDT		
Comments:		

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders

Respiratory Therapy

Order: Oxygen Therapy-Simple (O2 Therapy)

Order Start Date/Time: 12/28/2021 22:00 PST
 Order Status: Canceled Department Status: Canceled Activity Type: RT- Nsg Tx/Procedures
 End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
 Ordering Physician: Chan D.O.,Larry
 Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
 Order Details: 12/28/21 10:00:00 PM PST, Nasal Cannula, Keep O2 Sat % eq/greater: 92
 Comments:

Action Type: Cancel Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
 Communication Type:
 Order Details: 12/28/21 22:00:00 PST, Nasal Cannula, Keep O2 Sat % eq/greater: 92
 Review Information:
 Doctor Cosign: Not Required
 Comments:

Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
 Communication Type: Written
 Order Details: 12/28/21 22:00:00 PST, Nasal Cannula, Keep O2 Sat % eq/greater: 92
 Review Information:
 Doctor Cosign: Not Required
 Comments:

Order: Oxygen Therapy-Simple (O2 Therapy)

Order Start Date/Time: 12/29/2021 10:00 PST
 Order Status: Canceled Department Status: Canceled Activity Type: RT- Nsg Tx/Procedures
 End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
 Ordering Physician: Chan D.O.,Larry
 Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
 Order Details: 12/29/21 10:00:00 AM PST, Nasal Cannula, Keep O2 Sat % eq/greater: 92
 Comments:

Action Type: Cancel Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
 Communication Type:
 Order Details: 12/29/21 10:00:00 PST, Nasal Cannula, Keep O2 Sat % eq/greater: 92
 Review Information:
 Doctor Cosign: Not Required
 Comments:

Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
 Communication Type: Written
 Order Details: 12/29/21 10:00:00 PST, Nasal Cannula, Keep O2 Sat % eq/greater: 92
 Review Information:
 Doctor Cosign: Not Required
 Comments:

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders

Scheduling

Order: Left Heart Cath/Bilat Coronary Angiogram -Sch
Order Start Date/Time: 12/13/2021 16:51 PST
Order Status: Ordered
Department Status: Ordered
Activity Type: Scheduling
End-state Date/Time: 12/13/2021 16:51 PST
End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Strode ,Brenda L on 12/13/2021 16:51 PST
Order Details:
Comments:
Action Type: Order
Action Date/Time: 12/13/2021 16:51 PST
Action Personnel: Strode ,Brenda L
Communication Type:
Order Details:
Review Information:
Doctor Cosign: Not Required
Comments:

Surgery

Order: Cath/Rad ACU Tracking
Order Start Date/Time: 12/28/2021 15:21 PST
Order Status: Ordered
Department Status: Ordered
Activity Type: Surgery
End-state Date/Time: 12/28/2021 15:21 PST
End-state Reason:
Ordering Physician:
Entered By: Avila CNA,Jessica I on 12/27/2021 06:05 PST
Order Details: Chan D.O., Larry, Primary Procedure, None, 0, 0, 0, Concurrent
Comments:
Action Type: Activate
Action Date/Time: 12/28/2021 15:21 PST
Action Personnel: Garcia RN,Sheila M
Communication Type:
Order Details: Chan D.O., Larry, Primary Procedure, None, 0, 0, 0, Concurrent
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order
Action Date/Time: 12/27/2021 06:05 PST
Action Personnel: Avila CNA,Jessica I
Communication Type:
Order Details: Chan D.O., Larry, Primary Procedure, None, 0, 0, 0, Concurrent
Review Information:
Doctor Cosign: Not Required
Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5314530

Admit/Disch: 12/28/2021 12/28/2021

Patient Type: Day Patient

Admitting: Chan D.O.,Larry

Attending: Chan D.O.,Larry

Orders

Surgery

Order: PAT Phone Visit

Order Start Date/Time: 12/23/2021 13:21 PST

Order Status: Ordered Department Status: Ordered Activity Type: Surgery

End-state Date/Time: 12/23/2021 13:21 PST End-state Reason:

Ordering Physician:

Entered By: Gamboa RN,Veronica on 12/23/2021 13:21 PST

Order Details:

Comments:

Action Type: Order Action Date/Time: 12/23/2021 13:21 PST Action Personnel: Gamboa RN,Veronica

Communication Type:

Order Details:

Review Information:

Doctor Cosign: Not Required

Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: aspirin
Order Start Date/Time: 12/29/2021 09:00 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Canceled Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 81 mg = 1 tab, Tab-Chew, PO, Daily, Routine, Start date: 12/29/21 9:00:00 AM PST
Comments:
Action Type: Cancel Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 81 mg = 1 tab, Tab-Chew, PO, Daily, Routine, Start date: 12/29/21 9:00:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 81 mg = 1 tab, Tab-Chew, PO, Daily, Routine, Start date: 12/29/21 9:00:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: atorvastatin (Lipitor)
Order Start Date/Time: 12/28/2021 21:00 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Canceled Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 40 mg = 1 tab, Tab, PO, QHS, Routine, Start date: 12/28/21 9:00:00 PM PST
Comments:
Action Type: Cancel Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 40 mg = 1 tab, Tab, PO, QHS, Routine, Start date: 12/28/21 21:00:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 40 mg = 1 tab, Tab, PO, QHS, Routine, Start date: 12/28/21 21:00:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: ticagrelor (Brilinta (ticagrelor))
Order Start Date/Time: 12/28/2021 21:00 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Canceled Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 90 mg = 1 tab, Tab, PO, BID, Routine, Start date: 12/28/21 9:00:00 PM PST
Comments:
Action Type: Cancel Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 90 mg = 1 tab, Tab, PO, BID, Routine, Start date: 12/28/21 21:00:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 90 mg = 1 tab, Tab, PO, BID, Routine, Start date: 12/28/21 21:00:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: acetaminophen (Tylenol)
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 650 mg = 2 tab, Tab, PO, Q4hr, PRN, pain (mild), Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: Total Acetaminophen NOT TO EXCEED 4000mg/24hrs
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 650 mg = 2 tab, Tab, PO, Q4hr, PRN, pain (mild), Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 650 mg = 2 tab, Tab, PO, Q4hr, PRN, pain (mild), Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments: Total Acetaminophen NOT TO EXCEED 4000mg/24hrs

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: atropine
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 0.5 mg = 5 mL, Syringe, IV Push, Once, PRN, other (see comment), Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: Give for bradycardia post femoral sheath removal
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 0.5 mg = 5 mL, Syringe, IV Push, Once, PRN, other (see comment), Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 0.5 mg = 5 mL, Syringe, IV Push, Once, PRN, other (see comment), Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments: Give for bradycardia post femoral sheath removal

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: morphine (morphine injection)
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 2 mg = 0.2 mL, Soln, IV Push, Once, PRN, chest pain, Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: Notify physician for additional doses or unrelieved chest pain
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 2 mg = 0.2 mL, Soln, IV Push, Once, PRN, chest pain, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 2 mg = 0.2 mL, Soln, IV Push, Once, PRN, chest pain, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:13 PST
Doctor Cosign: Not Required
Comments: Notify physician for additional doses or unrelieved chest pain

Report ID: 127045217

Print Date/Time: 2/24/2023 16:08 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: morphine (morphine injection)
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 2 mg = 0.2 mL, Soln, IV Push, Once, PRN, other (see comment), Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: Prior to sheath removal
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 2 mg = 0.2 mL, Soln, IV Push, Once, PRN, other (see comment), Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 2 mg = 0.2 mL, Soln, IV Push, Once, PRN, other (see comment), Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:13 PST
Doctor Cosign: Not Required
Comments: Prior to sheath removal

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 DOB/Age/Sex: 3/29/1946 76 years Male
FIN: 5314530 Admit/Disch: 12/28/2021 12/28/2021
Patient Type: Day Patient Admitting: Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: naloxone (Narcan)
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 0.1 mg = 0.1 mL, Injection, IV Push, Q2min, PRN, opioid oversedation, Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: Notify Provider if medication administered
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 0.1 mg = 0.1 mL, Injection, IV Push, Q2min, PRN, opioid oversedation, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 0.1 mg = 0.1 mL, Injection, IV Push, Q2min, PRN, opioid oversedation, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:13 PST
Doctor Cosign: Not Required
Comments: Notify Provider if medication administered

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: naloxone (Narcan)
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 0.4 mg = 1 mL, Injection, IV Push, Once, PRN, opioid respiratory depression, Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: Notify Provider if medication administered
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 0.4 mg = 1 mL, Injection, IV Push, Once, PRN, opioid respiratory depression, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 0.4 mg = 1 mL, Injection, IV Push, Once, PRN, opioid respiratory depression, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:13 PST
Doctor Cosign: Not Required
Comments: Notify Provider if medication administered

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: nitroglycerin (nitroglycerin sublingual tab)
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: 0.4 mg = 1 tab, Tab, SL, As directed, PRN, chest pain, Routine, Start date: 12/28/21 3:07:00 PM PST
Comments: May give Q5min, up to a MAXIMUM of 3 doses per episode
Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM
Communication Type:
Order Details: 0.4 mg = 1 tab, Tab, SL, As directed, PRN, chest pain, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: 0.4 mg = 1 tab, Tab, SL, As directed, PRN, chest pain, Routine, Start date: 12/28/21 15:07:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments: May give Q5min, up to a MAXIMUM of 3 doses per episode

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5314530
Patient Type: Day Patient
Attending: Chan D.O.,Larry
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 12/28/2021 12/28/2021
Admitting: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: Normal Saline intravenous solution 1,000 mL
Order Start Date/Time: 12/28/2021 15:07 PST
Order Date/Time: 12/28/2021 15:07 PST
Order Status: Completed Clinical Category: IV Solutions Medication Type: Inpatient
End-state Date/Time: 12/28/2021 19:06 PST End-state Reason:
Ordering Physician: Chan D.O.,Larry
Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST
Order Details: Route: IV, Rate: 100 mL/hr, Total Volume: 1,000 mL, Start date: 12/28/21 3:07:00 PM PST, Duration: 4 hr(s), Stop date: 12/28/21 7:06:00 PM PST
Comments: Run for 4hrs, then IV Lock
Action Type: Status Change Action Date/Time: 12/28/2021 19:16 PST Action Personnel: SYSTEM
Communication Type:
Order Details: Route: IV, Rate: 100 mL/hr, Total Volume: 1,000, Start date: 12/28/21 15:07:00 PST, Duration: 4 hr(s), Stop date: 12/28/21 19:06:00 PST
Review Information:
Doctor Cosign: Not Required
Comments:
Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry
Communication Type: Written
Order Details: Route: IV, Rate: 100 mL/hr, Total Volume: 1,000 mL, Start date: 12/28/21 15:07:00 PST, Duration: 4 hr(s), Stop date: 12/28/21 19:06:00 PST
Review Information:
Nurse Review: Not Reviewed
Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST
Doctor Cosign: Not Required
Comments: Run for 4hrs, then IV Lock

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications

Inpatient

Order: ondansetron (Zofran injection)

Order Start Date/Time: 12/28/2021 15:07 PST

Order Date/Time: 12/28/2021 15:07 PST

Order Status: Discontinued Clinical Category: Medications Medication Type: Inpatient

End-state Date/Time: 12/28/2021 20:40 PST End-state Reason:

Ordering Physician: Chan D.O.,Larry

Entered By: Chan D.O.,Larry on 12/28/2021 15:07 PST

Order Details: 4 mg = 2 mL, Injection, IV Push, Q6hr, PRN, nausea/vomiting, Routine, Start date: 12/28/21 3:07:00 PM PST

Comments:

Action Type: Discontinue Action Date/Time: 12/28/2021 20:40 PST Action Personnel: SYSTEM

Communication Type:

Order Details: 4 mg = 2 mL, Injection, IV Push, Q6hr, PRN, nausea/vomiting, Routine, Start date: 12/28/21 15:07:00 PST

Review Information:

Doctor Cosign: Not Required

Comments:

Action Type: Order Action Date/Time: 12/28/2021 15:10 PST Action Personnel: Chan D.O.,Larry

Communication Type: Written

Order Details: 4 mg = 2 mL, Injection, IV Push, Q6hr, PRN, nausea/vomiting, Routine, Start date: 12/28/21 15:07:00 PST

Review Information:

Nurse Review: Not Reviewed

Pharmacist Verify: Electronically Signed, De Jesus RPH,Monica Frances C on 12/28/2021 15:19 PST

Doctor Cosign: Not Required

Comments:

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications
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Inpatient

Order: diazePAM (Vallium)		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Date/Time: 12/28/2021 11:56 PST		
Order Status: Completed	Clinical Category: Medications	Medication Type: Inpatient
End-state Date/Time: 12/28/2021 13:21 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: 5 mg = 1 tab, Tab, PO, On call, Routine, Start date: 12/28/21 11:56:00 AM PST		
Comments: PRIOR TO CATH LAB		
Action Type: Complete	Action Date/Time: 12/28/2021 13:21 PST	Action Personnel: Madden RN,Lisa A
Communication Type:		
Order Details: 5 mg = 1 tab, Tab, PO, On call, Routine, Start date: 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: 5 mg = 1 tab, Tab, PO, On call, Routine, Start date: 12/28/21 11:56:00 PST		
Review Information:		
Pharmacist Verify: Electronically Signed, Povia RPH,Jeanete O on 12/28/2021 12:03 PST		
Doctor Cosign: Not Required		
Comments: PRIOR TO CATH LAB		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5314530 **Admit/Disch:** 12/28/2021 12/28/2021
Patient Type: Day Patient **Admitting:** Chan D.O.,Larry
Attending: Chan D.O.,Larry

Orders - Inpatient-Outpatient Medications
--

Inpatient

Order: Normal Saline intravenous solution 1,000 mL		
Order Start Date/Time: 12/28/2021 11:56 PST		
Order Date/Time: 12/28/2021 11:56 PST		
Order Status: Discontinued	Clinical Category: IV Solutions	Medication Type: Inpatient
End-state Date/Time: 12/28/2021 20:40 PST	End-state Reason:	
Ordering Physician: Chan D.O.,Larry		
Entered By: Gamboa RN,Veronica on 12/23/2021 13:25 PST		
Order Details: Route: IV, Rate: 100 mL/hr, Total Volume: 1,000 mL, Start date: 12/28/21 11:56:00 AM PST		
Comments:		
Action Type: Discontinue	Action Date/Time: 12/28/2021 20:40 PST	Action Personnel: SYSTEM
Communication Type:		
Order Details: Route: IV, Rate: 100 mL/hr, Total Volume: 1,000 mL, Start date: 12/28/21 11:56:00 PST		
Review Information:		
Doctor Cosign: Not Required		
Comments:		
Action Type: Order	Action Date/Time: 12/28/2021 11:56 PST	Action Personnel: Madden RN,Lisa A
Communication Type: Written		
Order Details: Route: IV, Rate: 100 mL/hr, Total Volume: 1,000 mL, Start date: 12/28/21 11:56:00 PST		
Review Information:		
Pharmacist Verify: Electronically Signed, Povia RPH,Jeanete O on 12/28/2021 12:03 PST		
Doctor Cosign: Not Required		
Comments:		
Action Type: Plan	Action Date/Time: 12/23/2021 13:25 PST	Action Personnel: Gamboa RN,Veronica

Patient Information

Patient Name: HANNA MD, ADEL SHAKER	Sex: Male
Home Address: 5688 COUSINS PL RANCHO CUCAMONGA, CA 91737	DOB: 03/29/1946
Home Phone: (909) 374-7216	Age: 76 Years
Employer Name: DEPARTMENT OF CORRECTIONS	Religion: No Preference
Employer Phone: (909) 597-1821	SSN: 548-67-8932

Guarantor Information

Guarantor Name: ADEL HANNA	Sex: Male
Patient's Reltn: Self	DOB: 03/29/1946
Billing Address: 5688 COUSINS PL RANCHO CUCAMONGA, CA 91737	Age: 76 Years
Billing Phone: (909) 374-7216	SSN: 548-67-8932
Employer Name: DEPARTMENT OF CORRECTIONS	
Employer Phone: (909) 597-1821	

Contact Information**Emergency Contact**

Contact Name: IRMA KAWAGUCHI
Patient's Reltn: Spouse
Sex:
Home Phone: (909) 374-7216

Next of Kin

Contact Name: IRMA KAWAGUCHI
Patient's Reltn: Spouse
Sex:
Home Phone: (909) 374-7216

Primary Insurance

Subscriber Name: HANNA MD, ADEL SHAKER	Insurance Name: Blue Cross PPO
Patient's Reltn: Self	Claim Address: P.O. BOX 60007 LOS ANGELES, CA 90060
Sex: Male	Insurance Phone: (800) 451-6780
DOB: 03/29/1946	Policy Number: CPR226A67822
Age: 76 Years	Group Number: CB010A
Employer Name: DEPARTMENT OF CORRECTIONS	Authorization Number:
Employer Phone: (909) 597-1821	Authorization Phone:
Financial Class: PPO	Authorization Contact:

Secondary Insurance

Subscriber Name: HANNA MD, ADEL SHAKER	Insurance Name: Medicare Part A Only
Patient's Reltn: Self	Claim Address: P.O. BOX 669 AUGUSTA, GA 30903
Sex: Male	Insurance Phone:
DOB: 03/29/1946	Policy Number: 8UN2EH4XF93
Age: 76 Years	Group Number:
Employer Name: DEPARTMENT OF CORRECTIONS	Authorization Number:
Employer Phone: (909) 597-1821	Authorization Phone:
Financial Class: Medicare	Authorization Contact:

Encounter Information

Reg Dt/Tm: 11/14/2021 16:32	Patient Type: Observation	Admit Type: Emergency
Est Dt of Arrival:	Medical Service: OOS - Observation	Admit Source: Emergency Room
Inpt Adm Dt/Tm:	Location: 3RDV1	Advance Directive: Does not have a
Disch Dt/Tm: 11/15/2021 18:19	Room/Bed: 310 / A	Reg Clerk: Joceline Gonzalez
Observation Dt/Tm:	Isolation:	Admit Physician: M.D. Rishi Talwar
VIP Indicator:	Disease Alert:	Attend Physician: M.D. Mansurur K
Admit Reason: CP		PCP:

HANNA MD, ADEL SHAKER**Male / 76 Years****MRN: 918505****FIN: 5295168**



SAN ANTONIO REGIONAL HOSPITAL

999 San Bernardino Road, Upland, California 91786

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Allergies

Substance: REGLAN	Recorded Date/Time	Recorded By	Reaction Status: Active; Data Source: IBEX; Recorded On Behalf Of:
	6/12/2012 16:06 PDT	CONTRIBUTOR_ SYSTEM	CONTRIBUTOR_SYSTEM; Information Source: ; Reviewed Date/Time: 7/19/2022 12:23 PDT; Reviewed By: Norris RN, Kevin M

Discharge Documentation

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
Page 2 of 255

Patient Name: HANNA MD, ADEL SHAKER
Date of Birth: 3/29/1946

MRN: 918505
FIN: 5295168

* Auth (Verified) *



SAN ANTONIO REGIONAL HOSPITAL

999 San Bernardino Road, Upland, CA 91786 Phone: (909) 985-2811

****Signature Page****

Patient Name:

HANNA MD, ADEL SHAKER

DOB: 03/29/1946
MRN: 918505
FIN: 5295168
Visit Date: 11/14/2021

Current Date/Time: 11/15/2021 17:03:24

HANNA MD, ADEL SHAKER (or representative) has been given Discharge Instructions with follow-up instructions, medication instructions, patient education materials and has verbalized understanding.

Patient/Representative Name: Adel S. Hanna

Patient/Representative Signature: Hanna MD

Relationship to Patient: Self

RN Signature: Adrianna, RN

Date: 11/15/2021 17:45

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 FIN: 5295168

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Printed on: 11/15/2021 17:03 PST

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Document Name: Discharge Summary
Result Status: Auth (Verified)
Performed By: Khan M.D.,Mansurur R.(11/15/2021 09:50 PST)
Authenticated By: [Khan M.D.,Mansurur R.; Khan M.D.,Mansurur R.(11/22/2021 21:22 PST)]

Admission Information

Date of admission: 11/14/2021
Date of discharge: 11/15/2000

Admission Diagnosis

Chest pain
 Hypertension

Hospital Course

75-year-old male with hypertension presented with chest pain x5 days. He was admitted cardiac markers were all negative. He was seen for cardiology consultation. Lexiscan form and is negative for any reversible perfusion defects. He has been cleared for discharge cardiology follow-up with his PCP.

Procedures and Treatment Provided

Lexiscan, negative for ischemia

Physical Exam

Vitals & Measurements

T: 97.3 °F (Temporal Artery) **TMIN:** 97.1 °F (Temporal Artery) **TMAX:** 98.5 °F (Oral) **HR:** 68(Monitored) **RR:** 20 **BP:** 142/87
SpO2: 97% **WT:** 72.6 kg

Gen: Comfortable, NAD
 HEENT: Anicteric sclerae
 CV: RRR, no murmurs
 Lungs: CTAB
 Abd: Soft, nontender
 Ext: No edema
 Neuro: A+Ox3,

Discharge Medications

	What	How Much	When	Instructions
Continue	amLODIPine	5 Milligram Oral	Every day	
Continue	atenolol (atenolol 50 mg oral tablet)	2 tablet Oral	Every day	

Discharge Plan

Chest pain
 Hypertension
 Orders:

sodium chloride, 3 mL, Soln, IV Push, As directed, PRN, IV line care, Routine, Start date: 11/15/21 8:28:00 PST
 sodium chloride, 3 mL, Soln, IV Push, Q8hr (std), Routine, Start date: 11/15/21 14:00:00 PST

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Peripheral IV Care, 11/15/21 8:28:00 PST, Q96hr, PERIPHERAL IV LINE NURSING CARE

Patient Discharge Condition

Stable for discharge

Discharge Disposition

Home

Physician's Plan for Pending Test Results/Studies and Follow-up Resolution

Follow-up with PCP

Discharge Diagnosis

Chest pain
Hypertension

Problem List/Past Medical History

Ongoing/Comorbidities

Acid reflux / Confirmed
Allergic rhinitis / Confirmed
Cardiac ejection fraction / Confirmed
Comments: CARDIAC LV EF 60%

Resolved

No qualifying data

Signed by: Khan M.D., Mansurur R.

Signed Date/Time: 11/22/2021 09:22 PM

Document Name:
Result Status:
Performed By:
Authenticated By:

Patient Discharge Summary
Auth (Verified)
Dionisio RN,Rexie T (11/15/2021 17:47 PST)
Dionisio RN,Rexie T (11/15/2021 17:47 PST)



SAN ANTONIO REGIONAL HOSPITAL

999 San Bernardino Road, Upland, CA 91786 Phone: (909) 985-2811

Patient Name:

HANNA MD, ADEL SHAKER

DOB: 03/29/1946
MRN: 918505
FIN: 5295168

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
Page 5 of 255

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Visit Date: 11/14/2021

Current Date/Time: 11/15/2021 17:46:59

Patient Discharge Instructions

San Antonio Regional Hospital would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your illness/injury. Please make an appointment with your physician within two weeks and bring all of your medications and prescriptions to the appointment (unless otherwise instructed).

IF YOU RECEIVED SEDATION:

- Do not drive or operate machinery for 24 hours after receiving sedation or while taking pain medication.
- Do not drink alcoholic beverages for 24 hours after receiving sedation or while taking pain medication.
- Do not make important decisions or sign legal documents for the next 24 hours after receiving sedation.

My Health Records

Your San Antonio Regional Hospital **lab and radiology results** and **discharge instructions** can be viewed and downloaded on San Antonio Regional Hospital's patient portal. To access this, you need a *My Health Records* account. A registration representative may have sent you an Invitation to your personal email. Follow the instructions in the email to create your account. Or to self-enroll, go to SARH.org, then click on the *My Health Records* button (upper right corner), and follow the prompts. If you already have an account, go to www.SARH.org/4myhealth to log in. Note: Laboratory results are available after 3 days and Radiology results are available after 5 days. If you have questions or need assistance with creating a *My Health Records* account, please call (909) 694-1088 or email MyHealthRecords@sarh.org.

Wellness Tools are Also Available at My Health Records!

My Health Records has a variety of health assessment tools, health trackers, and action plans to help you monitor your health and provide educational information. Tools included are:

• Blood Pressure Log • Cholesterol Log • Glucose Log • Food Tracker • Weight Tracker • Steps Log

Your Diagnosis

Chest pain
Hypertension

Your Allergies

REGLAN

Your Care Team

Primary Care Physician: Ali M.D., Mohamed S
Admitting Physician: Talwar M.D., Rishi
Attending Physician: Khan M.D., Mansurur R.
Consulting Physician: Chan D.O., Larry; Rasania M.D., Suraj

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D.,Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D.,Rishi

Discharge Documentation

What to do next

You Need to Schedule the Following Appointments

Follow Up with Larry Chan

When In 2 weeks 11/29/2021 PST

Where: 685 N. 13th Ave.

Suite 9

Upland, CA 91786-

(909) 981-8383 Business (1)

Follow Up with Follow up with primary
care provider

When In 1 week 11/22/2021 PST

Immunizations This Visit

Given

Vaccine	Date
influenza virus vaccine	11/15/2021
pneumococcal 23-polyvalent vaccine	11/15/2021

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Medications and Prescriptions

San Antonio Regional Hospital Providers have provided you with a list of medications at discharge, if you have been instructed to stop taking a medication please ensure you also follow up with this information to your Primary Care Physician. Any specific questions regarding your ongoing medications and dosages should be discussed with your physician(s) and pharmacist.

Please check the medication list below

If a Pharmacy Name is listed, a prescription has been sent directly to that Pharmacy – Pick up your prescription at the listed pharmacy. If you have been given printed prescriptions, please take to a Pharmacy to be filled.

	What	How Much	When	Instructions	Next Dose
<i>New</i>	atorvastatin (Lipitor 40 mg oral tablet)	1 tablet Oral	Every day	Refills: 11 Printed Prescription	
<i>New</i>	losartan (losartan 50 mg oral tablet)	1 tablet Oral	2 times a day	Refills: 11 Printed Prescription	
<i>Changed</i>	amLODIPine (amLODIPine 10 mg oral tablet)	1 tablet Oral	Every day	Printed Prescription	

	What	How Much	When	Comments
<i>Stop Taking</i>	atenolol (atenolol 50 mg oral tablet)	2 tablet Oral	Every day	

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Medication Leaflets

Education Materials

Return to Work

_____ was treated at our facility.

Injury or illness was:

Work-related.

___ Not work-related.

___ Undetermined if work-related.

Return to work

- Employee may return to work on _____.
- Employee may return to modified work on _____.

Work activity restrictions

This person is **not** able to do the following activities:

___ Bend

___ Sit for a prolonged time

- This person should not sit for more than ___ hours at a time.
- This person should not sit for more than ___ hours during an 8-hour workday.

___ Lift more than _____ lb

___ Squat

___ Stand for a prolonged time

- ___ This person should not stand for more than ___ hours at a time.
- ___ This person should not stand for more than ___ hours during an 8-hour workday.

___ Climb

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

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Discharge Documentation

___ Reach

___ Push and pull with the ___ right hand ___ left hand

___ Walk

- ___ This person should not walk for more than ___ hours at a time.
• ___ This person should not walk for more than ___ hours during an 8-hour workday.

___ Drive or operate a motor vehicle at work

___ Grasp with the ___ right hand ___ left hand

___ Other _____

These restrictions are effective until _____ or until a recheck appointment on _____.

Health care provider name (printed): _____

Health care provider (signature): _____

Date: _____

How to use this form

Show this Return to Work statement to your supervisor at work as soon as possible. Your employer should be aware of your condition and may be able to help with the necessary work activity restrictions.

Contact your health care provider if:

- You wish to return to work sooner than the date that is listed above.
• You have problems that make it difficult for you to return at that time.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 12/13/2018 Document Reviewed: 12/13/2018
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Return To Work

_____ was treated at San Antonio Community Hospital.

INJURY OR ILLNESS WAS:

- ___ Work-related
___ Not work-related
___ Undetermined if work-related

RETURN TO WORK

- Employee may return to work on: _____
• Employee may return to modified work on: _____

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

WORK ACTIVITY RESTRICTIONS

Work activities not tolerated include:

- Bending
Prolonged sitting
Lifting
Squatting
Prolonged standing
Climbing
Reaching
Pushing and pulling
Walking
Other

Show this Return to Work statement to your supervisor at work as soon as possible. Your employer should be aware of your condition and can help with the necessary work activity restrictions. If you wish to return to work sooner than the date above, or if you have further problems which make it difficult for you to return at that time, please call us or your caregiver.

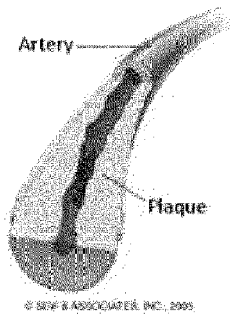
Physician Name (Printed)

Physician Signature

Date

Document Released: 12/18/2006 Document Revised: 12/06/2012 Document Reviewed: 06/03/2008
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High Cholesterol



Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

High cholesterol is a condition in which the blood has high levels of a white, waxy, fat-like substance (cholesterol). The human body needs small amounts of cholesterol. The liver makes all the cholesterol that the body needs. Extra (excess) cholesterol comes from the food that we eat.

Cholesterol is carried from the liver by the blood through the blood vessels. If you have high cholesterol, deposits (plaques) may build up on the walls of your blood vessels (arteries). Plaques make the arteries narrower and stiffer. Cholesterol plaques increase your risk for heart attack and stroke. Work with your health care provider to keep your cholesterol levels in a healthy range.

What increases the risk?

This condition is more likely to develop in people who:

- Eat foods that are high in animal fat (saturated fat) or cholesterol.
- Are overweight.
- Are not getting enough exercise.
- Have a family history of high cholesterol.

What are the signs or symptoms?

There are no symptoms of this condition.

How is this diagnosed?

This condition may be diagnosed from the results of a blood test.

- If you are older than age 20, your health care provider may check your cholesterol every 4–6 years.
- You may be checked more often if you already have high cholesterol or other risk factors for heart disease.

The blood test for cholesterol measures:

- "Bad" cholesterol (LDL cholesterol). This is the main type of cholesterol that causes heart disease. The desired level for LDL is less than 100.
- "Good" cholesterol (HDL cholesterol). This type helps to protect against heart disease by cleaning the arteries and carrying the LDL away. The desired level for HDL is 60 or higher.
- Triglycerides. These are fats that the body can store or burn for energy. The desired number for triglycerides is lower than 150.
- Total cholesterol. This is a measure of the total amount of cholesterol in your blood, including LDL cholesterol, HDL cholesterol, and triglycerides. A healthy number is less than 200.

How is this treated?

This condition is treated with diet changes, lifestyle changes, and medicines.

Diet changes

- This may include eating more whole grains, fruits, vegetables, nuts, and fish.
- This may also include cutting back on red meat and foods that have a lot of added sugar.

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D.,Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D.,Rishi

Discharge Documentation

Lifestyle changes

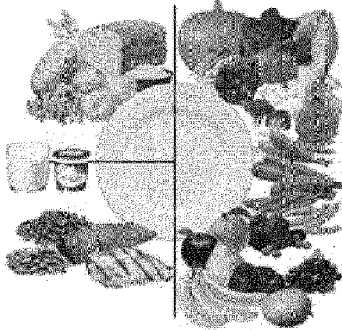
- Changes may include getting at least 40 minutes of aerobic exercise 3 times a week. Aerobic exercises include walking, biking, and swimming. Aerobic exercise along with a healthy diet can help you maintain a healthy weight.
- Changes may also include quitting smoking.

Medicines

- Medicines are usually given if diet and lifestyle changes have failed to reduce your cholesterol to healthy levels.
- Your health care provider may prescribe a statin medicine. Statin medicines have been shown to reduce cholesterol, which can reduce the risk of heart disease.

Follow these instructions at home:

Eating and drinking



If told by your health care provider:

- Eat chicken (without skin), fish, veal, shellfish, ground turkey breast, and round or loin cuts of red meat.
- **Do not** eat fried foods or fatty meats, such as hot dogs and salami.
- Eat plenty of fruits, such as apples.
- Eat plenty of vegetables, such as broccoli, potatoes, and carrots.
- Eat beans, peas, and lentils.
- Eat grains such as barley, rice, couscous, and bulgur wheat.
- Eat pasta without cream sauces.
- Use skim or nonfat milk, and eat low-fat or nonfat yogurt and cheeses.
- **Do not** eat or drink whole milk, cream, ice cream, egg yolks, or hard cheeses.
- **Do not** eat stick margarine or tub margarines that contain trans fats (also called partially hydrogenated oils).
- **Do not** eat saturated tropical oils, such as coconut oil and palm oil.
- **Do not** eat cakes, cookies, crackers, or other baked goods that contain trans fats.

General instructions

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Exercise as directed by your health care provider. Increase your activity level with activities such as gardening, walking, and taking the stairs.
- Take over-the-counter and prescription medicines only as told by your health care provider.
- **Do not** use any products that contain nicotine or tobacco, such as cigarettes and e-cigarettes. If you need help quitting, ask your health care provider.
- Keep all follow-up visits as told by your health care provider. This is important.

Contact a health care provider if:

- You are struggling to maintain a healthy diet or weight.
- You need help to start on an exercise program.
- You need help to stop smoking.

Get help right away if:

- You have chest pain.
- You have trouble breathing.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 12/21/2018 Document Reviewed: 06/17/2017
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Hypertension, Adult

Hypertension is another name for high blood pressure. High blood pressure forces your heart to work harder to pump blood. This can cause problems over time.

There are two numbers in a blood pressure reading. There is a top number (systolic) over a bottom number (diastolic). It is best to have a blood pressure that is below 120/80. Healthy choices can help lower your blood pressure, or you may need medicine to help lower it.

What are the causes?

The cause of this condition is not known. Some conditions may be related to high blood pressure.

What increases the risk?

- Smoking.
- Having type 2 diabetes mellitus, high cholesterol, or both.
- Not getting enough exercise or physical activity.
- Being overweight.
- Having too much fat, sugar, calories, or salt (sodium) in your diet.
- Drinking too much alcohol.
- Having long-term (chronic) kidney disease.
- Having a family history of high blood pressure.

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DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

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Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Age. Risk increases with age.
- Race. You may be at higher risk if you are African American.
- Gender. Men are at higher risk than women before age 45. After age 65, women are at higher risk than men.
- Having obstructive sleep apnea.
- Stress.

What are the signs or symptoms?

- High blood pressure may not cause symptoms. Very high blood pressure (hypertensive crisis) may cause:
 - 46 Headache.
 - 46 Feelings of worry or nervousness (anxiety).
 - 46 Shortness of breath.
 - 46 Nosebleed.
 - 46 A feeling of being sick to your stomach (nausea).
 - 46 Throwing up (vomiting).
 - 46 Changes in how you see.
 - 46 Very bad chest pain.
 - 46 Seizures.

How is this treated?

- This condition is treated by making healthy lifestyle changes, such as:
 - 46 Eating healthy foods.
 - 46 Exercising more.
 - 46 Drinking less alcohol.
- Your health care provider may prescribe medicine if lifestyle changes are not enough to get your blood pressure under control, and if:
 - 46 Your top number is above 130.
 - 46 Your bottom number is above 80.
- Your personal target blood pressure may vary.

Follow these instructions at home:

Eating and drinking

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

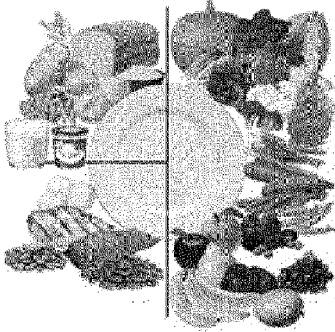
Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

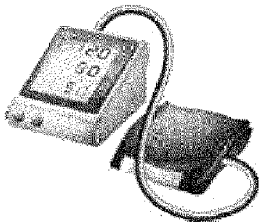
Attending: Khan M.D.,Mansurur R.

Discharge Documentation



- If told, follow the DASH eating plan. To follow this plan:
 - 46 Fill one half of your plate at each meal with fruits and vegetables.
 - 46 Fill one fourth of your plate at each meal with whole grains. Whole grains include whole-wheat pasta, brown rice, and whole-grain bread.
 - 46 Eat or drink low-fat dairy products, such as skim milk or low-fat yogurt.
 - 46 Fill one fourth of your plate at each meal with low-fat (lean) proteins. Low-fat proteins include fish, chicken without skin, eggs, beans, and tofu.
 - 46 Avoid fatty meat, cured and processed meat, or chicken with skin.
 - 46 Avoid pre-made or processed food.
- Eat less than 1,500 mg of salt each day.
- **Do not** drink alcohol if:
 - 46 Your doctor tells you not to drink.
 - 46 You are pregnant, may be pregnant, or are planning to become pregnant.
- If you drink alcohol:
 - 46 Limit how much you use to:
 - 52 0–1 drink a day for women.
 - 52 0–2 drinks a day for men.
 - 46 Be aware of how much alcohol is in your drink. In the U.S., one drink equals one 12 oz bottle of beer (355 mL), one 5 oz glass of wine (148 mL), or one 1½ oz glass of hard liquor (44 mL).

Lifestyle



- Work with your doctor to stay at a healthy weight or to lose weight. Ask your doctor what the best weight is for you.
- Get at least 30 minutes of exercise most days of the week. This may include walking, swimming, or biking.

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San Antonio Regional Hospital

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Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Get at least 30 minutes of exercise that strengthens your muscles (resistance exercise) at least 3 days a week. This may include lifting weights or doing Pilates.
- **Do not** use any products that contain nicotine or tobacco, such as cigarettes, e-cigarettes, and chewing tobacco. If you need help quitting, ask your doctor.
- Check your blood pressure at home as told by your doctor.
- Keep all follow-up visits as told by your doctor. This is important.

Medicines

- Take over-the-counter and prescription medicines only as told by your doctor. Follow directions carefully.
- **Do not** skip doses of blood pressure medicine. The medicine does not work as well if you skip doses. Skipping doses also puts you at risk for problems.
- Ask your doctor about side effects or reactions to medicines that you should watch for.

Contact a doctor if you:

- Think you are having a reaction to the medicine you are taking.
- Have headaches that keep coming back (recurring).
- Feel dizzy.
- Have swelling in your ankles.
- Have trouble with your vision.

Get help right away if you:

- Get a very bad headache.
- Start to feel mixed up (confused).
- Feel weak or numb.
- Feel faint.
- Have very bad pain in your:
 - 46 Chest.
 - 46 Belly (abdomen).
- Throw up more than once.
- Have trouble breathing.

Summary

- Hypertension is another name for high blood pressure.
- High blood pressure forces your heart to work harder to pump blood.
- For most people, a normal blood pressure is less than 120/80.
- Making healthy choices can help lower blood pressure. If your blood pressure does not get lower with healthy choices, you may need to take medicine.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 08/28/2019 Document Reviewed: 08/28/2019

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
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Discharge Documentation

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CHEST PAIN AND ACUTE CORONARY SYNDROME INFORMATION

WHAT IS ACUTE CORONARY SYNDROME (ACS)?

Acute Coronary Syndrome is an urgent problem in which the blood supply to the heart muscle is suddenly blocked. Well-known conditions that are acute coronary syndromes are heart attack and unstable angina. Over 800,000 people die in the US every year from a heart attack and on average 50% of these patients displayed, but ignored, the warning signs.

SIGNS AND SYMPTOMS OF ACS

- Most common presentations:
 - Chest pain or discomfort, which may involve pressure, tightness, aching, burning, or fullness
 - Pain or discomfort in one or both arms, the jaw, neck, back, or stomach
 - Shortness of breath
- Less common presentations:
 - Feeling dizzy or lightheaded
 - Nausea
 - Sweating
 - Unexplained/Excessive Fatigue
 - Unexplained feeling of anxiety
- Atypical symptoms include epigastric pain, indigestion, stabbing pain with coughing and breathing, and increasing difficulty breathing

RISK FACTORS

- Family history of chest pain, heart disease, or stroke
- Smoking
- High blood pressure
- High blood cholesterol
- Diabetes, history of gestational diabetes
- Physical inactivity
- Being overweight or obese
- For women: taking birth control pills, history of pre-eclampsia, or having a low birth weight baby

HEART HEALTHY DIET

- Talk to your health care provider or diet specialist (dietitian) to create an eating plan that is right for you.
- Limit unhealthy (saturated) fats (Animal products: meats, butter, & cream Plant: palm, palm kernel, & coconut oil)
- Increase healthy fats such as olive and canola oil, flaxseeds, walnuts, almonds, and seeds
- Eat more Omega-3 fats which include salmon, mackerel, sardine, tuna, flaxseed oil
- Avoid foods with trans fats such as margarine, cookies, crackers, and other baked goods
- Limit or avoid alcohol and foods high in salt, starch, and sugar

EXERCISE

- Talk to your health care provider:
 - Regarding an activity plan that works for you
 - Prior to starting a new exercise program
- Exercise regularly as directed by your health care provider and maintain a healthy weight

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
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Discharge Documentation

- **DO NOT** exercise so much that you hurt yourself, feel dizzy, or have difficulty catching your breath
- Drink water while you exercise to prevent dehydration
- Wear comfortable clothes and shoes with good support

SMOKING CESSATION

Avoid breathing secondhand smoke and if you currently smoke, it is time to quit. Smoking can cause multiple health problems and greatly increases the risk of developing heart disease. For free telephone counseling, self-help materials and online help to quit smoking call **California Smokers' Hotline: 1-800-NO-BUTTS**

MEDICATION SAFETY

It is important to follow the treatment plan your health care provider prescribed and know which medications to avoid. Medications to avoid are those that can prevent your heart medicine from working properly, make your heart worker harder, and make your heart disease worse.

Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)

NSAIDs are often used to relieve pain and reduce inflammation from conditions such as arthritis. NSAIDs can also cause body fluid retention and decrease kidney function, which can result in a rise in your blood pressure. The extra fluid and higher blood pressure will make your heart work harder.

Common NSAIDs include:

- Aspirin-If used to treat or prevent heart attacks, strokes, and chest pain, be sure to take ONLY under the supervision of a doctor
- Ibuprofen
- Naproxen
- Cough & Cold medications and Decongestants

You may find NSAIDs over-the-counter for other conditions, so be sure you check the label. Ask your health care provider if it is OK to take any NSAIDs or if they can recommend alternatives, such as acetaminophen (Tylenol).

Vitamins and Folic Acid

Antioxidant vitamin supplements and Folic Acid are not recommended to decrease the risk of a heart disease.

Hormone Replacement Therapy (HRT)

Hormone therapy (Estrogen plus Progesterin or Estrogen alone) is not recommended as a method to decrease the risk of a 2nd heart attack in postmenopausal women. If you were taking hormone therapy prior to your heart diagnosis, you need to speak to your health care provider about associated risks and benefits before resuming HRT.

Migraine Headache Medications

Some migraine medications relieve migraine pain by tightening the blood vessels in your head. These medications can constrict blood vessels throughout the body and make your blood pressure rise. If you have high blood pressure or any type of heart disease, talk with your health care provider before taking medication for migraines or severe headaches.

Weight Loss Medications

Some weight loss medications may make heart disease worse because they can increase your blood pressure and heart rate.

More Tips for Avoiding Medication Problems

- Take prescribed medication as directed
- Give a list of ALL medications you use (both prescription and over-the-counter) to every doctor you visit.
- Read medication labels before buying over-the-counter medications.
- Talk to your doctor before using any over-the-counter medication, herbal preparation, vitamins, or other nutritional supplements. Ask for alternatives to potentially harmful medications.

Discharge Medications

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
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Discharge Documentation

There are classes of medications that have been proven to reduce cardiovascular events and death in patients with a history of a NSTEMI-ACS, commonly known as a heart attack. Your medications and dosage may be individualized, depending on other medical issues and risk of side effects. Take all prescribed medication(s) unless contraindicated or not tolerated. **ASK YOUR PHYSICIAN BEFORE YOU STOP TAKING ANY MEDICATION BECAUSE STOPPING THE MEDICATION(S) CAN BE DANGEROUS TO YOUR HEALTH.**

There are 5 classes of medications that are likely to be prescribed to you in order to reduce the risk of another heart attack or death. The following are the classes of medications, some common examples, and the suggested duration of therapy:

Aspirin and/or antiplatelet (P2Y12): All patients with NSTEMI-ACS (heart attack), life-long therapy
These medications keep your platelets from forming clots that may lead to further heart issues.
Examples: Aspirin, Plavix (Clopidogrel), Effient (Prasugr), Brilinta (Ticagrelor)

Beta Blockers: All patients with NSTEMI-ACS, life-long therapy
These medications help control your heart's rhythm and lower your blood pressure.
Examples: Toprol (Metoprolol), Atenolol (Tenormin), Carvedilol (Coreg)

ACE Inhibitors/ARBs: All patients with NSTEMI-ACS, life-long therapy
These medications help lower your blood pressure and amount of work for the heart to pump blood.
Examples: Captopril, Vasotec (Enalapril), Altace (Ramipril), Lisinopril, Lotensin (Benzapril)

Statin: All patients with NSTEMI-ACS, life-long therapy
These medications help lower your cholesterol level in the blood.
Examples: Lipitor (Atorvastatin), Lescol (Fluvastatin), Mevacor (Lovastatin), Pravachol (Pravastatin), Crestor- (Rosuvastatin), Zocor (Simvastatin)

Nitroglycerin (Sublingual): All patients with NSTEMI-ACS, life-long therapy
This medication is used to prevent or treat chest pain by relaxing and widening blood vessels so blood can flow more easily to the heart. Take medication only as directed by your doctor. **DO NOT** chew or swallow the tablet. **DO NOT** use this medication if you have had a phosphodiesterase (Examples: Viagra, Cialis, or Levitra) medication within the last 24 to 48 hours. If chest pain has not improved or worsened after following the doctor's instructions, seek medical attention immediately (Call 911).
Examples: NitroSTAT, Nitrobid

SEEK IMMEDIATE MEDICAL CARE IF:

- You have severe chest pain, especially if the pain is crushing or pressure-like and spreads to arms, back, neck or jaw. **THIS IS AN EMERGENCY. Call 911 and DO NOT drive yourself to the hospital.**
- You are experiencing any of the ACS symptoms

POST-HOSPITAL

***If outpatient stress testing is indicated and ordered by your physician:**

Call your Primary Care Physician/Cardiologist to schedule a stress test within 72 hours of discharge if not done during this hospital stay.

***If ordered and referred to Cardiac Rehab by your physician:**

The Cardiac Rehab department will contact you to schedule an appointment.

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

San Antonio Regional Hospital is a San Bernardino County Vaccination Center

San Bernardino County has extended COVID-19 vaccinations to all people 12 and older.

San Antonio Regional Hospital has agreed to serve as a vaccination center for San Bernardino County.

An additional booster dose has been authorized (9/29/2021) for:

Individuals who have received the Pfizer mRNA COVID-19 vaccine at least 6 months after receiving their initial two doses and:

- People 65 and older or residents in long term care facility
- People aged 50-64 years with underlying medical conditions or at increased risk of social inequities
- People aged 18-64 years with underlying medical conditions or who are at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting

Vaccination locations as of July 30, 2021

San Antonio Regional Hospital

999 San Bernardino Road, Upland, California 91786

Open to the Public for Vaccinations 5 Days a week,

Monday – Friday, from 9:00AM – 1:00PM

To schedule an appointment at this location, email:

covid19vaccine@sarh.org

Sierra San Antonio Medical Plaza

16465 Sierra Lakes Parkway, Fontana, California 92336

Open to the Public for Vaccinations 7 Days a week,

Monday-Friday 9:00AM – 8:00PM ; Weekends 9:00AM – 5:00PM

To schedule an appointment at this location, go to

<https://4myhealth.iqhealth.com/pages/myturnvaccinescheduling>

Rancho San Antonio Medical Plaza

7777 Milliken Avenue, Rancho Cucamonga, California 91730

Open to the Public for Vaccinations 7 Days a week,

Monday-Friday 9:00AM – 8:00PM ; Weekends 9:00AM – 5:00PM

To schedule an appointment at this location, go to

<https://4myhealth.iqhealth.com/pages/myturnvaccinescheduling>

Eastvale San Antonio Medical Plaza

12442 Limonite Avenue, Eastvale, CA 91752

Open to the Public for Vaccinations 7 Days a week,

Monday-Friday 9:00AM – 8:00PM ; Weekends 9:00AM – 5:00PM

To schedule an appointment at this location, go to

<https://4myhealth.iqhealth.com/pages/myturnvaccinescheduling>

If you are 12 or older and a resident of San Bernardino County, all requests for a vaccination appointment at our hospital must be made by sending an email to covid19vaccine@sarh.org

Once you've sent the email to covid19vaccine@sarh.org, you will receive an email with a link to go online to schedule an appointment. The email will include the link and a specific invite code, which must be used when scheduling. There will be instructions regarding

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Discharge Documentation

information which must be included to register as well as instructions on what to bring the day of your appointment and where to check-in. **You will need to make individual appointments for each person.**

You will need to bring:

- An I.D. showing proof of residency in San Bernardino County to be vaccinated.
- You must be a resident of San Bernardino County within the above tiers to qualify for vaccination at this location.
- Unfortunately, anyone who does not bring this identification will have to be rescheduled for another day – no exceptions.

If you do not receive the email with the link & invite code right away, it is due to a delay in vaccine shipment. Please be patient and continue to check your email for a return message from covid19vaccine@sarh.org until you receive the link and invite code.

Be sure to write down the date & time of your appointment as you will NOT receive a confirmation email.
Finally, your second vaccine will be scheduled when you get your first shot. You will need to keep the card they give you with this date and time. You will return to the same location for your second vaccine.

Additional vaccination locations and registration information for SAN BERNARDINO COUNTY can be found at <https://sbcovid19.com/vaccine/locations>

Only for Patients Diagnosed with Coronavirus (COVID-19)

The novel Coronavirus, known as COVID-19. It is a viral illness that can cause fever, cough and trouble breathing. Some people may have chills, muscle aches, runny nose, sneezing, sore throat, upset stomach or loose stool.

When leaving the Hospital, you will be asked to wear a mask. You should wear it until you get home.

When do I need to call the doctor?

- Call your doctor if your breathing is getting worse e.g. harder or faster than before, or you feel like you are getting less air.
- Get medical attention right away if you have trouble breathing, chest pain or pressure that does not go away, new confusion or not able to wake up, or bluish lips or face.
- If you can, put on a facemask before leaving home or before you enter the clinic or hospital.

Precautions at home

The virus is spread easily through tiny droplets when you cough or sneeze. You should take these steps to help prevent the disease from spreading to people in your home and community:

1. Self-isolate at home

Stay in your home, except to go to the doctor, and limit contact with others:

- Do not go to work, school, or public areas, except for getting medical care.
- Avoid using public transportation such as buses, ride-sharing, or taxis.
- If you have an upcoming doctor appointment, call the office and tell them that you have COVID-19.

Separate yourself from other people and animals in your home:

- Avoid touching other people, including handshaking.
- As much as you can, stay in a specific room and away from other people in your home. You should also use a separate bathroom, if available.

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- Avoid sharing personal household items. You should not share dishes, drinking glasses, cups, eating utensils, towels, toothpaste, or bedding with other people in your home. After using these items, they should be washed well with soap and water.
- Do not handle pets or other animals while sick.

2. Clean and disinfect

Clean all "high-touch" surfaces every day:

- High-touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables.
- Clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the instructions on the label.
- Remove and wash clothes or bedding that have blood, stool, or body fluids on them.

3. Help stop the spread

Clean your hands often:

- Wash your hands with soap and water for at least 20 seconds **OR** use an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- Wash your hands after blowing your nose, coughing, sneezing, going to the bathroom, and before eating or preparing food.
- Avoid touching your eyes, nose, and mouth with unwashed hands.

Cover your mouth and nose:

- Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can and clean your hands right away.
- Wear a facemask when you are around other people (e.g. sharing a room or vehicle) or pets, and before you enter a healthcare provider's office.
- Notify your close contacts

Your close contacts should:

- Self-monitor for symptoms by checking their temperature twice a day and watching for fever, cough, or shortness of breath. They should contact their doctor if they develop these symptoms.
- Clean their hands often and avoid touching eyes, nose, and mouth with unwashed hands.
- Wear a mask if they have to be in the same room as you, if you are not able to wear one.

When can I stop precautions at home?

You can stop isolating yourself when the following things have happened:

You have had no fever for at least 24 hours (that is one full day of no fever without the use of medicine that reduces fevers)

AND

Other symptoms have improved (for example, when your cough or shortness of breath have improved)

AND

At least 10 days have passed since your symptoms first started.

Manage your stress and anxiety

Being ill can be stressful or cause anxiety:

- Remember that everyone reacts differently to stressful situations.
- COVID-19 might be especially stressful because it is a new disease and there is a lot of news coverage. Take breaks from watching, reading, or listening to news stories, including social media.
- People with preexisting mental conditions should continue their treatment and be aware of new or worsening symptoms.
- If you, or someone you care about, are feeling overwhelmed with emotions like sadness, depression, or anxiety, call the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Helpline: 1.800.985.5990 or text TalkWithUs to 66746. (TTY 1.800.846.8517)

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For more information:

- CDC Coronavirus Website <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC Coronavirus Frequently asked question - <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

Living Smoke Free

Smoking Facts

When a cigarette smoker inhales, about 25% of the nicotine in the smoke reaches the brain within six seconds. A "Pack-a-day" smoker gets between 50,000 and 70,000 such nicotine "jolts" a year. Nicotine causes the heart to beat much faster. Blood pressure rises and harmful substances pour into the blood. Combined with the stress caused by carbon monoxide in cigarette smoke, more than 120,000 heart attack deaths occur yearly among U.S. smokers.

Second Hand Smoke

Second hand smoke is the combination of smoke from a burning cigarette and smoke exhaled by a smoker. The smoke that burns off the end of a cigarette or cigar contains more harmful substances than the smoke inhaled by the smoker. If you do not smoke, but are exposed to second-hand smoke on a regular basis, your body is absorbing nicotine and other harmful substances just as the smokers body is doing. In the U.S., 37,000 annual deaths are related to second-hand smoke.

Do Not Smoke!!

If you would like more information on avoiding second-hand smoke or if you would like help to quit smoking, please contact the following community resource.

CALIFORNIA SMOKERS HOTLINE: 1-800-NO-BUTTS

(Six languages and hearing impaired)

Narcotics - Safe Use, Storage and Disposal

Safe Use of Narcotics

Follow all directions on your prescription label. Never take this medicine in larger amounts, or for longer than prescribed. Misuse of narcotics can cause addiction, overdose, or death, especially in a child or other person using the medicine without a prescription.

Storage of Narcotics

Remember to keep your narcotics and all other medicines out of reach of children. Never share your medicines with others, and use this medication only for the indication prescribed on the prescription label.

Common Side Effects of Narcotics

Common side effects include dizziness, drowsiness, nausea, or constipation. This is not a complete list of side effects and other symptoms may occur. Call your doctor for medical advice about side effects. Seek medical attention right away if you have life threatening symptoms.

How To Dispose Of Unused Medications

Caregivers and consumers should remove expired or unused medicines from their home as quickly as possible to help reduce the chance that others may accidentally take or intentionally misuse the unneeded medicine.

*Call 1-800-882-9539 for locations that collect unused medications near you

Disposal of Medications At Home

If no take-back programs or DEA-authorized collectors are available near your area, and there are no specific disposal instructions on the label, you can follow these simple steps below to dispose of most medications in the household:

1. MIX - Mix medicines (do not crush tablets or capsules) with an unpalatable substance such as dirt, litter, or used coffee grounds

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2. PLACE - Place the mixture in a container such as a sealed plastic bag
3. THROW - Throw the container in your household trash
4. SCRATCH OUT - Scratch out all personal information on the prescription label of your empty pill bottle or empty medicine packaging to make it unreadable, then dispose of the container.

**Persons may not dispose of illicit drugs (ex: marijuana, heroin, LSD) through these disposal methods.*

**Insulin syringes cannot be disposed of through one of the disposal methods stated above.*

Important Information To Know About Strokes

What is a Stroke?

A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked or bursts. When that happens, part of the brain cannot get the blood and oxygen it needs. Stroke is the No. 4 cause of death in the United States, behind diseases of the heart and cancer and is the leading cause of disability.

WARNING SIGNS OF STROKE

Stroke is a medical emergency. Know these warning signs and teach them to others. Every minute counts.

BE FAST and check for these signs:

BALANCE	Dizziness, sudden trouble walking, or loss of balance?
EYES	Trouble seeing or a sudden change in vision?
FACE	Facial droop; uneven smile?
ARM	Arm numbness; arm weakness especially on one side?
SPEECH	Slurred speech; difficulty speaking or understanding?
TIME	Timing is critical. Call 9-1-1. Have ambulance go to the nearest stroke center immediately.

Risk Factors For Stroke

Factors that cannot be changed: age, heredity (family history) and race, gender, prior stroke, TIA or heart attack. Factors that can be changed, treated or controlled: High blood pressure, high cholesterol, diabetes mellitus, cigarette smoking, carotid or other artery disease, atrial fibrillation, other heart disease, poor diet, physical inactivity, obesity, sickle cell disease, illegal drug use.

Discharge From The Hospital

If you have had a stroke it is important that you take all medications as directed and receive continued medical care with your primary care physician or consulting physician following your discharge.

Important Information About Chest Pain & Acute Coronary Syndrome

What Is Acute Coronary Syndrome (ACS)? Acute Coronary Syndrome is an urgent problem in which the blood supply to the heart muscle is suddenly blocked. Well-known conditions that are acute coronary syndromes are heart attack and unstable angina. Over 800,000 people die in the US every year from a heart attack and on average 50% of these patients displayed, but ignored, the warning signs.

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Discharge Documentation

Signs and Symptoms of ACS

Most common presentations:

Chest pain or discomfort, which may involve pressure, tightness, aching, burning, or fullness. Pain or discomfort in one or both arms, the jaw, neck, back, or stomach, shortness of breath.

Less common presentations:

Feeling dizzy or lightheaded, nausea, sweating, unexplained excessive fatigue, unexplained feeling of anxiety.

Atypical symptoms include:

Epigastric pain, indigestion, stabbing pain with coughing and breathing, and increasing difficulty breathing.

Risk Factors

- Family history of chest pain, heart disease, or stroke.
- Smoking.
- High blood pressure.
- High blood cholesterol.
- Diabetes, history of gestational diabetes.
- Physical inactivity, being overweight or obese.
- For women: taking birth control pills, history of pre-eclampsia, or having a low birth weight baby.

SEEK IMMEDIATE MEDICAL CARE IF: You are experiencing any of the ACS symptoms, or you have severe chest pain, especially if the pain is crushing or pressure-like and spreads to arms, back, neck or jaw.

THIS IS AN EMERGENCY. Call 9-1-1 and DO NOT drive yourself to the hospital.

Congestive Heart Failure (CHF) Discharge Instructions

If you have Congestive Heart Failure (CHF) or have ever had CHF, these are guidelines that we recommend for better health

CALL YOUR DOCTOR RIGHT AWAY IF THE FOLLOWING OCCURS:

- More Shortness of Breath than usual, especially when active or when lying flat
- Weight gain of 2 - 3+ pounds overnight or 4 pounds or more in a week
- Dizziness or fainting episodes
- Extreme tiredness
- Swollen ankles or feet
- Lack of appetite, abdominal bloating or pain, nausea or vomiting
- Constant cough
- Chest pain
- Skipped beats or very slow heart rate (50 beats per minute or less)

Activity and Rest

Plan your day to include balanced periods of rest and activity. Put your feet up to reduce ankle swelling. Avoid extreme temperatures.

Medications

Know the purpose and side effects of your medications.

Report any side effects without delay to your doctor.

Your doctor will prescribe medications to improve the way your heart pumps and rids your body of extra water.

Take medication as directed. Never skip a dose or discontinue a medication without letting your doctor know.

Know your medication names, dosage and schedule. Get a refill before you run out.

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If you have questions regarding dosages of your medications, contact your doctor.
Always keep an Up - To - Date List of the medications you are taking with you.

Diet

The blanks below with an asterisk (*) will only be completed by your nurse or physician if you actually have a diagnosis of CHF:

Your Doctor has prescribed * Diet.

Sodium * milligrams day.

Do not add extra salt to your diet. Follow a diet low in cholesterol and fat, particularly saturated fat.

Ask your doctor if limiting your fluids is necessary.

Your doctor has limited your fluids to * ounces / 24 hours.

Ask your doctor if limiting your fluids is necessary.

Rest 1 hour after meals before doing any activity.

Limit foods that have caffeine (e.g. coffee, tea, cola and chocolate) to 1-2 cups per day because of their stimulating effects.

Check with your Doctor about drinking alcohol. If OK, limit to 2 ounces per day.

Weigh Yourself Daily

Weigh yourself daily in the morning and record your weight. Report any sudden weight gain of 2-3 pounds overnight or 4 pounds or more in one week to your doctor.

Your weight when discharged was * pounds.

Exercise

Check with your Doctor before starting any exercise program. Exercise can increase muscle strength, flexibility and improve your ability to do other things. Avoid pushing, pulling, or raising heavy objects above the shoulder.

Walking is one exercise that may be recommended. Start with a 3-5 minute warm-up of light, slow stretching. Walk at a comfortable pace, making sure you can easily carry on a conversation while exercising. Slowly increasing the distance is okay as strength improves. End you walking sessions with a cooling down period by gradually slowing down.

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Attending: Khan M.D.,Mansurur R.
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SAN ANTONIO REGIONAL HOSPITAL

999 San Bernardino Road, Upland, CA 91786 Phone: (909) 985-2811

****Signature Page****

Patient Name:

HANNA MD, ADEL SHAKER

DOB: 03/29/1946
MRN: 918505
FIN: 5295168
Visit Date: 11/14/2021

Current Date/Time: 11/15/2021 17:46:59

HANNA MD, ADEL SHAKER (or representative) has been given Discharge Instructions with follow-up instructions, medication instructions, patient education materials and has verbalized understanding.

Patient/Representative Name: _____

Patient/Representative Signature: _____

Relationship to Patient: _____

RN Signature: _____

Date: _____

Document Name: Patient Discharge Summary
Result Status: Auth (Verified)
Performed By: Dionisio RN,Rexie T (11/15/2021 17:03 PST)
Authenticated By: Dionisio RN,Rexie T (11/15/2021 17:03 PST)



SAN ANTONIO REGIONAL HOSPITAL

999 San Bernardino Road, Upland, CA 91786 Phone: (909) 985-2811

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Discharge Documentation

Patient Name:

HANNA MD, ADEL SHAKER

DOB: 03/29/1946
MRN: 918505
FIN: 5295168
Visit Date: 11/14/2021

Current Date/Time: 11/15/2021 17:03:24

Patient Discharge Instructions

San Antonio Regional Hospital would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your illness/injury. Please make an appointment with your physician within two weeks and bring all of your medications and prescriptions to the appointment (unless otherwise instructed).

IF YOU RECEIVED SEDATION:

- Do not drive or operate machinery for 24 hours after receiving sedation or while taking pain medication.
- Do not drink alcoholic beverages for 24 hours after receiving sedation or while taking pain medication.
- Do not make important decisions or sign legal documents for the next 24 hours after receiving sedation.

My Health Records

Your San Antonio Regional Hospital **lab and radiology results** and **discharge instructions** can be viewed and downloaded on San Antonio Regional Hospital's patient portal. To access this, you need a *My Health Records* account. A registration representative may have sent you an Invitation to your personal email. Follow the instructions in the email to create your account. Or to self-enroll, go to SARH.org, then click on the *My Health Records* button (upper right corner), and follow the prompts. If you already have an account, go to www.SARH.org/4myhealth to log in. Note: Laboratory results are available after 3 days and Radiology results are available after 5 days. If you have questions or need assistance with creating a *My Health Records* account, please call (909) 694-1088 or email MyHealthRecords@sarh.org.

Wellness Tools are Also Available at My Health Records!

My Health Records has a variety of health assessment tools, health trackers, and action plans to help you monitor your health and provide educational information. Tools included are:

“ Blood Pressure Log “ Cholesterol Log “ Glucose Log “ Food Tracker “ Weight Tracker “ Steps Log

Your Diagnosis

Chest pain
Hypertension

Your Allergies

REGLAN

Your Care Team

Primary Care Physician: Ali M.D., Mohamed S
Admitting Physician: Talwar M.D., Rishi

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Attending Physician: Khan M.D., Mansurur R.
Consulting Physician: Chan D.O., Larry; Rasanian M.D., Suraj

What to do next

You Need to Schedule the Following Appointments

Follow Up with Larry Chan
When In 2 weeks 11/29/2021 PST

Where: 685 N. 13th Ave.
Suite 9
Upland, CA 91786-
(909) 981-8383 Business (1)

Follow Up with Follow up with primary
care provider
When In 1 week 11/22/2021 PST

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Patient Type: Observation

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Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Medications and Prescriptions

San Antonio Regional Hospital Providers have provided you with a list of medications at discharge, if you have been instructed to stop taking a medication please ensure you also follow up with this information to your Primary Care Physician. Any specific questions regarding your ongoing medications and dosages should be discussed with your physician(s) and pharmacist.

Please check the medication list below

If a Pharmacy Name is listed, a prescription has been sent directly to that Pharmacy – Pick up your prescription at the listed pharmacy. If you have been given printed prescriptions, please take to a Pharmacy to be filled.

	What	How Much	When	Instructions	Next Dose
<i>New</i>	atorvastatin (Lipitor 40 mg oral tablet)	1 tablet Oral	Every day	Refills: 11 Printed Prescription	
<i>New</i>	losartan (losartan 50 mg oral tablet)	1 tablet Oral	2 times a day	Refills: 11 Printed Prescription	
<i>Changed</i>	amLODIPine (amLODIPine 10 mg oral tablet)	1 tablet Oral	Every day	Printed Prescription	

	What	How Much	When	Comments
<i>Stop Taking</i>	atenolol (atenolol 50 mg oral tablet)	2 tablet Oral	Every day	

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Discharge Documentation

Medication Leaflets

Education Materials

Return to Work

_____ was treated at our facility.

Injury or illness was:

Work-related.

___ Not work-related.

___ Undetermined if work-related.

Return to work

- Employee may return to work on _____.
- Employee may return to modified work on _____.

Work activity restrictions

This person is not able to do the following activities:

___ Bend

___ Sit for a prolonged time

- This person should not sit for more than ___ hours at a time.
- This person should not sit for more than ___ hours during an 8-hour workday.

___ Lift more than _____ lb

___ Squat

___ Stand for a prolonged time

- ___ This person should not stand for more than ___ hours at a time.
- ___ This person should not stand for more than ___ hours during an 8-hour workday.

___ Climb

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

___ Reach

___ Push and pull with the ___ right hand ___ left hand

___ Walk

- ___ This person should not walk for more than ___ hours at a time.
• ___ This person should not walk for more than ___ hours during an 8-hour workday.

___ Drive or operate a motor vehicle at work

___ Grasp with the ___ right hand ___ left hand

___ Other _____

These restrictions are effective until _____ or until a recheck appointment on _____.

Health care provider name (printed): _____

Health care provider (signature): _____

Date: _____

How to use this form

Show this Return to Work statement to your supervisor at work as soon as possible. Your employer should be aware of your condition and may be able to help with the necessary work activity restrictions.

Contact your health care provider if:

- You wish to return to work sooner than the date that is listed above.
• You have problems that make it difficult for you to return at that time.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 12/13/2018 Document Reviewed: 12/13/2018
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Return To Work

_____ was treated at San Antonio Community Hospital.

INJURY OR ILLNESS WAS:

- ___ Work-related
___ Not work-related
___ Undetermined if work-related

RETURN TO WORK

- Employee may return to work on: _____
• Employee may return to modified work on: _____

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Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

WORK ACTIVITY RESTRICTIONS

Work activities not tolerated include:

- Bending
Prolonged sitting
Lifting
Squatting
Prolonged standing
Climbing
Reaching
Pushing and pulling
Walking
Other

Show this Return to Work statement to your supervisor at work as soon as possible. Your employer should be aware of your condition and can help with the necessary work activity restrictions. If you wish to return to work sooner than the date above, or if you have further problems which make it difficult for you to return at that time, please call us or your caregiver.

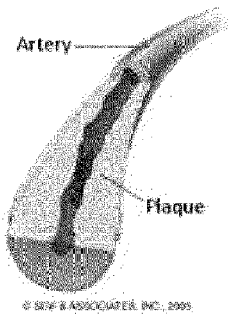
Physician Name (Printed)

Physician Signature

Date

Document Released: 12/18/2006 Document Revised: 12/06/2012 Document Reviewed: 06/03/2008
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High Cholesterol



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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

High cholesterol is a condition in which the blood has high levels of a white, waxy, fat-like substance (cholesterol). The human body needs small amounts of cholesterol. The liver makes all the cholesterol that the body needs. Extra (excess) cholesterol comes from the food that we eat.

Cholesterol is carried from the liver by the blood through the blood vessels. If you have high cholesterol, deposits (plaques) may build up on the walls of your blood vessels (arteries). Plaques make the arteries narrower and stiffer. Cholesterol plaques increase your risk for heart attack and stroke. Work with your health care provider to keep your cholesterol levels in a healthy range.

What increases the risk?

This condition is more likely to develop in people who:

- Eat foods that are high in animal fat (saturated fat) or cholesterol.
- Are overweight.
- Are not getting enough exercise.
- Have a family history of high cholesterol.

What are the signs or symptoms?

There are no symptoms of this condition.

How is this diagnosed?

This condition may be diagnosed from the results of a blood test.

- If you are older than age 20, your health care provider may check your cholesterol every 4–6 years.
- You may be checked more often if you already have high cholesterol or other risk factors for heart disease.

The blood test for cholesterol measures:

- "Bad" cholesterol (LDL cholesterol). This is the main type of cholesterol that causes heart disease. The desired level for LDL is less than 100.
- "Good" cholesterol (HDL cholesterol). This type helps to protect against heart disease by cleaning the arteries and carrying the LDL away. The desired level for HDL is 60 or higher.
- Triglycerides. These are fats that the body can store or burn for energy. The desired number for triglycerides is lower than 150.
- Total cholesterol. This is a measure of the total amount of cholesterol in your blood, including LDL cholesterol, HDL cholesterol, and triglycerides. A healthy number is less than 200.

How is this treated?

This condition is treated with diet changes, lifestyle changes, and medicines.

Diet changes

- This may include eating more whole grains, fruits, vegetables, nuts, and fish.
- This may also include cutting back on red meat and foods that have a lot of added sugar.

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Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

Lifestyle changes

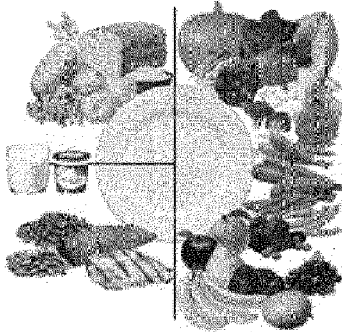
- Changes may include getting at least 40 minutes of aerobic exercise 3 times a week. Aerobic exercises include walking, biking, and swimming. Aerobic exercise along with a healthy diet can help you maintain a healthy weight.
- Changes may also include quitting smoking.

Medicines

- Medicines are usually given if diet and lifestyle changes have failed to reduce your cholesterol to healthy levels.
- Your health care provider may prescribe a statin medicine. Statin medicines have been shown to reduce cholesterol, which can reduce the risk of heart disease.

Follow these instructions at home:

Eating and drinking



If told by your health care provider:

- Eat chicken (without skin), fish, veal, shellfish, ground turkey breast, and round or loin cuts of red meat.
- **Do not** eat fried foods or fatty meats, such as hot dogs and salami.
- Eat plenty of fruits, such as apples.
- Eat plenty of vegetables, such as broccoli, potatoes, and carrots.
- Eat beans, peas, and lentils.
- Eat grains such as barley, rice, couscous, and bulgur wheat.
- Eat pasta without cream sauces.
- Use skim or nonfat milk, and eat low-fat or nonfat yogurt and cheeses.
- **Do not** eat or drink whole milk, cream, ice cream, egg yolks, or hard cheeses.
- **Do not** eat stick margarine or tub margarines that contain trans fats (also called partially hydrogenated oils).
- **Do not** eat saturated tropical oils, such as coconut oil and palm oil.
- **Do not** eat cakes, cookies, crackers, or other baked goods that contain trans fats.

General instructions

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Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Exercise as directed by your health care provider. Increase your activity level with activities such as gardening, walking, and taking the stairs.
- Take over-the-counter and prescription medicines only as told by your health care provider.
- **Do not** use any products that contain nicotine or tobacco, such as cigarettes and e-cigarettes. If you need help quitting, ask your health care provider.
- Keep all follow-up visits as told by your health care provider. This is important.

Contact a health care provider if:

- You are struggling to maintain a healthy diet or weight.
- You need help to start on an exercise program.
- You need help to stop smoking.

Get help right away if:

- You have chest pain.
- You have trouble breathing.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 12/21/2018 Document Reviewed: 06/17/2017
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Hypertension, Adult

Hypertension is another name for high blood pressure. High blood pressure forces your heart to work harder to pump blood. This can cause problems over time.

There are two numbers in a blood pressure reading. There is a top number (systolic) over a bottom number (diastolic). It is best to have a blood pressure that is below 120/80. Healthy choices can help lower your blood pressure, or you may need medicine to help lower it.

What are the causes?

The cause of this condition is not known. Some conditions may be related to high blood pressure.

What increases the risk?

- Smoking.
- Having type 2 diabetes mellitus, high cholesterol, or both.
- Not getting enough exercise or physical activity.
- Being overweight.
- Having too much fat, sugar, calories, or salt (sodium) in your diet.
- Drinking too much alcohol.
- Having long-term (chronic) kidney disease.
- Having a family history of high blood pressure.

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DOB/Age/Sex: 3/29/1946 76 years Male

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Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Age. Risk increases with age.
- Race. You may be at higher risk if you are African American.
- Gender. Men are at higher risk than women before age 45. After age 65, women are at higher risk than men.
- Having obstructive sleep apnea.
- Stress.

What are the signs or symptoms?

- High blood pressure may not cause symptoms. Very high blood pressure (hypertensive crisis) may cause:
 - 46 Headache.
 - 46 Feelings of worry or nervousness (anxiety).
 - 46 Shortness of breath.
 - 46 Nosebleed.
 - 46 A feeling of being sick to your stomach (nausea).
 - 46 Throwing up (vomiting).
 - 46 Changes in how you see.
 - 46 Very bad chest pain.
 - 46 Seizures.

How is this treated?

- This condition is treated by making healthy lifestyle changes, such as:
 - 46 Eating healthy foods.
 - 46 Exercising more.
 - 46 Drinking less alcohol.
- Your health care provider may prescribe medicine if lifestyle changes are not enough to get your blood pressure under control, and if:
 - 46 Your top number is above 130.
 - 46 Your bottom number is above 80.
- Your personal target blood pressure may vary.

Follow these instructions at home:

Eating and drinking

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Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

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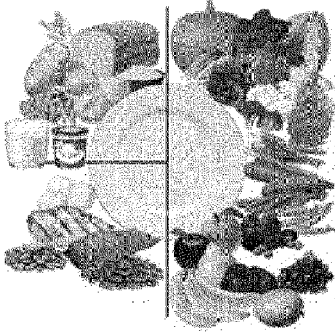
Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

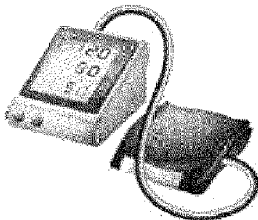
Attending: Khan M.D.,Mansurur R.

Discharge Documentation



- If told, follow the DASH eating plan. To follow this plan:
 - 46 Fill one half of your plate at each meal with fruits and vegetables.
 - 46 Fill one fourth of your plate at each meal with whole grains. Whole grains include whole-wheat pasta, brown rice, and whole-grain bread.
 - 46 Eat or drink low-fat dairy products, such as skim milk or low-fat yogurt.
 - 46 Fill one fourth of your plate at each meal with low-fat (lean) proteins. Low-fat proteins include fish, chicken without skin, eggs, beans, and tofu.
 - 46 Avoid fatty meat, cured and processed meat, or chicken with skin.
 - 46 Avoid pre-made or processed food.
- Eat less than 1,500 mg of salt each day.
- **Do not** drink alcohol if:
 - 46 Your doctor tells you not to drink.
 - 46 You are pregnant, may be pregnant, or are planning to become pregnant.
- If you drink alcohol:
 - 46 Limit how much you use to:
 - 52 0–1 drink a day for women.
 - 52 0–2 drinks a day for men.
 - 46 Be aware of how much alcohol is in your drink. In the U.S., one drink equals one 12 oz bottle of beer (355 mL), one 5 oz glass of wine (148 mL), or one 1½ oz glass of hard liquor (44 mL).

Lifestyle



- Work with your doctor to stay at a healthy weight or to lose weight. Ask your doctor what the best weight is for you.
- Get at least 30 minutes of exercise most days of the week. This may include walking, swimming, or biking.

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Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Get at least 30 minutes of exercise that strengthens your muscles (resistance exercise) at least 3 days a week. This may include lifting weights or doing Pilates.
- **Do not** use any products that contain nicotine or tobacco, such as cigarettes, e-cigarettes, and chewing tobacco. If you need help quitting, ask your doctor.
- Check your blood pressure at home as told by your doctor.
- Keep all follow-up visits as told by your doctor. This is important.

Medicines

- Take over-the-counter and prescription medicines only as told by your doctor. Follow directions carefully.
- **Do not** skip doses of blood pressure medicine. The medicine does not work as well if you skip doses. Skipping doses also puts you at risk for problems.
- Ask your doctor about side effects or reactions to medicines that you should watch for.

Contact a doctor if you:

- Think you are having a reaction to the medicine you are taking.
- Have headaches that keep coming back (recurring).
- Feel dizzy.
- Have swelling in your ankles.
- Have trouble with your vision.

Get help right away if you:

- Get a very bad headache.
- Start to feel mixed up (confused).
- Feel weak or numb.
- Feel faint.
- Have very bad pain in your:
 - 46 Chest.
 - 46 Belly (abdomen).
- Throw up more than once.
- Have trouble breathing.

Summary

- Hypertension is another name for high blood pressure.
- High blood pressure forces your heart to work harder to pump blood.
- For most people, a normal blood pressure is less than 120/80.
- Making healthy choices can help lower blood pressure. If your blood pressure does not get lower with healthy choices, you may need to take medicine.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 08/28/2019 Document Reviewed: 08/28/2019

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MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
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Discharge Documentation

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CHEST PAIN AND ACUTE CORONARY SYNDROME INFORMATION

WHAT IS ACUTE CORONARY SYNDROME (ACS)?

Acute Coronary Syndrome is an urgent problem in which the blood supply to the heart muscle is suddenly blocked. Well-known conditions that are acute coronary syndromes are heart attack and unstable angina. Over 800,000 people die in the US every year from a heart attack and on average 50% of these patients displayed, but ignored, the warning signs.

SIGNS AND SYMPTOMS OF ACS

- Most common presentations:
 - Chest pain or discomfort, which may involve pressure, tightness, aching, burning, or fullness
 - Pain or discomfort in one or both arms, the jaw, neck, back, or stomach
 - Shortness of breath
- Less common presentations:
 - Feeling dizzy or lightheaded
 - Nausea
 - Sweating
 - Unexplained/Excessive Fatigue
 - Unexplained feeling of anxiety
- Atypical symptoms include epigastric pain, indigestion, stabbing pain with coughing and breathing, and increasing difficulty breathing

RISK FACTORS

- Family history of chest pain, heart disease, or stroke
- Smoking
- High blood pressure
- High blood cholesterol
- Diabetes, history of gestational diabetes
- Physical inactivity
- Being overweight or obese
- For women: taking birth control pills, history of pre-eclampsia, or having a low birth weight baby

HEART HEALTHY DIET

- Talk to your health care provider or diet specialist (dietitian) to create an eating plan that is right for you.
- Limit unhealthy (saturated) fats (Animal products: meats, butter, & cream Plant: palm, palm kernel, & coconut oil)
- Increase healthy fats such as olive and canola oil, flaxseeds, walnuts, almonds, and seeds
- Eat more Omega-3 fats which include salmon, mackerel, sardine, tuna, flaxseed oil
- Avoid foods with trans fats such as margarine, cookies, crackers, and other baked goods
- Limit or avoid alcohol and foods high in salt, starch, and sugar

EXERCISE

- Talk to your health care provider:
 - Regarding an activity plan that works for you
 - Prior to starting a new exercise program
- Exercise regularly as directed by your health care provider and maintain a healthy weight

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FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
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Discharge Documentation

- **DO NOT** exercise so much that you hurt yourself, feel dizzy, or have difficulty catching your breath
- Drink water while you exercise to prevent dehydration
- Wear comfortable clothes and shoes with good support

SMOKING CESSATION

Avoid breathing secondhand smoke and if you currently smoke, it is time to quit. Smoking can cause multiple health problems and greatly increases the risk of developing heart disease. For free telephone counseling, self-help materials and online help to quit smoking call **California Smokers' Hotline: 1-800-NO-BUTTS**

MEDICATION SAFETY

It is important to follow the treatment plan your health care provider prescribed and know which medications to avoid. Medications to avoid are those that can prevent your heart medicine from working properly, make your heart worker harder, and make your heart disease worse.

Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)

NSAIDs are often used to relieve pain and reduce inflammation from conditions such as arthritis. NSAIDs can also cause body fluid retention and decrease kidney function, which can result in a rise in your blood pressure. The extra fluid and higher blood pressure will make your heart work harder.

Common NSAIDs include:

- Aspirin-If used to treat or prevent heart attacks, strokes, and chest pain, be sure to take ONLY under the supervision of a doctor
- Ibuprofen
- Naproxen
- Cough & Cold medications and Decongestants

You may find NSAIDs over-the-counter for other conditions, so be sure you check the label. Ask your health care provider if it is OK to take any NSAIDs or if they can recommend alternatives, such as acetaminophen (Tylenol).

Vitamins and Folic Acid

Antioxidant vitamin supplements and Folic Acid are not recommended to decrease the risk of a heart disease.

Hormone Replacement Therapy (HRT)

Hormone therapy (Estrogen plus Progesterone or Estrogen alone) is not recommended as a method to decrease the risk of a 2nd heart attack in postmenopausal women. If you were taking hormone therapy prior to your heart diagnosis, you need to speak to your health care provider about associated risks and benefits before resuming HRT.

Migraine Headache Medications

Some migraine medications relieve migraine pain by tightening the blood vessels in your head. These medications can constrict blood vessels throughout the body and make your blood pressure rise. If you have high blood pressure or any type of heart disease, talk with your health care provider before taking medication for migraines or severe headaches.

Weight Loss Medications

Some weight loss medications may make heart disease worse because they can increase your blood pressure and heart rate.

More Tips for Avoiding Medication Problems

- Take prescribed medication as directed
- Give a list of ALL medications you use (both prescription and over-the-counter) to every doctor you visit.
- Read medication labels before buying over-the-counter medications.
- Talk to your doctor before using any over-the-counter medication, herbal preparation, vitamins, or other nutritional supplements. Ask for alternatives to potentially harmful medications.

Discharge Medications

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Discharge Documentation

There are classes of medications that have been proven to reduce cardiovascular events and death in patients with a history of a NSTEMI-ACS, commonly known as a heart attack. Your medications and dosage may be individualized, depending on other medical issues and risk of side effects. Take all prescribed medication(s) unless contraindicated or not tolerated. **ASK YOUR PHYSICIAN BEFORE YOU STOP TAKING ANY MEDICATION BECAUSE STOPPING THE MEDICATION(S) CAN BE DANGEROUS TO YOUR HEALTH.**

There are 5 classes of medications that are likely to be prescribed to you in order to reduce the risk of another heart attack or death. The following are the classes of medications, some common examples, and the suggested duration of therapy:

Aspirin and/or antiplatelet (P2Y12): All patients with NSTEMI-ACS (heart attack), life-long therapy
These medications keep your platelets from forming clots that may lead to further heart issues.
Examples: Aspirin, Plavix (Clopidogrel), Effient (Prasugr), Brilinta (Ticagrelor)

Beta Blockers: All patients with NSTEMI-ACS, life-long therapy
These medications help control your heart's rhythm and lower your blood pressure.
Examples: Toprol (Metoprolol), Atenolol (Tenormin), Carvedilol (Coreg)

ACE Inhibitors/ARBs: All patients with NSTEMI-ACS, life-long therapy
These medications help lower your blood pressure and amount of work for the heart to pump blood.
Examples: Captopril, Vasotec (Enalapril), Altace (Ramipril), Lisinopril, Lotensin (Benzapril)

Statin: All patients with NSTEMI-ACS, life-long therapy
These medications help lower your cholesterol level in the blood.
Examples: Lipitor (Atorvastatin), Lescol (Fluvastatin), Mevacor (Lovastatin), Pravachol (Pravastatin), Crestor- (Rosuvastatin), Zocor (Simvastatin)

Nitroglycerin (Sublingual): All patients with NSTEMI-ACS, life-long therapy
This medication is used to prevent or treat chest pain by relaxing and widening blood vessels so blood can flow more easily to the heart. Take medication only as directed by your doctor. **DO NOT** chew or swallow the tablet. **DO NOT** use this medication if you have had a phosphodiesterase (Examples: Viagra, Cialis, or Levitra) medication within the last 24 to 48 hours. If chest pain has not improved or worsened after following the doctor's instructions, seek medical attention immediately (Call 911).
Examples: NitroSTAT, Nitrobid

SEEK IMMEDIATE MEDICAL CARE IF:

- You have severe chest pain, especially if the pain is crushing or pressure-like and spreads to arms, back, neck or jaw. **THIS IS AN EMERGENCY. Call 911 and DO NOT drive yourself to the hospital.**
- You are experiencing any of the ACS symptoms

POST-HOSPITAL

***If outpatient stress testing is indicated and ordered by your physician:**

Call your Primary Care Physician/Cardiologist to schedule a stress test within 72 hours of discharge if not done during this hospital stay.

***If ordered and referred to Cardiac Rehab by your physician:**

The Cardiac Rehab department will contact you to schedule an appointment.

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Discharge Documentation

San Antonio Regional Hospital is a San Bernardino County Vaccination Center

San Bernardino County has extended COVID-19 vaccinations to all people 12 and older.

San Antonio Regional Hospital has agreed to serve as a vaccination center for San Bernardino County.

An additional booster dose has been authorized (9/29/2021) for:

Individuals who have received the Pfizer mRNA COVID-19 vaccine at least 6 months after receiving their initial two doses and:

- People 65 and older or residents in long term care facility
- People aged 50-64 years with underlying medical conditions or at increased risk of social inequities
- People aged 18-64 years with underlying medical conditions or who are at increased risk for COVID-19 exposure and transmission because of occupational or institutional setting

Vaccination locations as of July 30, 2021

San Antonio Regional Hospital

999 San Bernardino Road, Upland, California 91786

Open to the Public for Vaccinations 5 Days a week,

Monday – Friday, from 9:00AM – 1:00PM

To schedule an appointment at this location, email:

covid19vaccine@sarh.org

Sierra San Antonio Medical Plaza

16465 Sierra Lakes Parkway, Fontana, California 92336

Open to the Public for Vaccinations 7 Days a week,

Monday-Friday 9:00AM – 8:00PM ; Weekends 9:00AM – 5:00PM

To schedule an appointment at this location, go to

<https://4myhealth.iqhealth.com/pages/myturnvaccinescheduling>

Rancho San Antonio Medical Plaza

7777 Milliken Avenue, Rancho Cucamonga, California 91730

Open to the Public for Vaccinations 7 Days a week,

Monday-Friday 9:00AM – 8:00PM ; Weekends 9:00AM – 5:00PM

To schedule an appointment at this location, go to

<https://4myhealth.iqhealth.com/pages/myturnvaccinescheduling>

Eastvale San Antonio Medical Plaza

12442 Limonite Avenue, Eastvale, CA 91752

Open to the Public for Vaccinations 7 Days a week,

Monday-Friday 9:00AM – 8:00PM ; Weekends 9:00AM – 5:00PM

To schedule an appointment at this location, go to

<https://4myhealth.iqhealth.com/pages/myturnvaccinescheduling>

If you are 12 or older and a resident of San Bernardino County, all requests for a vaccination appointment at our hospital must be made by sending an email to covid19vaccine@sarh.org

Once you've sent the email to covid19vaccine@sarh.org, you will receive an email with a link to go online to schedule an appointment. The email will include the link and a specific invite code, which must be used when scheduling. There will be instructions regarding

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Discharge Documentation

information which must be included to register as well as instructions on what to bring the day of your appointment and where to check-in. **You will need to make individual appointments for each person.**

You will need to bring:

- An I.D. showing proof of residency in San Bernardino County to be vaccinated.
- You must be a resident of San Bernardino County within the above tiers to qualify for vaccination at this location.
- Unfortunately, anyone who does not bring this identification will have to be rescheduled for another day – no exceptions.

If you do not receive the email with the link & invite code right away, it is due to a delay in vaccine shipment. Please be patient and continue to check your email for a return message from covid19vaccine@sarh.org until you receive the link and invite code.

Be sure to write down the date & time of your appointment as you will NOT receive a confirmation email.
Finally, your second vaccine will be scheduled when you get your first shot. You will need to keep the card they give you with this date and time. You will return to the same location for your second vaccine.

Additional vaccination locations and registration information for SAN BERNARDINO COUNTY can be found at <https://sbcovid19.com/vaccine/locations>

Only for Patients Diagnosed with Coronavirus (COVID-19)

The novel Coronavirus, known as COVID-19. It is a viral illness that can cause fever, cough and trouble breathing. Some people may have chills, muscle aches, runny nose, sneezing, sore throat, upset stomach or loose stool.

When leaving the Hospital, you will be asked to wear a mask. You should wear it until you get home.

When do I need to call the doctor?

- Call your doctor if your breathing is getting worse e.g. harder or faster than before, or you feel like you are getting less air.
- Get medical attention right away if you have trouble breathing, chest pain or pressure that does not go away, new confusion or not able to wake up, or bluish lips or face.
- If you can, put on a facemask before leaving home or before you enter the clinic or hospital.

Precautions at home

The virus is spread easily through tiny droplets when you cough or sneeze. You should take these steps to help prevent the disease from spreading to people in your home and community:

1. Self-isolate at home

Stay in your home, except to go to the doctor, and limit contact with others:

- Do not go to work, school, or public areas, except for getting medical care.
- Avoid using public transportation such as buses, ride-sharing, or taxis.
- If you have an upcoming doctor appointment, call the office and tell them that you have COVID-19.

Separate yourself from other people and animals in your home:

- Avoid touching other people, including handshaking.
- As much as you can, stay in a specific room and away from other people in your home. You should also use a separate bathroom, if available.

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Discharge Documentation

- Avoid sharing personal household items. You should not share dishes, drinking glasses, cups, eating utensils, towels, toothpaste, or bedding with other people in your home. After using these items, they should be washed well with soap and water.
- Do not handle pets or other animals while sick.

2. Clean and disinfect

Clean all "high-touch" surfaces every day:

- High-touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables.
- Clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the instructions on the label.
- Remove and wash clothes or bedding that have blood, stool, or body fluids on them.

3. Help stop the spread

Clean your hands often:

- Wash your hands with soap and water for at least 20 seconds **OR** use an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- Wash your hands after blowing your nose, coughing, sneezing, going to the bathroom, and before eating or preparing food.
- Avoid touching your eyes, nose, and mouth with unwashed hands.

Cover your mouth and nose:

- Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can and clean your hands right away.
- Wear a facemask when you are around other people (e.g. sharing a room or vehicle) or pets, and before you enter a healthcare provider's office.
- Notify your close contacts

Your close contacts should:

- Self-monitor for symptoms by checking their temperature twice a day and watching for fever, cough, or shortness of breath. They should contact their doctor if they develop these symptoms.
- Clean their hands often and avoid touching eyes, nose, and mouth with unwashed hands.
- Wear a mask if they have to be in the same room as you, if you are not able to wear one.

When can I stop precautions at home?

You can stop isolating yourself when the following things have happened:

You have had no fever for at least 24 hours (that is one full day of no fever without the use of medicine that reduces fevers)

AND

Other symptoms have improved (for example, when your cough or shortness of breath have improved)

AND

At least 10 days have passed since your symptoms first started.

Manage your stress and anxiety

Being ill can be stressful or cause anxiety:

- Remember that everyone reacts differently to stressful situations.
- COVID-19 might be especially stressful because it is a new disease and there is a lot of news coverage. Take breaks from watching, reading, or listening to news stories, including social media.
- People with preexisting mental conditions should continue their treatment and be aware of new or worsening symptoms.
- If you, or someone you care about, are feeling overwhelmed with emotions like sadness, depression, or anxiety, call the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Helpline: 1.800.985.5990 or text TalkWithUs to 66746. (TTY 1.800.846.8517)

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Discharge Documentation

For more information:

- CDC Coronavirus Website <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC Coronavirus Frequently asked question - <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

Living Smoke Free

Smoking Facts

When a cigarette smoker inhales, about 25% of the nicotine in the smoke reaches the brain within six seconds. A "Pack-a-day" smoker gets between 50,000 and 70,000 such nicotine "jolts" a year. Nicotine causes the heart to beat much faster. Blood pressure rises and harmful substances pour into the blood. Combined with the stress caused by carbon monoxide in cigarette smoke, more than 120,000 heart attack deaths occur yearly among U.S. smokers.

Second Hand Smoke

Second hand smoke is the combination of smoke from a burning cigarette and smoke exhaled by a smoker. The smoke that burns off the end of a cigarette or cigar contains more harmful substances than the smoke inhaled by the smoker. If you do not smoke, but are exposed to second-hand smoke on a regular basis, your body is absorbing nicotine and other harmful substances just as the smokers body is doing. In the U.S., 37,000 annual deaths are related to second-hand smoke.

Do Not Smoke!!

If you would like more information on avoiding second-hand smoke or if you would like help to quit smoking, please contact the following community resource.

CALIFORNIA SMOKERS HOTLINE: 1-800-NO-BUTTS

(Six languages and hearing impaired)

Narcotics - Safe Use, Storage and Disposal

Safe Use of Narcotics

Follow all directions on your prescription label. Never take this medicine in larger amounts, or for longer than prescribed. Misuse of narcotics can cause addiction, overdose, or death, especially in a child or other person using the medicine without a prescription.

Storage of Narcotics

Remember to keep your narcotics and all other medicines out of reach of children. Never share your medicines with others, and use this medication only for the indication prescribed on the prescription label.

Common Side Effects of Narcotics

Common side effects include dizziness, drowsiness, nausea, or constipation. This is not a complete list of side effects and other symptoms may occur. Call your doctor for medical advice about side effects. Seek medical attention right away if you have life threatening symptoms.

How To Dispose Of Unused Medications

Caregivers and consumers should remove expired or unused medicines from their home as quickly as possible to help reduce the chance that others may accidentally take or intentionally misuse the unneeded medicine.

*Call 1-800-882-9539 for locations that collect unused medications near you

Disposal of Medications At Home

If no take-back programs or DEA-authorized collectors are available near your area, and there are no specific disposal instructions on the label, you can follow these simple steps below to dispose of most medications in the household:

1. MIX - Mix medicines (do not crush tablets or capsules) with an unpalatable substance such as dirt, litter, or used coffee grounds

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Discharge Documentation

2. PLACE - Place the mixture in a container such as a sealed plastic bag
3. THROW - Throw the container in your household trash
4. SCRATCH OUT - Scratch out all personal information on the prescription label of your empty pill bottle or empty medicine packaging to make it unreadable, then dispose of the container.

**Persons may not dispose of illicit drugs (ex: marijuana, heroin, LSD) through these disposal methods.*

**Insulin syringes cannot be disposed of through one of the disposal methods stated above.*

Important Information To Know About Strokes

What is a Stroke?

A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked or bursts. When that happens, part of the brain cannot get the blood and oxygen it needs. Stroke is the No. 4 cause of death in the United States, behind diseases of the heart and cancer and is the leading cause of disability.

WARNING SIGNS OF STROKE

Stroke is a medical emergency. Know these warning signs and teach them to others. Every minute counts.

BE FAST and check for these signs:

BALANCE	Dizziness, sudden trouble walking, or loss of balance?
EYES	Trouble seeing or a sudden change in vision?
FACE	Facial droop; uneven smile?
ARM	Arm numbness; arm weakness especially on one side?
SPEECH	Slurred speech; difficulty speaking or understanding?
TIME	Timing is critical. Call 9-1-1. Have ambulance go to the nearest stroke center immediately.

Risk Factors For Stroke

Factors that cannot be changed: age, heredity (family history) and race, gender, prior stroke, TIA or heart attack. Factors that can be changed, treated or controlled: High blood pressure, high cholesterol, diabetes mellitus, cigarette smoking, carotid or other artery disease, atrial fibrillation, other heart disease, poor diet, physical inactivity, obesity, sickle cell disease, illegal drug use.

Discharge From The Hospital

If you have had a stroke it is important that you take all medications as directed and receive continued medical care with your primary care physician or consulting physician following your discharge.

Important Information About Chest Pain & Acute Coronary Syndrome

What Is Acute Coronary Syndrome (ACS)? Acute Coronary Syndrome is an urgent problem in which the blood supply to the heart muscle is suddenly blocked. Well-known conditions that are acute coronary syndromes are heart attack and unstable angina. Over 800,000 people die in the US every year from a heart attack and on average 50% of these patients displayed, but ignored, the warning signs.

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Discharge Documentation

Signs and Symptoms of ACS

Most common presentations:

Chest pain or discomfort, which may involve pressure, tightness, aching, burning, or fullness. Pain or discomfort in one or both arms, the jaw, neck, back, or stomach, shortness of breath.

Less common presentations:

Feeling dizzy or lightheaded, nausea, sweating, unexplained excessive fatigue, unexplained feeling of anxiety.

Atypical symptoms include:

Epigastric pain, indigestion, stabbing pain with coughing and breathing, and increasing difficulty breathing.

Risk Factors

- Family history of chest pain, heart disease, or stroke.
- Smoking.
- High blood pressure.
- High blood cholesterol.
- Diabetes, history of gestational diabetes.
- Physical inactivity, being overweight or obese.
- For women: taking birth control pills, history of pre-eclampsia, or having a low birth weight baby.

SEEK IMMEDIATE MEDICAL CARE IF: You are experiencing any of the ACS symptoms, or you have severe chest pain, especially if the pain is crushing or pressure-like and spreads to arms, back, neck or jaw.

THIS IS AN EMERGENCY. Call 9-1-1 and DO NOT drive yourself to the hospital.

Congestive Heart Failure (CHF) Discharge Instructions

If you have Congestive Heart Failure (CHF) or have ever had CHF, these are guidelines that we recommend for better health

CALL YOUR DOCTOR RIGHT AWAY IF THE FOLLOWING OCCURS:

- More Shortness of Breath than usual, especially when active or when lying flat
- Weight gain of 2 - 3+ pounds overnight or 4 pounds or more in a week
- Dizziness or fainting episodes
- Extreme tiredness
- Swollen ankles or feet
- Lack of appetite, abdominal bloating or pain, nausea or vomiting
- Constant cough
- Chest pain
- Skipped beats or very slow heart rate (50 beats per minute or less)

Activity and Rest

Plan your day to include balanced periods of rest and activity. Put your feet up to reduce ankle swelling. Avoid extreme temperatures.

Medications

Know the purpose and side effects of your medications.

Report any side effects without delay to your doctor.

Your doctor will prescribe medications to improve the way your heart pumps and rids your body of extra water.

Take medication as directed. Never skip a dose or discontinue a medication without letting your doctor know.

Know your medication names, dosage and schedule. Get a refill before you run out.

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FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
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Discharge Documentation

If you have questions regarding dosages of your medications, contact your doctor.
Always keep an Up - To - Date List of the medications you are taking with you.

Diet

The blanks below with an asterisk (*) will only be completed by your nurse or physician if you actually have a diagnosis of CHF:

Your Doctor has prescribed * Diet.

Sodium * milligrams day.

Do not add extra salt to your diet. Follow a diet low in cholesterol and fat, particularly saturated fat.

Ask your doctor if limiting your fluids is necessary.

Your doctor has limited your fluids to * ounces / 24 hours.

Ask your doctor if limiting your fluids is necessary.

Rest 1 hour after meals before doing any activity.

Limit foods that have caffeine (e.g. coffee, tea, cola and chocolate) to 1-2 cups per day because of their stimulating effects.

Check with your Doctor about drinking alcohol. If OK, limit to 2 ounces per day.

Weigh Yourself Daily

Weigh yourself daily in the morning and record your weight. Report any sudden weight gain of 2-3 pounds overnight or 4 pounds or more in one week to your doctor.

Your weight when discharged was * pounds.

Exercise

Check with your Doctor before starting any exercise program. Exercise can increase muscle strength, flexibility and improve your ability to do other things. Avoid pushing, pulling, or raising heavy objects above the shoulder.

Walking is one exercise that may be recommended. Start with a 3-5 minute warm-up of light, slow stretching. Walk at a comfortable pace, making sure you can easily carry on a conversation while exercising. Slowly increasing the distance is okay as strength improves. End you walking sessions with a cooling down period by gradually slowing down.

San Antonio Regional Hospital

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Attending: Khan M.D.,Mansurur R.
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Discharge Documentation



SAN ANTONIO REGIONAL HOSPITAL

999 San Bernardino Road, Upland, CA 91786 Phone: (909) 985-2811

****Signature Page****

Patient Name:

HANNA MD, ADEL SHAKER

DOB: 03/29/1946
MRN: 918505
FIN: 5295168
Visit Date: 11/14/2021

Current Date/Time: 11/15/2021 17:03:24

HANNA MD, ADEL SHAKER (or representative) has been given Discharge Instructions with follow-up instructions, medication instructions, patient education materials and has verbalized understanding.

Patient/Representative Name: _____

Patient/Representative Signature: _____

Relationship to Patient: _____

RN Signature: _____

Date: _____

Medicare Forms

* Auth (Verified) *



SAN ANTONIO REGIONAL HOSPITAL

Medicare Outpatient Obs

HANNA MD, ADEL SHAKER
DOB: 03/29/1946 74 Years
AGE: 74, Male, Married
MRN: 918505 FIN: 5295168

Patient name:

Pi

You're a hospital outpatient receiving observation services. You are not an inpatient because:

Observation services:

- Are given to help your doctor decide if you need to be admitted as an inpatient or discharged;
- Are given in the emergency department or another area of the hospital; and
- Usually last 48 hours or less

Being an outpatient may affect what you pay in a hospital:

- When you're a hospital outpatient, your observation stay is covered under Medicare Part B.
- For Part B services, you generally pay:
 - o A copayment for each outpatient hospital service you get. Part B copayments may vary by type of service.
 - o 20% of the Medicare-approved amount for most doctor services, after the Part B deductible.

Observation services may affect coverage and payment of your care after you leave the hospital:

- If you need skilled nursing facility (SNF) care after you leave the hospital, Medicare Part A will only cover SNF care if you've had a 3-day minimum, medically necessary, inpatient hospital stay for a related illness or injury. An inpatient hospital stay begins the day the hospital admits you as an inpatient based on a doctor's order and doesn't include the day you're discharged.
- If you have Medicaid, a Medicare Advantage plan or other health plan, Medicaid or the plan may have different rules for SNF coverage after you leave the hospital. Check with Medicaid or your plan.

NOTE: Medicare Part A generally doesn't cover outpatient hospital services, like an observation stay. However, Part A will generally cover medically necessary inpatient services if the hospital admits you as an inpatient based on a doctor's order. In most cases, you'll pay a one-time deductible for all of your inpatient hospital services for the first 60 days you're in a hospital.

If you have any questions about your observation services, ask the hospital staff member giving you this notice or the doctor providing your hospital care. You can also ask to speak with someone from the hospital's utilization or discharge planning department.

You can also call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.



SA000447

Form CMS 1061-A0206
Expiration: 12/31/2022. OIG approval 0328-1309
8000006 05490 (A02)

* Auth (Verified) *

Your costs for medications:

Generally, prescription and over-the-counter drugs, including "self-administered drugs," you get in a hospital outpatient setting (like an emergency department) aren't covered by Part B. "Self-administered drugs" are drugs you'd normally take on your own. For safety reasons, many hospitals don't allow you to take medications brought from home. If you have a Medicare prescription drug plan (Part D), your plan may help you pay for these drugs. You'll likely need to pay out-of-pocket for these drugs and submit a claim to your drug plan for a refund. Contact your drug plan for more information.

If you're enrolled in a Medicare Advantage plan (like an HMO or PPO) or other Medicare health plan (Part C), your costs and coverage may be different. Check with your plan to find out about coverage for outpatient observation services.

If you're a Qualified Medicare Beneficiary through your state Medicaid program, you can't be billed for Part A or Part B deductibles, coinsurance, and copayments.

Additional Information:

*****If you are covered by a Health Plan other than Medicare, this notice is to inform you that your care is being provided on an outpatient basis, which may affect your health care coverage reimbursement.**

If you have questions regarding your admission status please call the Case Management Department at: (909) 920-4820 or ext. 24820 and a Case Manager will answer your questions.

Please sign below to show you received and understand this notice.

Verbal consent

Signature of Patient or Representative

11/14/21

Date / Time

CMS does not discriminate in its programs and activities. To request this publication in alternative format, please call: 1-800-MEDICARE or email: AltFormatRequest@cms.hhs.gov.



San Antonio Regional Hospital

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MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Physician Written Orders

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Patient Name: HANNA MD, ADEL SHAKER
Date of Birth: 3/29/1946

MRN: 918505
FIN: 5295168

* Auth (Verified) *

MEDICAL RECORD NUMBER
918505

VISIT NUMBER
17897799

PATIENT ACCOUNT NUMBER
5295168

SAN ANTONIO REGIONAL HOSPITAL

PATIENT NAME: HANNA MD, ADEL SHAKER
ADMIT DX: CP

DOB: 03/29/46
AGE: 75 Years

ADMIT DATE: 11/14/21
NURSING UNIT: EDMH
ROOM/BED: TRG104

HGT / WT: /
SEX: Male

ALLERGIES: REGLAN

ORDER: PLACE IN OBSERVATION STATUS

ORDER DATE/TIME: 11/14/21 21:03 PST
ORDERING MD: Talwar M.D., Rishi
ORDER ENTERED BY: Talwar M.D., Rishi
ORDER NUMBER: 1406263063

Requested Start Date/Time: 11/14/21 21:03 PST
Level of Care: Telemetry
Reason for Admit: cp
Admitting Physician: Talwar M.D., Rishi
Attending Physician: Khan M.D., Mansurur R.

ORDER PLACE IN OBSERVATION STATUS

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D., Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D., Rishi

Progress Notes

Document Name: Progress Note-Physician
Result Status: Auth (Verified)
Performed By: Rasania M.D., Suraj (11/15/2021 09:25 PST)
Authenticated By: [Rasania M.D., Suraj; Rasania M.D., Suraj (11/15/2021 16:15 PST)]; Rasania M.D., Suraj (11/15/2021 16:15 PST); Rasania M.D., Suraj (11/15/2021 14:23 PST); Rasania M.D., Suraj (11/15/2021 14:12 PST); Rasania M.D., Suraj (11/15/2021 14:09 PST)

Assessment/Plan

1. Chest pain
2. HTN
3. Dyspnea
4. Palpitations
5. Family history of CAD

Plan

- Chest pain
- Chest pain with typical and atypical features
 - Continue to trend troponin
 - Cardiac risk factors of HTN, FH of CAD
 - Pending 2D Echocardiogram to evaluate EF and valvular heart disease. Preliminary reports shows EF of 67%.
 - Full echo report also pending.
 - Further recommendations based on cardiac work up
- HTN
- Suboptimal control on atenolol and amlodipine
 - Will increase amlodipine dose and add losartan to regimen
- Dyspnea
- Likely multifactorial etiology of dyspnea
 - Rule out cardiac contribution to dyspnea
 - Awaiting stress findings/ final read.
- Palpitations
- Recommend outpatient holter monitor to rule out significant arrhythmias as etiology of her symptoms at home setting
- Family history of CAD
- Brother had MI and passed at 52 and another brother had MI and passed in 70's

Discussed care with patient and/or family member(s). Discussed care with staff member(s). Medical complex decision making process.

Suraj Rasania, MD FACC FSCAI

Interventional Cardiology
685 North 13th Ave
Upland, CA 91786
Chest pain
Hypertension

Subjective

Resting

Inpatient Medications

amlODIPine, 10 mg= 2 tab, PO, Daily
aspirin, 81 mg= 1 tab, PO, Daily
Ativan, 0.5 mg= 1 tab, PO, Q8hr, PRN
Colace, 100 mg= 1 cap, PO, BID, PRN
influenza virus vaccine, inactivated - preservative free, 0.5 mL, IM, This admission
labetalol injection, 10 mg= 2 mL, IV Push, Q1hr, PRN
Lexiscan injection, 0.4 mg= 5 mL, IV Push, Once
Lipitor, 40 mg= 1 tab, PO, Daily
losartan, 25 mg= 1 tab, PO, Daily
morphine injection, 2 mg= 0.2 mL, IV Push, Q5min, PRN
Narcan, 0.1 mg= 0.1 mL, IV Push, Q2min, PRN
Narcan, 0.4 mg= 1 mL, IV Push, Once, PRN
nitroglycerin sublingual tab, 0.4 mg= 1 tab, SL, As directed, PRN
Normal Saline Flush inj soln (adult), 3 mL, IV Push, Q8hr (std)
Normal Saline Flush inj soln (adult), 3 mL, IV Push, As directed, PRN
pneumococcal 23-polyvalent vaccine, 0.5 mL, IM, This admission
Restoril, 15 mg= 1 cap, PO, QHS, PRN
Tylenol, 500 mg= 1 tab, PO, Q4hr, PRN
Tylenol, 500 mg= 1 tab, PO, Q4hr, PRN
Zofran injection, 4 mg= 2 mL, IV Push, Q6hr, PRN

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Progress Notes

Objective

Vitals & Measurements

T: 97.3 °F (Temporal Artery) **TMIN:** 97.1 °F (Temporal Artery) **TMAX:** 98.5 °F (Oral)
HR: 68(Monitored) **RR:** 20 **BP:** 142/87 **SpO2:** 97% **WT:** 72.6 kg

Intake & Output

This visit (24 hour periods starting at 06:00 PST)

	11/15/21 *	11/14/21	11/13/21
Total Summary			
Intake mL	--	--	--
Output mL	--	--	--
Fluid Balance	--	--	--
Intake (0)			
Output (0)			
Counts (1)			
Urine Count	1	--	--

* This column has not completed the indicated time period.

Physical Exam

General: Alert and oriented x3, no apparent distress
Eye: PERRLA, EOMI
Neck: Supple, no bruits
Cardiovascular: S1-S2, regular
Respiratory: Clear to auscultation bilaterally, no wheeze
Gastrointestinal: Soft, NT/ND, bowel sounds x4
Extremities: No lower extremity edema, +2 DP B/L
Musculoskeletal: Normal strength and normal range of movement
Integumentary: No skin lesions
Neurologic: Cranial nerve II-12 is intact, no focal lesions identified
Cognition and Speech: Normal and appropriate
Psychiatric: Normal and appropriate

[1] Elite Cardiology - Consult Note; Chan D.O., Larry 11/14/2021 23:33 PST

Signed by: *Rasania M.D., Suraj*

Signed Date/Time: 11/15/2021 04:15 PM

History and Physical Reports

Document Name:	History and Physical
Result Status:	Auth (Verified)
Performed By:	Talwar M.D.,Rishi (11/14/2021 21:06 PST)
Authenticated By:	[Talwar M.D.,Rishi; Talwar M.D.,Rishi (11/15/2021 05:40 PST)]

Chief Complaint

chest pain for the last 30 min, denies cardiac hx

Problem List/Past Medical History

Ongoing/Comorbidities
 Acid reflux / Confirmed

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Patient Type: Observation

Attending: Khan M.D., Mansurur R.

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Admitting: Talwar M.D., Rishi

History and Physical Reports

Dr. Hanna is a very pleasant 75 year old gentleman who presents with 5 days of chest pain. He describes a 6/10 chest pressure substernally located with radiation to his neck with associated SOB but no associated palpitations, diaphoresis or nausea. No alleviating or aggravating factors. The episode is on going. The episode started when he was at rest. [1]

History of Present Illness

75-year-old chief psychiatrist from Chino State prison present with hypertension presents emergency room complaining of 1 week of worsening episodes of chest pain. Sometimes associated with shortness of breath. No significant relationship with activity but does have significant relationship with stress which has recently increased at his place of work due to multiple factors. He had similar issues 10 years ago and underwent angiogram was found to have mildly obstructive LAD and was diagnosed with stress-induced coronary spasms by cardiologist at that time. He has noticed recurrence of the symptoms over the past week, described as substernal, pressure-like, with radiation to the left and right chest. Sometimes relieved with rest

Arrival to emergency room he was having peaks of systolic blood pressure up to 180s over 104 despite being compliant with his BP medications

Family History

Both brothers died of sudden cardiac events in their 50s and 60s

Social History

Alcohol

Denies, 08/06/2021

Substance Abuse

Denies, 08/06/2021

Tobacco

Denies, Tobacco Use: Former smoker, quit more than 30 days ago., 08/06/2021

Review of Systems

12 point ROS negative except as mentioned in the HPI

Physical Exam

Vitals & Measurements

T: 98.0 °F (Oral) **TMIN:** 98.0 °F (Oral) **TMAX:** 98.5 °F (Oral) **HR:** 66(Peripheral)

RR: 18 **BP:** 184/104 **SpO2:** 98% **WT:** 72.6 kg

General: No acute distress. vitals reviewed

Eye: Normal conjunctiva, anicteric sclera

HENT: Normocephalic, oral mucosa is moist

Neck: Supple, nontender, no thyromegaly or lymphadenopathy

Respiratory: Lungs are diminished to auscultation, respirations are nonlabored, breath sounds are equal, symmetrical chest wall expansion

Cardiovascular: Regular rate, regular rhythm, no murmurs, gallops, rubs appreciated, apical impulse palpated and within normal limits

Gastrointestinal: Soft, nontender, bowel sounds heard in all 4 quadrants, no masses or hepatosplenomegaly appreciated

Genitourinary: No CVA tenderness

Musculoskeletal: Moves all 4 extremities, no calf tenderness

Integumentary: Warm, dry

Neurologic: Alert and awake, no focal deficits, sensation grossly intact, pupils are equally reactive to light

Cognition and Speech: Cooperative, appropriate mood and affect

Allergic rhinitis / Confirmed
Cardiac ejection fraction / Confirmed
Comments: CARDIAC LV EF 60%

Resolved

No qualifying data

COVID-19 Testing Done Prior to Arrival As Stated By Patient (Subjective)

Covid Vaccine History: 2nd Dose Moderna
CV-19 Vaccine Rec'd - 2 or MORE wks ago
(Screen for 3rd dose if Immunocompromised)
(11/14/21 16:50:00)

COVID-19 Testing Done Prior to Arrival: No
(11/14/21 16:50:00)

Procedure/Surgical History

- Cholecystectomy

Medications

Inpatient

aspirin, 162 mg= 2 tab, PO, Once

aspirin, 81 mg= 1 tab, PO, Daily

Ativan, 0.5 mg= 1 tab, PO, Q8hr, PRN

Colace, 100 mg= 1 cap, PO, BID, PRN

Lipitor, 40 mg= 1 tab, PO, Daily

morphine injection, 2 mg= 1 mL, IV Push, Q5min, PRN

Narcan, 0.1 mg= 0.1 mL, IV Push, Q2min, PRN

Narcan, 0.4 mg= 1 mL, IV Push, Once, PRN

nitroglycerin sublingual tab, 0.4 mg= 1 tab, SL, Q5min, PRN

nitroglycerin sublingual tab, 0.4 mg= 1 tab, SL, As directed, PRN

Restoril, 15 mg= 1 cap, PO, QHS, PRN

Tylenol, 500 mg= 1 tab, PO, Q4hr, PRN

Tylenol, 500 mg= 1 tab, PO, Q4hr, PRN

Zofran injection, 4 mg= 2 mL, IV Push, Q6hr, PRN

Home

amLODIPine, 5 mg, PO, Daily

atenolol 50 mg oral tablet, 100 mg= 2 tab, PO, Daily

Allergies

REGLAN

Lab Results

Labs (Last four charted values)

WBC L 4.3 (NOV 14)

Hgb 15.6 (NOV 14)

Hct 47 (NOV 14)

Plt 164 (NOV 14)

Na 144 (NOV 14)

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

History and Physical Reports

Psychiatric: No anxiety or depression

Assessment/Plan

Chest pain

Multifactorial, possible underlying ischemia with increased recent stressors from employment; unhealthy/hostile work environment

Hypertension

Accelerated hypertension, related to above

Strong family history

Orders:

12-Lead EKG, Timed Study, Q3hr, for 2, dose(s)/time(s), Stop Date 11/15/21 3:04:00 PST, If not done in ED, 11/14/21 21:03:00 PST

12-Lead EKG PRN for Chest Pain or Rhythm Changes, 11/14/21 21:03:00 PST, Nursing - order STAT EKG for c/o Chest Pain. Page Cardiology or Respiratory if ordering at night Bedrest, 11/14/21 21:03:00 PST

Cardiac Diet, 11/14/21 21:03:00 PST, Diet Modifiers: No Caffeine, Beverage Modifier: No caffeinated beverages

CBC with Differential, Blood, In AM collect, 11/15/21 5:00:00 PST, Stop date 11/15/21 5:00:00 PST

Communication Order, 11/14/21 21:03:00 PST, NITRATES, Nitrates should not be administered to pts who recently received a phosphodiesterase inhibitor, especially within 24 hrs of sildenafil (Viagra) or vardenafil (Levitra) or within 48 hrs of tadalafil (Cialis)

Consult to Nutrition Services - EDUCATION ONLY, 11/14/21 21:03:00 PST, Instruct patient on present diet, PRIOR to discharge

Education Cardiac, 11/14/21 21:03:00 PST, Q shift

Intake and Output, 11/14/21 21:03:00 PST

Lipid Profile, Blood, Add-On Order collect, 11/14/21 21:03:00 PST, Stop date 11/14/21 21:03:00 PST

Notify Provider Vital Signs, 11/14/21 21:03:00 PST, PRN, HR greater than 130, HR less than 50

Notify Provider Vital Signs, 11/14/21 21:03:00 PST, PRN, SBP greater than 180, SBP less than 90

Oxygen Therapy-Simple, 11/14/21 21:03:00 PST, Nasal Cannula, Keep O2 Sat % eq/greater: 90, BID

Peripheral IV Insertion, 11/14/21 21:03:00 PST, Stop Date/Time: 11/14/21 21:03:00 PST, 11/14/21 21:03:00 PST

Place in Observation Status, 11/14/21 21:03:00 PST, Level of Care: Telemetry, Reason for Admit cp, Admitting Physician: Talwar M.D., Rishi, Attending Physician: Khan M.D., Mansurur R.

Smoking Cessation Instruction, 11/14/21 21:03:00 PST, PRN

Straight Cath if Unable to Void, 11/14/21 21:03:00 PST, Once, PRN

Troponin I, Blood, In AM collect, 11/15/21 2:00:00 PST, Stop date 11/15/21 3:00:00 PST

Vital Signs Per Standards of Care, 11/14/21 21:03:00 PST

Plan

Continue trending EKGs and troponins

Follow-up cardiology consultation recommendations

Possible stress test in a.m.

Blood pressure control

Start labetalol resume patient's home medications

Remainder plan as per orders and/or above

K 4.1 (NOV 14)

CO2 28 (NOV 14)

CI 111 (NOV 14)

Cr 1.16 (NOV 14)

BUN 18 (NOV 14)

Glucose 92 (NOV 14)

Ca 9.1 (NOV 14)

Troponin <0.015 (NOV 14)

Diagnostic Results

Reviewed images.

reviewed radiology reports.

reviewed labs.

discussed with ED MD/consultants.

plans/interventions as per orders.

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

History and Physical Reports

Certified Length of Stay

1-2 midnights or more

Progression of Care

Guarded

Level of Care

Telemetry

[1] Elite Cardiology - Consult Note; Chan D.O., Larry 11/14/2021 23:33 PST

Signed by: Talwar M.D., Rishi

Signed Date/Time: 11/15/2021 05:40 AM

Consultation Notes

Document Name: Consultation Physician
Result Status: Auth (Verified)
Performed By: Chan D.O.,Larry (11/14/2021 23:50 PST)
Authenticated By: Chan D.O.,Larry (11/14/2021 23:50 PST)

Reason for Consultation

Chest pain

Chief Complaint

chest pain for the last 30 min, denies cardiac hx

History of Present Illness

Dr. Hanna is a very pleasant 75 year old gentleman who presents with 5 days of chest pain. He describes a 6/10 chest pressure substernally located with radiation to his neck with associated SOB but no associated palpitations, diaphoresis or nausea. No alleviating or aggravating factors. The episode is on going. The episode started when he was at rest.

Family History

Migraines: Self.

None: Negative: Self.

Father: History is unknown

Mother: History is unknown

Social History

Alcohol

Denies, 08/06/2021

Substance Abuse

Denies, 08/06/2021

Tobacco

Denies, Tobacco Use: Former smoker, quit more than 30 days ago., 08/06/2021

Review of Systems

Constitutional: Negative

Eye: Negative

ENMT: Negative

Respiratory: SOB

Problem List/Past Medical History

Ongoing/Comorbidities

Acid reflux / Confirmed

Allergic rhinitis / Confirmed

Cardiac ejection fraction / Confirmed

Comments: CARDIAC LV EF 60%

Resolved

No qualifying data

COVID-19 Testing Done Prior to Arrival As Stated By Patient (Subjective)

Covid Vaccine History: 2nd Dose Moderna
CV-19 Vaccine Rec'd - 2 or MORE wks ago
(Screen for 3rd dose if Immunocompromised)
(11/14/21 16:50:00)

COVID-19 Testing Done Prior to Arrival: No
(11/14/21 16:50:00)

Procedure/Surgical History

- Cholecystectomy

Medications

Inpatient

aspirin, 81 mg= 1 tab, PO, Daily

Ativan, 0.5 mg= 1 tab, PO, Q8hr, PRN

Colace, 100 mg= 1 cap, PO, BID, PRN

labetalol injection, 10 mg= 2 mL, IV Push,
Q1hr, PRN

Lipitor, 40 mg= 1 tab, PO, Daily

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D., Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D., Rishi

Consultation Notes

Cardiovascular: CP, SOB, palpitations

Gastrointestinal: Negative

Genitourinary: Negative

Hema/Lymph: Negative

Endocrine: Negative

Musculoskeletal: Negative

Integumentary: Negative

Neurologic: Negative

Psychiatric: Cooperative, alert and oriented

Physical Exam

Vitals & Measurements

T: 97.6 °F (Oral) **TMIN:** 97.6 °F (Oral) **TMAX:** 98.5 °F (Oral) **HR:** 62 (Monitored)

RR: 20 **BP:** 179/101 **SpO2:** 97% **WT:** 72.6 kg

General: Alert and oriented x3, no apparent distress

Eye: PERRLA, EOMI

Neck: Supple, no bruits

Cardiovascular: S1-S2, regular

Respiratory: Clear to auscultation bilaterally, no wheeze

Gastrointestinal: Soft, NT/ND, bowel sounds x4

Extremities: No lower extremity edema, +2 DP B/L

Musculoskeletal: Normal strength and normal range of movement

Integumentary: No skin lesions

Neurologic: Cranial nerve II-12 is intact, no focal lesions identified

Cognition and Speech: Normal and appropriate

Psychiatric: Normal and appropriate

Assessment/Plan

1. Chest pain
2. HTN
3. SOB
4. Palpitations
5. Family history of CAD

Plan

Chest pain

- Chest pain with typical and atypical features
- Rule out ACS with cardiac biomarker trends
- Cardiac risk factors of HTN, FH of CAD
- Recommend 2D Echocardiogram to evaluate EF and valvular heart disease
- Recommend Lexican stress test to rule out ischemia as etiology of symptoms
- Further recommendations based on cardiac work up
- D/W nurse

HTN

- Suboptimal control on atenolol and amlodipine
- Will increase amlodipine dose and add losartan to regimen

SOB

- Likely multifactorial etiology of SOB
- Rule out cardiac contribution to SOB
- Await 2D echo and stress test findings

Palpitations

- Recommend outpatient holter monitor to rule out significant arrhythmias as etiology of her symptoms at home setting

morphine injection, 2 mg= 0.2 mL, IV Push, Q5min, PRN

Narcan, 0.1 mg= 0.1 mL, IV Push, Q2min, PRN

Narcan, 0.4 mg= 1 mL, IV Push, Once, PRN

nitroglycerin sublingual tab, 0.4 mg= 1 tab,

SL, Q5min, PRN

nitroglycerin sublingual tab, 0.4 mg= 1 tab,

SL, As directed, PRN

Restoril, 15 mg= 1 cap, PO, QHS, PRN

Tylenol, 500 mg= 1 tab, PO, Q4hr, PRN

Tylenol, 500 mg= 1 tab, PO, Q4hr, PRN

Zofran injection, 4 mg= 2 mL, IV Push,

Q6hr, PRN

Home

amLODIPine, 5 mg, PO, Daily

atenolol 50 mg oral tablet, 100 mg= 2 tab, PO, Daily

Allergies

REGLAN

Lab Results

Labs (Last four charted values)

WBC: 4.3 x10(3)/mcl Low (11/14/21 17:20:43)

Hgb: 15.6 gm/dL (11/14/21 17:20:43)

HCT: 47 % (11/14/21 17:20:43)

Platelet: 164 x10(3)/mcl (11/14/21 17:20:43)

Sodium Lvl: 144 mmol/L (11/14/21 17:20:43)

Potassium Lvl: 4.1 mmol/L (11/14/21 17:20:43)

Chloride Lvl: 111 mmol/L (11/14/21 17:20:43)

CO2: 28 mmol/L (11/14/21 17:20:43)

Glucose Lvl: 92 mg/dL (11/14/21 17:20:43)

BUN: 18 mg/dL (11/14/21 17:20:43)

Creatinine Lvl: 1.16 mg/dL (11/14/21 17:20:43)

Calcium Lvl: 9.1 mg/dL (11/14/21 17:20:43)

Troponin I: <0.015 (11/14/21 20:43:00)

Troponin I: <0.015 (11/14/21 17:20:43)

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Consultation Notes

Family history of CAD

-Brother had MI and passed at 52 and another brother had MI and passed in 70's

Signed by: Chan D.O., Larry

Signed Date/Time: 11/14/2021 11:50 PM

Consents

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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* Auth (Verified) *

SAN ANTONIO REGIONAL HOSPITAL
999 San Bernardino Road, Upland, CA 91786

Name **HANNA MD, ADEL SHAKER**
DOB: 03/29/1946 75 Years
Attn: Khan M.D., Mansurur
MRN: 918505 FIN: 5295168



**CONSENT TO SURGERY OR
SPECIAL PROCEDURE**

1. Your doctors have recommended the operation or procedure listed on the signature page (page 3).

Upon your authorization and consent, this operation or procedure, together with any different or further procedures which, in the opinion of the doctor(s) performing the procedure, may be indicated due to any emergency, will be performed on you. The operations or procedures will be performed by the doctor named below (or in the event the doctor is unable to perform or complete the procedure, a qualified substitute doctor), together with associates and assistants, including anesthesiologists, pathologists, and radiologists from the medical staff of *San Antonio Regional Hospital* to whom the doctor(s) performing the procedure may assign designated responsibilities. The hospital maintains personnel and facilities to assist your doctors in their performance of various surgical operations and other special diagnostic or therapeutic procedures. However, the persons in attendance for the purpose of performing specialized medical services such as anesthesia, radiology, or pathology are not employees or agents of the hospital or of doctor(s) performing the procedure. They are independent medical practitioners. **INITIALS:** AK

2. Name of the practitioner (s) who is/are performing the procedure or administering the medical treatment:

LARRY CHAN D.O. FROHAN Turolo FNP
(First and Last Name(s))

Operations and procedures carry the risk of unsuccessful results, complications, injury, or even death, from both known and unforeseen causes, and no warranty or guarantee is made as to result or cure. You have the right to be informed of:

- The nature of the operation or procedure, including other care, treatment or medications;
- Potential benefits, risks or side effects of the operation or procedure, including potential problems that might occur during recuperation;
- The likelihood of achieving treatment goals;
- Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not receiving care or treatment; and
- Any independent medical research or significant economic interests your doctor may have related to the performance of the proposed operation or procedure.



SAD00003

* Auth (Verified) *

SAN ANTONIO REGIONAL HOSPITAL
999 San Bernardino Road, Upland, CA 91786

Male **HANNA MD, ADEL SHAKER**
DOB: 03/29/1946 75 Years
Attn: Khan M.D., Mansurur
MRN: 918505 FIN: 5295168



**CONSENT TO SURGERY OR
SPECIAL PROCEDURE**

Except in cases of emergency, operations or procedures are not performed until you have had the opportunity to receive this information and have given your consent. You have the right to give or refuse consent to any proposed operation or procedure at any time prior to its performance.

- 3. If your doctor determines that there is a reasonable possibility that you may need a blood transfusion as a result of the surgery or procedure to which you are consenting, your doctor will inform you of this and will provide you with information concerning the benefits and risks of the various options for blood transfusion, including predonation by yourself or others. You also have the right to have adequate time before your procedure to arrange for predonation, but you can waive this right if you do not wish to wait.

Transfusion of blood or blood products involves certain risks, including the transmission of disease such as hepatitis or Human Immunodeficiency Virus (HIV), and you have a right to consent or refuse consent to any transfusion. You should discuss any questions that you may have about transfusions with your doctor.

- 4. By your signature below, you authorize the pathologist to use his or her discretion in disposition or use of any member, organ or tissue removed from your person during the operation or procedure set forth above, subject to the following conditions (if any):

- 5. During this procedure an authorized member of the medical staff or any representative thereof, may photograph and/or video you or any part of your body for purposes directly related to the medical care rendered. INITIALS: _____

- 6. During this procedure a product representative may be present. The product representative will not assist in the surgery/procedure. INITIALS: _____

- 7. If applicable, your initials here indicate that you have received "A Women's Guide to Breast Cancer Diagnosis and Treatment.". INITIALS: _____

- 8. In accordance with Hospital Policy, any patient on a Do Not Resuscitate Status will have this status suspended during this surgical procedure. INITIALS: _____

* Auth (Verified) *

SAN ANTONIO REGIONAL HOSPITAL
999 San Bernardino Road, Upland, CA 91786

Male **HANNA MD, ADEL SHAKER**
DOB: 03/29/1946 75 Years
Attn: Khan M.D., Mansurur
MRN: 918505 FIN: 5295168



**CONSENT TO SURGERY OR
SPECIAL PROCEDURE**

9. NAME OF OPERATION OR PROCEDURE: _____

(EXISCAN) STRESS TEST

PATIENT SIGNATURE

10. Your signature on this form indicates that:

- you have read and understand the information provided in this form;
- your doctor has adequately explained to you the operation or procedure and the anesthesia set forth above, along with the risks, benefits, and alternatives, and the other information described above in this form;
- you have had a chance to ask your doctors questions;
- you have received all of the information you desire concerning the operation or procedure and the anesthesia; and
- you authorize and consent to the performance of the operation or procedure and the anesthesia.

Date: 11/15/21 Time: 1017 AM/PM

Signature: *Hanna MD*
(Patient/Parent/Conservator/Guardian)

If signed by other than patient, indicate name and relationship: _____

Witness: *[Signature]* Name: Joseph Louis cut
(Signature) (Print)

INTERPRETER'S STATEMENT

I have accurately and completely read the foregoing document to (patient or patient's legal representative) _____ in the patient's or legal representative's primary language _____ (identify language). He/she understood all of the terms and conditions and acknowledged his/her agreement by signing the document in my presence.

Date: _____ Time: _____ AM/PM

Signature: _____ Name: _____
(Interpreter) (Print name)

* Auth (Verified) *

SAN ANTONIO REGIONAL HOSPITAL
3810 BURNHAM ROAD • DFW, TX 75246

HANNA MD, ADEL SHAKER
DOB: 3/29/1946
Gender: Male
MRN # 918505
PHO # 5295168

**CONDITIONS OF
ADMISSION AND SERVICE
(INFANT, AMBULATORY SERVICES,
OBSERVATION, EMERGENCY)**

CONSENT TO MEDICAL AND SURGICAL PROCEDURES

I consent to the procedures that may be performed during this hospitalization or while I am an out-patient. These may include, but are not limited to, emergency treatment or services, laboratory procedures, X-ray examinations, medical or surgical treatment or procedures, telehealth services, anesthesia, or hospital services provided to me under the general and special instructions of my physician or surgeon. I understand that the practice of medicine and surgery is not an exact science and that diagnosis and treatment may involve risks of injury or even death. I acknowledge that no guarantees have been made to me regarding the result of examination or treatment in this hospital.

NURSING CARE

This hospital provides only general nursing care and care ordered by the physician(s). If I want a private duty nurse, I agree to make such arrangements. The hospital is not responsible for failure to provide a private duty nurse and is hereby released from any and all liability arising from the fact that the hospital does not provide this additional care.

EDUCATIONAL CONSENT

The hospital is, in part, an educational facility participating in the training of physicians, medical students, student nurses, and other health care personnel. I agree that they may participate in my care to the extent deemed appropriate by the medical staff or hospital personnel, and I consent to the demonstration, observation and admission of treatment or procedures by such persons under the supervisor of the members of the medical staff or hospital personnel.

LEGAL RELATIONSHIP BETWEEN HOSPITAL AND PHYSICIANS

ALL PHYSICIANS AND SURGEONS PROVIDING SERVICES TO ME, INCLUDING THE RADIOLOGISTS, PATHOLOGISTS, EMERGENCY PHYSICIANS, ANESTHESIOLOGISTS, NURSE PRACTITIONERS, PHYSICIAN'S ASSISTANTS, CONSULTING PHYSICIANS AND OTHERS, ARE NOT EMPLOYEES, REPRESENTATIVES OR AGENTS OF THE HOSPITAL. They have been granted the privilege of using the hospital for the care and treatment of their patients, but they are not employees, representatives or agents of the hospital. They are independent practitioners and WILL BILL SEPARATELY. I understand that I am under the care and supervision of my attending physician. The hospital and its nursing staff are responsible for carrying out my physician's instructions. My physician or surgeon is responsible for obtaining my informed consent, when required, to medical or surgical treatment, special diagnostic or therapeutic procedures, or hospital services provided to me under my physician's general and special instructions.

Initials: AS

MATERNITY PATIENTS

If I deliver an infant(s) while a patient of this hospital, I agree that these same Conditions of Admission apply to the infant(s).

Initials: _____

PERSONAL BELONGINGS

As a patient, I am encouraged to leave personal items at home. The hospital maintains a fireproof safe for the safekeeping of money and valuables. The hospital is not liable for the loss or damage to any money, jewelry, documents, eyeglasses, dentures, hearing aids, cell phones, laptops, or other personal electronic devices, or other articles that are not placed in the safe. Hospital liability for loss of any personal property deposited with the hospital for safekeeping is limited by law to five hundred dollars (\$500) unless I receive a written receipt for a greater amount from the hospital.

Initials: AS



800002 4408 (Rev. 07/17)

* Auth (Verified) *

FINANCIAL AGREEMENT

I agree to promptly pay all hospital bills in accordance with the charges listed in the hospital's charge description master and, if applicable, the hospital's charity care and discount payment policies and state and federal law. I understand that I may review the hospital's charge description master before (or after) I receive services from the hospital. I understand that all physicians and surgeons, including the radiologist, pathologist, emergency physician, anesthesiologist, and others, will bill separately for their services. Payment of estimated hospital liability may be required for non-emergent services. I have received information on the hospital's financial assistance policy and I understand I may request further assistance to determine if I may qualify. I authorize the hospital, collection agency or other entity contracted with the hospital, to verify employment and to obtain credit reports about me/legal representative from national credit bureaus in connection with payment of my account, past or present. The patient/legal representative will comply with all authorization and insurance certification requirements. If my account is referred to an attorney or collection agency for collection, I will pay actual attorney's fees and collection expenses. All delinquent accounts shall bear interest at the legal rate, unless prohibited by law.

I/legal representative agree, by providing my phone number(s) including a landline and/or a wireless phone number, consent to receive calls and/or text messages including autodialed calls and artificial or prerecorded messages from the hospital, physicians, agents and independent contractors (including service agencies and collection agencies) regarding hospital/medical services and any related financial obligations. I acknowledge that text messages may be susceptible to certain privacy and security risks, such as being viewed by others with access to the phone or device on which the text is received or stored. This consent applies to all services and billing associated with the patient account(s).

Initials:

ASSIGNMENT OF ALL RIGHTS AND BENEFITS

I irrevocably assign and transfer to the hospital all rights, benefits, and any other interests in connection with any insurance plan, health benefit plan, or other source of payment for my care. This assignment shall include assigning and authorization of direct payment to the hospital of all insurance and health plan benefits payable for this hospitalization or for these outpatient services. I agree that the insurer or plan's payment to the hospital pursuant to this authorization shall discharge its obligations to the extent of such payment. I understand that I am financially responsible for charges not paid according to the assignment, to the extent permitted by state and federal law. I agree to cooperate with, and take all steps reasonably requested by, this hospital to perfect, confirm, or validate this assignment.

HEALTH PLAN CONTRACTS

This hospital maintains a list of health plans with which it contracts. A list of such plans is available upon request from the patient financial services office. All physicians and surgeons, including the radiologist, pathologist, emergency physician, anesthesiologist, and others, will bill separately for their services. It is my responsibility to determine if the hospital or the physicians providing services to me contract with my health plan.

RELEASE OF INFORMATION

The hospital may use and disclose patient identifiable health information for purposes of treatment, payment and health care operations and as otherwise required or permitted by law and hospital policy. For example, the hospital may release patient information from records to any person or company which is or may be responsible to pay for the hospital's services, including Medicare, Medi-Cal, insurance companies, health care plans and/or workers' compensation carriers. In addition, State law requires the hospital to report certain cases of infectious disease and cancer to governmental health agencies. For all other purposes, the patient's written authorization permitting release of identifiable health information to others will be obtained. Please see the hospital's Notice of Privacy Practices for details regarding your rights concerning the use and disclosure of patient identifiable health information.

Initials:

NOTICE OF PRIVACY PRACTICES AND PATIENT RIGHTS DOCUMENT

My initial acknowledges my receipt of the Notice of Privacy Practices, and Patient Rights Document.

Initials:

CONSENT TO PHOTOGRAPH

I consent to the taking of photographs, videotapes, digital or other images of my medical or surgical condition or treatment, and the use of the images, for purpose of my diagnosis or treatment or for the hospital's operations, including peer review and education or training programs conducted by the hospital.

6020002 44018 0/rev 05/10

* Auth (Verified) *

ADVANCE DIRECTIVE ACKNOWLEDGEMENT

I have been given written materials about my right to accept or refuse medical treatment. I have been informed of my right to formulate an Advance Directive. I understand that I am not required to have an Advance Directive in order to receive medical treatment at this health care facility. I understand that the terms of any Advance Directive that I have signed will be followed by the health care facility and my caregivers to the extent permitted by law. *If I have an Advance Directive, I will present it at each admission.*

I HAVE signed an Advance Directive _____ I HAVE given a copy to the Hospital _____
I CHOOSE NOT to give a copy to the hospital _____ I DO NOT have an Advance Directive

TRANSPORTATION ARRANGEMENTS

I understand transportation must be arranged in advance and be available once my treating physician deems that I may safely be discharged. I may not drive a vehicle until my physician advises me that I may drive.
Initials: Ad

After reviewing this document, please initial one of the options below:

The undersigned acknowledges that he/she has read the foregoing and agrees that they do not wish to receive a signed or unsigned copy of this document but understand that one is available upon request.
Initials: Ad

I certify that I have read the foregoing and have received an unsigned copy thereof. I understand that a signed copy is available upon request.
Initials: _____

Date: 11/14/2021 Time: 10:12 AM/PM

Signature: [Signature]
(patient/legal representative)

If signed by someone other than the patient, indicate relationship: _____

Print name: _____
(legal representative)

Signature: [Signature] Print name: Justina Escobar
(witness) (witness)

FINANCIAL RESPONSIBILITY AGREEMENT WITH PERSON OTHER THAN THE PATIENT OR THE PATIENT'S LEGAL REPRESENTATIVE

I agree to accept financial responsibility for services rendered to the patient and to accept the terms of the Financial Agreement, Assignment of Insurance Benefits, and Health Plan Contracts provisions above.

Date: _____ Time: _____ AM/PM

Signature: _____
(financial responsible party)

Print name: _____
(legal representative)

Address: _____

Phone number: _____

Signature: _____ Print name: _____
(witness) (witness)

80200027-20008 (Rev. 05/18)

* Auth (Verified) *

SAN ANTONIO REGIONAL HOSPITAL
999 SAN BERNARDINO ROAD • UPLAND, CALIFORNIA 91786

HANNA MD, ADEL SHAKER
DOB: 3/29/1946
Gender: Male
MRN # 918505
PNO # 5210547

CONDITIONS OF SERVICES (OUTPATIENT)

CONSENT TO MEDICAL AND SURGICAL PROCEDURES

The person who signs below as the patient, or the representative on behalf of the patient, consents to be cared for as an outpatient at San Antonio Regional Hospital. This outpatient care may include, but is not limited to: laboratory procedures, x-ray examination including use of contrast injections, medical or surgical treatment or procedures, telehealth services, local anesthesia, and services provided to the patient under the general and special instructions of the patient's physician or surgeon. I understand that the practice of medicine and surgery is not an exact science and that diagnosis and treatment may involve risks of injury or even death. I acknowledge that no guarantees have been made to me regarding the result of examination or treatment in this hospital. This outpatient condition of services and consent will remain in effect for up to twelve (12) months from date of signature and will apply to all outpatient services provided at San Antonio Regional Hospital during this period of time.

NURSING CARE

This hospital provides only general nursing care and care ordered by the physician(s). If I want a private duty nurse, I agree to make such arrangements. The hospital is not responsible for failure to provide a private duty nurse and is hereby released from any and all liability arising from the fact that the hospital does not provide this additional care.

EDUCATIONAL CONSENT

The hospital is, in part, an educational facility participating in the training of physicians, medical students, student nurses, and other health care personnel. I agree that they may participate in my care to the extent deemed appropriate by the medical staff or hospital personnel, and I consent to the demonstration, observation and admission of treatment or procedures by such persons under the supervisor of the members of the medical staff or hospital personnel.

LEGAL RELATIONSHIP BETWEEN HOSPITAL AND PHYSICIANS

ALL PHYSICIANS AND SURGEONS PROVIDING SERVICES TO ME, INCLUDING THE RADIOLOGISTS, PATHOLOGISTS, EMERGENCY PHYSICIANS, ANESTHESIOLOGISTS, NURSE PRACTITIONERS, PHYSICIAN'S ASSISTANTS, CONSULTING PHYSICIANS AND OTHERS, ARE NOT EMPLOYEES, REPRESENTATIVES OR AGENTS OF THE HOSPITAL. They have been granted the privilege of using the hospital for the care and treatment of their patients, but they are not employees, representatives or agents of the hospital. They are independent practitioners and WILL BILL SEPARATELY. I understand that I am under the care and supervision of my attending physician. The hospital and its nursing staff are responsible for carrying out my physician's instructions. My physician or surgeon is responsible for obtaining my informed consent, when required, to medical or surgical treatment, special diagnostic or therapeutic procedures, or hospital services provided to me under my physician's general and special instructions.

Initials: AS

PERSONAL BELONGINGS

As a patient, I am encouraged to leave personal items at home. The hospital maintains a fireproof safe for the safekeeping of money and valuables. The hospital is not liable for the loss or damage to any money, jewelry, documents, eyeglasses, dentures, hearing aids, cell phones, laptops, or other personal electronic devices, or other articles that are not placed in the safe. Hospital liability for loss of any personal property deposited with the hospital for safekeeping is limited by law to five hundred dollars (\$500) unless I receive a written receipt for a greater amount from the hospital.

Initials: AS



80000369 (05/19)

* Auth (Verified) *

FINANCIAL AGREEMENT

I agree to promptly pay all hospital bills in accordance with the charges listed in the hospital's charge description master and, if applicable, the hospital's charity care and discount payment policies and state and federal law. I understand that I may review the hospital's charge description master before (or after) I receive services from the hospital. I understand that all physicians and surgeons, including the radiologist, pathologist, emergency physician, anesthesiologist, and others, will bill separately for their services. Payment of estimated hospital liability may be required for non-emergent services. I have received information on the hospital's financial assistance policy and I understand I may request further assistance to determine if I may qualify. I authorize the hospital, collection agency or other entity contracted with the hospital, to verify employment and to obtain credit reports about me/legal representative from national credit bureaus in connection with payment of my account, past or present. The patient/legal representative will comply with all authorization and insurance certification requirements. If any account is referred to an attorney or collection agency for collection, I will pay actual attorneys' fees and collection expenses. All delinquent accounts shall bear interest at the legal rate, unless prohibited by law.

I/legal representative agree, by providing my phone number(s) including a landline and/or a wireless phone number, consent to receive calls and/or text messages including autodialed calls and artificial or prerecorded messages from the hospital, physicians, agents and independent contractors (including service agencies and collection agencies) regarding hospital/medical services and any related financial obligations. I acknowledge that text messages may be susceptible to certain privacy and security risks, such as being viewed by others with access to the phone or device on which the text is received or stored. This consent applies to all services and billing associated with the patient account(s).

Initials: _____ ✎

ASSIGNMENT OF ALL RIGHTS AND BENEFITS

I irrevocably assign and transfer to the hospital all rights, benefits, and any other interests in connection with any insurance plan, health benefit plan, or other source of payment for my care. This assignment shall include assigning and authorization of direct payment to the hospital of all insurance and health plan benefits payable for this hospitalization or for these outpatient services. I agree that the insurer or plan's payment to the hospital pursuant to this authorization shall discharge its obligations to the extent of such payment. I understand that I am financially responsible for charges not paid according to the assignment, to the extent permitted by state and federal law. I agree to cooperate with, and take all steps reasonably requested by, this hospital to perfect, confirm, or validate this assignment.

HEALTH PLAN CONTRACTS

This hospital maintains a list of health plans with which it contracts. A list of such plans is available upon request from the patient financial services office. All physicians and surgeons, including the radiologist, pathologist, emergency physician, anesthesiologist, and others, will bill separately for their services. It is my responsibility to determine if the hospital or the physicians providing services to me contract with my health plan.

RELEASE OF INFORMATION

The hospital may use and disclose patient identifiable health information for purposes of treatment, payment and health care operations and as otherwise required or permitted by law and hospital policy. For example, the hospital may release patient information from records to any person or company which is or may be responsible to pay for the hospital's services, including Medicare, Medi-Cal, insurance companies, health care plans and/or workers' compensation carriers. In addition, State law requires the hospital to report certain cases of infectious disease and cancer to governmental health agencies. For all other purposes, the patient's written authorization permitting release of identifiable health information to others will be obtained. Please see the hospital's Notice of Privacy Practices for details regarding your rights concerning the use and disclosure of patient identifiable health information.

Initials: _____ ✎

NOTICE OF PRIVACY PRACTICES AND PATIENT RIGHTS DOCUMENT

My initial acknowledges my receipt of the Notice of Privacy Practices, and Patient Rights Document.

Initials: _____ ✎

CONSENT TO PHOTOGRAPH

I consent to the taking of photographs, videotapes, digital or other images of my medical or surgical condition or treatment, and the use of the images, for purposes of my diagnosis or treatment or for the hospital's operations, including peer review and education or training programs conducted by the hospital.

80000369 (05/19)

* Auth (Verified) *

ADVANCE DIRECTIVE ACKNOWLEDGEMENT

I have been given written materials about my right to accept or refuse medical treatment. I have been informed of my right to formulate an Advance Directive. I understand that I am not required to have an Advance Directive in order to receive medical treatment at this health care facility. I understand that the terms of any Advance Directive that I have signed will be followed by the health care facility and my caregivers to the extent permitted by law. *If I have an Advance Directive, I will present it at each admission.*

I HAVE signed an Advance Directive _____ I HAVE given a copy to the Hospital _____

I CHOOSE NOT to give a copy to the hospital _____ I DO NOT have an Advance Directive _____

LENGTH OF OUTPATIENT CONDITION OF SERVICES

I understand and agree that this outpatient condition of services and consent will remain in effect for up to twelve (12) months from date of signature and will apply to all outpatient services provided at San Antonio Regional Hospital during this period of time.

Initials: AS

After reviewing this document, please initial one of the options below:

The undersigned acknowledges that he/she has read the foregoing and agrees that they **do not wish to receive** a signed or unsigned copy of this document but understand that one is available upon request.

Initials: _____

I certify that I have read the foregoing and **have received** an unsigned copy thereof. I understand that a signed copy is available upon request.

Initials: AS

07/09/2021 15:25:22

Date: _____ Time: _____ AM/PM

Signature: [Signature]

(patient/legal representative)

Patient

If signed by someone other than the patient, indicate relationship: _____

Print name: _____

(legal representative)

E102977

E102977

Signature: _____ Print name: _____

(witness)

(witness)

FINANCIAL RESPONSIBILITY AGREEMENT BY PERSON OTHER THAN THE PATIENT OR THE PATIENT'S LEGAL REPRESENTATIVE

I agree to accept financial responsibility for services rendered to the patient and to accept the terms of the Financial Agreement, Assignment of Insurance Benefits, and Health Plan Contracts provisions above.

07/09/2021 15:25:26

Date: _____ Time: _____ AM/PM

Signature: _____

(financially responsible party)

Print name: _____

(legal representative)

Address: _____

Phone number: _____

Signature: E102977 Print name: E102977

(witness)

(witness)

80000369 (05/19)

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Electrocardiogram

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

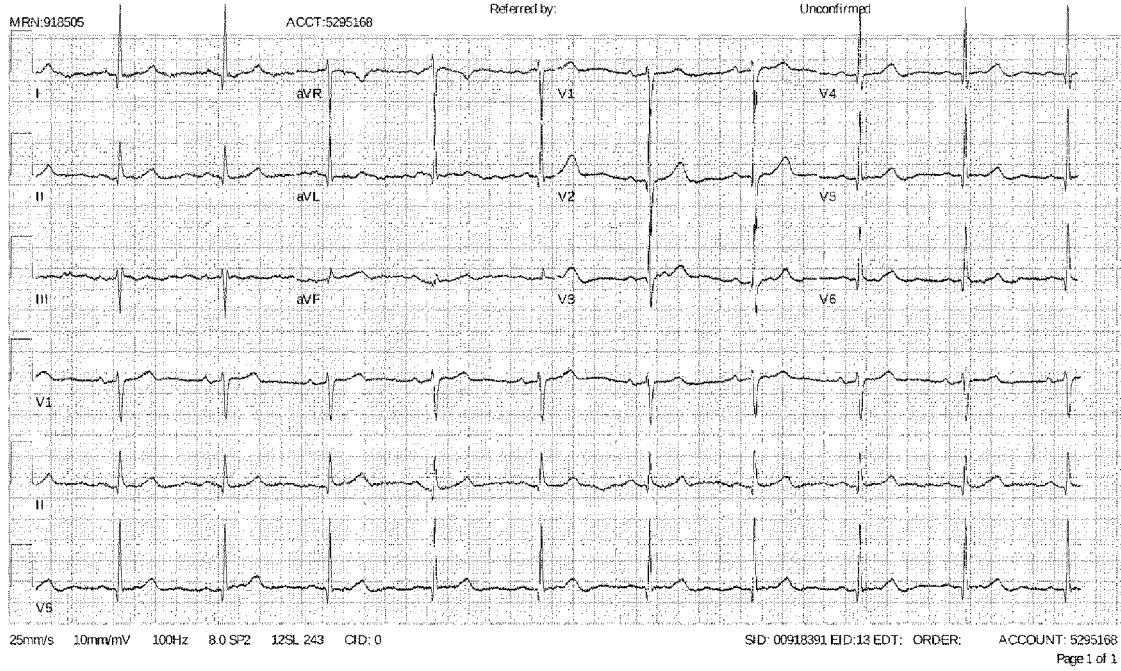
Page 72 of 255

* Auth (Verified) *

HANNA, ADEL ID:0918505 14-NOV-2021 21:26:38 SAN ANTONIO REGIONAL HOSPITAL-EMR ROUTINE RECORD

29-MAR-1946 (75 yr)	Heart rate	60	BPM	Normal sinus rhythm
Male	PR interval	172	ms	Minimal voltage criteria for LVH, may be normal variant Statement Not Found (#1605) Statement Not Found (#530) Statement Not Found (#1606)
Room:LCBBY	QRS duration	88	ms	Cannot rule out inferior infarct (ated on or before 14-NOV-2021)
Lcc:1	QT/QTc	434/434	ms	Abnormal ECG
	P-R-T axes	25 -2	27	When compared with ECG of 14-NOV-2021 16:39, Questionable change in initial forces of Inferior leads

Technician: A H CARD
Test Ind:



* Auth (Verified) *

HANNA, ADEL ID:0918505 14-NOV-2021 16:39:27 SAN ANTONIO REGIONAL HOSPITAL-EMR ROUTINE RECORD

29-MAR-1946 (75 yr)	Heart rate	82	BPM	Normal sinus rhythm
Male	PR interval	170	ms	Possible Lateral infarct, age undetermined
Other	QRS duration	82	ms	Cannot rule out Inferior infarct, age undetermined
Room:LCBBY	QT/QTc	380/443	ms	Abnormal ECG
Lcc:1	P-R-T axes	71 68 79		When compared with ECG of 13-JUN-2012 08:33, PR interval has decreased Minimal criteria for Inferior infarct are now Present

Technician: L. C. CARD (CVT)
Test Ind:



San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5295168
Patient Type: Observation
Attending: Khan M.D.,Mansurur R.
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Electrocardiogram

Document Name: EKG Interpretation
Result Status: Auth (Verified)
Performed By: Covarrubias SCRIBE,Victoria (11/14/2021 21:32 PST)
Authenticated By: Covarrubias SCRIBE,Victoria (11/14/2021 21:32 PST)

ED EKG Interpretation

12 lead EKG interpreted by Emergency Department Physician.
12 lead EKG shows normal sinus , regular rhythm , with no ectopics , 60 BPM . Conduction normal . ST segments normal . T waves normal . Axis normal . Minimal voltage criteria for LVH, may be normal variant. Cannot rule out inferior infarct. age undetermined.
Clinical impression: Abnormal EKG.

Interpreted by Dr. Kim at 2126

Document Name: EKG Interpretation
Result Status: Auth (Verified)
Performed By: Infantino SCRIBE,Kamryn (11/14/2021 16:57 PST)
Authenticated By: Infantino SCRIBE,Kamryn (11/14/2021 16:57 PST)

ED EKG Interpretation

12 lead EKG interpreted by Emergency Department Physician.
12 lead EKG shows normal sinus , regular rhythm , with no ectopics . Conduction normal . ST segments normal . T waves normal . Axis normal . Possible lateral infarct, age undetermined. Cannot rule out inferior infarct. age undetermined.
Clinical impression: Abnormal EKG.

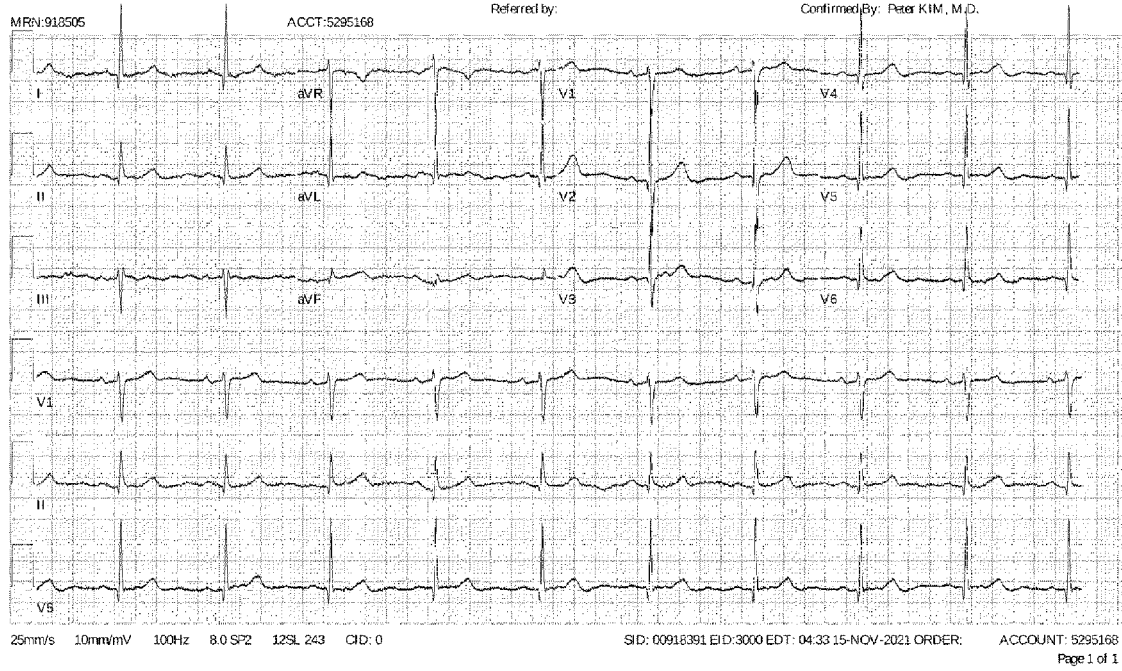
Interpreted by: Dr. Abed on 11/14/21 at 1657
Comparison to previous EKG:

* Auth (Verified) *

HANNA, ADEL ID:0918505 14-NOV-2021 21:26:38 SAN ANTONIO REGIONAL HOSPITAL-EMR ROUTINE RECORD

29-MAR-1946 (75 yr)	Heart rate	60	BPM	Normal sinus rhythm
Male	PR interval	172	ms	Minimal voltage criteria for LVH, may be normal variant Statement Not Found (#1605) Statement Not Found (#530) Statement Not Found (#1606)
Room:LCBBY	QRS duration	88	ms	Cannot rule out inferior infarct (ated on or before 14-NOV-2021)
Lcc:1	QT/QTc	434/434	ms	Abnormal ECG
	P-R-T axes	25 -2 27		When compared with ECG of 14-NOV-2021 16:39, Questionable change in initial forces of Inferior leads

Technician: A H CARD
Test Ind:

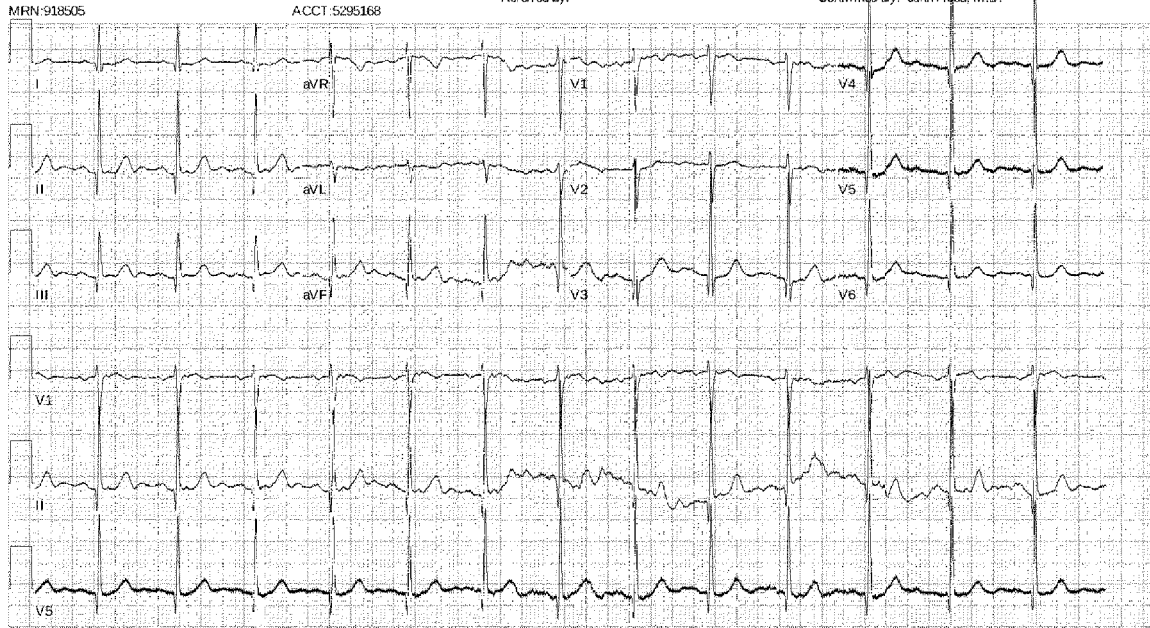


* Auth (Verified) *

HANNA, ADEL ID: 0918505 14-NOV-2021 16:39:27 SAN ANTONIO REGIONAL HOSPITAL-EMR ROUTINE RECORD

29-MAR-1946 (75 yr)	Vent. rate	82	BPM	Normal sinus rhythm
Male	PR interval	170	ms	Possible Lateral Infarct, age undetermined
Other	QRS duration	82	ms	Cannot rule out Inferior Infarct, age undetermined
Room: LOBBY	QT/QTc	380/443	ms	Abnormal ECG
Loc: 1	P-R-T axes	71 68 79		When compared with ECG of 13-JUN-2012 08:33, PR Interval has decreased Minimal criteria for Inferior Infarct are now Present

Technician: L C CARD (CVT)
Test Ind:



25mm/s 10mm/mV 100Hz 8.0 SP2 12SL 243 CID: 0 SID: 00918391 EID: 801 EDT: 01:28 15-NOV-2021 ORDER: ACCOUNT: 5295168
Page 1 of 1

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Telemetry Strip

Report ID: 127045218

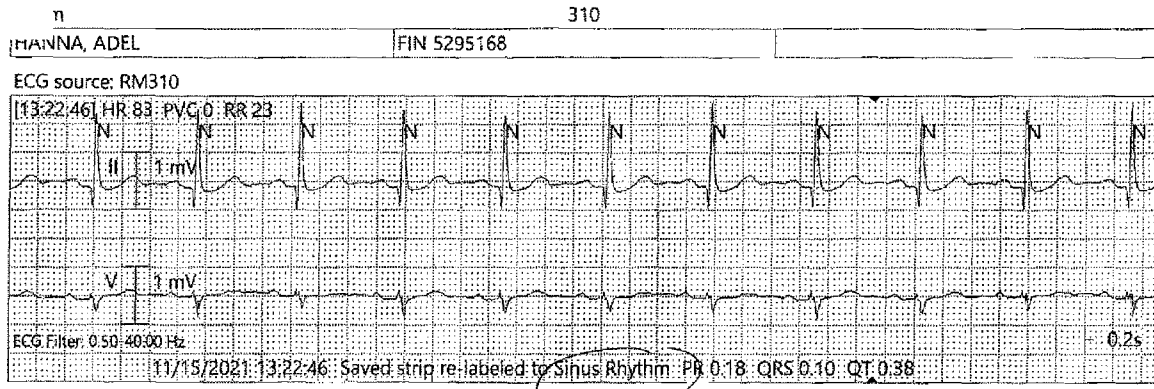
Print Date/Time: 2/24/2023 16:04 PST

Page 78 of 255

Patient Name: HANNA MD, ADEL SHAKER
Date of Birth: 3/29/1946

MRN: 918505
FIN: 5295168

* Auth (Verified) *



Sig: *W. H. ...*
Date: 11/15/2021
Time: 15:10

d on 11/15/2021 13:31:22	TELEMETRY	SAN ANTONIO REGIONAL HOSPITAL
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Echocardiogram

Document Name: Echocardiogram Report
Result Status: Auth (Verified)
Performed By: Chan D.O.,Larry (11/15/2021 19:06 PST)
Authenticated By: Chan D.O.,Larry (11/15/2021 19:06 PST)

DATE OF PROCEDURE: 11/15/2021.

INDICATIONS: Chest pain.

TECHNICALLY ADEQUATE STUDY.

FINDINGS:

1. Left ventricle: Left ventricular chamber size is within normal limits, measured at 4.98 cm. There is borderline concentric left ventricular hypertrophy with a septal diameter measured at 1.05 cm and posterior wall measured at 1.03 cm. Left ventricular ejection fraction is estimated at 65-70%. There is grade 1 diastolic dysfunction.
2. Right ventricle: Normal size and function.
3. Left atrium: Mildly dilated with normal function with left atrial dimension measured at 4.3 cm.
4. Right atrium: Normal size and function.
5. Interatrial septum: Cannot rule out ASD/PFO without bubble study, but no obvious inter-atrial septal defect seen by color flow Doppler.
6. Aortic root is mildly dilated with widest measurement of 4.2 cm.
7. Mitral valve: Normal structure and function. No mitral regurgitation seen.
8. Aortic valve: Normal structure and function. No significant aortic stenosis seen. There is trace aortic insufficiency seen.
9. Tricuspid valve: Normal structure and function. Mild tricuspid regurgitation with right ventricular systolic pressure estimated at 24 mmHg.
10. Pulmonic valve: Normal structure and function, trivial pulmonary insufficiency seen.
11. Pericardium: No significant pericardial effusion seen.

CONCLUSION:

1. Left ventricular ejection fraction estimated at 65-70%.
2. Grade 1 diastolic dysfunction.
3. Aortic root is mildly dilated with widest measurement of 4.2 cm.
4. There is trace aortic insufficiency seen.
5. Right ventricular systolic pressure estimated to be at 24 mmHg.

Cardiology Procedures

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

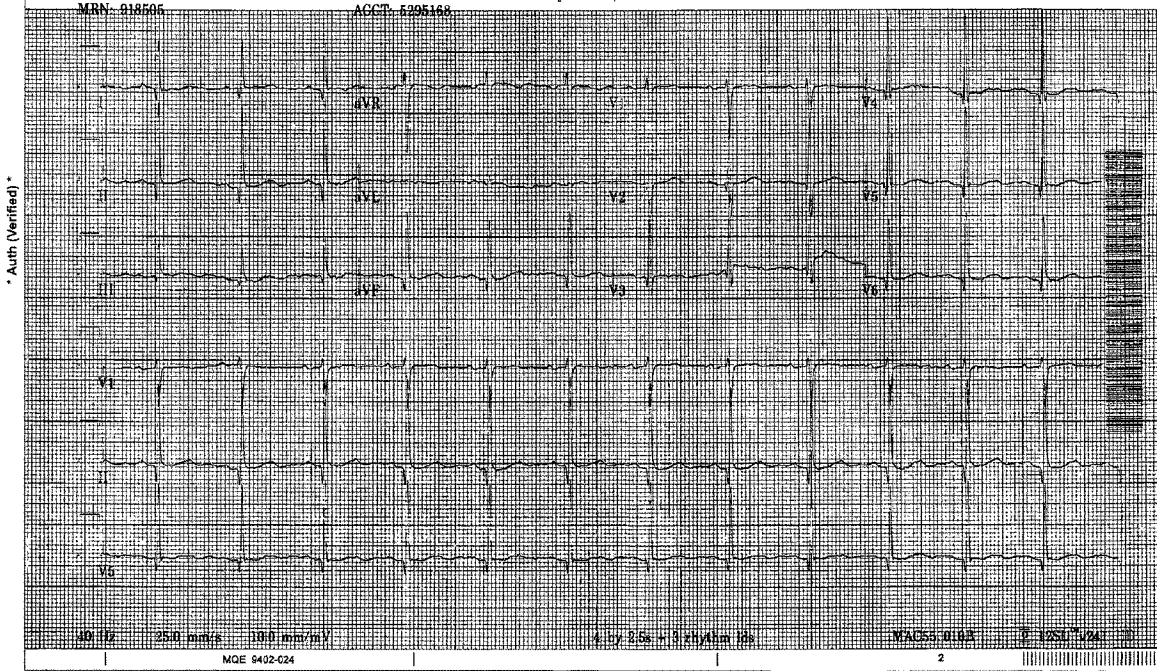
Page 80 of 255

HANNA, ADEL ID: 0918505 15-Nov-2021 10:55:45 SAN ANTONIO REGIONAL HOSPITAL
29-Mar-1946 Vent. rate 76 bpm Normal sinus rhythm
Male PR interval 190 ms Nonspecific T wave abnormality
QRS duration 90 ms Prolonged QT
Room: 310A QT/QTc 418/470 ms Abnormal ECG
Loc: 8 P-R-T axes 44 54 80

Technician: 278

Referred by: CHAN, L

Unconfirmed



HANNA, ADEL
ID: 0918505

12 LEAD REPORT

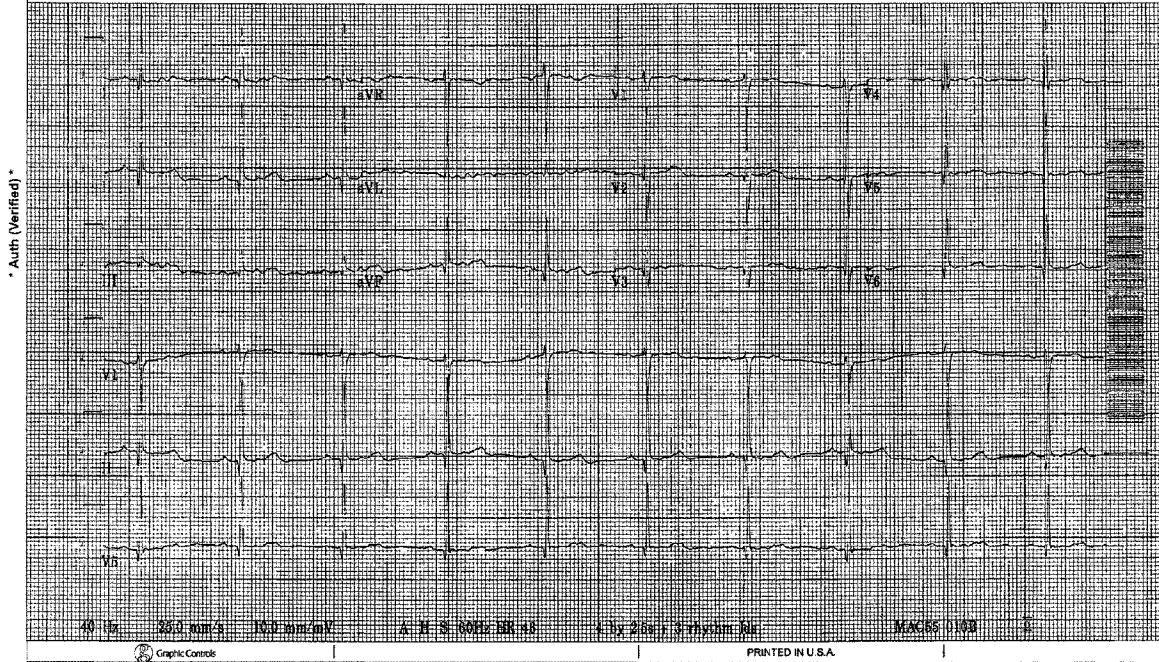
SAN ANTONIO REGIONAL HOSPITAL

15-Nov-2021
10:26:13

61bpm

PREINFSN
PREINFSN
3:08

LEXISCAN
** *mph
** *%



* Auth (Verified) *

HANNA, ADEL
ID: 0918505

MEDIANS REPORT

SAN ANTONIO REGIONAL HOSPITAL

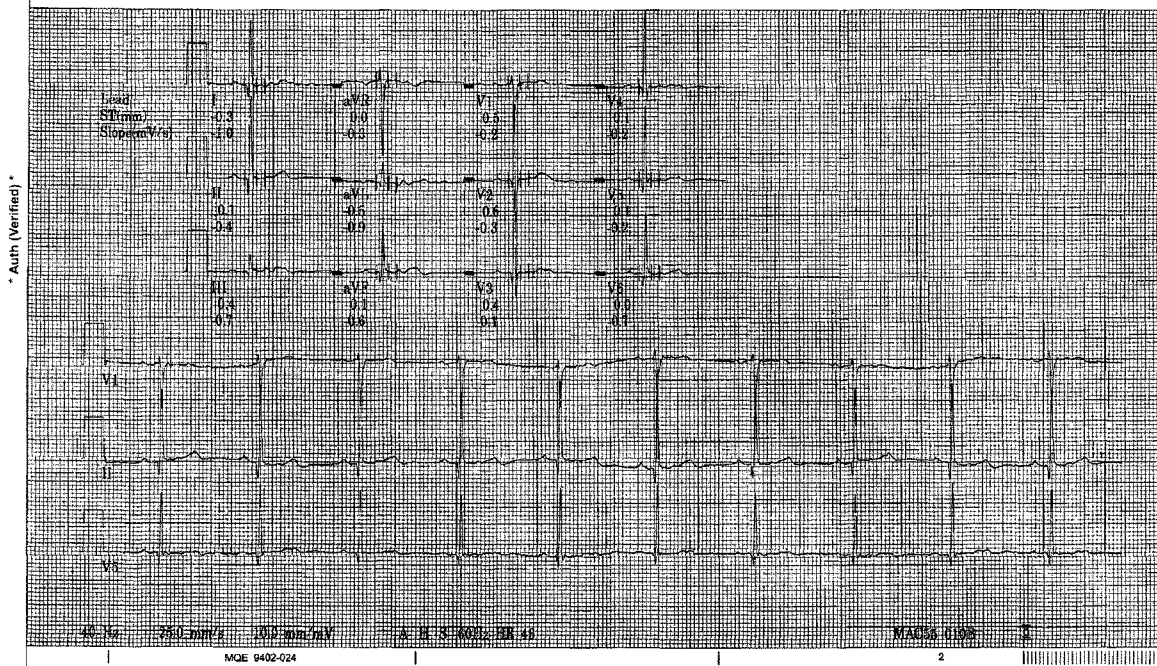
15-Nov-2021
10:26:27

61bpm

PREINPSN
PREINPSN
3:21

LEXISCAN
**mph
**%

ST @ 10mm/mV
80ms post



Patient Name: HANNA MD, ADEL SHAKER
Date of Birth: 3/29/1946

HANNA, ADEL
ID: 0918505

12 LEAD REPORT

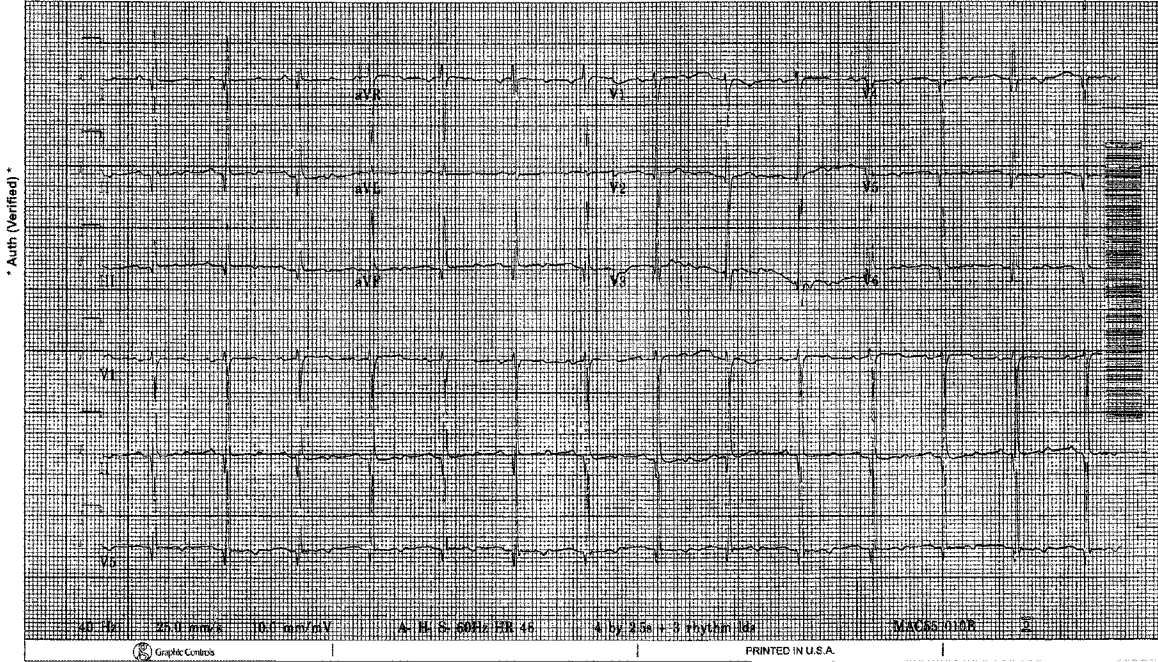
SAN ANTONIO REGIONAL HOSPITAL

15-Nov-2021
10:51:47

85bpm

POSTINFSN
RECOVERY1
0:45

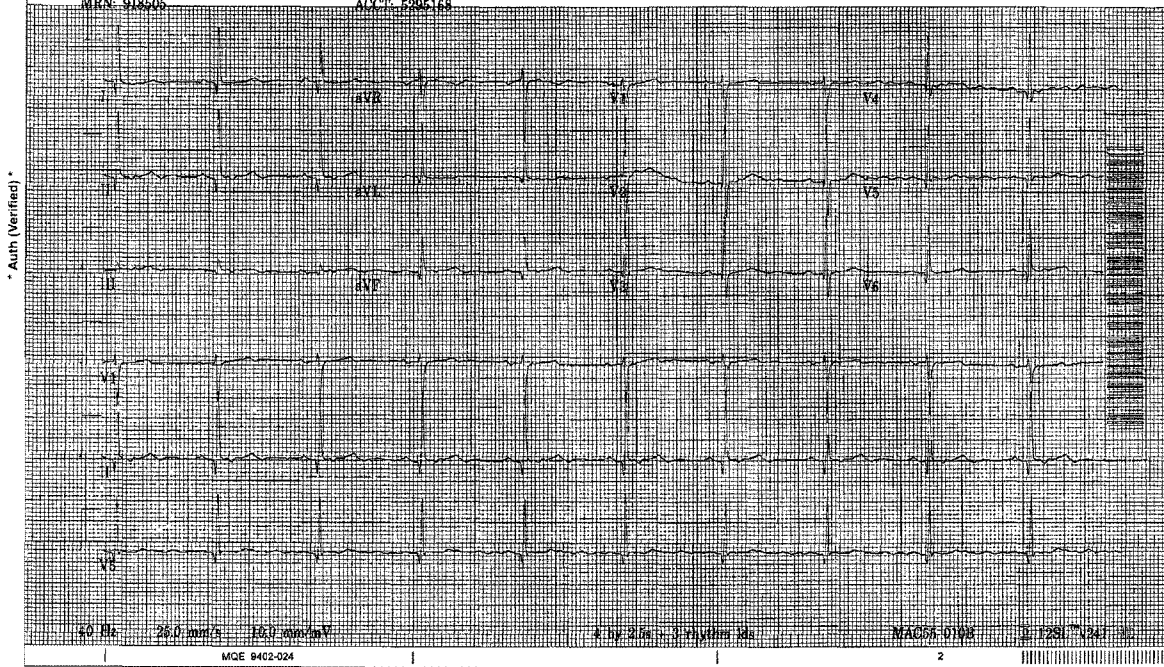
LEXISCAN
** *mph
** *%



HANNA, ADEL ID: 0918505 15-Nov-2021 10:22:28 SAN ANTONIO REGIONAL HOSPITAL
29-Mar-1946 Vent rate 60 bpm Normal sinus rhythm
Male PR interval 178 ms Nonspecific T wave abnormality
Room: 310A QRS duration 88 ms Abnormal ECG
Loc: 8 QT/QTc 458/458 ms
P-R-T axes 48 38 61

Technician: 278

MRN: 918505 ACCT: 5295168 Referred by: CHAN, L Unconfirmed



HANNA, ADEL
ID: 0918505

12 LEAD REPORT

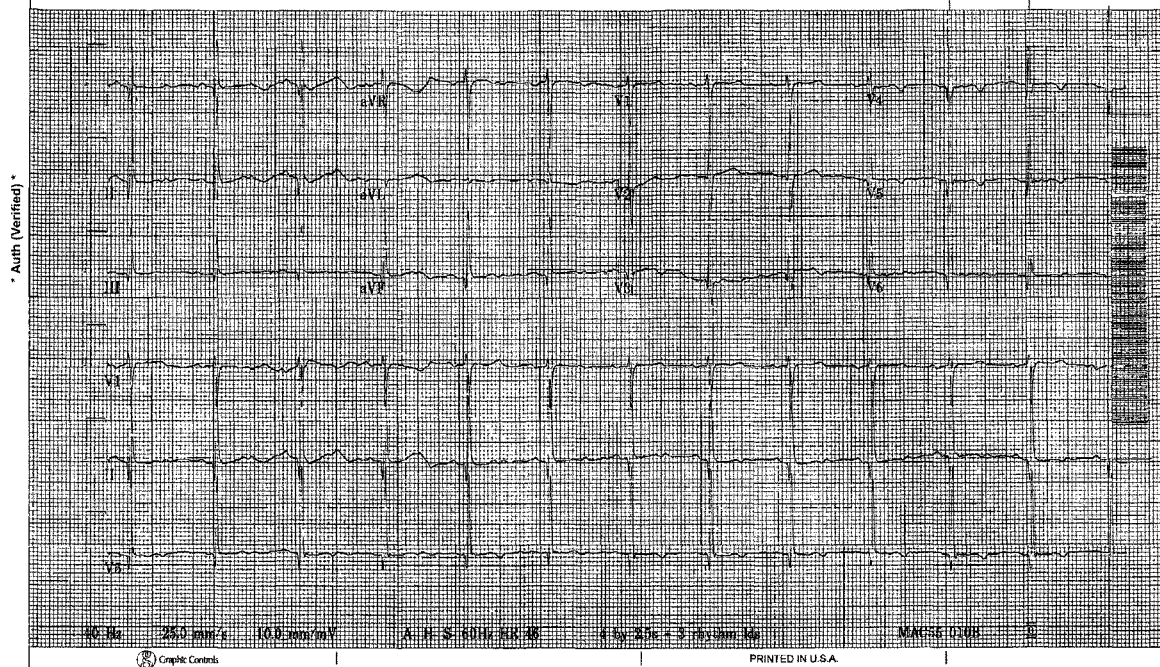
SAN ANTONIO REGIONAL HOSPITAL

15-Nov-2021
10:50:47

73bpm

INFUSION
STAGE1
0:54

LEXISCAN
** *mph
** *%



HANNA, ADEL
ID: 0918505

15-Nov-2021
10:51:18

MEDIANS REPORT

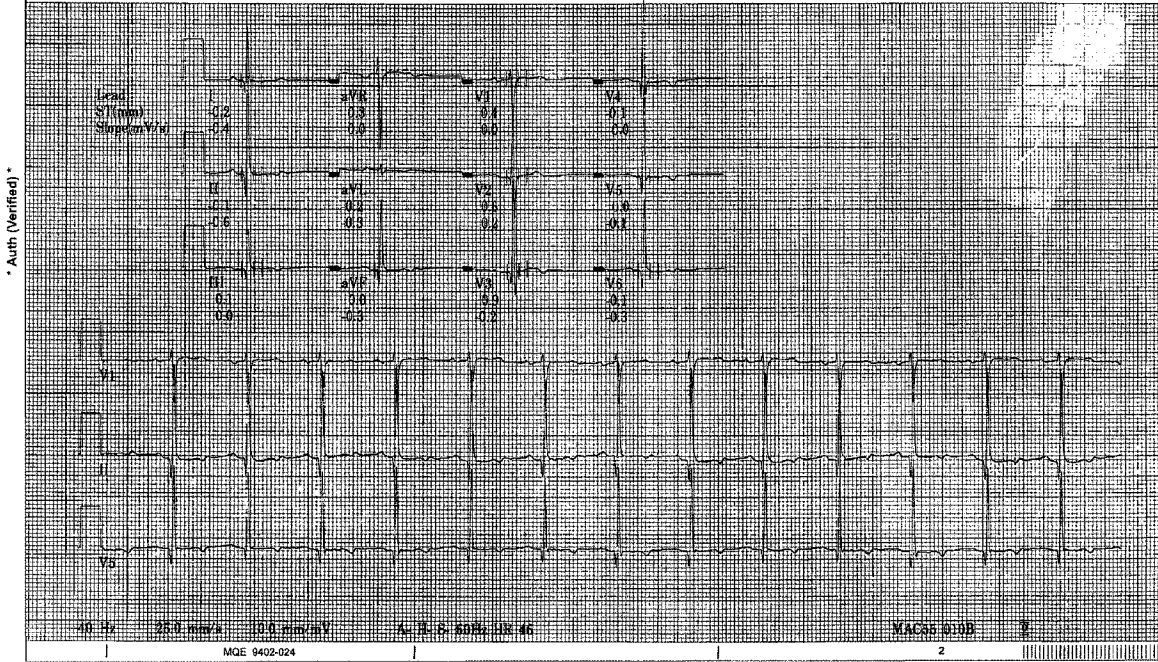
82bpm

POSTINFSN
RECOVERY1
0:16

SAN ANTONIO REGIONAL HOSPITAL

LEXISCAN
**.*mph
**.*%

ST @ 10mm/mV
80ms postJ



* Auth (Verified) *

HANNA, ADEL
ID: 0918505

12 LEAD REPORT

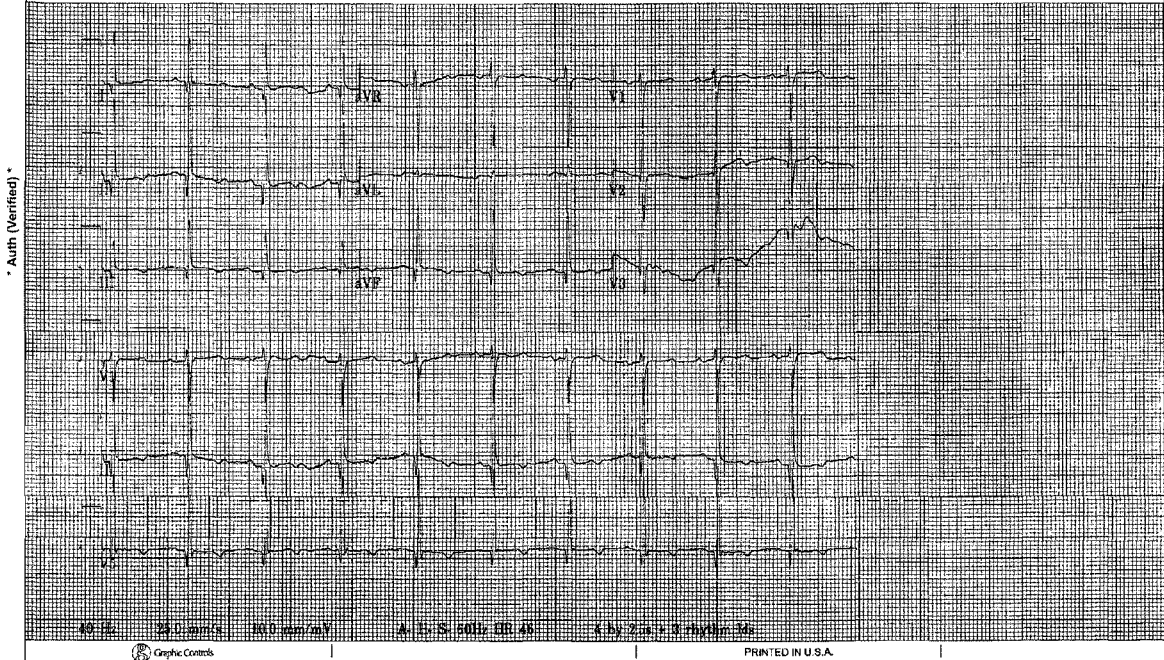
SAN ANTONIO

80bpm

POSTINFUSION
RECOVERY
0:00

LEXISCAN
** *mph
** *%

15-Nov-2021
10:51:03



HANNA, ADEL
ID: 0914505

12 LEAD REPORT

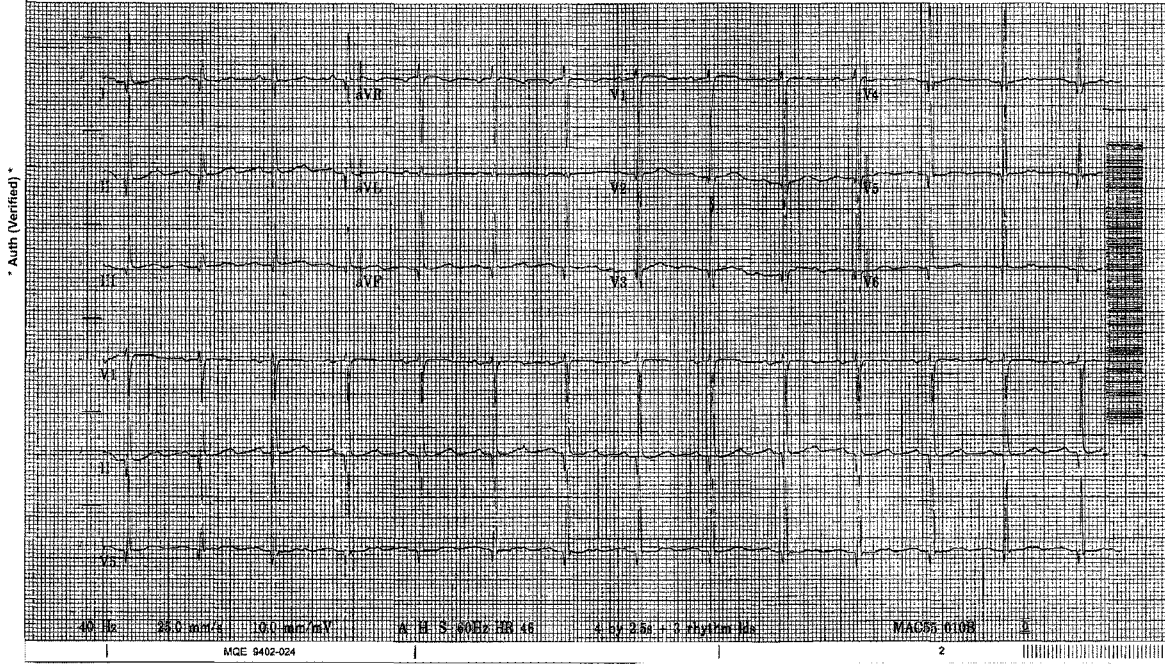
SAN ANTONIO REGIONAL HOSPITAL

15-Nov-2021
10:52:48

83bpm

POSTINFUSN
RECOVERY2
1:47

LEXISCAN
** *mph
** *%



HANNA, ADEL
ID: 0918505

12 LEAD REPORT

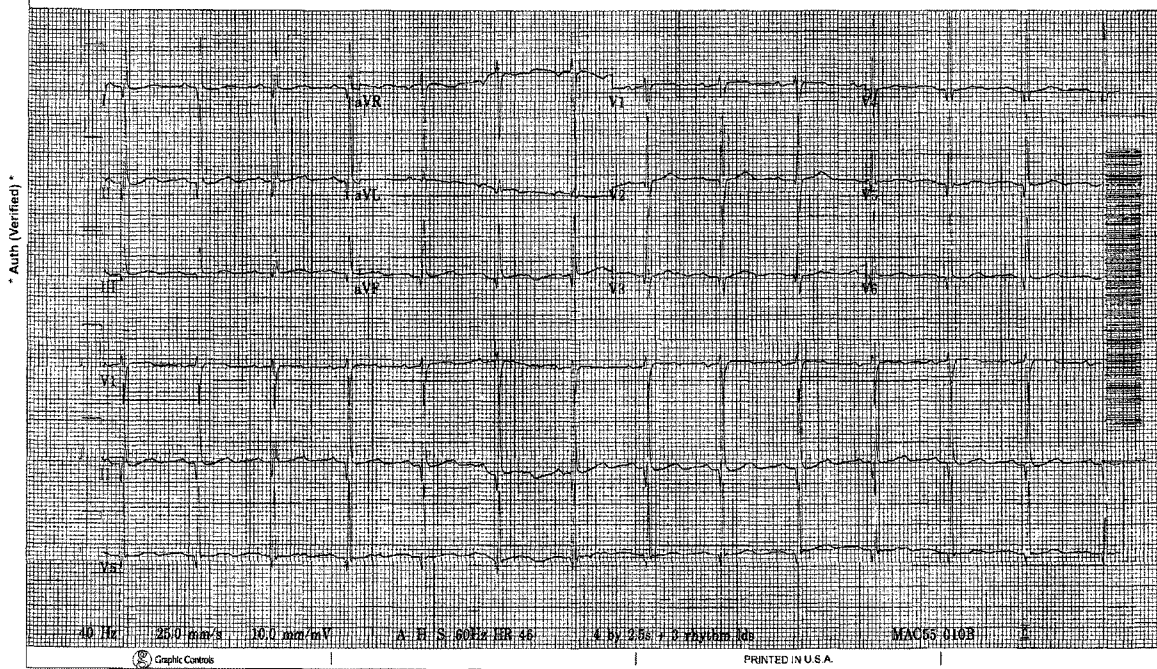
SAN ANTONIO REGIONAL HOSPITAL

15-Nov-2021
10:53:02

81bpm

POSTINFEN
RECOVERY2
2:00

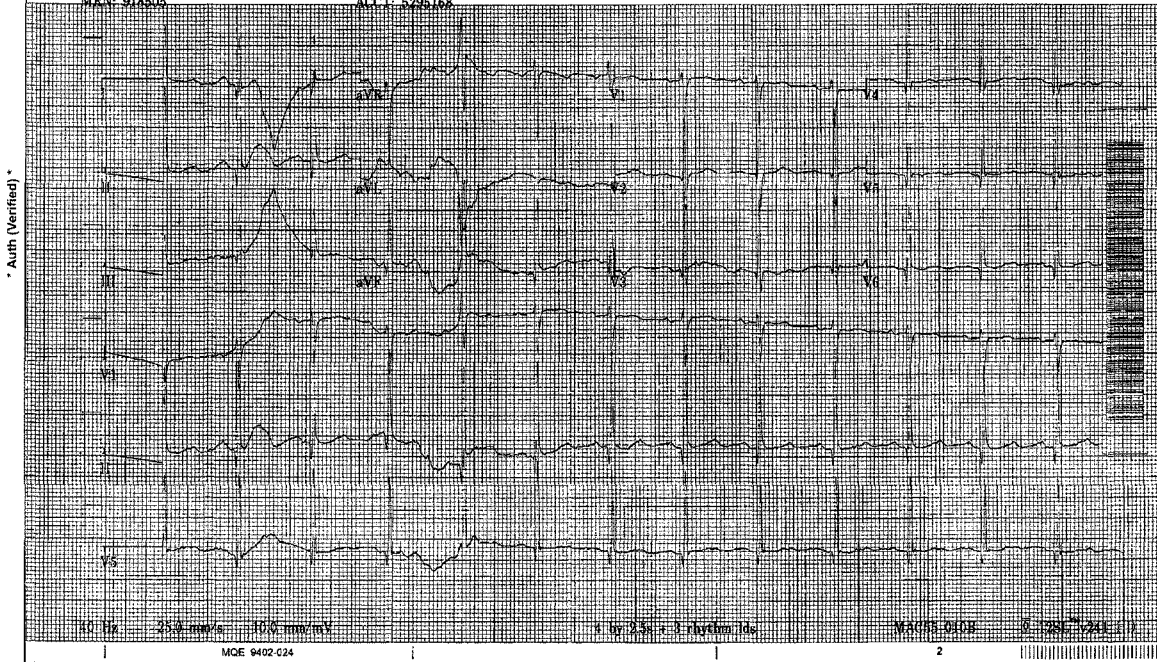
LEXISCAN
** *mph
** *%



HANNA, ADEL ID: 0918505 15-Nov-2021 10:54:11 SAN ANTONIO REGIONAL HOSPITAL
29-Mar-1946 Vent. rate 82 bpm Normal sinus rhythm
Male PR interval 174 ms Nonspecific ST and T wave abnormality
Room: 310A QRS duration 94 ms Prolonged QT
Loc: 8 QT/QTc 394/460 ms Abnormal ECG
P-R-T axes 42 58 108

Technician: 278

MRN: 918505 ACCT: 5295168 Referred by: CHAN, L Unconfirmed



HANNA, ADEL
29-Mar-1946
Male
Room: 310A
Loc: 8

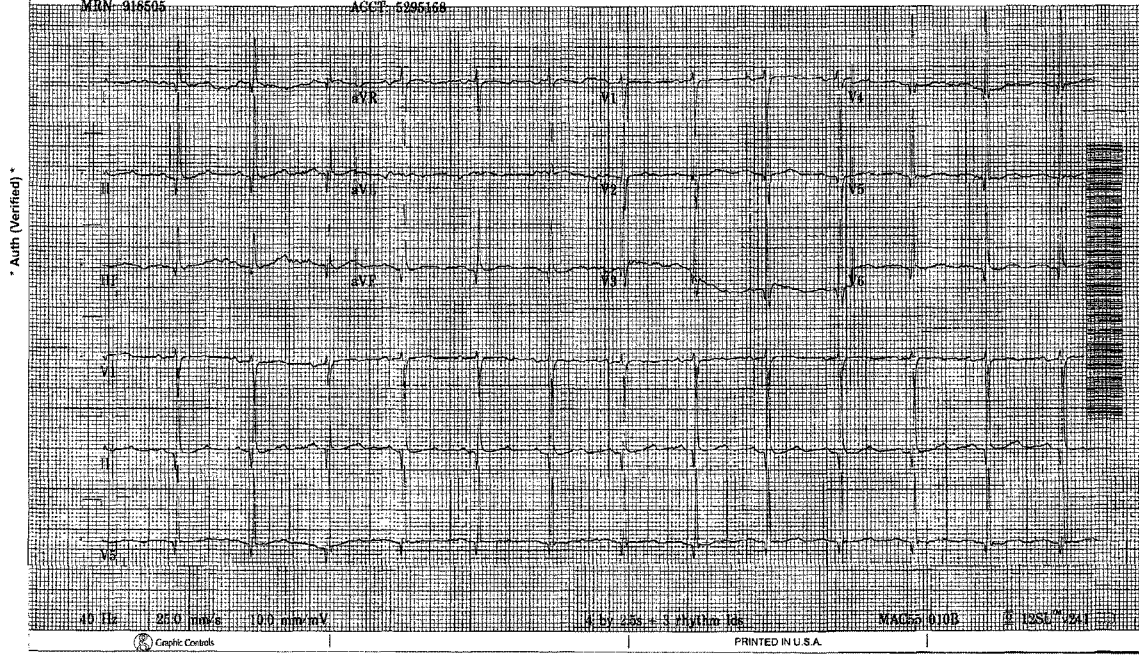
ID: 0918505 15-Nov-2021 10:54:28
Vent. rate 81 bpm
PR interval 186 ms
QRS duration 90 ms
QT/QTc 384/446 ms
P-R-T axes 50 55 84

SAN ANTONIO REGIONAL HOSPITAL

Technician: 278

Referred by: CHAN, L

Unconfirmed



* Auth (Verified) *



SAN ANTONIO REGIONAL HOSPITAL
 Heart Center

Male **HANNA MD, ADEL SHAKER**
 DOB: 03/29/1946 75 Years
 Attn: Khan M.D., Mansurur
 MRN: 918505 FIN: 5295168



LEXISCAN (Regadenoson) NUCLEAR STRESS TEST

ACCOUNT#: 5295168
 NAME: HANNA, ADEL (MD) DATE: 11/15/21 TIME: 1030
 AGE: 75 SEX: M HT: _____ WT: _____
 ROOM: 310 TECH: Joe NM: JAVIER RN: _____
 ALLERGIES: REGLAN SMOKER: NO
 REQUESTED BY: DR L. CHAN PERFORMED BY: F. Tuzo FNP
 MEDICATIONS: _____

SEE CHART

INDICATION(S) FOR STUDY: CHEST PAIN
 DID PATIENT TAKE MEDICATION TODAY? _____
 BASELINE EKG: _____

	HR	BP	O2 Sat	SYMPTOMS	NOTES
REST	61	149/89	98%	None	
STRESS	82		98%		
Lexiscan: <u>10</u>					
Cardiolite: <u>36</u>					

RECOVERY

TIME (Minutes)	HR	BP	O2 Sat	SYMPTOMS	NOTES
1	86	135/80	98%		
2	77		95%		
3	75	148/84	99%		
4	74		98%		
5	76		98%		

INTERPRETATION: [Signature]

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Procedure Notes

DOCUMENT NAME: Procedure Note
SERVICE DATE/TIME: 11/15/2021 11:00 PST
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Tuozo FNP,Froilan (11/15/2021 11:07 PST)
SIGN INFORMATION: Chan D.O.,Larry (11/15/2021 19:00 PST); Tuozo FNP,Froilan (11/15/2021 11:07 PST); Tuozo FNP,Froilan (11/15/2021 11:07 PST)

DATE OF PROCEDURE: 11/15/2021

ASSISTANT: JHoseph

STUDY PERFORMED: EKG Portion of Lexiscan Stress Test

INDICATION: Chest pain

BRIEF CLINICAL HISTORY: This is a 75-year old male patient with hx. of HTN, family hx. of CAD - 2 brothers had MI, presented with a chief complaint of chest pain. The patient was consulted by Dr. Larry Chan. I was asked to perform the pharmacological portion of the lexiscan study.

PROTOCOL: Informed consent was obtained from the patient, after explaining the procedure along with its indications, complications, and potential side effects as well as adverse reactions. The patient received 0.4 mg Lexiscan intravenously per protocol. A peak pharmacological stress Sestamibi was then injected. See radiology report for dose of the Sestamibi given. The patient subsequently went for post-stress and gated imaging.

SUMMARY OF FINDINGS:

1. Baseline EKG demonstrated normal sinus rhythm at 76 beats per minute. PR 190 ms, QRS 90 ms, QTc 470ms, normal axis, ST/T waves were normal.
2. There were no arrhythmias seen.
3. Starting heart rate was 76 beats per minute and blood pressure was 149/89 mmHg. Peak heart rate was 86 beats per minute and blood pressure was 135/80 mmHg. Ending heart rate was 75 beats per minute and blood pressure was 148/84 mmHg.
4. O2 sat ranged from 98% at rest and, in recovery, ranged from 89% to 99% on room air.
5. The patient did not have any chest pain or shortness of breath through out the test.

PRELIMINARY IMPRESSION:

1. T wave inversion in V4 and V5 noted during stress phase and returned baseline in recovery.
2. Appropriate hemodynamic response.
3. No arrhythmias or conduction abnormalities were seen.
4. The patient did not have any chest pain, shortness of breath or other associated symptoms during the stress test.
5. Correlation with Sestamibi scans to follow. Nuclear image will be interpreted/reported separately by Radiologist.

Froilan Tuozo, MSN, NP, CEPS
Cardiac Services

Pt seen and examined. Lexiscan EKG portion performed under my supervision. Agree with above findings and recommendations as discussed with me personally. Await nuclear portion of lexiscan stress test.

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D., Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D., Rishi

Emergency Documentation

Document Name:

Result Status:

Performed By:

Authenticated By:

ED Notes

Auth (Verified)

Infantino SCRIBE, Kamryn (11/14/2021 18:35 PST)

[Abed M.D., John; Abed M.D., John (11/14/2021 23:40 PST)];

Infantino SCRIBE, Kamryn (11/14/2021 18:39 PST)

Time Seen:

Abed M.D., John 11/14/2021 18:26

Problem List/Past Medical History

Ongoing/Comorbidities

Acid reflux / Confirmed

Allergic rhinitis / Confirmed

Cardiac ejection fraction / Confirmed

Comments: CARDIAC LV EF 60%

Resolved

No qualifying data

Basic Information

Chief Complaint Per RN

chest pain for the last 30 min, denies cardiac hx

History of Present Illness

Chief complaint: Chest pain

Historian: Patient 75 year old male presents to the ED c/o chest pain. The pt reports with increased pain from his regular chest pain, which comes and goes every so often. The pt reports the pain started earlier today and has progressed. Pt reports that he has a family hx of 3 MI deaths. The pt reports that he is under severe stress due to the family hx, and is very nervous about his chest pain.

Mechanism of injury: Unknown mechanism

Location: Cardio

Quality: Unable to describe

Current Severity: Moderate

Time course onset: Sudden

Time course current symptoms: Unchanged

Associated with: chest pain

Primary Physician: Dr. Alli

Review of Systems

12 point Review of Systems negative except as mentioned in the History of Present Illness. Nursing History reviewed and confirmed by ED provider.

Physical Exam

Vitals & Measurements

T: 97.6 °F (Oral) HR: 62(Monitored) RR: 20 BP: 179/101 SpO2: 97%

WT: 72.6 kg

Constitutional: Vital signs reviewed, patient appears uncomfortable

Head: Exam included findings of head atraumatic, normocephalic

Eyes: No conjunctival injection, sclera normal

ENT: Mucous membranes moist, external ear normal

Neck: Trachea midline, no ecchymosis

Respiratory/Chest: Breath sounds clear, no respiratory distress

Cardiovascular: Regular rate and regular rhythm, heart sounds normal

Abdomen: Abdomen is soft and nontender, no abdominal distension, no masses palpable, no peritoneal signs

COVID-19 Testing/Vaccine Info (Prior to Arrival) as stated by Patient (Subjective)

Covid Vaccine History: 2nd Dose Moderna CV-19 Vaccine Rec'd - 2 or MORE wks ago (Screen for 3rd dose if Immunocompromised) (11/14/21 16:50:00)

COVID-19 Testing Done Prior to Arrival: No (11/14/21 16:50:00)

Procedure/Surgical History

- Cholecystectomy

Medication Administration

Given

aspirin, 324 mg, Chew

nitroglycerin sublingual tab, 0.4 mg, SL

Allergies

REGLAN

Social History

Alcohol

Denies, 08/06/2021

Substance Abuse

Denies, 08/06/2021

Tobacco

Denies, Tobacco Use: Former smoker, quit more than 30 days ago., 08/06/2021

Family History

Migraines: Self.

None: Negative: Self.

Father: History is unknown

Mother: History is unknown

Lab Results

WBC: 4.3 x10(3)/mL Low

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5295168
Patient Type: Observation
Attending: Khan M.D., Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D., Rishi

Emergency Documentation

Genitourinary:

Back:

Upper Extremities: No cyanosis, no edema

Lower Extremities: No cyanosis, no edema

Skin: Skin is warm, dry, and normal color

Lymphatics:

Neurologic: Moves all extremities, no facial asymmetry, speech is normal

Psychiatric: Alert and oriented x3, affect normal

ED Medical Decision Making

ED Medical Decision Making Component

11/14/21 23:38:56

75-year-old male who presents with significant substernal chest pain going on for much of the day. He has had mild bouts of similar in the past but never this bad. He is very hypertensive and has a significant family history of multiple siblings with early MIs. Did not appear to have any acute ST changes on current ECG and his initial troponin was negative. I am quite concerned about possible ACS, patient was given aspirin on arrival, nitroglycerin ordered. Discussed the case with the hospitalist and admission orders were provided. Discussed with the cardiologist who was evaluating the patient.

Signed By: Abed M.D., John

Reevaluation

ED Re-evaluation

11/14/21 18:26:00

Dr. Abed is at the bedside for an evaluation of the patient, to place orders, and to further discuss plan of care. The patient understands and agrees with the plan.

Signed By: Infantino SCRIBE, Kamryn

ED Re-evaluation

11/14/21 16:33:00

FNP-C Bock introduces herself to the pt at ED Lobby for initial evaluation. FNP-C Bock discusses findings and informs the pt she will place orders prior to re-evaluation by another ED Provider. The pt understands and is comfortable with plan for care.

Signed By: Shukla SCRIBE, Harshil

Assessment/Plan

Chest pain
Hypertension

Follow Up

No qualifying data available

RBC: 5.33 x10(6)/mcL
Hgb: 15.6 gm/dL
HCT: 47 %
Platelet: 164 x10(3)/mcL
MCV: 88 fL
MCH: 29.2 pg
MCHC: 33 gm/dL
RDW: 14.3 %
MPV: 9.3 fL
% Neutro: 53 %
% Lymph: 36 %
% Mono: 9 % High
% Eos: 2 %
% Basophil: 1 %
Neutro: 2.3 x10(3)/mcL
Lymph: 1.6 x10(3)/mcL
Mono: 0.4 x10(3)/mcL
Eos: 0.1 x10(3)/mcL
Basophil: 0 x10(3)/mcL
Sodium Lvl: 144 mmol/L
Potassium Lvl: 4.1 mmol/L
Chloride Lvl: 111 mmol/L
CO2: 28 mmol/L
AGAP: 5 mmol/L
Glucose Lvl: 92 mg/dL
BUN: 18 mg/dL
Creatinine Lvl: 1.16 mg/dL
GFR, Estimated: 61 mL/min
Calcium Lvl: 9.1 mg/dL
Troponin I: <0.015
Cholesterol: 148 mg/dL
HDL: 62 mg/dL
LDL: 73 mg/dL
LDL/HDL: 1.2 ratio Low
Triglyceride: 110 mg/dL
Chol/HDLc: 2.4 ratio Low

Diagnostic Results
XR Chest Portable in ER

11/14/21 16:43:43

IMPRESSION:

Mild bibasilar linear opacities, probably atelectasis. Please clinically correlate to exclude pneumonia.

dictated by: Peter Yoo M.D. on 11/14/2021 5:15 PM

Signed By: Yoo M.D., Peter

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5295168
Patient Type: Observation
Attending: Khan M.D.,Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Emergency Documentation

Medication Reconciliation

	What	How Much	When	Instructions
Continue	amLODIPine	5 Milligram Oral	Every day	
Continue	atenolol (atenolol 50 mg oral tablet)	2 tablet Oral	Every day	

EKG Interpretation

11/14/21 21:31:59

ED EKG Interpretation

12 lead EKG interpreted by Emergency Department Physician.
 12 lead EKG shows normal sinus , regular rhythm , with no ectopics , 60 BPM . Conduction normal . ST segments normal . T waves normal . Axis normal . Minimal voltage criteria for LVH, may be normal variant. Cannot rule out inferior infarct, age undetermined.
 Clinical impression: Abnormal EKG.

Interpreted by Dr. Kim at 2126

Signed By: Covarrubias SCRIBE, Victoria

EKG Interpretation

11/14/21 16:56:05

ED EKG Interpretation

12 lead EKG interpreted by Emergency Department Physician.
 12 lead EKG shows normal sinus , regular rhythm , with no ectopics . Conduction normal . ST segments normal . T waves normal . Axis normal . Possible lateral infarct, age undetermined. Cannot rule out inferior infarct, age undetermined.
 Clinical impression: Abnormal EKG.

Interpreted by: Dr. Abed on 11/14/21 at 1657

Comparison to previous EKG:

Signed By: Infantino SCRIBE, Kamryn

Critical Care Time

Time spent providing critical care to this patient was 30 -74 minutes. Total number of minutes spent in direct care of this critically ill patient excluding procedure time.

Disposition

adm

Attestation

All medical record entries made by the Scribe were at my direction and personally dictated by me. I have reviewed the chart and agree that the record accurately reflects my personal performance of the history, physical exam, medical decision making, and emergency department course for this patient. I have also personally directed, reviewed, and agree with the discharge instructions and disposition.

I have personally seen and examined this patient. I have fully participated in this patient's care, including the ordering of all medications and interventions. I have reviewed all pertinent clinical information and agree with the management and disposition of this patient.

Document Name:
 Result Status:
 Performed By:
 Authenticated By:

ED Notes
 Auth (Verified)
 Shukla SCRIBE,Harshil (11/14/2021 16:38 PST)
 Razo M.D.,Paul R.(11/23/2021 01:41 PST); Bock FNP-C,
 Cheryl L.(11/20/2021 15:19 PST)

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D.,Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D.,Rishi

Emergency Documentation

Time Seen:

Bock FNP-C, Cheryl L. 11/14/2021 16:33

History of Present Illness

Chief complaint: CP

Historian: Patient 75 YOM with h/o HTN presents to the ED c/o CP. The pt reports experiencing non-radiating substernal CP with associated SOB for the past couple hours, intermittently radiating to the Lt chest, that he sts feels "like someone standing on his chest". The pt sts his pain "kinda" worsens with exertion. The pt notes he is an M.D. and sts "don't believe all my answers". The pt notes recently increasing his prescribed Atenolol to 200mg. The pt reports allergy to Reglan.

Location: Chest

Quality: "Someone standing on chest"

Time course onset: Couple hours

Time course current symptoms: Unchanged

Associated with: SOB

Exacerbated by: Minor exacerbation with exertion

Relieved by: Denies relief

Primary Physician: Dr.

Review of Systems

12 point Review of Systems negative except as mentioned in the History of Present Illness. Nursing History reviewed and confirmed by ED provider with the exceptions noted.

Physical Exam

Constitutional: Patient appears nontoxic

Head: Exam included findings of head atraumatic, normocephalic

Eyes: No conjunctival injection, sclera normal

ENT: External nose normal

Neck: Trachea midline

Respiratory/Chest: No respiratory distress

Neurologic: No facial asymmetry, speech is normal

Psychiatric: Alert, answers questions appropriately

Reevaluation

ED Re-evaluation

11/14/21 16:33:00

FNP-C Bock introduces herself to the pt at ED Lobby for initial evaluation. FNP-C Bock discusses findings and informs the pt she will place orders prior to re-evaluation by another ED Provider. The pt understands and is comfortable with plan for care.

Signed By: Shukla SCRIBE, Harshil

Assessment/Plan

Chest pain

Hypertension

Problem List/Past Medical History

Ongoing/Comorbidities

Acid reflux / Confirmed

Allergic rhinitis / Confirmed

Cardiac ejection fraction / Confirmed

Comments: CARDIAC LV EF 60%

Resolved

No qualifying data

Procedure/Surgical History

- Cholecystectomy

Allergies

REGLAN

Social History

Alcohol

Denies, 08/06/2021

Substance Abuse

Denies, 08/06/2021

Tobacco

Denies, Tobacco Use: Former smoker, quit more than 30 days ago., 08/06/2021

Family History

Migraines: Self.

None: Negative: Self.

Father: History is unknown

Mother: History is unknown

Lab Results

No Qualifying Results

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Emergency Documentation

Follow Up

No qualifying data available

Medication Reconciliation

	What	How Much	When	Instructions
Continue	atenolol (atenolol 50 mg oral tablet)	1 tablet Oral	Every day	

Attestation

All medical record entries made by the Scribe were at my direction and personally dictated by me. I have reviewed the chart and agree that the record accurately reflects my personal performance of the history, physical exam, medical decision making, and emergency department course for this patient. I have also personally directed, reviewed, and agree with the discharge instructions and disposition.

Document Name: ED Medical Decision Making Component
Result Status: Auth (Verified)
Performed By: Abed M.D.,John (11/14/2021 23:40 PST)
Authenticated By: Abed M.D.,John (11/14/2021 23:40 PST)

75-year-old male who presents with significant substernal chest pain going on for much of the day. He has had mild bouts of similar in the past but never this bad. He is very hypertensive and has a significant family history of multiple siblings with early MIs. Did not appear to have any acute ST changes on current ECG and his initial troponin was negative. I am quite concerned about possible ACS, patient was given aspirin on arrival, nitroglycerin ordered. Discussed the case with the hospitalist and admission orders were provided. Discussed with the cardiologist who was evaluating the patient.

Miscellaneous Patient Care

Document Name: Outside Records
Result Status: Auth (Verified)
Performed By: ToC ,OPSJOB Systemuser (11/16/2021 01:01 PST)
Authenticated By:

You have been sent a Continuity of Care Document from SAN ANTONIO REGIONAL HOSPITAL

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Note: This is not a monitored email address. If you have received this email in error, please do not reply to this email but contact SAN ANTONIO REGIONAL HOSPITAL.

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5295168
Patient Type: Observation
Attending: Khan M.D.,Mansurur R.
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Coding Documentation

Document Name: Coding Summary
Result Status: Transcribed
Performed By:
Authenticated By:

CODING DATE: 11/23/2021 FINAL
SAN ANTONIO REGIONAL HOSPITAL

DSCH STATUS:
01 Discharged to Home or Self Care

PAYOR:
PPO

APC DESCRIPTION
5521 Level 1 Imaging without Contrast
5593 Level 3 Nuclear Medicine and Related Services
5025 Level 5 Type A ED Visits
5573 Level 3 Imaging with Contrast

ADMIT DX:

REASON FOR VISIT DX:
R07.9 Chest pain, unspecified

FINAL DX:
PRINCIPAL:
R07.89 Other chest pain

SECONDARY:
I10 Essential (primary) hypertension
R06.02 Shortness of breath
K21.9 Gastro-esophageal reflux disease without esophagitis
R00.2 Palpitations
Z87.891 Personal history of nicotine dependence
Z82.49 Family history of ischemic heart disease and other diseases of the circulatory system
Z23 Encounter for immunization

PYMT
PROC APC STAT DESCRIPTION DOCTOR NAME DATE
36415 Collection of venous 11/14/2021

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Coding Documentation		
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71045 5521	blood by venipuncture Radiologic examination, chest; single view	11/14/2021
78452 5593	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or	11/14/2021
80048	Basic metabolic panel (Calcium, total) This	11/14/2021
	panel must include the following: Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea nitrogen (BUN) (84520)	
80061	Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718) Triglycerides (84478)	11/14/2021
84484	Troponin, quantitative	11/14/2021
85025	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count	11/14/2021

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Coding Documentation		
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87426	Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute resp	11/14/2021
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid)	11/14/2021
90472	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination	11/14/2021
	vaccine/toxoid) (List separately in addition to code for primary procedure)	
90686	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use	11/14/2021
90732	Pneumococcal polysaccharide vaccine, 23-valent (PPSV23),	11/14/2021

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
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Coding Documentation

93017	adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use	11/14/2021
99285 5025	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; tracing only, without interpretation and report	11/14/2021
25	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components within the constraints imposed by the urgency of the patient's clinical condition and/or mental status: A comprehensive history; A comprehensi	
CS	Significant, Separately Identifiable Evaluation and	
A9500	Cost share waiver covid-19	11/14/2021
C8929 5573	Tc99m sestamibi	11/14/2021
J2785	TTE w or wo fol wcon, doppler	11/14/2021
	Regadenoson injection	11/14/2021

San Antonio Regional Hospital

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Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
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Coding Documentation

NOTE: The code number assigned matches the documented diagnosis and / or procedure in the patient's chart. However, the narrative phrase printed from the coding software may appear abbreviated, or result in slightly different terminology.

Coded By: Hilvano , Francisco T
Date Saved: 11/23/2021 12:34

Nuclear Medicine Notes

* Auth (Verified) *

 **SAN ANTONIO REGIONAL HOSPITAL** Nuclear Medicine Department

Exam: MPI
 Camera: SYMBIA

Room: 310
 Name: **HANNA MD, ADEL SHAKER**
 DOB: 03/29/1946 75 Years
 Attn: Khan M.D., Mansurur
 MRN: 918505 FIN: 5295168
 STAT

Isotope: ^{99m}Tc SESTAMIBI
 Amount: Rest 10.6 mCi
 Stress: 32.8 mCi
 Stress Agent: LEXISCAN

Rx# 216199
 Date Ordered: 11Nov2021
 Date/Time Processed: 15Nov2021 02:20 PT
SAN ANTONIO REGIONAL
 999 SAN BERNARDINO RD
 UPLAND CA 91786-4920
 1 - WKDY 0401 Run 1 - San Antonio
Patient: Per Physician Order
 Product: Tc-99m Sestamibi Unit Dose (CH)
 Disp Amt: 21.24 mCi
 Calibration: 15Nov2021 11:00 PT
 Administer Intravenously Store at Controlled Room Temp
 Indication: **Cardiac Imaging**
 Dispense Date: 15Nov2021 Lot#: K21319-0022 Price(cat): N/A
 Use By: 15Nov2021 20:20 PT Physician: PHILIP EATON NPT: Per Physician Order
 Notes: NDC: RPh: R.Bellizzi

Physician: L CHAN
 Medications: SEE EMR
 Pregnant: NA
 Inpatient: Outpatient:
 Morse Falls: D/C Pending:

Tc99m
 10.66mCi 07:11 Mon Nov 15 21

History:
CHEST PAIN
HTN
SOB
PALPITATION
NO CARDIAC
FAMILY HX OF CAD
 Previous Infarct NO
 Previous Cardiolite ?
 Post Angioplasty NO
 Post Angiogram NO
 Previous CABG NO
 Angina CHEST PAIN

Rx# 216403
 Date Ordered: 11Nov2021
 Date/Time Processed: 15Nov2021 07:29 PT
SAN ANTONIO REGIONAL
 999 SAN BERNARDINO RD
 UPLAND CA 91786-4920
 2 - WKDY 0831 Run 2 - San Antonio
Patient: Per Physician Order
 Product: Tc-99m Sestamibi Unit Dose (CH)
 Disp Amt: 27.47 mCi
 Calibration: 15Nov2021 14:00 PT
 Administer Intravenously Store at Controlled Room Temp
 Indication: **Cardiac Imaging**
 Dispense Date: 15Nov2021 Lot#: K21319-0044 Price(cat): N/A
 Use By: 16Nov2021 01:29 PT Physician: PHILIP EATON NPT: M.Hancock
 Notes: NDC: RPh: R.Bellizzi

Tc99m
 32.8mCi 10:29 Mon Nov 15 21



San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
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DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Diagnostic Radiology

Exam: XR Chest Portable in ER
Accession Number: XR-21-0078183
Exam Date/Time: 11/14/2021 16:48 PST
Ordering Provider: Ernst M.D.,Steven B.

Report: CHEST, ONE VIEW, PORTABLE AT 1646 HOURS

Clinical History: Chest pain

Comparison: August 12, 2021

Findings: The cardiomediastinal silhouette is within normal limits. Mild bibasilar linear opacities. There is no pleural abnormality.

IMPRESSION:

Mild bibasilar linear opacities, probably atelectasis. Please clinically correlate to exclude pneumonia.

dictated by: Peter Yoo M.D. on 11/14/2021 5:15 PM

***** Final Report *****

Dictated: 11/14/2021 17:15 Yoo M.D., Peter

Electronically signed: 11/14/2021 17:25
Provider: Yoo M.D., Peter

Nuclear Medicine

Exam: NM Myocardial Perf Multi Rest/Stress
Accession Number: NM-21-0002757
Exam Date/Time: 11/15/2021 13:39 PST
Ordering Provider: Chan D.O.,Larry

Report: NM Myocardial Perf Multi Rest/Stress

Referring Name: Larry Chan

Clinical history: 75-year-old male being evaluated for chest pain.

Comparison: None

Isotopes: 10.6 mCi of Technetium-99m sestamibi (Cardiolite) was injected for the rest study. An additional 32.8 mCi of Tc99m sestamibi (Cardiolite) was injected for the stress study.

Stress Agent: Lexiscan

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5295168
Patient Type: Observation
Attending: Khan M.D.,Mansurur R.
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Nuclear Medicine

Report

EJECTION FRACTION: 90% (NORMAL: >50% (females); >45% (males))
END-DIASTOLIC VOLUME: 54 mL (NORMAL: <100 mL (females); <142 mL (males))
END-SYSTOLIC VOLUME: 5 mL (NORMAL: <42 mL (females); <65 mL (males))

PERFUSION IMAGING: Left ventricular stress images demonstrate distribution of activity in left ventricular walls appearing within normal limits. Rest images demonstrate no significant change in distribution of activity.

WALL MOTION: Left ventricular stress wall motion appear within normal limits.

IMPRESSION: Left ventricular perfusion activity appears within normal limits. Left ventricular stress ejection fraction calculated at greater than 70%% with left ventricular stress wall motion normal in appearance.

dictated by: Jeffrey G Karst M.D. on 11/15/2021 1:58 PM

***** Final Report *****

Dictated: 11/15/2021 13:58 Karst M.D., Jeffrey Gerald

Electronically signed: 11/15/2021 14:08

Provider: Karst M.D., Jeffrey Gerald

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Hematology/Coagulation

Legend: c=Corrected, *=Abnormal, C=Critical, L=Low, H=High, f=Footnote, ^=Interp Data, R=Result Comment

Collected Dt/Tm	Procedure	Result	Reference Range	Units	Verified Dt/Tm
11/15/2021 06:35 PST	% Neutro	45	[45-76]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	% Lymph	41	[6-42]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	% Mono	8	[3-8]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	% Eos	5	[0-8]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	% Basophil	1	[0-1]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	# Neutro	1.7 ^L	[1.8-7.0]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	# Lymph	1.6	[1.2-4.0]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	# Mono	0.3	[0.0-0.8]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	# Eos	0.2	[0.0-0.6]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	# Basophil	0.0	[0.0-0.0]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	WBC	3.8 ^L	[4.4-9.1]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	RBC	5.50 ^H	[4.60-5.40]	x10(6)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	Hgb	15.8	[13.6-16.3]	gm/dL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	HCT	49	[36-55]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	Platelet	147 ^L	[150-450]	x10(3)/mcL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	MCV	89	[80-99]	fL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	MCH	28.7	[28.3-31.1]	pg	11/15/2021 07:03 PST
11/15/2021 06:35 PST	MCHC	32	[30-36]	gm/dL	11/15/2021 07:03 PST
11/15/2021 06:35 PST	RDW	14.2	[11.1-14.7]	%	11/15/2021 07:03 PST
11/15/2021 06:35 PST	MPV	9.4	[7.4-10.4]	fL	11/15/2021 07:03 PST
11/14/2021 17:20 PST	% Neutro	53	[45-76]	%	11/14/2021 17:36 PST

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Hematology/Coagulation

Legend: c=Corrected, *=Abnormal, C=Critical, L=Low, H=High, f=Footnote, ^=Interp Data, R=Result Comment

Collected Dt/Tm	Procedure	Result	Reference Range	Units	Verified Dt/Tm
11/14/2021 17:20 PST	% Lymph	36	[6-42]	%	11/14/2021 17:36 PST
11/14/2021 17:20 PST	% Mono	9 ^H	[3-8]	%	11/14/2021 17:36 PST
11/14/2021 17:20 PST	% Eos	2	[0-8]	%	11/14/2021 17:36 PST
11/14/2021 17:20 PST	% Basophil	1	[0-1]	%	11/14/2021 17:36 PST
11/14/2021 17:20 PST	# Neutro	2.3	[1.8-7.0]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	# Lymph	1.6	[1.2-4.0]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	# Mono	0.4	[0.0-0.8]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	# Eos	0.1	[0.0-0.6]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	# Basophil	0.0	[0.0-0.0]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	WBC	4.3 ^L	[4.4-9.1]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	RBC	5.33	[4.60-5.40]	x10(6)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	Hgb	15.6	[13.6-16.3]	gm/dL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	HCT	47	[36-55]	%	11/14/2021 17:36 PST
11/14/2021 17:20 PST	Platelet	164	[150-450]	x10(3)/mcL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	MCV	88	[80-99]	fL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	MCH	29.2	[28.3-31.1]	pg	11/14/2021 17:36 PST
11/14/2021 17:20 PST	MCHC	33	[30-36]	gm/dL	11/14/2021 17:36 PST
11/14/2021 17:20 PST	RDW	14.3	[11.1-14.7]	%	11/14/2021 17:36 PST
11/14/2021 17:20 PST	MPV	9.3	[7.4-10.4]	fL	11/14/2021 17:36 PST

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Chemistry

Legend: c=Corrected, *=Abnormal, C=Critical, L=Low, H=High, f=Footnote, ^=Interp Data, R=Result Comment

Collected Dt/Tm	Procedure	Result	Reference Range	Units	Verified Dt/Tm
11/15/2021 06:35 PST	Troponin I	<0.015 ^{01 *1}	[0.000-0.045]	ng/mL	11/15/2021 08:27 PST
11/14/2021 20:43 PST	Cholesterol	148 ⁰²	[0-200]	mg/dL	11/14/2021 21:40 PST
11/14/2021 20:43 PST	HDL	62 ^{02 *2}		mg/dL	11/14/2021 21:40 PST
11/14/2021 20:43 PST	LDL	73 ^{02 *3}		mg/dL	11/14/2021 21:40 PST
11/14/2021 20:43 PST	LDL/HDL	1.2 ^{L 02}	[2.5-3.8]	ratio	11/14/2021 21:40 PST
11/14/2021 20:43 PST	Triglyceride	110 ^{02 *4}	[<=149]	mg/dL	11/14/2021 21:40 PST
11/14/2021 20:43 PST	Chol/HDLc	2.4 ^{L 02}	[4.0-6.0]	ratio	11/14/2021 21:40 PST
11/14/2021 20:43 PST	Troponin I	<0.015 ^{03 *1}	[0.000-0.045]	ng/mL	11/14/2021 21:17 PST
11/14/2021 17:20 PST	Troponin I	<0.015 ^{04 *1}	[0.000-0.045]	ng/mL	11/14/2021 17:55 PST
11/14/2021 17:20 PST	GFR,Estimated	61 ^{^5}	[>=60]	mL/min	11/14/2021 18:01 PST
11/14/2021 17:20 PST	Sodium Lvl	144	[134-146]	mmol/L	11/14/2021 18:01 PST
11/14/2021 17:20 PST	Potassium Lvl	4.1	[3.3-5.2]	mmol/L	11/14/2021 18:01 PST
11/14/2021 17:20 PST	Chloride Lvl	111	[99-113]	mmol/L	11/14/2021 18:01 PST
11/14/2021 17:20 PST	CO2	28	[21-32]	mmol/L	11/14/2021 18:01 PST
11/14/2021 17:20 PST	AGAP	5	[5-15]	mmol/L	11/14/2021 18:01 PST
11/14/2021 17:20 PST	Glucose Lvl	92 ^{^6}	[60-100]	mg/dL	11/14/2021 18:01 PST
11/14/2021 17:20 PST	BUN	18	[6-22]	mg/dL	11/14/2021 18:01 PST
11/14/2021 17:20 PST	Creatinine Lvl	1.16 ^{^4}	[0.70-1.30]	mg/dL	11/14/2021 18:01 PST
11/14/2021 17:20 PST	Calcium Lvl	9.1 ^{^7}	[8.0-10.3]	mg/dL	11/14/2021 18:01 PST

Order Comments

O1: Troponin I

Second followup Troponin ordered by Discern rule based on IBEX order.

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 DOB/Age/Sex: 3/29/1946 76 years Male
FIN: 5295168 Admit/Disch: 11/14/2021 11/15/2021
Patient Type: Observation Admitting: Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Chemistry

Legend: c=Corrected, *=Abnormal, C=Critical, L=Low, H=High, f=Footnote, ^=Interp Data, R=Result Comment

Order Comments

- O2: Lipid Profile
no extra poke, may change to am
- O3: Troponin I
First followup Troponin ordered by Discern rule based on IBEX order.
- O4: Troponin I
Initial Stat Troponin ordered by Discern rule based on IBEX order.

Interpretive Data

- ^1: Troponin I
NOTE:
Myocardial infarction should be diagnosed according to the Universal Definition of Myocardial Infarction (ESC/ACC J Am Coll Cardiology 2007:50:2173-2195). These criteria require troponin (cTN) elevations above the 99th percentile of a normal reference population in conjunction with clinical findings of ischemia: i.e. chest pain of at least 20 minutes duration, ECG changes of ischemia, development of pathologic Q waves, loss of myocardium by imaging, regional wall motion abnormalities, rising or falling cTN values. Detectable cardiac troponin levels indicate myocardial muscle damage. About 50% of these elevations reflect ischemic heart disease, either infarction, unstable angina or stable angina. However, renal failure, heart failure, cardiomyopathy, myocarditis, atrial fibrillation, tachycardia, pulmonary embolism and other conditions must also be considered. Thus, troponin elevations must be correlated with the overall clinical findings.

This assay employs the Siemens Dimension VISTA CTNI methodology using a homogeneous sandwich chemiluminescent immunoassay based on LOCI(R) Technology. Troponin I values obtained with other assay methods cannot be used interchangeably.

- ^2: HDL
HDL REF. RANGE: Desirable > 40 mg/dl

Falsely depressed results may occur on samples drawn from patients receiving Metamizole.

- ^3: LDL
Desirable for CHD and
- | | |
|-----------------------------|------------|
| CHD risk equivalents: | <100 mg/dL |
| Multiple Risk Factors (2+): | <130 mg/dL |
| 0-1 Risk Factors: | <160 mg/dL |

- ^4: Creatinine Lvl, Triglyceride
Falsely depressed results may occur on samples drawn from patients receiving N-Acetylcysteine (NAC) or Metamizole.

- ^5: GFR, Estimated
eGFR result reported in ml/min/1.73m³. If patient is African-American, please multiply the result by 1.210. Stable creatinine presumed. Ignore eGFR in dialysis patients. Interpret with caution in patients with acute renal failure.

- ^6: Glucose Lvl
Reference Ranges:

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Chemistry

Legend: c=Corrected, *=Abnormal, C=Critical, L=Low, H=High, f=Footnote, ^=Interp Data, R=Result Comment

Interpretive Data

^6: Glucose Lvl

	Fasting	Oral GTT (2HR)
NORMAL	<100 mg/dl	<140 mg/dl
PREDIABETES	>100 to <126 mg/dl	>140 to <200 mg/dl
DIABETES	>126 mg/dl	>200 mg/dl

American Diabetes Association "Diagnosis and Classification of Diabetes Mellitus"
Diabetes Care, Volume 36, Supplement 1, January 2013

All pregnant patients not known to be diabetic should be tested with the 75 gram OGTT between 24 and 28 weeks gestation.

^7: Calcium Lvl

Reference Range: 8.0-10.3 mg/dL

Interpretive Guide

Normal Parathyroid	Normal
Hypoparathyroidism	Low
Hyperparathyroidism	
Primary	High
Secondary	Normal or Low
Tertiary	High
Non-Parathyroid	
Hypercalcemia	High

Point of Care Testing

Legend: c=Corrected, *=Abnormal, C=Critical, L=Low, H=High, f=Footnote, ^=Interp Data, R=Result Comment

	Collected Date	Collected Time
	11/14/2021	23:55 PST
Procedure	Units	Reference Range
COVID-19/Veritor POC		Presumptive Negative ^{®B}

Interpretive Data

^8: COVID-19/Veritor POC

PRINCIPLES OF THE PROCEDURE The BD Veritor System for Rapid Detection of SARS-CoV-2 is an antigen test designed to detect proteins from the virus that causes COVID-19 in respiratory specimens obtained from nasal swabs.

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

***Nursing Discharge/Transfer Summary (Required) Entered On: 11/15/2021 17:00 PST**
Performed On: 11/15/2021 16:59 PST by Dionisio RN, Rexie T

Discharge Information

Post Hospital Caregiver Contact Info : Not obtained, Patient denies

Post Hosp Caregiver Contacted RE Disch : Yes

Discharge Contact : Yes

Discharge Contact #1 Name : Irma Kawaguchi 909-374-7216

Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Readiness for Discharge

Discharge Readiness Criteria : Alert, oriented, and able to care for self at home

Spokesperson Notified of Discharge : Yes

Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Post Stent Readiness for Discharge

Post Stent Medication Information Needed : N/A

Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Oral Methotrexate Discharge Education

Patient taking Oral Methotrexate? : No

Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Discharge Belongings

Previous Belongings Sec Envelope Admit : No Belongings Sent to Security Envelope upon Admit

Previous Pt Belongings at Admit : Belongings in Patient's Possession upon Admit: Shoes, Shirt, Pants, Cell Phone (Biomed Contacted), Necklace, Wallet, Money (Amount), Eyeglasses, Comments: 1 x 100.00

2 x 5.00

3 X 1.00

Gutierrez RN, Roseanne M-11/15/21 06:30:00

Belongings in Patient's Possession upon Admit: Other: eyeglasses,shoes,pants,shirt,
Allee CNA, Erica J-11/15/21 06:30:00

Belongings in Patient's Possession upon Admit: Shoes, Shirt, Pants, Cell Phone (Biomed Contacted), Necklace, Wallet,
Money (Amount), Eyeglasses, Comments: 1 x 100.00

2 x 5.00

3 X 1.00

Gutierrez RN, Roseanne M-11/15/21 06:30:00

Medications Sent to Pharmacy : No Patient Medications Sent To Pharmacy upon Admit

Belonging Condition Satisfactory Discharge : Yes

Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Education

Responsible Learner/s Present : No Data Available

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Home Caregiver Present for Session : No
Barriers to Learning : None evident
Prefd Language for Education Leaflets : English
Teaching Method : Demonstration, Explanation, Printed materials
Prefd Language for Discharge Instruction : English
Depart Instructions : Yes - patient/family/caregiver verbalizes understanding of instructions given
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Post-Hospital Education Adult Grid
Importance of Follow-Up Visits : Verbalizes understanding
Pain Management : Verbalizes understanding
When to Call Healthcare Provider : Verbalizes understanding
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Health Maintenance Education Adult Grid
Diet/Nutrition : Verbalizes understanding
Exercise : Verbalizes understanding
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Medication Education Adult Grid
Med Generic/Brand Name, Purpose, Action : Verbalizes understanding
Safety, Medication : Verbalizes understanding
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Safety Education Newborn Grid
Safety, Fall : Verbalizes understanding
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

DC Information
Discharged to : Home with family care
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Ticket to Ride Entered On: 11/15/2021 8:29 PST
Performed On: 11/15/2021 8:28 PST by Dionisio RN, Rexie T

Transport Prep

Code Status during Transport : Full resuscitation
ID Band Checked : Correct name, Correct MRN/FIN Number
Isolation Precautions : Standard
Transport Documentation : Fall precautions
Transferring Unit : 3V
Receiving Unit : Nuclear Med
Patient Able to Give Consent : Yes
Surrogate Decision Maker Name : Irma Kawaguchi 909-374-7216
Intrahospital Transfer Mode : Bed
Drains / Tubes : None
Implantable Devices : None

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Patient Can Tolerate All Positions : Standing, Lying on right side, Lying on left side
Dionisio RN, Rexie T - 11/15/2021 8:28 PST
(As Of: 11/15/2021 16:40:41 PST)

Allergies (Active)

REGLAN
Estimated Onset Date: Unspecified ; *Created By:*
CONTRIBUTOR_SYSTEM ; *Reaction Status:* Active ;
Substance: REGLAN ; *Updated By:*
CONTRIBUTOR_SYSTEM ; *Reviewed Date:* 11/14/2021 16:33
PST

Mobility Level

Mobility Level : Mobility Level 1
Dionisio RN, Rexie T - 11/15/2021 8:28 PST

Transport Send

Pain Med Given Within the Last One Hour : No
Patient Stable for Transport : Yes
IV(s) Patent : Yes
Level of Consciousness : Awake
Orientation : Oriented to person, Oriented to place, Oriented to time, Follows commands
Suicidal Ideation : No
RN Name from Sending Unit : Dionisio RN, Rexie T
Transporter name : Garcia , Roberto C
Departure Time Unit : 11/15/2021 08:29 PST
Surrogate Decision Maker : Named by patient to make medical decisions
Surrogate Decision Maker Name : Irma Kawaguchi 909-374-7216
Dionisio RN, Rexie T - 11/15/2021 8:28 PST

Return to Unit

RN Name From Receiving Unit : Dionisio RN, Rexie T
Time Returned to Patient Room : 11/15/2021 08:50 PST
Transfer Mode on Return : Wheelchair
Patient Condition on Return : Stable
Dionisio RN, Rexie T - 11/15/2021 16:40 PST

Basic Admission Information Entered On: 11/15/2021 6:44 PST
Performed On: 11/15/2021 6:30 PST by Allee CNA, Erica J

Vital Signs

Temperature Temporal Artery : 97.1 degF(Converted to: 36.2 degC) (LOW)
Heart Rate Monitored : 94 bpm (HI)
Respiratory Rate : 20 br/min
Systolic Blood Pressure : 144 mmHg (HI)
Diastolic Blood Pressure : 89 mmHg

Report ID: 127045218

Print Date/Time: 2/24/2023 16:04 PST
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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Mean Arterial Pressure, Cuff: 107 mmHg
SpO2: 96 %
Oxygen Therapy: Room air

Allee CNA, Erica J - 11/15/2021 6:41 PST

Height/Weight

Height/Length: 169 cm(Converted to: 5 ft 7 inch, 5.54 ft, 66.54 inch)
Weight: 69.5 kg(Converted to: 153 lb 4 oz, 153.221 lb)
Body Mass Index: 24

Allee CNA, Erica J - 11/15/2021 6:41 PST

Admit Belongings

Belongings in Patient's Possession: Other: eyeglasses,shoes,pants,shirt,
Patient Instructions of Belongings: Do not leave containers or belongings in bed or on meal tray, Advised that hospital staff cannot watch belongings, Advised that hospital staff is not responsible for damages or losses, Advised to send belongings home, Advised to send valuables (i.e. money, credit cards) to Security

Allee CNA, Erica J - 11/15/2021 6:41 PST

Safety

Patient Safety: All monitor alarms on and settings verified, Tele monitor and room number verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, ID band check, Non-Slip footwear, Personal items within reach, Side rails up x2, Traffic path in room free of clutter, Wheels locked, Patient is NPO

Allee CNA, Erica J - 11/15/2021 6:41 PST

***Pre-Discharge Screening (Required) Entered On: 11/15/2021 16:59 PST**
Performed On: 11/15/2021 16:59 PST by Dionisio RN, Rexie T

Hi Risk Infection (MRSA) DC Screening

Patient MRSA Positive This Visit: Not tested this visit
High Risk Infection Criteria on Disch: None

Dionisio RN, Rexie T - 11/15/2021 16:59 PST

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Vaccines Given Prior to Discharge Entered On: 11/15/2021 16:59 PST
Performed On: 11/15/2021 16:59 PST by Dionisio RN, Rexie T

Vaccines Given Prior to Discharge

Vaccines Given Prior to Discharge : Yes

Vaccines Given Prior to Disch Comments : Influenza and Pneumonia vaccines given prior to discharge
Dionisio RN, Rexie T - 11/15/2021 16:59 PST

Admission History Adult Entered On: 11/15/2021 6:40 PST
Performed On: 11/15/2021 6:30 PST by Gutierrez RN, Roseanne M

General Info

Preferred Name : Adel Hanna
Admitted From : Emergency department
Mode of Arrival : Gurney
Reason for Admission : Medical treatment
Information Given By : Patient
Preferred Communication Mode : Verbal
Preferred Language : English
Prefd Language for Discharge Instruction : English
Pregnancy Status : N/A
Prefd Language for Education Leaflets : English
Condition H Education : Yes, left at bedside

Gutierrez RN, Roseanne M - 11/15/2021 6:36 PST

Allergy

(As Of: 11/15/2021 06:40:40 PST)

Allergies (Active)

REGLAN

Estimated Onset Date: Unspecified ; *Created By:*
CONTRIBUTOR_SYSTEM ; *Reaction Status:* Active ;
Substance: REGLAN ; *Updated By:*
CONTRIBUTOR_SYSTEM ; *Reviewed Date:* 11/14/2021 16:33
PST

Initial Screenings & Oncologic

Pt Admitted with Current or Possible Fx : No
COVID-19 Testing Done Prior to Arrival : No
Anesthesia/Transfusions : No prior transfusion, Prior anesthesia
Family Anesthesia Reaction : No

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Medical Devices : None
MRI/MRA First Screening, Patient History Includes : None
Is this an Oncology patient? : No
Is This an Active Cancer? : No

Gutierrez RN, Roseanne M - 11/15/2021 6:36 PST

Advance Directive

Agent Name and Number : Irma Kawaguchi (wife) 909-374-7216

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Advanced Directives : Yes

Advance Directive Location : Family to bring in copy from home

Gutierrez RN, Roseanne M - 11/15/2021 6:36 PST

Admission Medication Reconciliation

Medication Reconciliation completed : No

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Medication List

(As Of: 11/15/2021 06:55:26 PST)

Normal Order

regadenoson 0.4 mg/5 mL Inj Soln : regadenoson 0.4 mg/5 mL Inj Soln ; *Status:* Ordered ; *Ordered As Mnemonic:* Lexiscan injection ; *Simple Display Line:* 0.4 mg, 5 mL, IV Push, Once ; *Ordering Provider:* Chan D.O., Larry ; *Catalog Code:* regadenoson ; *Order Dt/Tm:* 11/14/2021 23:50:59 PST

Aspirin 81mg Chew Tab : Aspirin 81mg Chew Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* aspirin ; *Simple Display Line:* 81 mg, 1 tab, PO, Daily ; *Ordering Provider:* Talwar M.D., Rishi ; *Catalog Code:* aspirin ; *Order Dt/Tm:* 11/14/2021 21:03:22 PST

Atorvastatin 40mg Tab : Atorvastatin 40mg Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* Lipitor ; *Simple Display Line:* 40 mg, 1 tab, PO, Daily ; *Ordering Provider:* Talwar M.D., Rishi ; *Catalog Code:* atorvastatin ; *Order Dt/Tm:* 11/14/2021 21:03:29 PST

amLODIPine 5mg Tab : amLODIPine 5mg Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* amLODIPine ; *Simple Display Line:* 10 mg, 2 tab, PO, Daily ; *Ordering Provider:* Chan D.O., Larry ; *Catalog Code:* amLODIPine ; *Order Dt/Tm:* 11/14/2021 23:45:11 PST

Losartan 25mg Tab : Losartan 25mg Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* losartan ; *Simple Display Line:* 25 mg, 1 tab, PO, Daily ; *Ordering Provider:* Chan D.O., Larry ; *Catalog Code:* losartan ; *Order Dt/Tm:* 11/14/2021 23:45:06 PST

Labetalol 5mg/mL IV Soln : Labetalol 5mg/mL IV Soln ; *Status:* Ordered ; *Ordered As Mnemonic:* labetalol injection ; *Simple Display Line:* 10 mg, 2 mL, IV Push, Q1hr, PRN: other (see comment) ; *Ordering*

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Provider: Talwar M.D., Rishi; *Catalog Code:* labetalol ; *Order Dt/Tm:* 11/14/2021 21:07:04 PST ; *Comment:* to keep SBP less than ____160

Acetaminophen 500mg Tab : Acetaminophen 500mg Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* Tylenol ; *Simple Display Line:* 500 mg, 1 tab, PO, Q4hr, PRN: fever ; *Ordering Provider:* Talwar M.D., Rishi; *Catalog Code:* acetaminophen ; *Order Dt/Tm:* 11/14/2021 21:03:37 PST ; *Comment:* Total Acetaminophen NOT TO EXCEED 4000mg/24hrs

Acetaminophen 500mg Tab : Acetaminophen 500mg Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* Tylenol ; *Simple Display Line:* 500 mg, 1 tab, PO, Q4hr, PRN: pain (mild) ; *Ordering Provider:* Talwar M.D., Rishi; *Catalog Code:* acetaminophen ; *Order Dt/Tm:* 11/14/2021 21:03:22 PST ; *Comment:* Total Acetaminophen NOT TO EXCEED 4000mg/24hrs

Aspirin 81mg Chew Tab : Aspirin 81mg Chew Tab ; *Status:* Completed ; *Ordered As Mnemonic:* aspirin ; *Simple Display Line:* 162 mg, 2 tab, PO, Once ; *Ordering Provider:* Talwar M.D., Rishi; *Catalog Code:* aspirin ; *Order Dt/Tm:* 11/14/2021 21:03:21 PST ; *Comment:* (if not allergic). Chew tablet. If not done in ED.

Docusate sodium 100mg Cap : Docusate sodium 100mg Cap ; *Status:* Ordered ; *Ordered As Mnemonic:* Colace ; *Simple Display Line:* 100 mg, 1 cap, PO, BID, PRN: constipation ; *Ordering Provider:* Talwar M.D., Rishi; *Catalog Code:* docusate ; *Order Dt/Tm:* 11/14/2021 21:03:29 PST

LORazepam 0.5mg Tab : LORazepam 0.5mg Tab ; *Status:* Ordered ; *Ordered As Mnemonic:* Ativan ; *Simple Display Line:* 0.5 mg, 1 tab, PO, Q8hr, PRN: anxiety ; *Ordering Provider:* Talwar M.D., Rishi; *Catalog Code:* LORazepam ; *Order Dt/Tm:* 11/14/2021 21:03:30 PST

Morphine 10mg/mL Inj Soln - 1mL : Morphine 10mg/mL Inj Soln - 1mL ; *Status:* Ordered ; *Ordered As Mnemonic:* morphine injection ; *Simple Display Line:* 2 mg, 0.2 mL, IV Push, Q5min, PRN: chest pain ; *Ordering Provider:* Talwar M.D., Rishi; *Catalog Code:* morphine ; *Order Dt/Tm:* 11/14/2021 21:03:22 PST ; *Comment:* Give Q5 min as needed up to a MAXIMUM of 4 mg per episode. Call Physician if chest pain unrelieved

Naloxone 0.4mg/mL Inj Sol : Naloxone 0.4mg/mL Inj Sol ; *Status:* Ordered ; *Ordered As Mnemonic:* Narcan ; *Simple Display Line:* 0.4 mg, 1 mL, IV

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505
FIN: 5295168
Patient Type: Observation
Attending: Khan M.D., Mansurur R.
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D., Rishi

Admit/Discharge/Transfer Forms

Push, Once, PRN: opioid respiratory depression ; Ordering Provider: Talwar M.D., Rishi; Catalog Code: naloxone ; Order Dt/Tm: 11/14/2021 21:03:37 PST ; Comment: Notify Provider if medication is administered

Naloxone 1mg/mL Inj Sol - 2mL : Naloxone 1mg/mL Inj Sol - 2mL ; Status: Ordered ; Ordered As Mnemonic: Narcan ; Simple Display Line: 0.1 mg, 0.1 mL, IV Push, Q2min, PRN: opioid oversedation ; Ordering Provider: Talwar M.D., Rishi; Catalog Code: naloxone ; Order Dt/Tm: 11/14/2021 21:03:37 PST ; Comment: Notify Provider if medication is administered

Nitroglycerin 0.4mg Sublingual Tab : Nitroglycerin 0.4mg Sublingual Tab ; Status: Ordered ; Ordered As Mnemonic: nitroglycerin sublingual tab ; Simple Display Line: 0.4 mg, 1 tab, SL, As directed, PRN: chest pain ; Ordering Provider: Talwar M.D., Rishi; Catalog Code: nitroglycerin ; Order Dt/Tm: 11/14/2021 21:03:26 PST ; Comment: Give Q5min up to MAXIMUM of 3 doses per episode. Do not give if SBP less than 100

Ondansetron 2mg/mL Inj Sol - 2mL : Ondansetron 2mg/mL Inj Sol - 2mL ; Status: Ordered ; Ordered As Mnemonic: Zofran injection ; Simple Display Line: 4 mg, 2 mL, IV Push, Q6hr, PRN: nausea/vomiting ; Ordering Provider: Talwar M.D., Rishi; Catalog Code: ondansetron ; Order Dt/Tm: 11/14/2021 21:03:30 PST

Temazepam 15mg Cap : Temazepam 15mg Cap ; Status: Ordered ; Ordered As Mnemonic: Restoril ; Simple Display Line: 15 mg, 1 cap, PO, QHS, PRN: insomnia ; Ordering Provider: Talwar M.D., Rishi; Catalog Code: temazepam ; Order Dt/Tm: 11/14/2021 21:03:34 PST ; Comment: May repeat x1

Nitroglycerin 0.4mg Sublingual Tab : Nitroglycerin 0.4mg Sublingual Tab ; Status: Discontinued ; Ordered As Mnemonic: nitroglycerin sublingual tab ; Simple Display Line: 0.4 mg, 1 tab, SL, Q5min, PRN: chest pain ; Ordering Provider: Abed M.D., John; Catalog Code: nitroglycerin ; Order Dt/Tm: 11/14/2021 18:35:19 PST

Aspirin 81mg Chew Tab : Aspirin 81mg Chew Tab ; Status: Completed ; Ordered As Mnemonic: aspirin ; Simple Display Line: 324 mg, 4 tab, Chew, Once ; Ordering Provider: Ernst M.D., Steven B.; Catalog Code: aspirin ; Order Dt/Tm: 11/14/2021 16:35:01 PST ; Comment: If not allergic, and if not received within 24 hrs after the onset of chest pain

San Antonio Regional Hospital

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Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Home Meds

amLODIPine : amLODIPine ; Status: Documented ; Ordered As Mnemonic:
amLODIPine ; Simple Display Line: 5 mg, PO, Daily, 0
Refill(s) ; Catalog Code: amLODIPine ; Order Dt/Tm:
11/14/2021 17:00:32 PST

atenolol : atenolol ; Status: Documented ; Ordered As Mnemonic:
atenolol 50 mg oral tablet ; Simple Display Line: 100 mg, 2 tab,
PO, Daily ; Catalog Code: atenolol ; Order Dt/Tm: 6/12/2012
21:36:35 PDT

International Travel Screening

Recent International Travel by Patient : No travel outside US in last 21 days
COVID-19 Screen : Shortness of breath or difficulty breathing, Fatigue
Pt Hospitalized - C auris High Risk Area : No
Ebola Epidemiological Risk Factors : None

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Infectious Disease Screening

Patient has history of MRSA : No
Patient has history of VRE : No
Admission to ICU/CCU : No
Patient transferred from Skilled Nursing Facility : No
Patient transferred from LTAC : No
Pt discharged from acute care hospital in last 30 day : No
Transferred from one of listed facilities : N/A
Joint Replacement Surgery is Scheduled : No
Cardiac Surgery is Scheduled : No
Are you a dialysis patient : No
Had Loose Stools/Diarrhea in Last 2 Days : No
Patient has GI ostomy in place : No
Patient has PEG tube in place : No
Contact Isolation Precautions in Place : No
Last Tetanus : None received

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

TB Risk Factors Grid

Alcohol and Drug Use : No
Employee of Institutional Living Environment : No
Health Care Employee : Yes
History of Exposure to TB : No
History of Positive Chest X-Ray for TB : No
History of Positive TB Skin Test : Yes
Homeless : No
Known Immunosuppression : No
Recent Immigrant : No

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Admit/Discharge/Transfer Forms

Resident of Institutional Living Environment : No

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Nutrition

Weight : 69.5 kg

Percent Weight Change Adult : 8 %

Unintended Wt Change >10% in Last 6mnths : No

Gutierrez RN, Roseanne M - 11/15/2021 7:11 PST

Usual Weight : 75.909 kg

Gutierrez RN, Roseanne M - 11/15/2021 7:09 PST

Home Diet : Regular

Feeding Ability : Complete independence

Weight Change in Last 6 Months : Unintentional weight loss or gain

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Nutritional Risk Factors

Constipation : Yes

Diarrhea : No

Nausea : No

Vomiting : No

TPN Feedings : No

Enteral Feedings : No

Fluid Intake Less Than 50% of Normal in Last 3 Days : No

Impaired Nutritional Intake : No

History of Skin Breakdown/Pressure Injuries : No

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Nutritional Risk Score : 1

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Cultural/Spiritual

Religious Preference : christian othodox

Social Cause Band Present : No

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Psychosocial/Abuse Indicators

Stressors : Hospitalization

Concerns About Family Members at Home : No

Suicidal Ideation : No

Risk Factors for Violent Behavior : None at this time

Abuse/Neglect Indicators : No domestic concerns

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Mobility Level

Mobility Level : Mobility Level 1

Assistive Device : None

Activity Assistance : Minimum assistance

Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

VTE Prophylaxis Assessment

VTE Prophylaxis In Place : No

Gutierrez RN, Roseanne M - 11/15/2021 7:09 PST

Pneumococcal Vaccine Screening

Pneumococcal Vaccine History : Has never received vaccine

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
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Patient Type: Observation
Attending: Khan M.D.,Mansurur R.
DOB/Age/Sex: 3/29/1946 76 years Male
Admit/Disch: 11/14/2021 11/15/2021
Admitting: Talwar M.D.,Rishi

Admit/Discharge/Transfer Forms

Pneumococcal Vaccine Contraindications : No contraindications
Pneumococcal Vaccine Indications : 65 yrs of age or older
Gutierrez RN, Roseanne M - 11/15/2021 7:09 PST

Ready to Screen for Pneumococcal Vaccine : Yes
Is Pt <18 Yrs? (Pneumococcal) : No
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Influenza Vaccine Screening
Ready to Screen for Influenza Vaccine : Yes
Is Pt <18 Yrs? (Influenza) : No
Influenza Vaccine History : NONE received this season (Aug 2021 through March 2022)
Influenza Vaccine Contraindications : No contraindications
Influenza Vaccine Indications : Greater than 17 years of age
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

COVID-19 Vaccine Screen - Inpatient - Section 1
Last Charted COVID-19 Vaccine RTF : Moderna COVID-19 Vaccine:
SARS-CoV-2 (Moderna) mRNA-1273 vaccine: 0 unknown unit (01/26/21)
SARS-CoV-2 (Moderna) mRNA-1273 vaccine: 0 unknown unit (12/29/20)
Covid Vaccine History : 2nd Dose Moderna CV-19 Vaccine Rec'd - 2 or MORE wks ago (Screen for 3rd dose if Immunocompromised)
Are you immunocompromised? : No
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Notification of Admission
Notification of Family/Representative : A family member or representative is already aware of my admission to the hospital
Name of Person Notified about Admission : Irma Kawaguchi (909) 374-7216
Notification of Personal Physician : Please notify my personal physician of my admission to the hospital
Name of Personal Physician Notified : M Ali MD
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Discharge Information
Post Hospital Caregiver Contact Info : Not obtained, Patient denies
Discharge Contact : Yes
Discharge Contact #1 Name : Irma Kawaguchi 909-374-7216
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Surrogate Decision Maker
Surrogate Decision Maker : Named by patient to make medical decisions
Surrogate Decision Maker Name : Irma Kawaguchi 909-374-7216
Spokesperson : Irma Kawaguchi 909-374-7216
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

Admit Belongings
Belongings in Patient's Possession : Shoes, Shirt, Pants, Cell Phone (Biomed Contacted), Necklace, Wallet, Money (Amount), Eyeglasses
(Comment: 1 x 100.002 x 5.003 X 1.00 [Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST])
Reconciliation of Valuables/Belongings : Valuables/Belongings Reconciled with Patient/Family
Gutierrez RN, Roseanne M - 11/15/2021 6:41 PST

*Discharge Readiness Checklist (Required) Entered On: 11/15/2021 16:58 PST

San Antonio Regional Hospital

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Admit/Discharge/Transfer Forms

Performed On: 11/15/2021 16:58 PST by Dionisio RN, Rexie T

Discharge Readiness Checklist

Responsible Learner/s Present : No Data Available
Home Caregiver Present for Session : No
Barriers to Learning : None evident
Teaching Method : Demonstration, Explanation, Printed materials
Prfd Language for Discharge Instruction : English
Prfd Language for Education Leaflets : English

Dionisio RN, Rexie T - 11/15/2021 16:58 PST

Discharge Readiness Education

Activity Expectations : Verbalizes understanding
Equipment/Devices : Verbalizes understanding
Pain Management : Verbalizes understanding
Physical Limitations : Verbalizes understanding
Plan of Care : Verbalizes understanding
When to Call Healthcare Provider : Verbalizes understanding
Diet/Nutrition : Verbalizes understanding

Dionisio RN, Rexie T - 11/15/2021 16:58 PST

Diagnosis Specific Aftercare Education : Complete

Dionisio RN, Rexie T - 11/15/2021 16:58 PST

Discharge Readiness Medication Education

Med Dosage, Route, Scheduling : Verbalizes understanding
Safety, Medication : Verbalizes understanding

Dionisio RN, Rexie T - 11/15/2021 16:58 PST

Self Medication Return Demonstration : Complete

Medication/Reconciliation Education : Complete

Durable Medical Equipment Arranged : N/A

Follow-Up Appointment Arranged : N/A - Pt does not have a pneumonia diagnosis

Dionisio RN, Rexie T - 11/15/2021 16:58 PST

Assessment Forms

ED Phone Call for Consults Entered On: 11/14/2021 19:56 PST

Performed On: 11/14/2021 19:55 PST by Villela , Angelica

Phone Call for Consults

ED Phone Call for Consults - Form

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

FIN: 5295168

Patient Type: Observation

Attending: Khan M.D.,Mansurur R.

DOB/Age/Sex: 3/29/1946 76 years Male

Admit/Disch: 11/14/2021 11/15/2021

Admitting: Talwar M.D.,Rishi

Assessment Forms

<i>Date and Time of Contact :</i>	11/14/2021 20:17 PST	11/14/2021 19:53 PST
<i>Phone Call Attempt :</i>	Second call	First call
<i>Reason for Consult :</i>		Admit
<i>Physician Requesting Consult :</i>	Abed M.D., John	Abed M.D., John
<i>Physician Requested for Consult :</i>	Talwar M.D., Rishi	Talwar M.D., Rishi
<i>Date and Time Call Returned :</i>	11/14/2021 20:31 PST Vilella , Angelica - 11/14/2021 20:31 PST	
<i>Physician Returning Call :</i>	Talwar M.D., Rishi Vilella , Angelica - 11/14/2021 20:31 PST	
<i>Additional Information :</i>		B.Cross PPO PMD: Ali. Mohammed UHG admits for PMD
	Vilella , Angelica - 11/14/2021 20:17 PST	Vilella , Angelica - 11/14/2021 19:55 PST

Communication Forms

SBAR Note Entered On: 11/15/2021 18:18 PST
Performed On: 11/15/2021 18:17 PST by Dionisio RN, Rexie T

SBAR

Situation : Pt. discharged via wheelchair accompanied by spouse in stable condition.

Dionisio RN, Rexie T - 11/15/2021 18:17 PST

SBAR Note Entered On: 11/15/2021 18:04 PST

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Communication Forms

Performed On: 11/15/2021 17:45 PST by Dionisio RN, Rexie T

SBAR

Situation : Discharge instructions/prescriptions given to pt, emphasized need for follow-up visits and to report onset of chest pain; verbalized understanding. Influenza and Pneumonia vaccines given respectively. All belongings complete. Tele monitor discontinued; RAC peripheral line removed. Awaiting spouse for transport.

Dionisio RN, Rexie T - 11/15/2021 18:02 PST

SBAR Note Entered On: 11/15/2021 16:50 PST
Performed On: 11/15/2021 16:50 PST by Dionisio RN, Rexie T

SBAR

Situation : Notified pt's. wife Irma about discharge.

Dionisio RN, Rexie T - 11/15/2021 17:07 PST

{ [Notified pt's. wife Irma about discharge; left a voicemail.
] -- previously charted by Dionisio RN, Rexie T at 11/15/2021 16:50 PST};

SBAR Note Entered On: 11/15/2021 16:42 PST
Performed On: 11/15/2021 14:15 PST by Dionisio RN, Rexie T

SBAR

Situation : Dr. L. Chan notified of Lexiscan results.

Dionisio RN, Rexie T - 11/15/2021 16:41 PST

SBAR Note Entered On: 11/15/2021 13:06 PST
Performed On: 11/15/2021 7:50 PST by Dionisio RN, Rexie T

SBAR

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Communication Forms

Situation : Pt. awake on rounds, A/O x4; ambulatory. Clear breath sounds on both upper lobes, diminished at the bases; comfortable on RA, denies SOB, no chest pain. Abd. is soft, good BS on 4 quadrants;NPO. Skin is intact. NPO instructed/maintained, call light in reach, fall precautions observed, assisted w/ ADL's, instructed to report onset of chest pain. Will continue to monitor status.

Dionisio RN, Rexie T - 11/15/2021 13:04 PST

SBAR Note Entered On: 11/15/2021 8:34 PST
Performed On: 11/15/2021 7:30 PST by Gutierrez RN, Roseanne M

SBAR

Situation : Notified Rexie Dionisio RN that TB isolation alert was activated following completion of Admission history, patient is healthcare employee and has history of positive TB skin test.

Gutierrez RN, Roseanne M - 11/15/2021 8:31 PST

Emergency Department Forms

DOCUMENT NAME: ED Secondary Triage - Adult - Text
SERVICE DATE/TIME: 11/14/2021 16:50 PST
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Tjongdrokusuma RN,Teddy (11/14/2021 16:50 PST)
SIGN INFORMATION: Tjongdrokusuma RN,Teddy (11/14/2021 16:50 PST)

ED Secondary Triage - Adult Entered On: 11/14/2021 16:53 PST
Performed On: 11/14/2021 16:50 PST by Tjongdrokusuma RN, Teddy

General Information

Temperature Oral : 98.5 degF(Converted to: 36.9 degC)
Systolic Blood Pressure : 168 mmHg (HI)
Diastolic Blood Pressure : 98 mmHg (HI)
Treatment Height/Length Dosing : 170 cm(Converted to: 5 ft 7 inch)
Weight Dosing : 72.6 kg(Converted to: 160 lb 1 oz)
Chief Complaint : chest pain for the last 30 min, denies cardiac hx
Influenza Vaccine History : NONE received this season (Aug 2021 through March 2022)
Pneumococcal Vaccine History : Has never received vaccine
Domestic Concerns : None
**Smoking/Social History :* Document smoking status
Last Influenza : No
Last Tetanus : None received

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Emergency Department Forms

COVID-19 Testing Done Prior to Arrival : No

Tjongdrokusuma RN, Teddy - 11/14/2021 16:50 PST
(As Of: 11/14/2021 16:53:52 PST)

Problems(Active)

Acid reflux (SNOMED CT :353140018) *Name of Problem:* Acid reflux ; *Recorder:* Caler RN, Tiffany A ;
Confirmation: Confirmed ; *Classification:* Nursing ; *Code:* 353140018 ; *Contributor System:* PowerChart ; *Last Updated:* 4/8/2014 14:11 PDT ; *Life Cycle Date:* 06/13/2012 ; *Life Cycle Status:* Active ; *Vocabulary:* SNOMED CT

Allergic rhinitis (SNOMED CT :102311013) *Name of Problem:* Allergic rhinitis ; *Recorder:* Manzano RN, Brenda P ; *Confirmation:* Confirmed ; *Classification:* Nursing ; *Code:* 102311013 ; *Contributor System:* PowerChart ; *Last Updated:* 4/8/2014 14:11 PDT ; *Life Cycle Date:* 06/12/2012 ; *Life Cycle Status:* Active ; *Vocabulary:* SNOMED CT

Cardiac ejection fraction (SNOMED CT :117644011) *Name of Problem:* Cardiac ejection fraction ; *Recorder:* Gonzalez RT, Enrique ; *Confirmation:* Confirmed ; *Classification:* Nursing ; *Code:* 117644011 ; *Contributor System:* PowerChart ; *Last Updated:* 6/13/2012 11:15 PDT ; *Life Cycle Date:* 06/13/2012 ; *Life Cycle Status:* Active ; *Responsible Provider:* Agarwal M.D., Chandahas ; *Vocabulary:* SNOMED CT ; *Comments:*

6/13/2012 11:14 - Gonzalez RT, Enrique
CARDIAC LV EF 60%

Diagnoses(Active)

Chest pain *Date:* 11/14/2021 ; *Diagnosis Type:* Discharge ; *Confirmation:* Confirmed ; *Clinical Dx:* Chest pain ; *Classification:* Medical ; *Code:* ICD-10-CM ; *Probability:* 0 ; *Diagnosis Code:* R07.9

Chest pain* *Date:* 11/14/2021 ; *Diagnosis Type:* Reason For Visit ; *Confirmation:* Complaint of ; *Clinical Dx:* Chest pain* ; *Classification:* Patient Stated ; *Clinical Service:* Non-Specified ; *Code:* PNED ; *Probability:* 0 ; *Diagnosis Code:* 8E095FBB-BBCA-40DB-90A7-E99D6615CA20

SOB - Shortness of breath *Date:* 11/14/2021 ; *Diagnosis Type:* Discharge ; *Confirmation:* Confirmed ; *Clinical Dx:* SOB - Shortness of breath ; *Classification:* Medical ; *Code:* ICD-10-CM ; *Probability:* 0 ; *Diagnosis Code:* R06.00

COVID-19 Vaccine History Screening

Last Charted COVID-19 Vaccine RTF : Moderna COVID-19 Vaccine:
SARS-CoV-2 (Moderna) mRNA-1273 vaccine: 0 unknown unit (01/26/21)
SARS-CoV-2 (Moderna) mRNA-1273 vaccine: 0 unknown unit (12/29/20)

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San Antonio Regional Hospital

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Attending: Khan M.D.,Mansurur R.

Emergency Department Forms

Covid Vaccine History : 2nd Dose Moderna CV-19 Vaccine Rec'd - 2 or MORE wks ago (Screen for 3rd dose if Immunocompromised)

Tjiongdrokusuma RN, Teddy - 11/14/2021 16:50 PST

Social History

Social History

(As Of: 11/14/2021 16:53:52 PST)

Tobacco:

Denies, Tobacco Use: Former smoker, quit more than 30 days ago. (Last Updated: 8/6/2021 12:06:19 PDT by Andrade-Escarcega RN, Maria)

Alcohol:

Denies (Last Updated: 8/6/2021 12:06:23 PDT by Andrade-Escarcega RN, Maria)

Substance Abuse:

Denies (Last Updated: 8/6/2021 12:06:27 PDT by Andrade-Escarcega RN, Maria)

DOCUMENT NAME: ED Primary Triage - Adult - Text
SERVICE DATE/TIME: 11/14/2021 16:33 PST
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Cruz RN,Brianne C (11/14/2021 16:33 PST)
SIGN INFORMATION: Cruz RN,Brianne C (11/14/2021 16:33 PST)

ED Primary Triage - Adult Entered On: 11/14/2021 16:34 PST
Performed On: 11/14/2021 16:33 PST by Cruz RN, Brianne C

ED Triage

Recent International Travel by Patient : No travel outside US in last 21 days

Chief Complaint : chest pain for the last 30 min, denies cardiac hx

Document Allergies : Document assessment

STEMI Reporting : N/A - visit not related to STEMI

STEMI Reporting : Private vehicle

COVID-19 Screen : Not applicable

Peripheral Pulse Rate : 82 bpm

Respiratory Rate : 20 br/min

SpO2 : 100 %

Cruz RN, Brianne C - 11/14/2021 16:33 PST

DGP GENERIC CODE

Tracking Acuity : 2 - Emergent

Tracking Group : ED Tracking Group

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Emergency Department Forms

Cruz RN, Brianne C - 11/14/2021 16:33 PST
(As Of: 11/14/2021 16:34:40 PST)

Problems(Active)

Acid reflux (SNOMED CT :353140018) *Name of Problem:* Acid reflux ; *Recorder:* Caler RN, Tiffany A ;
Confirmation: Confirmed ; *Classification:* Nursing ; *Code:* 353140018 ; *Contributor System:* PowerChart ; *Last Updated:* 4/8/2014 14:11 PDT ; *Life Cycle Date:* 06/13/2012 ; *Life Cycle Status:* Active ; *Vocabulary:* SNOMED CT

Allergic rhinitis (SNOMED CT :102311013) *Name of Problem:* Allergic rhinitis ; *Recorder:* Manzano RN, Brenda P ; *Confirmation:* Confirmed ; *Classification:* Nursing ;
Code: 102311013 ; *Contributor System:* PowerChart ; *Last Updated:* 4/8/2014 14:11 PDT ; *Life Cycle Date:* 06/12/2012 ; *Life Cycle Status:* Active ; *Vocabulary:* SNOMED CT

Cardiac ejection fraction (SNOMED CT :117644011) *Name of Problem:* Cardiac ejection fraction ; *Recorder:* Gonzalez RT, Enrique ; *Confirmation:* Confirmed ;
Classification: Nursing ; *Code:* 117644011 ; *Contributor System:* PowerChart ; *Last Updated:* 6/13/2012 11:15 PDT ; *Life Cycle Date:* 06/13/2012 ; *Life Cycle Status:* Active ; *Responsible Provider:* Agarwal M.D., Chandrahas ; *Vocabulary:* SNOMED CT ; *Comments:*

6/13/2012 11:14 - Gonzalez RT, Enrique
CARDIAC LV EF 60%

Diagnoses(Active)

Chest pain* *Date:* 11/14/2021 ; *Diagnosis Type:* Reason For Visit ;
Confirmation: Complaint of ; *Clinical Dx:* Chest pain* ; *Classification:* Patient Stated ; *Clinical Service:* Non-Specified ; *Code:* PNE0 ; *Probability:* 0 ; *Diagnosis Code:* 8E095FBB-BBCA-40DB-90A7-E99D6615CA20

ED Allergies

(As Of: 11/14/2021 16:34:40 PST)

Allergies (Active)

REGLAN *Estimated Onset Date:* Unspecified ; *Created By:* CONTRIBUTOR_SYSTEM ; *Reaction Status:* Active ;
Substance: REGLAN ; *Updated By:* CONTRIBUTOR_SYSTEM ; *Reviewed Date:* 11/14/2021 16:33 PST

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Emergency Department Forms

DOCUMENT NAME: ED Disposition Documentation-Text
SERVICE DATE/TIME: 11/15/2021 06:09 PST
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Horton RN,Sarah M (11/15/2021 06:09 PST)
SIGN INFORMATION: Horton RN,Sarah M (11/15/2021 06:09 PST)

ED Disposition Documentation Entered On: 11/15/2021 6:10 PST
Performed On: 11/15/2021 6:09 PST by Horton RN, Sarah M

Disposition Documentation

ED Disposition : Admit to Inpatient/Observation
ED Admission Documentation Conditional : Open admission documentation

Horton RN, Sarah M - 11/15/2021 6:09 PST

Admission

Room Assignment : 310
Date/Time Called to Give Report : 11/15/2021 06:10 PST
Initial Date/Time of Call to Give Report : Gutierrez RN, Roseanne M
Date/Time Report Given : 11/15/2021 06:10 PST

Horton RN, Sarah M - 11/15/2021 6:09 PST

Pain Management Forms

PRN Response Entered On: 11/15/2021 0:50 PST
Performed On: 11/14/2021 23:37 PST by Amezcua RN, Steven A

Intervention Information:

nitroglycerin
Performed by Amezcua RN, Steven A on 11/14/2021 23:34:00 PST

nitroglycerin,0.4mg
SL,chest pain

PRN Medication Response

PRN Medication Effective : No
PRN Medication Effectiveness Evaluated : Numeric rating scale (0-10)

Amezcua RN, Steven A - 11/15/2021 0:50 PST

Numeric Pain Scale (0-10)

Numeric Pain Scale : 4 = Moderate pain
Pain Functional Limitations Assessment : none
PRN Medication Effectiveness Comments : no change in pressure

Amezcua RN, Steven A - 11/15/2021 0:50 PST

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Treatments/Procedures Forms

Lexiscan Cardiolute Stress Test Entered On: 11/15/2021 14:36 PST
Performed On: 11/15/2021 14:31 PST by Lane IV , Joseph

Allergy

(As Of: 11/15/2021 14:36:21 PST)

Allergies (Active)

REGLAN

Estimated Onset Date: Unspecified ; *Created By:* CONTRIBUTOR_SYSTEM ; *Reaction Status:* Active ;
Substance: REGLAN ; *Updated By:* CONTRIBUTOR_SYSTEM ; *Reviewed Date:* 11/14/2021 16:33 PST

Cardiology Procedure Info

Stress Echo Ordering Physician : Chan D.O., Larry
Cardiology Procedure Physician : Tuoze FNP, Froilan
Cardiology Tech : Lane IV , Joseph
Nuclear Tech : Rodriguez CNMT, Javier A
Cardiology Procedure Indication : Chest pain
Cardiac Symptoms : None
Location of Echocardiogram Procedure : Bedside
Date of Cardiology Study : 11/15/2021 PST
Cardiology Procedures Performed : Lexiscan Cardiolute Stress Test

Lane IV , Joseph - 11/15/2021 14:31 PST

Stress Protocol

Stress Test Protocol Resting Pretest

	Supine
<i>Heart Rate :</i>	61 bpm
<i>Blood Pressure :</i>	149/89
<i>Cardiac Symptoms :</i>	None
<i>Comment</i>	(Comment: 98% [Lane IV , Joseph - 11/15/2021 14:31 PST])
	Lane IV , Joseph - 11/15/2021 14:31 PST

Stress Test Protocol Target Heart Range

	Target Range 100%	Target Range 90%	Target Range 85%	Target Range 80%
<i>Target Range :</i>	145	130	123	116

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Treatments/Procedures Forms

<i>Target Reached :</i>	n	n	n
	Lane IV , Joseph - 11/15/2021 14:31 PST	Lane IV , Joseph - 11/15/2021 14:31 PST	Lane IV , Joseph - 11/15/2021 14:31 PST

Isotope Injected : :36
Total Exercise Time : 1 minute
Max HR Reached : 85

Lane IV , Joseph - 11/15/2021 14:31 PST

Lexiscan Stress Protocol Stress Phase

	1 minute
<i>Heart Rate :</i>	82 bpm
<i>Cardiac Symptoms :</i>	None
<i>Comment</i>	(Comment: 98% [Lane IV , Joseph - 11/15/2021 14:31 PST])
	Lane IV , Joseph - 11/15/2021 14:31 PST

Lexiscan Stress Protocol Recovery Phase

<i>Minute Count :</i>	1	2	3	4
<i>Heart Rate :</i>	86 bpm	77 bpm	75 bpm	74 bpm
<i>Blood Pressure :</i>	135/80		148/84	
<i>Cardiac Symptoms :</i>	None	None	None	None
<i>Comment</i>	(Comment: 98% [Lane IV , Joseph - 11/15/2021 14:31 PST])	(Comment: 99% [Lane IV , Joseph - 11/15/2021 14:31 PST])	(Comment: 99% [Lane IV , Joseph - 11/15/2021 14:31 PST])	(Comment: 98% [Lane IV , Joseph - 11/15/2021 14:31 PST])
	Lane IV , Joseph - 11/15/2021 14:31 PST	Lane IV , Joseph - 11/15/2021 14:31 PST	Lane IV , Joseph - 11/15/2021 14:31 PST	Lane IV , Joseph - 11/15/2021 14:31 PST

<i>Minute Count :</i>	5
<i>Heart Rate :</i>	76 bpm
<i>Blood Pressure :</i>	
<i>Cardiac Symptoms :</i>	None
<i>Comment</i>	(Comment: 98% [Lane IV , Joseph

San Antonio Regional Hospital

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FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Treatments/Procedures Forms

	- 11/15/2021 14:31 PST])
	Lane IV , Joseph - 11/15/2021 14:31 PST

Echocardiogram Entered On: 11/15/2021 12:16 PST
Performed On: 11/15/2021 11:28 PST by Hermosilla, Leonila E

Allergies

(As Of: 11/15/2021 12:16:24 PST)

Allergies (Active)

REGLAN

Estimated Onset Date: Unspecified ; Created By:
CONTRIBUTOR_SYSTEM ; Reaction Status: Active ;
Substance: REGLAN ; Updated By:
CONTRIBUTOR_SYSTEM ; Reviewed Date: 11/14/2021 16:33
PST

ECHO Procedure Info

Sonographer : Hermosilla, Leonila E
Stress Echo Ordering Physician : Chan D.O., Larry
Cardiology Procedure Physician : Chan D.O., Larry
Cardiology Procedure Indication : Chest pain
Location of Echocardiogram Procedure : Bedside
Date of Cardiology Study : 11/15/2021 PST
Cardiology Procedures Performed : Echo 2D, 3D Imaging, LV Strain

Hermosilla, Leonila E - 11/15/2021 12:15 PST

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Care Plans

Medical

Plan: Chest Pain - Admission
Status: Discontinued
History: Initiated at 11/14/2021 21:03 PST electronically signed by Talwar M.D.,Rishi
 Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM

Plan: ED Protocol Chest Pain/Suspected Acute MI
Status: Discontinued
History: Initiated at 11/14/2021 16:35 PST electronically signed by Cruz RN,Brianne C
 Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM

Nursing

Plan: IPOC Age Specific 65 - 79 Years NSG
Status: Discontinued
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M
 Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM

Outcome: Received care appropriate to age.	Expectation: Met
Intervention: Apply lotion to skin after bathing	Expectation: Done
Intervention: Assess skin integrity frequently	Expectation: Done
Intervention: Be aware of need for warmer environment	Expectation: Done
Intervention: Continue with pain assess and management	Expectation: Done
Intervention: Explore individual support system	Expectation: Done
Intervention: Involve family with care	Expectation: Done
Intervention: Keep environment safe	Expectation: Done
Intervention: Monitor bowel elimination q24 hours.	Expectation: Done
Intervention: Provide adequate nutrition	Expectation: Done
Intervention: Use adjunct analgesics with caution	Expectation: Done

Plan: IPOC Adult
Phase: IPOC Nursing Adult; Status: Discontinued
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M
 Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM

Sub-phase: IPOC Cardiovascular - Adult NSG; Status: Discontinued
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M
 Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM

Outcome: No complaints of chest pain	Expectation: Met
Intervention: Monitor cardiopulmonary symptoms	Expectation: Done
Intervention: Monitor for changes in vascular status	Expectation: Done
Intervention: Educate.Notify RN of chest pain or SOB	Expectation: Done

Sub-phase: IPOC Respiratory - Adult NSG; Status: Discontinued
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M
 Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM

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MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
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Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
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Care Plans

Nursing

Outcome: Respirations unlabored.	Expectation: Met
Intervention: Monitor pulse oximeter q4 hr and prn.	Expectation: Done
Intervention: Consider oxygen prn	Expectation: Done
Sub-phase: IPOC Pain/Comfort - Adult NSG; Status: Discontinued	
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM	
Intervention: Determine if opioid naive or tolerant	Expectation: Done
Intervention: Provide non pharmacological interventions	Expectation: Done
Intervention: Ask patient to describe functional limitations	Expectation: Done
Intervention: Administer pain meds PRN	Expectation: Done
Sub-phase: IPOC Education - Adult NSG; Status: Discontinued	
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM	
Outcome: Understands plan of care	Expectation: Met
Outcome: Family understands plan of care	Expectation: Met
Intervention: Review plan of care with patient.	Expectation: Done
Intervention: Coordinate discussions with providers.	Expectation: Done
Sub-phase: IPOC Falls - Low Risk Adult NSG; Status: Discontinued	
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM	
Outcome: Remains free from fall	Expectation: Met
Intervention: Orient patient to surroundings	Expectation: Done
Intervention: Place call button within easy reach	Expectation: Done
Intervention: Maintain bed in low position	Expectation: Done
Intervention: Bed brakes locked & top side rails up	Expectation: Done
Intervention: Use of non-slip footwear	Expectation: Done
Intervention: Ambulatory devices within easy reach	Expectation: Done
Intervention: Eliminate environmental hazards	Expectation: Done
Intervention: Fall Safety Education handout given	Expectation: Done
Intervention: Fall Risk status reported q shift change	Expectation: Done
Sub-phase: IPOC Readmission Prevention - Adult NSG; Status: Discontinued	
History: Initiated at 11/15/2021 08:30 PST electronically signed by Gutierrez RN,Roseanne M Discontinued at 11/15/2021 18:19 PST electronically signed by SYSTEM	
Outcome: Readmission Risks Addressed	Expectation: Met
Outcome: Verbalizes Understanding of Follow Up Appointments	Expectation: Met
Outcome: Verbalize Understanding of Readmission Prevention	Expectation: Met
Outcome: Verbalize disease process understanding	Expectation: Met
Outcome: Verbalizes Name/Dose/Timing/Purpose/Side Effects/Interaction	Expectation: Met

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Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Care Plans

Nursing

Intervention: Involve Significant Support Person	Expectation: Done
Intervention: Provide Follow-Up Appointments, Services Information	Expectation: Done
Intervention: Learn About Condition(s) and How to Avoid Complications	Expectation: Done
Intervention: Screen Patient/Family for Medication Adherence	Expectation: Done
Intervention: Evaluate Ability to Self Medicate	Expectation: Done
Intervention: Return demonstration of med administration	Expectation: Done

Immunizations

Vaccine: influenza virus vaccine ⁰⁵		Date Given: 11/15/2021 17:35 PST	
Admin Person: Dionisio RN,Rexie T			
Site: Left Deltoid	Amount: 0.5mL	Manufacturer: Seqirus, A CSL Company	
Expiration: 6/30/2022	Lot #: P100369129		

Order Comments

O5: influenza virus vaccine, inactivated (influenza virus vaccine, inactivated - preservative free)
 Ordered secondary to documenting Indications for protocol Influenza vaccine

Vaccine: influenza virus vaccine		Date Given: 11/1/2011	
Vaccine: pneumococcal 23-polyvalent vaccine ⁰⁶			
Date Given: 11/15/2021 17:35 PST			
Admin Person: Dionisio RN,Rexie T			
Site: Right Deltoid	Amount: 0.5mL	Manufacturer: Merck & Company Inc	
Expiration: 1/14/2023	Lot #: 0021995		

Order Comments

O6: pneumococcal 23-polyvalent vaccine
 Ordered secondary to documenting Indications for protocol Pneumococcal vaccine

Report ID: 127045218

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San Antonio Regional Hospital

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Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Immunizations

Vaccine: pneumococcal 23-polyvalent vaccine ⁰⁷		Date Given: 6/13/2012 21:29 PDT	
Admin Person: Jaques RN, Callee M			
Site: Right Upper Arm	Amount: 0.5mL	Manufacturer: MERCK & CO., INC.	
Expiration: 8/18/2013	Lot #: 0087ae		

Order Comments

O7: pneumococcal 23-polyvalent vaccine
 Ordered secondary to documenting Indications for protocol Pneumococcal vaccine

Vaccine: SARS-CoV-2 (Moderna) mRNA-1273 vaccine	Date Given: 1/26/2021
Lot #: 025I20A	

Vaccine: SARS-CoV-2 (Moderna) mRNA-1273 vaccine	Date Given: 12/29/2020
Lot #: 025L20A	

Intake and Output

INTAKE	11/15/2021 - 11/16/2021		
All time in PST	0600 - 1800	1800 - 0600	Total
sodium chloride	mL 3	-	3
Oral Intake	mL 360	-	360
12 Hour Total	mL 363	-	
24 Hour Total	mL	363	

OUTPUT	11/15/2021 - 11/16/2021		
All time in PST	0600 - 1800	1800 - 0600	Total
Urine Count	2	-	2
12 Hour Total	mL -	-	
24 Hour Total	mL	-	

Clinical Range Total from 11/15/2021 to 11/16/2021

Total Intake (mL)	Total Output (mL)	Fluid Balance (mL)
363	0	363

San Antonio Regional Hospital

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Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Activities of Daily Living

Activity ADLs

	Recorded Date	Recorded Time	
	11/15/2021	08:00 PST	
	Recorded By Dionisio RN,Rexie T		
Procedure	Reference Range		Units
Activity Status ADL		In bed, High Fowler's	
Activity Assistance		Minimum assistance	
Assistive Device		None	
Positioning/Pressure Reducing Devices		Pillow	
Turning Assessment		Turns independently	
Patient Position		High Fowler's	

	Recorded Date	Recorded Time	
	11/15/2021	06:30 PST	
	Recorded By Gutierrez RN,Roseanne M		
Procedure	Reference Range		Units
Activity Assistance		Minimum assistance ^{O8}	
Assistive Device		None ^{O8}	

	Recorded Date	Recorded Time	
	11/15/2021	06:00 PST	
	Recorded By Gutierrez RN,Roseanne M		
Procedure	Reference Range		Units
Activity Status ADL		Complete bedrest, HOB elevated	
Positioning/Pressure Reducing Devices		Pillow	
Turning Assessment		Turns independently	
Patient Position		Head of bed elevated	

Order Comments
 O8: Admission History Adult
 Ordered by System secondary to Admission or Transfer

Nutrition ADLs

	Recorded Date	Recorded Time	
	11/15/2021	08:00 PST	
	Recorded By Hernandez CNA,Karla		
Procedure	Reference Range		Units
Breakfast Percent		0	%

San Antonio Regional Hospital

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Activities of Daily Living

Safety ADLs

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	08:00 PST	Dionisio RN,Rexie T	11/15/2021 06:30 PST Allee CNA,Erica J
Patient Safety Signs Displayed			Yes		-
Patient Safety			See Below ^{T1}		See Below ^{T2 O9}

Textual Results

T1: 11/15/2021 08:00 PST (Patient Safety)
 All monitor alarms on and settings verified, Tele monitor and room number verified, Bed in low position, Bed alarm on, Call device within reach, Cardiac monitor electrodes in place, Chemotherapy precautions in place, Mobility support items readily available, Non-Slip footwear, Personal items within reach, Sensory aids within reach, Side rails up x2, Traffic path in room free of clutter, Wheels locked

T2: 11/15/2021 06:30 PST (Patient Safety)
 All monitor alarms on and settings verified, Tele monitor and room number verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, ID band check, Non-Slip footwear, Personal items within reach, Side rails up x2, Traffic path in room free of clutter, Wheels locked, Patient is NPO

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	04:00 PST	Amezquita RN,Steven A	11/14/2021 23:48 PST Amezquita RN,Steven A
Patient Safety			See Below ^{T3}		See Below ^{T4}

Textual Results

T3: 11/15/2021 04:00 PST (Patient Safety)
 All monitor alarms on and settings verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, Side rails up x2, Wheels locked

T4: 11/14/2021 23:48 PST (Patient Safety)
 All monitor alarms on and settings verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, Side rails up x2, Wheels locked

Order Comments

O9: Basic Admission Information
 Ordered by System secondary to Admission or Transfer

Admit-Transfer-Discharge

Admission Information

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	06:30 PST	Gutierrez RN,Roseanne M	
Mode of Arrival					Gurney ^{O8}

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Admit-Transfer-Discharge

Admission Information

	Recorded Date	Recorded Time	Recorded By
	11/15/2021	06:30 PST	Gutierrez RN,Roseanne M
Procedure	Reference Range		
Reason for Admission		Medical treatment ^{O8}	
Admitted From		Emergency department ^{O8}	
Preferred Name		Adel Hanna ^{O8}	
Information Given by		Patient ^{O8}	
Languages		English ^{O8}	
Preferred Communication Mode		Verbal ^{O8}	
Notification of Family/Representative		See Below ^{T7 O8}	
Name of Person Notified about Admission		Irma Kawaguchi (909) 374-7216 ^{O8}	
Notification of Personal Physician		See Below ^{T8 O8}	
Name of Personal Physician Notified		M Ali MD ^{O8}	

Textual Results

T7: 11/15/2021 06:30 PST (Notification of Family/Representative)
 A family member or representative is already aware of my adm
T8: 11/15/2021 06:30 PST (Notification of Personal Physician)
 Please notify my personal physician of my admission to the h

	Recorded Date	Recorded Time	Recorded By
	11/14/2021	16:50 PST	Tjongdrokusuma RN,Teddy
Procedure	Reference Range		
Chief Complaint		See Below ^{T5}	

Textual Results

T5: 11/14/2021 16:50 PST (Chief Complaint)
 chest pain for the last 30 min, denies cardiac hx

	Recorded Date	Recorded Time	Recorded By
	11/14/2021	16:33 PST	Cruz RN,Brianne C
Procedure	Reference Range		
Chief Complaint		See Below ^{T6}	
Lynx Mode of Arrival		Private vehicle	
STEMI Reporting		N/A - visit not related to STEMI	

Textual Results

T6: 11/14/2021 16:33 PST (Chief Complaint)
 chest pain for the last 30 min, denies cardiac hx

Order Comments

O8: Admission History Adult
 Ordered by System secondary to Admission or Transfer

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Automation

	Recorded Date	Recorded Time		
	11/15/2021	08:00 PST		11/15/2021
				08:00 PST
	Recorded By	Dionisio RN,Rexie T		Hernandez CNA,Karla
Procedure	Reference Range			Units
Activity Status ADL	In bed, High Fowler's		-	
Activity Assistance	Minimum assistance		-	
Assistive Device	None		-	
Positioning/Pressure Reducing Devices	Pillow		-	
Turning Assessment	Turns independently		-	
Patient Position	High Fowler's		-	
Breakfast Percent	-		0	%
Patient Safety Signs Displayed	Yes		-	
Patient Safety	See Below ^{T1}		-	

Textual Results

T1: 11/15/2021 08:00 PST (Patient Safety)
 All monitor alarms on and settings verified, Tele monitor and room number verified, Bed in low position, Bed alarm on, Call device within reach, Cardiac monitor electrodes in place, Chemotherapy precautions in place, Mobility support items readily available, Non-Slip footwear, Personal items within reach, Sensory aids within reach, Side rails up x2, Traffic path in room free of clutter, Wheels locked

	Recorded Date	Recorded Time		
	11/15/2021	06:30 PST		11/15/2021
				06:30 PST
	Recorded By	Allee CNA,ERICA J		Gutierrez RN,Roseanne M
Procedure	Reference Range			Units
Activity Assistance	-		Minimum assistance ^{O8}	
Assistive Device	-		None ^{O8}	
Patient Safety	See Below ^{T2 O9}		-	

Textual Results

T2: 11/15/2021 06:30 PST (Patient Safety)
 All monitor alarms on and settings verified, Tele monitor and room number verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, ID band check, Non-Slip footwear, Personal items within reach, Side rails up x2, Traffic path in room free of clutter, Wheels locked, Patient is NPO

	Recorded Date	Recorded Time		
	11/15/2021	06:00 PST		
	Recorded By	Gutierrez RN,Roseanne M		
Procedure	Reference Range			Units
Activity Status ADL	Complete bedrest, HOB elevated			
Positioning/Pressure Reducing Devices	Pillow			
Turning Assessment	Turns independently			
Patient Position	Head of bed elevated			

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Automation

Recorded Date 11/15/2021
Recorded Time 04:00 PST
Recorded By Amezquita RN,Steven A

Procedure	Reference Range	Units
Patient Safety	See Below ^{T3}	

Textual Results

T3: 11/15/2021 04:00 PST (Patient Safety)
 All monitor alarms on and settings verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, Side rails up x2, Wheels locked

Recorded Date 11/14/2021
Recorded Time 23:48 PST
Recorded By Amezquita RN,Steven A

Procedure	Reference Range	Units
Patient Safety	See Below ^{T4}	

Textual Results

T4: 11/14/2021 23:48 PST (Patient Safety)
 All monitor alarms on and settings verified, Bed in low position, Call device within reach, Cardiac monitor electrodes in place, Side rails up x2, Wheels locked

Order Comments

- O8: Admission History Adult
Ordered by System secondary to Admission or Transfer
- O9: Basic Admission Information
Ordered by System secondary to Admission or Transfer

Cardiovascular

Cardiovascular Assessment

Recorded Date 11/15/2021 11/15/2021
Recorded Time 08:00 PST 06:00 PST
Recorded By Dionisio RN,Rexie T Gutierrez RN,Roseanne M

Procedure	Reference Range		Units
Cardiovascular Symptoms	Fatigue	Fatigue	
Nail Bed Color	Pink	Pink	
Capillary Refill	Less than 2 seconds	Less than 2 seconds	
Heart Rhythm	Regular	Regular	

Recorded Date 11/15/2021 11/14/2021
Recorded Time 04:00 PST 23:48 PST
Recorded By Amezquita RN,Steven A Amezquita RN,Steven A

Procedure	Reference Range		Units
Cardiovascular Symptoms	None	Other: chest pressure	
Capillary Refill	Less than 2 seconds	Less than 2 seconds	

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Cardiovascular

Cardiovascular Assessment

		Recorded Date	11/15/2021	11/14/2021
		Recorded Time	04:00 PST	23:48 PST
		Recorded By	Amezquita RN,Steven A Amezquita RN,Steven A	
Procedure	Reference Range			Units
Heart Rhythm		Regular	Regular	

		Recorded Date	11/14/2021	11/14/2021
		Recorded Time	23:09 PST	16:53 PST
		Recorded By	Horton RN,Sarah M Tjongdrokusuma RN,Teddy	
Procedure	Reference Range			Units
Cardiovascular Symptoms		None	None ⁰¹⁰	
Capillary Refill		Less than 2 seconds	-	
Heart Rhythm		Regular	Regular ⁰¹⁰	

Order Comments

O10: ED Rapid Focused Assessment Adult
 Order placed due to patient arrival to the Emergency Department

Pulses Assessment

		Recorded Date	11/15/2021	11/15/2021
		Recorded Time	08:00 PST	06:00 PST
		Recorded By	Dionisio RN,Rexie T Gutierrez RN,Roseanne M	
Procedure	Reference Range			Units
Radial Pulse,Left		2+ Normal	2+ Normal	
Radial Pulse,Right		2+ Normal	2+ Normal	
Dorsalis Pedis Pulse,Left		2+ Normal	2+ Normal	
Dorsalis Pedis Pulse,Right		2+ Normal	2+ Normal	

Edema Assessment

		Recorded Date	11/15/2021	
		Recorded Time	06:00 PST	
		Recorded By	Gutierrez RN,Roseanne M	
Procedure	Reference Range			Units
Generalized Edema		None		

Cardiac Rhythm Analysis

		Recorded Date	11/15/2021	11/15/2021	11/15/2021
		Recorded Time	16:00 PST	12:00 PST	08:00 PST
		Recorded By	Dionisio RN,Rexie T Dionisio RN,Rexie T Dionisio RN,Rexie T		
Procedure	Reference Range				Units
Cardiac Rhythm		Normal sinus rhythm	Normal sinus rhythm	Normal sinus rhythm	

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Cardiovascular

Cardiac Rhythm Analysis

		Recorded Date	11/15/2021	11/14/2021
		Recorded Time	06:00 PST	23:48 PST
		Recorded By	Gutierrez RN,Roseanne M	Amezquita RN,Steven A
Procedure	Reference Range			
Cardiac Rhythm	Normal sinus rhythm	Normal sinus rhythm		

Chest Pain Center Admission

		Recorded Date	11/14/2021
		Recorded Time	16:33 PST
		Recorded By	Cruz RN,Brianne C
Procedure	Reference Range		
Lynx Mode of Arrival	Private vehicle		

Clinician Communication

Communication

		Recorded Date	11/15/2021	11/15/2021
		Recorded Time	06:09 PST	05:50 PST
		Recorded By	Horton RN,Sarah M	Amezquita RN,Steven A
Procedure	Reference Range			
RN Additional Notes	-	See Below ^{T9}		
Report Given To:	Gutierrez RN, Roseanne M	-		

Textual Results

T9: 11/15/2021 05:50 PST (RN Additional Notes)
 Pt sleeping, NAD noted. Denies chest pressure while awake. pt informed of being transported to inpt room shortly.

		Recorded Date	11/15/2021	11/15/2021
		Recorded Time	04:00 PST	00:25 PST
		Recorded By	Amezquita RN,Steven A	Amezquita RN,Steven A
Procedure	Reference Range			
RN Additional Notes	See Below ^{T10}	See Below ^{T11}		

Textual Results

T10: 11/15/2021 04:00 PST (RN Additional Notes)
 Pt ambulated to restroom with steady gait. Pt denies chest pressure.

T11: 11/15/2021 00:25 PST (RN Additional Notes)
 Pt given BP meds. NAD noted. VSS. Pt aware of plan of care.

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Clinician Communication

Communication

	Recorded Date	Recorded Time	Recorded Date	Recorded Time	Recorded By
	11/14/2021	23:48 PST	11/14/2021	23:09 PST	Amezquita RN,Steven A Horton RN,Sarah M
Procedure	Reference Range				Units
RN Additional Notes		See Below ^{T12}		See Below ^{T13}	

Textual Results

T12: 11/14/2021 23:48 PST (RN Additional Notes)
 Pt c/o 4/10 chest pressure. Nitro SL given. No pressure relief. Dr Chan at bedside, states no additional dose of nitro needed.

T13: 11/14/2021 23:09 PST (RN Additional Notes)
 Assisting with temporary care. Pt reports chest pain has improved at this time. Pt aware of admissionm and agrees with plan.

	Recorded Date	Recorded Time	Recorded By
	11/14/2021	16:53 PST	Tjiongdrokusuma RN,Teddy
Procedure	Reference Range		Units
RN Additional Notes		See Below ^{T14 O10}	

Textual Results

T14: 11/14/2021 16:53 PST (RN Additional Notes)
 chest pain x 1 hr ago. sob with pain.

Order Comments

O10: ED Rapid Focused Assessment Adult
 Order placed due to patient arrival to the Emergency Department

Comfort Measures

	Recorded Date	Recorded Time	Recorded By
	11/15/2021	08:00 PST	Dionisio RN,Rexie T
Procedure	Reference Range		Units
Comfort Measures Blanket Application		Yes	
Comfort Measures Positioning		Yes	
Comfort Measures Pressure Relief		Yes	
Comfort Measures Quiet Environment		Yes	
Comfort Measures Relaxation		Yes	
Comfort Measures Rest		Yes	

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Comfort Measures

		Recorded Date	11/15/2021
		Recorded Time	06:00 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		Units
Comfort Measures Blanket Application		Yes	
Comfort Measures Positioning		Yes	
Comfort Measures Pressure Relief		Yes	
Comfort Measures Quiet Environment		Yes	
Comfort Measures Relaxation		Yes	
Comfort Measures Rest		Yes	

Falls Information

		Recorded Date	11/15/2021
		Recorded Time	08:00 PST
		Recorded By	Dionisio RN,Rexie T
Procedure	Reference Range		Units
History of Fall in Last 3 Months Morse		No	
Presence of Secondary Diagnosis Morse		Yes	
Use of Ambulatory Aid Morse		None, bedrest, wheelchair, nurse	
IV/Heparin Lock Fall Risk Morse		Yes	
Gait Weak or Impaired Fall Risk Morse		Normal, bedrest, immobile	
Mental Status Fall Risk Morse		Oriented to own ability	
Morse Fall Risk Score		35	

		Recorded Date	11/15/2021
		Recorded Time	06:00 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		Units
History of Fall in Last 3 Months Morse		No	
Presence of Secondary Diagnosis Morse		Yes	
Use of Ambulatory Aid Morse		None, bedrest, wheelchair, nurse	
IV/Heparin Lock Fall Risk Morse		Yes	
Gait Weak or Impaired Fall Risk Morse		Normal, bedrest, immobile	
Mental Status Fall Risk Morse		Oriented to own ability	
Morse Fall Risk Score		35	

Report ID: 127045218

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Gastrointestinal

Gastrointestinal Assessment

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	08:00 PST	Dionisio RN,Rexie T	11/15/2021	06:00 PST	Gutierrez RN,Roseanne M	
GI Symptoms				Constipation			Constipation	
Abdomen Description				Soft, Symmetric			Soft, Symmetric	
Abdomen Palpation				Soft			Soft, Non-Tender	

Bowel Sounds Assessment

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	08:00 PST	Dionisio RN,Rexie T	11/15/2021	06:00 PST	Gutierrez RN,Roseanne M	
Bowel Sounds All Quadrants				Present			Present	

General

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	06:30 PST	Gutierrez RN,Roseanne M	11/15/2021	06:00 PST	Gutierrez RN,Roseanne M	
Distress				-			None	
Medical Devices				None ^{O8}			-	
Anesthesia/Transfusions				See Below ^{T15 O8}			-	

Textual Results

T15: 11/15/2021 06:30 PST (Anesthesia/Transfusions)
No prior transfusion, Prior anesthesia

Order Comments

O8: Admission History Adult
Ordered by System secondary to Admission or Transfer

Genitourinary

Genitourinary Assessment

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	08:00 PST	Dionisio RN,Rexie T	11/15/2021	06:00 PST	Gutierrez RN,Roseanne M	
Genitourinary Symptoms				Denies			Denies	

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Genitourinary

Genitourinary Assessment

Procedure	Reference Range	Recorded Date		Recorded Time		Recorded By		Units
		11/15/2021	11/15/2021	08:00 PST	06:00 PST	Dionisio RN,Rexie T	Gutierrez RN,Roseanne M	
Urinary Elimination		Voiding, no difficulties		Voiding, no difficulties				
Bladder Distention		Absent		Absent				
Flank Pain		-		None				
Flank Tender		-		None				

Gynecology / Obstetrics

Gynecology/Obstetrics Information

Procedure	Reference Range	Recorded Date		Recorded Time		Recorded By		Units
		11/15/2021	11/15/2021	06:30 PST		Gutierrez RN,Roseanne M		
Pregnancy Status		N/A ⁰⁸						

Order Comments

O8: Admission History Adult
 Ordered by System secondary to Admission or Transfer

On Shift Assessment, OB

Procedure	Reference Range	Recorded Date		Recorded Time		Recorded By		Units
		11/15/2021	11/15/2021	08:00 PST	06:00 PST	Dionisio RN,Rexie T	Gutierrez RN,Roseanne M	
Date Of Last Bowel Movement		11/13/2021		11/13/21				

Infection Control

Procedure	Reference Range	Recorded Date		Recorded Time		Recorded By		Units
		11/15/2021	11/15/2021	16:59 PST		Dionisio RN,Rexie T		
High Risk Infection Criteria on Disch		None						
Patient MRSA Positive This Visit		Not tested this visit						

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Infection Control

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/15/2021 06:30 PST Gutierrez RN,Roseanne M	
Patient has history of MRSA		No ⁰⁸	
Patient has history of VRE		No ⁰⁸	
Patient transferred from SNF		No ⁰⁸	
Patient transferred from LTAC		No ⁰⁸	
Transferred from Another Facility		N/A ⁰⁸	
Pt discharge from acute hosp last 30 day		No ⁰⁸	
Patient has PEG tube in place		No ⁰⁸	
Contact Isolation Precautions in Place		No ⁰⁸	
Joint Replacement Surgery is Scheduled		No ⁰⁸	
Admission to ICU/CCU		No ⁰⁸	
Cardiac Surgery is Scheduled		No ⁰⁸	
Had Loose Stools/Diarrhea in Last 2 Days		No ⁰⁸	
GI Ostomy in Place		No ⁰⁸	
Patient Receiving In-patient Dialysis		No ⁰⁸	
COVID-19 Testing Done Prior to Arrival		No ⁰⁸	
Pt Hospitalized -C auris High Risk Area		No ⁰⁸	
Alcohol and Drug Use		No ⁰⁸	
Employee of Institutional Living		No ⁰⁸	
Health Care Employee		Yes ⁰⁸	
History of Exposure to TB		No ⁰⁸	
History of Positive Chest X-Ray for TB		No ⁰⁸	
History of Positive TB Skin Test		Yes ⁰⁸	
Homeless		No ⁰⁸	
Known Immunosuppression		No ⁰⁸	
Recent Immigrant		No ⁰⁸	
Resident of Institutional Living		No ⁰⁸	
Recent International Travel by Patient		See Below ^{T16 08}	
COVID-19 Screen		See Below ^{T18 08}	
Ebola Epidemiological Risk Factors		None ⁰⁸	

Textual Results

T16: 11/15/2021 06:30 PST (Recent International Travel by Patient)

No travel outside US in last 21 days

T18: 11/15/2021 06:30 PST (COVID-19 Screen)

Shortness of breath or difficulty breathing, Fatigue

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/14/2021 16:50 PST Tjongdokusuma RN,Teddy	
COVID-19 Testing Done Prior to Arrival		No	

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Infection Control

Recorded Date 11/14/2021
Recorded Time 16:33 PST
Recorded By Cruz RN,Brianne C

Procedure	Reference Range	Units
Recent International Travel by Patient	See Below ^{T17}	
COVID-19 Screen	Not applicable	

Textual Results
T17: 11/14/2021 16:33 PST (Recent International Travel by Patient)
 No travel outside US in last 21 days

Order Comments
O8: Admission History Adult
 Ordered by System secondary to Admission or Transfer

Integumentary

Braden Assessment

Recorded Date 11/15/2021 **11/15/2021**
Recorded Time 08:00 PST **06:00 PST**
Recorded By Dionisio RN,Rexie T Gutierrez RN,Roseanne M

Procedure	Reference Range	Units
Sensory Perception Braden	No impairment	No impairment
Moisture Braden	Rarely moist	Rarely moist
Activity Braden	Walks occasionally	Walks occasionally
Mobility Braden	No limitations	No limitations
Nutrition Braden	Adequate	Adequate
Friction and Shear Braden	No apparent problem	No apparent problem
Braden Score	21	21

Integumentary Assessment

Recorded Date 11/15/2021 **11/15/2021**
Recorded Time 08:00 PST **06:00 PST**
Recorded By Dionisio RN,Rexie T Gutierrez RN,Roseanne M

Procedure	Reference Range	Units
2nd RN Skin Inspection Verification	Goette RN, Annmarie	-
Heel Inspection Done	Heel(s) intact	Heel(s) intact
2nd RN Heel Inspection Verification	Goette RN, Annmarie	-
Skin Color	Normal for ethnicity	Normal for ethnicity
Skin Temperature	Warm	Warm
Skin Description	Dry	Dry
Skin Integrity	Intact (no broken skin)	Intact (no broken skin)
Skin Turgor	Elastic	Decreased

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Integumentary

Integumentary Assessment

Procedure	Reference Range	Recorded Date	11/15/2021	11/15/2021	Units
		Recorded Time	08:00 PST	06:00 PST	
		Recorded By	Dionisio RN,Rexie T	Gutierrez RN,Roseanne M	
Mucous Membrane Color			Pink	Pink	
Mucous Membrane Description			Moist	Moist	

Procedure	Reference Range	Recorded Date	11/15/2021	11/15/2021	Units
		Recorded Time	05:50 PST	04:00 PST	
		Recorded By	Amezquita RN,Steven A	Amezquita RN,Steven A	
Skin Color			Normal for ethnicity	Normal for ethnicity	
Skin Temperature			Warm	Warm	
Skin Description			Dry	Dry	

Procedure	Reference Range	Recorded Date	11/15/2021	11/14/2021	Units
		Recorded Time	00:25 PST	23:48 PST	
		Recorded By	Amezquita RN,Steven A	Amezquita RN,Steven A	
Skin Color			Normal for ethnicity	Normal for ethnicity	
Skin Temperature			Warm	Warm	
Skin Description			Dry	Dry	
Skin Integrity			-	Intact (no broken skin)	

Procedure	Reference Range	Recorded Date	11/14/2021	Units
		Recorded Time	23:09 PST	
		Recorded By	Horton RN,Sarah M	
Skin Color			Normal for ethnicity	
Skin Temperature			Warm	
Skin Description			Dry	

Intrasedation

Procedure	Reference Range	Recorded Date	11/15/2021	Units
		Recorded Time	06:00 PST	
		Recorded By	Gutierrez RN,Roseanne M	
Pulse Oximetry Monitoring			Intermittent	

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Measurements

Measurements

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	06:30 PST	Allee CNA, Erica J Gutierrez RN, Roseanne M	11/15/2021 06:30 PST
Weight		69.5 ⁰⁹			kg
Usual Weight		-			kg
Height/Length		169 ⁰⁹			cm
Body Mass Index		24 ⁰⁹			

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Units
		11/14/2021	16:50 PST	Tjongdrokusuma RN, Teddy	
Weight Dosing		72.6			kg
Treatment Height/Length Dosing		170			cm

Order Comments

- O8: Admission History Adult
Ordered by System secondary to Admission or Transfer
- O9: Basic Admission Information
Ordered by System secondary to Admission or Transfer

Neurological

Neurological Assessment

Procedure	Reference Range	Recorded Date	Recorded Time	Recorded By	Units
		11/15/2021	08:28 PST	Dionisio RN, Rexie T	11/15/2021 08:00 PST Dionisio RN, Rexie T
Neurological Symptoms		-			None
Gait		-			Steady
Swallowing Difficulty		-			None
Characteristics of Communication		-			Appropriate
Characteristics of Speech		-			Clear
Aspiration Risk		-			None
Facial Symmetry		-			Symmetric
Level of Consciousness		Awake			-
Agitation Scale		-			0=Calm and cooperative
Hallucinations Present		-			None

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Neurological

Neurological Assessment

Procedure	Reference Range	Recorded Date	11/15/2021	11/15/2021	Units
		Recorded Time	06:00 PST	05:50 PST	
		Recorded By	Gutierrez RN,Roseanne M	Amezquita RN,Steven A	
Neurological Symptoms			None	-	
Gait			Steady	-	
Swallowing Difficulty			None	-	
Characteristics of Communication			Appropriate	-	
Characteristics of Speech			Clear	-	
Aspiration Risk			None	-	
Facial Symmetry			Symmetric	-	
Level of Consciousness			Awake	Sleeping/Easily aroused	
Agitation Scale			0=Calm and cooperative	-	
Hallucinations Present			None	-	

Procedure	Reference Range	Recorded Date	11/15/2021	11/15/2021	Units
		Recorded Time	04:00 PST	00:25 PST	
		Recorded By	Amezquita RN,Steven A	Amezquita RN,Steven A	
Neurological Symptoms			None	-	
Level of Consciousness			Sleeping/Easily aroused	Awake	

Procedure	Reference Range	Recorded Date	11/14/2021	11/14/2021	Units
		Recorded Time	23:48 PST	23:09 PST	
		Recorded By	Amezquita RN,Steven A	Horton RN,Sarah M	
Level of Consciousness			Awake	Awake	

Procedure	Reference Range	Recorded Date	11/14/2021	Units
		Recorded Time	16:53 PST	
		Recorded By	Tjongdokusuma RN,Teddy	
Level of Consciousness			Awake ⁰¹⁰	

Order Comments

O10: ED Rapid Focused Assessment Adult
 Order placed due to patient arrival to the Emergency Department

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER

MRN: 918505

DOB/Age/Sex: 3/29/1946 76 years Male

FIN: 5295168

Admit/Disch: 11/14/2021 11/15/2021

Patient Type: Observation

Admitting: Talwar M.D.,Rishi

Attending: Khan M.D.,Mansurur R.

Neurological

Glasgow Coma Assessment

Procedure	Reference Range	Recorded Date	11/15/2021	11/15/2021
		Recorded Time	08:00 PST	06:00 PST
		Recorded By	Dionisio RN,Rexie T	Gutierrez RN,Roseanne M
Procedure	Reference Range			Units
Eye Opening Response Glasgow		Spontaneously		Spontaneously
Best Motor Response Glasgow		Obeys simple commands		Obeys simple commands
Best Verbal Response Glasgow		Oriented		Oriented
Glasgow Coma Score		15		15

Procedure	Reference Range	Recorded Date	11/14/2021	
		Recorded Time	23:09 PST	
		Recorded By	Horton RN,Sarah M	
Procedure	Reference Range			Units
Eye Opening Response Glasgow		Spontaneously		
Best Motor Response Glasgow		Obeys simple commands		
Best Verbal Response Glasgow		Oriented		
Glasgow Coma Score		15		

Pupils Assessment

Procedure	Reference Range	Recorded Date	11/15/2021	11/15/2021
		Recorded Time	08:00 PST	06:00 PST
		Recorded By	Dionisio RN,Rexie T	Gutierrez RN,Roseanne M
Procedure	Reference Range			Units
PERRLA		Yes		Yes

Neuromuscular/Extremities Assessment

Procedure	Reference Range	Recorded Date	11/15/2021	
		Recorded Time	08:00 PST	
		Recorded By	Dionisio RN,Rexie T	
Procedure	Reference Range			Units
Left Upper Extremity Strength -ICU		5 full strength		
Right Upper Extremity Strength -ICU		5 full strength		
Left Lower Extremity Strength -ICU		5 full strength		
Right Lower Extremity Strength -ICU		5 full strength		
Left Upper Extremity Tone		Normal		
Right Upper Extremity Tone		Normal		
Left Lower Extremity Tone		Normal		
Right Lower Extremity Tone		Normal		
Left Upper Extremity Sensation		Intact		
Right Upper Extremity Sensation		Intact		
Left Lower Extremity Sensation		Intact		

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Neurological

Neuromuscular/Extremities Assessment

		Recorded Date	11/15/2021
		Recorded Time	08:00 PST
		Recorded By	Dionisio RN,Rexie T
Procedure	Reference Range		
Right Lower Extremity Sensation		Intact	

Nutritional

Nutrition Admission Information

		Recorded Date	11/15/2021
		Recorded Time	06:30 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		
Home Diet		Regular ⁰⁸	
Feeding Ability		Complete independence ⁰⁸	

Order Comments

O8: Admission History Adult
 Ordered by System secondary to Admission or Transfer

Nutritional Risks

		Recorded Date	11/15/2021
		Recorded Time	06:30 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		
Constipation		Yes ⁰⁸	
Diarrhea		No ⁰⁸	
Enteral Feedings		No ⁰⁸	
Impaired Nutritional Intake		No ⁰⁸	
Intake < 50% of Normal in Last 3 Days		No ⁰⁸	
Nausea		No ⁰⁸	
Skin Breakdown/Pressure Injuries		No ⁰⁸	
TPN Feedings		No ⁰⁸	
Vomiting		No ⁰⁸	
Nutritional Risk Score		1 ⁰⁸	

		Recorded Date	11/15/2021
		Recorded Time	06:00 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		
Geriatric Surgical Patient		No	

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Nutritional

Nutritional Risks

		Recorded Date	11/15/2021
		Recorded Time	06:00 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		Units
Lactation		No	
Nutritional Risk Score		0	

Order Comments

O8: Admission History Adult
 Ordered by System secondary to Admission or Transfer

General Nutrition Information

		Recorded Date	11/15/2021
		Recorded Time	06:00 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		Units
Appetite		Unable to assess	
Eating Difficulties		None	

Nutrition Assessment Information

		Recorded Date	11/15/2021
		Recorded Time	06:00 PST
		Recorded By	Gutierrez RN,Roseanne M
Procedure	Reference Range		Units
Nutrition Information Reassessed		See Below ^{T19}	

Textual Results

T19: 11/15/2021 06:00 PST (Nutrition Information Reassessed)
 Assessment done - see following documentation for details

Pain Assessment

Pain Intensity Tools

		Recorded Date	11/15/2021	11/15/2021	11/15/2021
		Recorded Time	16:00 PST	12:00 PST	08:00 PST
		Recorded By	Dionisio RN,Rexie T	Dionisio RN,Rexie T	Dionisio RN,Rexie T
Procedure	Reference Range				Units
Numeric Pain Scale		0 = No pain	0 = No pain	0 = No pain	

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Pain Assessment

Pain Intensity Tools

	Recorded Date	11/15/2021	11/14/2021
	Recorded Time	06:00 PST	23:37 PST
	Recorded By	Gutierrez RN,Roseanne M Amezquita RN,Steven A	
Procedure	Reference Range	Units	
Numeric Pain Scale	0 = No pain	4 = Moderate pain ^{O11}	

	Recorded Date	11/14/2021	
	Recorded Time	19:00 PST	
	Recorded By	Mendoza ,Ruth	
Procedure	Reference Range	Units	
Numeric Pain Scale	7 = Severe pain		

Order Comments

O11: nitroglycerin (nitroglycerin sublingual tab)
 Give Q5min up to MAXIMUM of 3 doses per episode. Do not give if SBP less than 100

Pain Assessment Detail

	Recorded Date	11/14/2021	
	Recorded Time	23:37 PST	
	Recorded By	Amezquita RN,Steven A	
Procedure	Reference Range	Units	
Pain Functional Limitations Assessment	none ^{O11}		

Order Comments

O11: nitroglycerin (nitroglycerin sublingual tab)
 Give Q5min up to MAXIMUM of 3 doses per episode. Do not give if SBP less than 100

General Pain Assessment

	Recorded Date	11/14/2021	
	Recorded Time	23:34 PST	
	Recorded By	Amezquita RN,Steven A	
Procedure	Reference Range	Units	
Numeric Pain Scale General	4 = Moderate pain ^{O11}		

Order Comments

O11: nitroglycerin (nitroglycerin sublingual tab)
 Give Q5min up to MAXIMUM of 3 doses per episode. Do not give if SBP less than 100

San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Pain Assessment

Additional Pain

Recorded Date 11/14/2021
Recorded Time 23:34 PST
Recorded By Amezquita RN,Steven A

Procedure	Reference Range	Units
Pain Location	chest ^{O11}	
Pain Quality	pressure ^{O11}	

Order Comments

O11: nitroglycerin (nitroglycerin sublingual tab)
 Give Q5min up to MAXIMUM of 3 doses per episode. Do not give if SBP less than 100

Patient and Family Education

Recorded Date 11/15/2021
Recorded Time 16:59 PST
Recorded By Dionisio RN,Rexie T

Procedure	Reference Range	Units
Barriers to Learning	None evident	
Ed-Diet/Nutrition	Verbalizes understanding	
Ed-Exercise	Verbalizes understanding	
Ed-Importance of Follow-Up Visits	Verbalizes understanding	
Ed-Med Generic/Brand Name,Purpose,Action	Verbalizes understanding	
Ed-Pain Management	Verbalizes understanding	
Ed-Safety,Fall	Verbalizes understanding	
Ed-Safety,Medication	Verbalizes understanding	
Ed-When to Call Health Care Provider	Verbalizes understanding	
Home Caregiver Present for Session	No	
Teaching Method	See Below ^{T20}	
Prefd Language for Discharge Instruction	English	
Prefd Language for Education Leaflets	English	

Textual Results

T20: 11/15/2021 16:59 PST (Teaching Method)
 Demonstration, Explanation, Printed materials

Recorded Date 11/15/2021
Recorded Time 16:58 PST
Recorded By Dionisio RN,Rexie T

Procedure	Reference Range	Units
Barriers to Learning	None evident	
Ed-Activity Expectations	Verbalizes understanding	
Ed-Diet/Nutrition	Verbalizes understanding	
Ed-Equipment/Devices	Verbalizes understanding	

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Patient and Family Education

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/15/2021 16:58 PST Dionisio RN,Rexie T	
Ed-Medication Dosage,Route,Scheduling			Verbalizes understanding
Ed-Pain Management			Verbalizes understanding
Ed-Physical Limitations			Verbalizes understanding
Ed-Plan of Care			Verbalizes understanding
Ed-Safety,Medication			Verbalizes understanding
Ed-When to Call Health Care Provider			Verbalizes understanding
Home Caregiver Present for Session			No
Teaching Method			See Below ^{T21}
Prefd Language for Discharge Instruction			English
Prefd Language for Education Leaflets			English

Textual Results

T21: 11/15/2021 16:58 PST (Teaching Method)
 Demonstration, Explanation, Printed materials

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/15/2021 08:00 PST Dionisio RN,Rexie T	
Barriers to Learning			None evident
Ed-Accurate Report of Pain			Verbalizes understanding
Ed-Action if Fall Occurs			Verbalizes understanding
Ed-Activity Expectations			Verbalizes understanding
Ed-Bed Height			Verbalizes understanding
Ed-Benefit of Pain Control			Verbalizes understanding
Ed-Call Light Use,Conventional			Verbalizes understanding
Ed-Common Side Effects-Pain Medication			Verbalizes understanding
Ed-Cough/Deep Breathing			Verbalizes understanding
Ed-Diet/Nutrition			Verbalizes understanding
Ed-Environmental Management			Verbalizes understanding
Ed-Equipment/Devices			Verbalizes understanding
Ed-Exercise			Verbalizes understanding
Ed-Fall Prevention Protocol			Verbalizes understanding
Ed-Fall Risk Factors			Verbalizes understanding
Ed-Handrail/Grab Bar Use			Verbalizes understanding
Hypertension			Verbalizes understanding
Ed-Importance of Reporting Pain			Verbalizes understanding
Ed-Medication Dosage,Route,Scheduling			Verbalizes understanding
Ed-Medication Side Effects			Verbalizes understanding
Ed-Nonpharmacologic Pain Interventions			Verbalizes understanding
Ed-Nonskid Footwear Use			Verbalizes understanding

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San Antonio Regional Hospital

Patient: HANNA MD, ADEL SHAKER
MRN: 918505 **DOB/Age/Sex:** 3/29/1946 76 years Male
FIN: 5295168 **Admit/Disch:** 11/14/2021 11/15/2021
Patient Type: Observation **Admitting:** Talwar M.D.,Rishi
Attending: Khan M.D.,Mansurur R.

Patient and Family Education

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/15/2021 08:00 PST Dionisio RN,Rexie T	
Ed-Notification of Staff When Leaving			Verbalizes understanding
Ed-Pain Assessment Schedule			Verbalizes understanding
Ed-Pain Can Be Managed/Relieved			Verbalizes understanding
Ed-Pain Management			Verbalizes understanding
Ed-Painful Procedures Planned			Verbalizes understanding
Ed-Patient Specific Fall Risk Factors			Verbalizes understanding
Ed-Personal Article Availability			Verbalizes understanding
Ed-Physical Limitations			Verbalizes understanding
Ed-Prevention Responsibility Patient			Verbalizes understanding
Ed-Safety,Fall			Verbalizes understanding
Shortness of Breath			Verbalizes understanding
Ed-Side Effect Management			Verbalizes understanding
Ed-Side Rails for Support			Verbalizes understanding
Ed-Transfer/Mobility Techniques			Verbalizes understanding
Ed-When to Call Health Care Provider			Verbalizes understanding
Teaching Method			See Below ^{T22}

Textual Results

T22: 11/15/2021 08:00 PST (Teaching Method)
 Demonstration, Explanation, Printed materials

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/15/2021 06:30 PST Gutierrez RN,Roseanne M	
Condition H Education			Yes, left at bedside ^{O8}
Prefd Language for Discharge Instruction			English ^{O8}
Prefd Language for Education Leaflets			English ^{O8}

Procedure	Reference Range	Recorded Date Recorded Time Recorded By	Units
		11/15/2021 06:00 PST Gutierrez RN,Roseanne M	
Ed-Activity Expectations			Verbalizes understanding
Ed-Bed Height			Verbalizes understanding
Ed-Call Light Use,Conventional			Verbalizes understanding
Ed-Environmental Management			Verbalizes understanding
Ed-Fall Prevention Protocol			Verbalizes understanding
Ed-Fall Risk Factors			Verbalizes understanding
Ed-Night Light Use			Verbalizes understanding
Ed-Nonskid Footwear Use			Verbalizes understanding

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