

Please note:

This file may contain sensitive information that we are not legally authorized to redact per *California Business and Professions Code § 22458*.

Additionally, the copy or copies following this page may be difficult to read.

We have done our best to produce a legible copy of any original documents that were not in good condition.

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF WORKERS' COMPENSATION
WORKERS' COMPENSATION APPEALS BOARD

ADEL HANNA
DOB: 3/29/1946
SSN: XXX-XX-XXXX

AKA:
DOB:
SSN:

VS.

CALIFORNIA INSTITUTION FOR MEN , STATE FUND - RIVERSIDE - STATE
CONTRACTS

Case No: ADJ15547702

(IF APPLICATION HAS BEEN FILED, CASE NUMBER
MUST BE INDICATED REGARDLESS OF DATE OF INJURY)

SUBPOENA DUCES TECUM

(When records are mailed, identify them by using the
above Case No. or attaching copy of the subpoena.)

NO PERSONAL APPEARANCE NECESSARY

Please refer to the In Bold summary description
found below to identify the documents requested by
this Subpoena

*The People of the State of California Sends Greetings to: **Custodian Of Records***

CHINO VALLEY MEDICAL CENTER - MEDICAL RECORDS

WE COMMAND YOU to appear before A NOTARY PUBLIC

At ONTELLUS, 27450 Ynez Road, Suite 300, Temecula, CA 92591-4680

On the 09th day of February, 2023, at 9 o'clock A. M. to testify in the above-entitled matter and to bring with you and
produce the following described documents:

**ANY AND ALL MEDICAL/TREATMENT RECORDS PERTAINING TO THE CARE, TREATMENT AND EXAMINATION OF CLAIMANT/APPLICANT REGARDLESS
OF TIME PERIOD WHEN SERVICES WERE RENDERED.**

(Do not produce X-rays unless specifically mentioned above.)

For failure to attend as required, you may be deemed guilty of a contempt and liable to pay to the parties aggrieved all losses and amages
sustained thereby and forfeit one hundred dollars in addition thereto.

This subpoena is issued at the request of the person making the declaration on the reverse hereof, or on the copy which is served herewith.

Date 01/25/2023



CC: NATALIA FOLEY ESQ
295923

**WORKERS' COMPENSATION APPEALS BOARD
OF THE STATE OF CALIFORNIA**

Workers Compensation Judge

**Records copied and submitted to the designated
court by ONTELLUS will be deemed as full
compliance with this Subpoena.**

FOR INJURIES OCCURRING ON OR AFTER JANUARY 1,
1990 AND BEFORE, JANUARY 1, 1994:

If no Application for Adjudication of Claim has been filed, a declaration
under penalty of perjury that the Employee's Claim for Workers'
Compensation Benefits (Form DWC-1) has been filed pursuant to Labor
Code Section 5401 must be executed properly.

SEE REVERSE SIDE

[SUBPOENA INVALID WITHOUT DECLARATION]

Order Ref #: 1957077

You may fully comply with this subpoena by mailing the records described (or authenticated copies, Evid Code 1561) to the person and place stated
above within ten (10) days of the date of service of this subpoena.

This subpoena does not apply to any member of the Highway Patrol, Sheriff's Office or City Police Department unless accompanied by notice from
this Board that deposit of witness fee has been made in accordance with Government Code 68097.2 et seq.

DECLARATION FOR SUBPOENA DUCES TECUM

Case No.: ADJ15547702

STATE OF CALIFORNIA, County of RIVERSIDE

The undersigned states:

That he / she is (one of) the representative(s) for the defendant in the action captioned on the reverse hereof.

That CHINO VALLEY MEDICAL CENTER - MEDICAL RECORDS has in his / her possession or under his / her control the documents described on the reverse hereof. That said documents are material to the issues involved in the case for the following reason: To determine present and/or past physical condition; nature, extent and duration of sickness; injury, disability and/or necessity of further treatment.

[] Declaration for Injuries on or After January 1, 1990 and before January 1, 1994

That an Employee's Claim for Workers' Compensation Benefits (DWC Form 1) has been filed in accordance with Labor Code Section 5401 by the alleged injured worker whose records are sought; or if the worker is deceased, by the dependant(s) of the decedent, and that a true copy of the form filed is attached hereto. (Check Box if applicable and part of declaration below, See instructions on front of subpoena.)

I declare under penalty of perjury that the forgoing is true and correct.

Executed on 01/25/2023, at Temecula, California

[Signature] ONTELLUS, 27450 Ynez Road, #300 (951) 694-5770
Signature Address Telephone

ONTELLUS FOR: STATE FUND - RIVERSIDE - STATE CONTRACTS
THE INSURANCE CARRIER: DIANA MUNOZ
/S/ PO BOX 65005 ATTN: CLAIMS PROCESSING
FRESNO, CA 93650-5005
(888) 782-8338

DECLARATION OF SERVICE

STATE OF CALIFORNIA, County of: San Bernardino

I, the undersigned, state that I served the forgoing subpoena by showing the original and delivering a true copy thereof, together with a copy of the Declaration in support thereof, to each of the following named persons, personally, at the date and place set forth opposite each name.

Name of Person Served: 45514 S Date: January, 26 2023 Place: 5451 WALNUT AVE ATTN: MEDICAL RECORDS, CHINO, CA 91710

I declare under penalty of perjury that the forgoing is true and correct.

Executed on at CHINO, California

[Signature]
Signature

ADEL HANNA, CHINO VALLEY MEDICAL CENTER - MEDICAL RECORDS



Order Ref #: 1957077

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): DIANA MUNOZ STATE FUND - RIVERSIDE - STATE CONTRACTS PO BOX 65005 ATTN: CLAIMS PROCESSING FRESNO, CA 93650-5005 (888) 782-8338 ATTORNEY FOR (<i>Name</i>): CALIFORNIA INSTITUTION FOR MEN / STATE FUND - RIVERSIDE - STATE CONTRACTS	FOR COURT USE ONLY CASE NUMBER: ADJ15547702
NAME OF COURT: WCAB - SAN BERNARDINO STREET ADDRESS: 464 W 4TH ST STE 239 CITY AND ZIP CODE: SAN BERNARDINO, CA 92401-1411 BRANCH NAME: SAN BERNARDINO DISTRICT OFFICE	
PLAINTIFF/PETITIONER: ADEL HANNA DEFENDANT/RESPONDENT: CALIFORNIA INSTITUTION FOR MEN / STATE FUND - RIVERSIDE - STATE CONTRACTS	
NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION (Code Civ. Proc., §§ 1985.3, 1985.6)	

NOTICE TO CONSUMER OR EMPLOYEE

TO (name): ADEL HANNA VIA HIS/HER ATTORNEY OF RECORD

1. PLEASE TAKE NOTICE THAT **REQUESTING PARTY (name): DIANA MUNOZ, STATE FUND - RIVERSIDE - STATE CONTRACTS** SEEKS YOUR RECORDS FOR EXAMINATION by the parties to this action on (*specify date*):02/09/2023

The records are described in the subpoena directed to (*specify name and address of person or entity from whom records are sought*): **CHINO VALLEY MEDICAL CENTER - MEDICAL RECORDS 5451 WALNUT AVE ATTN: MEDICAL RECORDS CHINO, CA 91710**

A copy of the subpoena is attached.

2. IF YOU OBJECT to the production of these records, YOU MUST DO ONE OF THE FOLLOWING BEFORE THE DATE SPECIFIED. IN ITEM a. OR b. BELOW:
- a. If you are a party to the above-entitled action, you must file a motion pursuant to Code of Civil Procedure section 1987.1 to quash or modify the subpoena and give notice of that motion to the **witness** and the **deposition officer** named in the subpoena at least five days before the date set for production of the records.
 - b. If you are not a party to this action, you must serve on the **requesting party** and on the **witness**, before the date set for production of the records, a written objection that states the specific grounds on which production of such records should be prohibited. You may use the form below to object and state the grounds for your objection. You must complete the Proof of Service on the reverse side indicating whether you personally served or mailed the objection. The objection should **not** be filed with the court. **WARNING: IF YOUR OBJECTION IS NOT RECEIVED BEFORE THE DATE SPECIFIED IN ITEM 1, YOUR RECORDS MAY BE PRODUCED AND MAY BE AVAILABLE TO ALL PARTIES.**
3. YOU OR YOUR ATTORNEY MAY CONTACT THE UNDERSIGNED to determine whether an agreement can be reached in writing to cancel or limit the scope of the subpoena. If no such agreement is reached, and if you are not otherwise represented by an attorney in this action, YOU SHOULD CONSULT AN ATTORNEY TO ADVISE YOU OF YOUR RIGHTS OF PRIVACY.

Date: 01/25/2023

DIANA MUNOZ

/S/ DIANA MUNOZ

(TYPE OR PRINT NAME)

(SIGNATURE OF

REQUESTING PARTY

ATTORNEY)

OBJECTION BY NON-PARTY TO PRODUCTION OF RECORDS

1. I object to the production of all of my records specified in the subpoena.
2. I object only to the production of the following specified records:

3. The specific grounds for my objection are as follows:

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

(Proof of service on reverse)

Page 1 of 2

PLAINTIFF/PETITIONER: ADEL HANNA
DEFENDANT/RESPONDENT: CALIFORNIA INSTITUTION FOR MEN

CASE NUMBER:
ADJ15547702

PROOF OF SERVICE OF NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION
(Code Civ. Proc., §§ 1985.3,1985.6)

Personal Service Mail Order #: 1957077

1. At the time of service I was at least 18 years of age and **not a party to this legal action.**
2. I served a copy of the *Notice to Consumer or Employee and Objection* as follows (check either a or b):
 - a. **Personal service.** I personally delivered the *Notice to Consumer or Employee and Objection* as follows:

(1) Name of person served:	(3) Date served:
(2) Address where served:	(4) Time served:
 - b. **Mail.** I deposited the *Notice to Consumer or Employee and Objection* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(1) Name of person served : WORKERS DEFENDERS ANAHEIM /Opposing Counsel	(3) Date of mailing: 01/25/2023
(2) Address: NATALIA FOLEY (295923) State Bar 8018 E SANTA ANA CANYON RD STE 100-215 ANAHEIM, CA 92808	(4) Place of mailing (city and state): Temecula, CA

(5) I am a resident of or employed in the county where the *Notice to Consumer or Employee and Objection* was mailed.

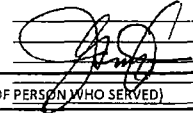
c. My residence or business address is (specify): ONTELLUS, 27450 Ynez Rd, Temecula CA 92591

d. My phone number is (specify): (800) 660-1107

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 01/25/2023

Jeannie Gosiengfiao

(TYPE OR PRINT NAME OF PERSON WHO SERVED)



(SIGNATURE OF PERSON WHO SERVED)

PROOF OF SERVICE OF OBJECTION TO PRODUCTION OF RECORDS
(Code Civ. Proc., §§ 1985.3,1985.6)

Personal Service Mail

1. At the time of service I was at least 18 years of age and **not a party to this legal action.**
2. I served a copy of the *Objection to Production of Records* as follows (complete either a or b):
 - a. ON THE REQUESTING PARTY
 - (1) **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served:	(iii) Date served:
(ii) Address where served:	(iv) Time served:
 - (2) **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served:	(iii) Date of mailing:
(ii) Address:	(iv) Place of mailing (city and state):
 - b. ON THE WITNESS
 - (1) **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served:	(iii) Date served:
(ii) Address where served:	(iv) Time served:
 - (2) **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served:	(iii) Date of mailing:
(ii) Address:	(iv) Place of mailing (city and state):

(v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.

3. My residence or business address is (specify):

4. My phone number is (specify):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date: 01/25/2023

(TYPE OR PRINT NAME OF PERSON WHO SERVED)

(SIGNATURE OF PERSON WHO SERVED)

4NOT192.168.107.59.1
CVMC

CHINO VALLEY MEDICAL CENTER
5451 Walnut Avenue Chino, CA 91710
(909) 464-8600

ADMISSION / REGISTRATION

Patient HANNA, ADEL S	Unit Number M000273781	Account # V00000905328	Reimb Type / Payor Type FFSNONCONT				
Admit/Serv Dt 06/01/20	Time 0010	Disch Dt	Time	Room/Bed	Location EMERGENCY DEPART	Service	Pat Type REG ER
Arrival Mode AMB	Source HCM	Priority EM		Primary Care Phys	Office Phone	Family Physician	Office Phone
Reason for Visit CHEST PAIN.	Admission Comment		Admitted By ADGE				
Emergency Physician Ornelas, Francisco	Office Phone 310-379-2134	Attending Physician	Office Phone	Admitting Physician	Office Phone		
Previous Inpatient D/C Date:	12/24/14	Readmit No of Days:	198	Previous Visit Prin Dx:			

PATIENT

Soc Sec No DOB Age Sex MS Religion VIP Conf
548-67-8932 03/29/46 74 M M CH Y

E-Mail STMARIAMEDICAL@YAHOO.COM

Race Ethnicity Pref Lang Maiden/Other Name
OTHER 2 ENG HANNA, ADEL

Address: 3019 SONG OF THE WINDS Alt Address: 3019 SONG OF THE WIND
CHINO HILLS, CA 91709 CHINO HILL CA 91709

Home Phone: (909) 342-9908 Cell Phone:

PATIENT EMPLOYER

Employer: CALIFORNIA INSTITUTE FOR MEN
Address: 14901 S CENTRAL AVE
CHINO, CA 91710

Work Phone: (909) 606-7144
Occupation: PHYSICIAN

GUARANTOR

Name: HANNA, ADEL SSN: 548-67-8932

Address: 3019 SONG OF THE WINDS
CHINO HILLS, CA 91709

Home Phone: (909) 342-9908

Relationship to Patient: SP

GUARANTOR EMPLOYER

Employer: CALIFORNIA INSTITUTE FOR MEN
Address: 14901 S CENTRAL AVE
CHINO, CA 91710

Work Phone: (909) 606-7144
Occupation: PHYSICIAN

CARE PARTNER

Relationship to Patient: WIFE

Name: KAWAGUCHI, IRMA

Address: 3019 SONG OF THE WINDS , CHINO HILLS, CA 91709

Home Ph: (909) 342-9908 Work Ph:

NEXT OF KIN

Relationship to Patient: SON

Name: HANNA, TAMER

Address: 3019 SONG OF THE WINDS , CHINO HILLS, CA 91

Home Ph: (909) 342-9908 Work Ph: (949) 413-8670

INSURANCE #1

Name: BLUE CROSS PRUDENT BUYER Insured: HANNA, ADEL S

Address: Rel to Pt: SELF / SAME AS PATIENT

PO BOX 60007 Policy#: CPR226A67822

LOS ANGELES CA 900600007 Coverage:

Phone: Group: CB010A-PERSCHOICE-CALPERS STAT Medical GRP/IPA:

AUTHORIZATION

Auth #1:

Auth #2:

Medical GRP/IPA:

INSURANCE #2

Name: MEDICARE PART A ONLY Insured: HANNA, ADEL S

Address: Rel to Pt: SELF / SAME AS PATIENT

NORIDIAN Policy: 548678932A

FARGO ND 58108-6770 Coverage:

Phone: (855) 609-9960 Group: PART A ONLY-MEDICARE Medical GRP/IPA:

AUTHORIZATION

Auth #1:

Auth #2:

Medical GRP/IPA:

Advance Directive

Does the patient have an advance directive on file (Y/N): N

Advance Directive Info Given: (Y/N): Y

Blood Product:

Organ Donor: NO

Accident Occurance

Date	Time
DATE ONSET OF SYMPTOMS/ILLNESS	06/01/20 0000

Accident Detail:

Primary Isolation Isolation Description

Influenza Vaccine: PREVIOUS VACCIN Date: 01/09/14

Pneumococcal Vaccine: VACCINE UNAVAIL Date:

DISCHARGE SUMMARY Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

DISCHARGE SUMMARY

Dictated/Documented By: Andrea Glover NP Date/Time: 06/03/20 1145
Service Date/Time: 06/03/20 1145

Discharge Instructions

Discharge Information

Discharge Date 06/03/20

Discharge Home

Discharge Patient To HOME

Discharge Transportation

Discharge Transport By PRIVATE AUTO

Family Notification

Patient Family/Representative Notified Of Discharge: YES

Patient Instructions

Patient Instructions

Recommended Activity NO RESTRICTIONS

Bath SHOWER

Recommended Diet CARDIAC DIET

Potential Complications

Follow with your primary physician or local ER if any of the following occur:

- Worsening Symptoms: Temperature, Swelling, Pain, Shortness of Breath, etc.

Pending Tests/Diagnostics

Follow with your physician for updates and outcomes on the following pending tests:

- NONE

Imaging Results

Impressions

NÚCLEAR MEDICINE - NM REST/STRESS w/ MOTION+ EFRAC 06/02 1717

*** Report Impression - Status: SIGNED Entered: 06/02/2020 1742

Impression:

- No evidence of myocardium at ischemic risk.
 - The left ventricular ejection fraction is 71%.
- Impression By: DRBUIKE - Kevin T. Bui,MD

DISCHARGE SUMMARY Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

DISCHARGE SUMMARY

Dictated/Documented By: Andrea Glover NP Date/Time: 06/03/20 1145
Service Date/Time: 06/03/20 1145

Discharge Medications

Prescriptions Provided YES

Medication Reconciliation Done YES

Reconcile Medications

Scheduled Medications

Amlodipine Besylate 5 MG TABLET 5 MG PO DAILY (Reported)

ASPIRIN (ASPI-COR) 81 MG CTB 81 MG PO DAILY (Reported)

ATENOLOL 100 MG TABLET 100 MG PO DAILY (Reported)

Discontinued Medications

ATENOLOL 50 MG TABLET 1 TAB PO DAILY #30 TAB (Reported)

Discontinued reason: PATIENT NO LONGER TAKING

[AUGMENTIN] 875 MG TAB 1 TAB PO BID CHRONIC SINUSITIS 30 Days

Discontinued reason: PATIENT NO LONGER TAKING

FLUTICASONE FUROATE (VERAMYST) 27.5 MCG/Actuation SPR 2 Spray NA DAILY SINUSITIS #10 GM

Discontinued reason: PATIENT NO LONGER TAKING

PREDNISONE 20 MG TAB 1 TAB PO BID #10 TAB

Discontinued reason: PATIENT NO LONGER TAKING

Prednisone (Prednisone*) 20 MG TAB 20 MG PO DAILY CHRONIC SINUSITIS 5 Days

Discontinued reason: PATIENT NO LONGER TAKING

Follow-Up Care

Follow-Up Clinic

THE FOLLOWING TELE-MEDICINE APPOINTMENT HAS BEEN SET UP FOR YOUR FOLLOW-UP CARE:

06/08/2020 AT 10:00AM

THE CONTINUNITY CARE CLINIC
5450 JEFFERSON AVE. STE 3
CHINO, CA 91710

DISCHARGE SUMMARY Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

DISCHARGE SUMMARY

Dictated/Documented By: Andrea Glover NP Date/Time: 06/03/20 1145
Service Date/Time: 06/03/20 1145

909-464-8722

IF YOU ARE UNABLE TO KEEP THIS APPOINTMENT, PLEASE CALL THEM DIRECTLY TO RESCHEDULE.

Discharge Progress Note

Discharge Progress Note

Admit Reason

Patient admitted for: CHEST PAIN, HYPOKALEMIA

Admitting Diagnosis

Chest pain, r/o ACS VS GERD
Hypokalemia 2.8
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Discharge Diagnosis

Chest pain, r/o ACS VS GERD RESOLVED
Hypokalemia 2.8 RESOLVED
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Procedures

Impressions

NUCLEAR MEDICINE - NM REST/STRESS w/ MOTION+ EFRAC 06/02 1717

*** Report Impression - Status: SIGNED Entered: 06/02/2020 1742

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

DISCHARGE SUMMARY Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

DISCHARGE SUMMARY

Dictated/Documented By: Andrea Glover NP Date/Time: 06/03/20 1145
Service Date/Time: 06/03/20 1145

Impression By: DRBUIKE - Kevin T. Bui,MD

Hospital Course

**PATIENT WAS ADMITTED FOR CHEST PAIN AND HYPOKALEMIA. PATIENT RECEIVED A CARDI
CONSULT WITH DR. CHOU. pOTASSUM WAS REPLACED AND HYPOKALEMIA RESOLVED**

Trops x2 negative, trend q8

Cardiology consult Dr.Chou : EKG showed normal sinus rhythm without acute ischemic changes.
Troponins have been negative x 2. Chest pain - ruled out for myocardial infarction; constellation of
symptoms suggest secondary to stress.. Patient received stress test

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

**Psychiatry consult pending. Per patient request. patient has been under extreme amount fo stress
and is requesting to speak with Psychiatrist. Dr.Idrees to see patient for psych clearance.**

**If patient is clear by psyc patient is clear for discharge home . Patient is ambulating without
assistance and is tolertating diet**

History of Present Illness

This is 74 YOM with PMH of HTN, migranes and GERD came to ED with c/o substernal chest tightness
and pressure with radiation to the left shoulder left arm and jaw for 1 hour at rest associated with nausea
but no vomiting or diaphoresis. Patient stated he had a cardiac catheterization about 5 or 6 years ago
and he showed mild disease but no stents were placed. Pt was given 2 nitro and one tab of ASA at home.
Pt denies fever, chills, cough, SOB, vomiting, diarrhea, or body aches. No risk factors or symptoms
suspicious for COVID at the moment.

He had 1 brother die at almost 50 years old and a second brother die at 65 years old from heart attack.

Complications

None

DISCHARGE SUMMARY Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

DISCHARGE SUMMARY

Dictated/Documented By: Andrea Glover NP Date/Time: 06/03/20 1145
Service Date/Time: 06/03/20 1145

Condition Upon Discharge STABLE

SIGNED DATE AND TIME: 06/03/20 / 1153
ELECTRONICALLY SIGNED BY: Andrea Glover NP

COSIGNED DATE AND TIME: 06/10/20 / 1439
ELECTRONICALLY SIGNED BY: Dr. Jhoette Dumlao

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

GENERAL VISIT INFORMATION

Reason for Visit: CHEST PAIN, HYPOKALEMIA

Allergies/Adverse Drug Reactions: metoclopramide

Discharge Disposition: ROUTINE HOME/SELF CARE

Care Team Members

per patient NONE, PRIMARY CARE PHYSICIAN
Jeffrey J. Crudo, ADMITTING, INTERNAL MEDICINE, 818-638-1157
Jeffrey J. Crudo, ATTENDING, INTERNAL MEDICINE, 818-638-1157
per patient NONE, FAMILY
Francisco Ornelas, EMERGENCY, EMERGENCY MEDICINE, 310-379-2134

DISCHARGE INFORMATION

DISCHARGE

Date: 06/03/20

Discharge Diagnosis: chest pain

Discharge Disposition: ROUTINE HOME/SELF CARE

PATIENT INFORMATION

Temperature/F: 98.0

Pulse: 79

Respirations: 20

Blood Pressure: 150/93

SpO2 (%): 95

Oxygen Device: ROOM AIR

O2 Amount (L/min): 0

Pain Scale at Discharge: 0/10

Pain Medication Given: NO

Condition Upon Leaving:

ALERT

ORIENTED

ABLE TO COMMUNICATE

Isolation:

NONE

Feeding: INDEPENDENT

Ambulating: INDEPENDENT

Transferring: INDEPENDENT

DISCHARGE INSTRUCTIONS

Discharge Date 06/03/20

Discharge Home

Discharge Patient To HOME

PAGE NUMBER: 1

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

Discharge Transportation

Discharge Transport By PRIVATE AUTO

Family Notification

Patient Family/Representative Notified Of Discharge: YES

Patient Instructions

Recommended Activity NO RESTRICTIONS

Bath SHOWER

Recommended Diet CARDIAC DIET

Potential Complications

Follow with your primary physician or local ER if any of the following occur:

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Pending Tests/Diagnostics

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Impressions

NUCLEAR MEDICINE - NM REST/STRESS w/ MOTION + EFRAC 06/02 1717

*** Report Impression - Status: SIGNED Entered: 06/02/2020 1742

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

Impression By: DRBUIKE - Kevin T. Bui,MD

Discharge Medications

Prescriptions Provided YES

Medication Reconciliation Done YES

Follow-Up Clinic

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06/08/2020 AT 10:00AM

THE CONTINUITY CARE CLINIC
5450 JEFFERSON AVE. STE 3
CHINO, CA 91710
909-464-8722

IF YOU ARE UNABLE TO KEEP THIS APPOINTMENT, PLEASE CALL THEM DIRECTLY TO RESCHEDULE.

Admit Reason

Patient admitted for: CHEST PAIN, HYPOKALEMIA

PAGE NUMBER: 2

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

Admitting Diagnosis

Chest pain, r/o ACS VS GERD
Hypokalemia 2.8
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Discharge Diagnosis

Chest pain, r/o ACS VS GERD RESOLVED
Hypokalemia 2.8 RESOLVED
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Procedures

Impressions

NUCLEAR MEDICINE - NM REST/STRESS w/ MOTION + EFRAC 06/02 1717

*** Report Impression - Status: SIGNED Entered: 06/02/2020 1742

Impression:

1. No evidence of myocardium at ischemic risk.
The left ventricular ejection fraction is 71%.
- Impression By: DRBUIKE - Kevin T. Bui,MD

Hospital Course

pPATIENT WAS ADMITTED FOR CHEST PAIN AND HYPOKALEMIA. PATIENT RECEIVED A CARDIO CONSULT WITH DR. CHOU. pOTASSUM WAS REPLACED AND HYPOKALEMIA RESOLVED

Trops x2 negative, trend q8

Cardiology consult Dr.Chou : EKG showed normal sinus rhythm without acute ischemic changes. Troponins have been negative x 2. Chest pain - ruled out for myocardial infarction; constellation of symptoms suggest secondary to stress.. Patient received stress test

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

Psychiatry consult pending. Per patient request. patient has been under extreme amount fo stress and is requesting to speak with Psychiatrist. Dr.Idrees to see patient for psych clearance.

If patient is clear by psyc patient is clear for discharge home . Patient is ambulating without assistance and is toltertating diet

PAGE NUMBER: 3

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

History of Present Illness

This is 74 YOM with PMH of HTN, migranes and GERD came to ED with c/o substernal chest tightness and pressure with radiation to the left shoulder left arm and jaw for 1 hour at rest associated with nausea but no vomiting or diaphoresis. Patient stated he had a cardiac catheterization about 5 or 6 years ago and he showed mild disease but no stents were placed. Pt was given 2 nitro and one tab of ASA at home. Pt denies fever, chills, cough, SOB, vomiting, diarrhea, or body aches. No risk factors or symptoms suspicious for COVID at the moment.

He had 1 brother die at almost 50 years old and a second brother die at 65 years old from heart attack.

Complications

None

Condition Upon Discharge STABLE

MEDICATION RECONCILIATION

Medications

ATORVASTATIN* (Lipitor*) 10 MG TABLET	Dose: 10 MILLIGRAM	BY MOUTH, EVERY EVENING LAST DOSE GIVEN (Date/Time): 6/2/20 AT 9:41 PM	Qty: 30 Refills: 0	Sent to Pharm 1
Metoprolol Succinate (Metoprolol Succinate) 25 MG TAB, ER, 24H	Dose: 25 MILLIGRAM	BY MOUTH, DAILY LAST DOSE GIVEN (Date/Time): 6/3/20 AT 08:53 AM	Qty: 30 Refills: 0	Sent to Pharm 1
Lisinopril* (Zestril) 5 MG TABLET	Dose: 5 MILLIGRAM	BY MOUTH, DAILY LAST DOSE GIVEN (Date/Time): 6/3/20 AT 08:52 AM	Qty: 30 Refills: 0	Sent to Pharm 1

Continued Medications

ASPIRIN (ASPI-COR) 81 MG Dose: BY MOUTH, DAILY
CIB 81 MILLIGRAM

Stopped Medications

ATENOLOL (ATENLOL) 100 MG TABLET	Dose: 100 MILLIGRAM	BY MOUTH, DAILY Reason Stopped: PHYSICIAN ORDER
Amlodipine Besylate (Amlodipine Besylate) 5 MG TABLET	Dose: 5 MILLIGRAM	BY MOUTH, DAILY Reason Stopped: PHYSICIAN ORDER

1: SAV-CN PHARMACY #2515, 3255 GRAND AVE, CHINO HILLS, CA 91709 (909)590-1449

PAGE NUMBER: 4

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

Stopped Medications (Continued)

Your Preferred Pharmacy
SAV-ON PHARMACY #2515
3255 GRAND AVE
CHINO HILLS, CA 91709
(909)590-1449

ADDITIONAL INFORMATION
CASE MANAGEMENT/SOCIAL SERVICES

THE FOLLOWING TELE-MEDICINE APPOINTMENT HAS BEEN SET UP FOR YOUR FOLLOW-UP CARE:

06/08/2020 AT 10:00AM

THE CONTINUITY CARE CLINIC
5450 JEFFERSON AVE. STE 3
CHINO, CA 91710
909-464-8722

IF YOU ARE UNABLE TO KEEP THIS APPOINTMENT, PLEASE CALL THEM DIRECTLY TO RESCHEDULE.

EDUCATIONAL MATERIALS

Exercise Stress Echocardiogram, Care After

LABORATORY/MICROBIOLOGY RESULTS

Basic Metabolic Panel (BMP)

<u>Date</u>	<u>Time</u>	<u>Test</u>	<u>Result</u>	<u>Flag</u>	<u>Normal Range</u>
06/03/20	0611	NA	139		136-145 mmol/L
06/03/20	0611	K	3.7		3.5-5.1 mmol/L
06/03/20	0611	CL	105		98-107 mmol/L
06/03/20	0611	CO2	28.1		21-32 mmol/L
06/03/20	0611	GLUCOSE	97		74-106 mg/dL
06/03/20	0611	BUN	8.0		7.0-18.0 mg/dL
06/03/20	0611	CREAT	0.9		0.7-1.3 mg/dL
06/03/20	0611	CA	8.5		8.5-10.1 mg/dL

Please follow up with your primary doctor regarding any abnormal test results.

Brain Natriuretic Peptide BNP

<u>Date</u>	<u>Time</u>	<u>Test</u>	<u>Result</u>	<u>Flag</u>	<u>Normal Range</u>
06/01/20	0040	B NATRIURETIC P	40.17		0-100 pg/mL

BNP < 100 PG/ML CHF VERY UNLIKELY (2%)
BNP 100-500 PG/ML INDETERMINATE

PAGE NUMBER: 5

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

BNP > 500 PG/ML CHF VERY LIKELY (95%)

Please follow up with your primary doctor regarding any abnormal test results.

Cardiac Enzymes

Date	Time	Test	Result	Flag	Normal Range
06/01/20	0040	CK	74		39-308 U/L
06/01/20	1650	TROP I	< 0.02		0.00-0.10 ng/m

Please follow up with your primary doctor regarding any abnormal test results.

Complete Blood Count (CBC)

Date	Time	Test	Result	Flag	Normal Range
06/03/20	0611	WBC	3.9	L	4.5-11.0 K/mm ³
06/03/20	0611	RBC	5.26		4.52-5.90 M/mm ³
06/03/20	0611	HGB	14.9		13.0-18.0 g/dL
06/03/20	0611	HCT	46		42-52 %
06/03/20	0611	MCV	87		80-99 fl
06/03/20	0611	MCH	28		27-31 pg
06/03/20	0611	MCHC	33		32-37 pg
06/03/20	0611	RDW	15.9	H	11.5-14.5 %
06/03/20	0611	PLT	141		130-400 x10 ³ /mm ³
06/03/20	0611	MPV	10.3		7.4-10.4 fl
06/03/20	0611	NEUT %	57.9		40-70 %
06/03/20	0611	LYMPH %	30.2		25-45 %

Please follow up with your primary doctor regarding any abnormal test results.

Complete Metabolic Panel (CMP)

Date	Time	Test	Result	Flag	Normal Range
06/03/20	0611	NA	139		136-145 mmol/L
06/03/20	0611	K	3.7		3.5-5.1 mmol/L
06/03/20	0611	CL	105		98-107 mmol/L
06/03/20	0611	CO2	28.1		21-32 mmol/L
06/03/20	0611	GLUCOSE	97		74-106 mg/dL
06/03/20	0611	BUN	8.0		7.0-18.0 mg/dL
06/03/20	0611	CREAT	0.9		0.7-1.3 mg/dL
06/03/20	0611	CA	8.5		8.5-10.1 mg/dL

Please follow up with your primary doctor regarding any abnormal test results.

Hepatic Function Profile (LFT)

Date	Time	Test	Result	Flag	Normal Range
06/01/20	0040	T PROT	6.7		6.4-8.2 g/dL
06/01/20	0040	ALB	3.5		3.4-5.0 g/dL
06/01/20	0040	TBILI	0.6		0.20-1.00 mg/d
06/01/20	0040	AST	11	L	15-37 U/L
06/01/20	0040	ALT	18		16-63 U/L
06/01/20	0040	ALKP TOTAL	35	L	46-116 U/L

Please note new reference range as of 02-22-2015

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVENUE
CHINO, CA-91710

PATIENT DISCHARGE INSTRUCTIONS/SUMMARY

PATIENT NAME: HANNA, ADEL S
MED RECORD NUMBER: M000273781
ACCOUNT NUMBER: V00000905328

Please follow up with your primary doctor regarding any abnormal test results.

Magnesium/Phosphorous Level

<u>Date</u>	<u>Time</u>	<u>Test</u>	<u>Result</u>	<u>Flag</u>	<u>Normal Range</u>
06/02/20	0501	PHOS	3.1		2.5-4.9 mg/dL
06/02/20	0501	MG	2.2		1.8-2.4 mg/dL

Please follow up with your primary doctor regarding any abnormal test results.

HEALTH CONCERNS

Chest pain , ruled out MI

Goals

manage acute and chronic conditions

PLAN OF TREATMENT

Please take the prescribed medications as per the instructions.

Compiled on 06/03/20 at 8:48pm.

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA, ADEL S
Unit Number: M000273781
Account Number: V00000905328

Patient Signature Page

Patient Name: ADEL S HANNA

Date of Birth: 03/29/46

Guardian Name:

The above-named patient and/or guardian has received the following:

Patient Visit Report
Patient Instructions:
Exercise Stress Echocardiogram, Care After

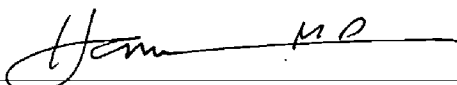
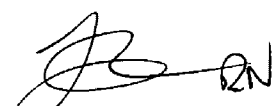
Signature Disclaimer:

Please make sure you have read through this information before signing.

I have read and understand the instructions given to me by my caregivers.

ADEL S HANNA

Print Patient Name

	6-3-2020	2100
Patient (or Guardian) Signature	Date	Time
	6-3-2020	2100
Caregiver/RN/Doctor Signature	Date	Time

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA,ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary

Patient Name: HANNA,ADEL S
Address: 3019 SONG OF THE WINDS
CHINO HILLS, CA 91709

Home Phone: (949)244-7729 CELL
Other Phone: (909)578-6061 CELL
Med Rec #: M000273781
Date of Birth: 03/29/1946
Sex: M
Marital Status: MARRIED
Pregnant:
Race: OTHER
Ethnicity: NON-HISPANIC
Language Spoken: English
Religious Affiliation: CHRISTIAN

Next of Kin

Next of Kin	Relationship	Address	Phone Number
KAWAGUCHI,IRMA	WIFE	3019 SONG OF THE WINDS CHINO HILLS, CA 91709	(909)374-7216 CELL

Healthcare Providers

Role	Provider	Type	Phone	Organization
Primary Care	NONE, per patient	Active		
Attending	Crudo, Jeffrey J .	Staff Physician	818-638-1157	
Admitting	Crudo, Jeffrey J .	Staff Physician	818-638-1157	
Emergency	Ornelas, Francisco	Staff Physician	310-379-2134	Emergent Medical Assoc

Visit Care Team For your Inpatient visit 06/01/20

Role	Name	Primary Phone
Primary Care Physician	NONE, per patient	
Admitting	Crudo, Jeffrey J .	818-638-1157
Attending	Crudo, Jeffrey J .	818-638-1157
Emergency	Ornelas, Francisco	310-379-2134
Family	NONE, per patient	

Insurance Providers

Payer	Subscriber	Guarantor
Name: BLUE CROSS PRUDENT BUYER Address: PO BOX 60007 LOS ANGELES, CA 900600007 Phone: (800)333-0912	Name: HANNA,ADEL S DOB: 03291946 Policy Number: CPR226A67822 Insurance Type: 09 Group Number: CB010A Subscriber Relationship: SELF / SAME AS PATIENT Coverage Dates: Effective:01/01/01 Exp: Address: 3019 SONG OF THE WINDS CHINO HILLS, CA 91709 Phone: (949)244-7729 CELL	Name: HANNA,ADEL Address: 3019 SONG OF THE WINDS CHINO HILLS, CA 91709 Phone: (949)244-7729 CELL

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino, CA 91710

Patient Name: HANNA,ADEL S
 Med Rec #: M000273781
 Date: 06/04/20

Patient Health Summary

Name: MEDICARE PART A ONLY Address: NORIDIAN PO BOX 6770 FARGO, ND 58108-6770 Phone: (855)609-9960	Name: HANNA,ADEL S DOB: 03291946 Policy Number: 8UN2EH4XF93 Insurance Type: 09 Group Number: 8UN2EH4XF93 Subscriber Relationship: SELF / SAME AS PATIENT Coverage Dates: Effective:10/01/11 Exp: Address: 3019 SONG OF THE WINDS CHINO HILLS, CA 91709 Phone: (949)244-7729 CELL	
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Allergies, Adverse Reactions, Alerts

Allergen	Type	Severity	Reaction	Last Updated
metoclopramide	Allergy	Intermediate		06/01/20

Problems

Active Medical Problem	Status	Onset Date
Headache	Acute	~ 12/23/14
Migraine	Acute	~ 12/23/14

Current Home Medications

Medication: ASPIRIN (ASPI-COR) 81 MG CTB Dose: 81 MILLIGRAM Route: BY MOUTH Frequency: DAILY Ordering Provider: [Patient Reported] Start Date:
Medication: ATORVASTATIN* (Lipitor*) 10 MG TABLET Dose: 10 MILLIGRAM Route: BY MOUTH Frequency: EVERY EVENING Quantity: 30 Refills: 0 Ordering Provider: Glover, Andrea Order Date/Time: 06/03/20 11:45am
Medication: Lisinopril* (Zestril *) 5 MG TABLET Dose: 5 MILLIGRAM Route: BY MOUTH Frequency: DAILY Quantity: 30 Refills: 0 Ordering Provider: Glover, Andrea Order Date/Time: 06/03/20 11:45am
Medication: Metoprolol Succinate 25 MG TAB.ER.24H Dose: 25 MILLIGRAM Route: BY MOUTH Frequency: DAILY Quantity: 30 Refills: 0 Ordering Provider: Glover, Andrea Order Date/Time: 06/03/20 11:45am

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA,ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary

Past Home Medications Discontinued within past 30 days

<p>Medication: ATENOLOL 100 MG TABLET Dose: 100 MILLIGRAM Route: BY MOUTH Frequency: DAILY Ordering Provider: [Patient Reported] Start Date:</p>
<p>Medication: ATENOLOL 50 MG TABLET Dose: 1 TAB Route: BY MOUTH Frequency: DAILY Quantity: 30 Refills: 5 Ordering Provider: [Patient Reported] Start Date:</p>
<p>Medication: AUGMENTIN 875 MG TAB Dose: 1 TAB Route: BY MOUTH Frequency: TWICE A DAY Days: 30 Refills: 0 Indication: CHRONIC SINUSITIS Ordering Provider: Dalrymple,William Order Date/Time: 12/24/14 11:14am</p>
<p>Medication: Amlodipine Besylate 5 MG TABLET Dose: 5 MILLIGRAM Route: BY MOUTH Frequency: DAILY Ordering Provider: [Patient Reported] Start Date:</p>
<p>Medication: FLUTICASONE FUROATE (VERAMYST) 27.5 MCG/Actuation SPR Dose: 2 Spray Route: NASAL Frequency: DAILY Quantity: 10 Refills: 3 Indication: SINUSITIS Ordering Provider: Dalrymple,William Order Date/Time: 12/24/14 11:14am</p>
<p>Medication: PREDNISON 20 MG TAB Dose: 1 TAB Route: BY MOUTH Frequency: TWICE A DAY Quantity: 10 Refills: 0 Ordering Provider: Dalrymple,William Order Date/Time: 12/24/14 11:14am</p>

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA, ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary

Medication: Prednisone (Prednisone*) 20 MG TAB
Dose: 20 MILLIGRAM
Route: BY MOUTH
Frequency: DAILY
Days: 5
Refills: 0
Indication: CHRONIC SINUSITIS
Ordering Provider: Dalrymple, William
Order Date/Time: 12/24/14 11:14am

Advance Directives

Directive	Response	Recorded Date/Time
Resuscitation Status	FULL CODE	06/01/20 2:00am
Advance Directive:	No	06/01/20 3:47pm
Living Will:	No	06/01/20 3:47pm
Healthcare Proxy:	No	06/01/20 3:47pm
Healthcare Power of Attorney:	No	06/01/20 3:47pm

Immunizations

[no IMMUNIZATIONS recorded]

Vital Signs

For your Inpatient visit 06/01/20

Vital Reading	How Taken	Value	Recorded Date/Time
Temperature	TEMPORAL ARTERY	98.0 F	06/03/20 8:47pm
Blood Pressure:	AUTOMATIC	150/93	06/03/20 8:47pm
Respirations:	OBSERVED	20	06/03/20 8:47pm
Pulse:	AUTOMATIC, NONINVASIVE	79	06/03/20 8:47pm
SpO2 (%):		95	06/03/20 8:47pm

Body Measurements	Value	Recorded Date/Time
Height	5 ft 7 in	06/01/20 2:52am
Weight	164 lb	06/01/20 2:52am
Body Mass Index	25.6 kg/m ²	06/01/20 2:52am

Encounters

Encounter	Location	Attending Provider	Date/Time
Discharged Inpatient	Chino Valley Medical Center	Crudo, Jeffrey J.	06/03/20 9:12pm

Encounter Diagnosis

For your Inpatient visit 06/01/20

[no ENCOUNTER DIAGNOSIS recorded]

Procedures

[no PROCEDURES recorded]

Diagnostic Lab Results

Test Name	Result/Comment	Unit	Reference	Date/Time
White Blood Count	3.9 Low	K/mm ³	4.5-11.0	06/03/20 6:11am
Red Blood Count	5.26	M/mm ³	4.52-5.90	06/03/20 6:11am

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA, ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary

Hemoglobin	14.9	g/dL	13.0-18.0	06/03/20 6:11am
Hematocrit	46	%	42-52	06/03/20 6:11am
Mean Corpuscular Volume	87	fL	80-99	06/03/20 6:11am
Mean Corpuscular Hemoglobin	28	pg	27-31	06/03/20 6:11am
PUBS Mean Corpuscular Hgb Conc	33	pg	32-37	06/03/20 6:11am
Red Cell Distribution Width	15.9 High	%	11.5-14.5	06/03/20 6:11am
Platelet Count	141	x10 ³ mcl	130-400	06/03/20 6:11am
Mean Platelet Volume	10.3	fL	7.4-10.4	06/03/20 6:11am
Neutrophils %	57.9	%	40-70	06/03/20 6:11am
Lymphocytes %	30.2	%	25-45	06/03/20 6:11am
Monocytes %	7.6	%	2.5-10.0	06/03/20 6:11am
Eosinophils %	3.9	%	0.0-11.0	06/03/20 6:11am
Basophils %	0.4	%	0-2	06/03/20 6:11am
Add Manual Differential	NO			06/03/20 6:11am
RBC Morphology 2	NO			06/03/20 6:11am
Sodium Level	139	mmol/L	136-145	06/03/20 6:11am
Serum Potassium	3.7	mmol/L	3.5-5.1	06/03/20 6:11am
Chloride Level	105	mmol/L	98-107	06/03/20 6:11am
Carbon Dioxide Level	28.1	mmol/L	21-32	06/03/20 6:11am
Glucose Level	97	mg/dL	74-106	06/03/20 6:11am
Blood Urea Nitrogen	8.0	mg/dL	7.0-18.0	06/03/20 6:11am
Creatinine	0.9	mg/dL	0.7-1.3	06/03/20 6:11am
Calcium Level	8.5	mg/dL	8.5-10.1	06/03/20 6:11am
Urine Phencyclidine Screen	NONE DETECTED		See below	06/03/20 4:30am
Urine Benzodiazepines Screen	NONE DETECTED		See below	06/03/20 4:30am
Urine Cocaine Screen	NONE DETECTED		See below	06/03/20 4:30am
Urine Amphetamine Screen	NONE DETECTED		See below	06/03/20 4:30am
Urine Cannabinoids Screen	NONE DETECTED		See below	06/03/20 4:30am
Urine Opiates Screen	NONE DETECTED		See below	06/03/20 4:30am

Patient Health Summary

Urine Barbiturates, Qualitative	NONE DETECTED Method: Reference Range: PCP Neg <= 25 ng/mL Phencyclidine BENZ Neg <= 200 ng /mL Lormetazepam COC Neg <= 300 ng/mL Benzoyllecgonine AMPH Neg <= 1000 ng/mL d-Methamphetamine THC Neg <= 50 ng/mL 11-nor-d9-THC -carboxylic acid OPI Neg <= 2000 ng/mL Morphine BARB Neg <= 200 ng/mL Secobarbital This Drug Screen method provides only a preliminary analytical test result. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GS/MS) is the preferred confirmatory method. Other chemical confirmatory methods are available. Clinical consideration and professional judgement should be applied to any drug of abuse test result, particularly when preliminary results are used.		See below	06/03/20 4:30am
Phosphorus Level	3.1	mg/dL	2.5-4.9	06/02/20 5:01am
Magnesium Level	2.2	mg/dL	1.8-2.4	06/02/20 5:01am
Troponin I	< 0.02	ng/mL	0.00-0.10	06/01/20 4:50pm
Prothrombin Time	10.8	sec	8.8-11.0	06/01/20 0:40am
INR International Normalized Ratio	1.1		0.9-1.2	06/01/20 0:40am
Partial Thromboplastin Time - Dade	24.2		20.2-29.8	06/01/20 0:40am
B-Type Natriuretic Peptide	40.17	pg/mL	0-100	06/01/20 0:40am
	BNP < 100 PG/ML CHF VERY UNLIKELY (2%) BNP 100-500 PG/ML INDETERMINATE BNP > 500 PG/ML CHF VERY LIKELY (95%)			

Patient Health Summary

Serum Total Protein	6.7	g/dL	6.4-8.2	06/01/20 0:40am
Albumin	3.5	g/dL	3.4-5.0	06/01/20 0:40am
Globulin	3.2	g/dL	1.5-3.5	06/01/20 0:40am
Albumin/Globulin Ratio	1.1	g/dL	1.1-1.8	06/01/20 0:40am
Total Bilirubin	0.6	mg/dL	0.20-1.00	06/01/20 0:40am
Aspartate Amino Transf (AST/SGOT)	11 Low	U/L	15-37	06/01/20 0:40am
Alanine Aminotransferase (ALT/SGPT)	18	U/L	16-63	06/01/20 0:40am
Alkaline Phosphatase	35 Low Please note new reference range as of 02-22-2015	U/L	46-116	06/01/20 0:40am
Creatine Kinase	74	U/L	39-308	06/01/20 0:40am
Lipase	126	IU/L	73-393	06/01/20 0:40am
Ammonia	14	umol/L	11-32	06/01/20 0:40am
Triglycerides Level	144	mg/dL	< 150	06/01/20 0:40am
Cholesterol Level	130	mg/dL	< 200	06/01/20 0:40am
HDL Cholesterol	44	mg/dL	40-60	06/01/20 0:40am
LDL Cholesterol Direct	69	mg/dL	< 100	06/01/20 0:40am
VLDL Cholesterol	23.04	mg/dL		06/01/20 0:40am

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino, CA 91710

Patient Name: HANNA, ADEL S
 Med Rec #: M000273781
 Date: 06/04/20

Patient Health Summary

Cholesterol/HDL Ratio	3.0	mg/dL		06/01/20 0:40am
<p>----- ----- ----- ----- ----- ESTIMATED CORONARY RISK INTERPRETATION ----- ----- ----- ----- -----</p> <p>Risk Cholesterol Factor HDL Chol Risk (mg/dl) (Chol/HDL) Assess ----- ----- -----</p> <p>> 45 < 5.0 Decreased < 200 Desirable level MALES 45 5.0 Average 200- 239 Borderline High < 45 > 5.0 Increased > 239 High Level -----</p> <p>< 4.4 > 55 Decreased FEMALE 55 4.4 Average < 55 > 4.4 Increased ===== ----- ----- ----- ----- ----- -----</p>				
Cholesterol Risk Factor	3.0		0.0-5.5	06/01/20 0:40am
Triiodothyronine (T3) Uptake	32.0 Low	% UPTAKE	33-39	06/01/20 0:40am
Total Triiodothyronine	0.97	ng/mL		06/01/20 0:40am
<p>Reference Interval: Euthyroid 0.60 - 1.81 ng/mL Hypothyroid < 0.60 ng/mL Hyperthyroid > 1.81 ng/mL</p>				
Free Thyroxine	1.28	ng/dL	0.76-1.46	06/01/20 0:40am
Thyroxine (T4)	7.2	ug/dL	4.7-13.3	06/01/20 0:40am
Free Thyroxine Index	2.3	ug/dL	1.4-4.5	06/01/20 0:40am
Thyroid Stimulating Hormone (TSH)	1.740	uIU/mL	0.36-3.74	06/01/20 0:40am

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino, CA 91710

Patient Name: HANNA, ADEL S
 Med Rec #: M000273781
 Date: 06/04/20

Patient Health Summary

Microbiology Results

Source/Description	Procedure	Date/Time
NARES / BILATERAL	MRSA Screen	06/01/20 3:07am
	NO MRSA ISOLATED	

Radiology Procedures

Exam	Date/Time	Status
Chest X-Ray	06/01/20 0:32am	Completed

Functional and Cognitive Status

[no FUNCTIONAL AND COGNITIVE STATUS recorded]

Social History

History	Response	Recorded Date/Time
Smoking Cessation:	FORMER SMOKER	06/01/20 2:52am
Have you smoked in the last 12 months:	No	06/01/20 2:51am
Do you dip or chew tobacco:	No	06/01/20 2:51am
If you are a Former Smoker, when did you quit:	40 YEARS AGO	06/01/20 2:51am

Smoking Status	Start Date	End Date
FORMER SMOKER		

Family History

[no FAMILY HISTORY recorded]

Plan of Care

Discharge Date:	06/03/20 9:12pm
Disposition:	ROUTINE HOME/SELF CARE
Reason for Visit:	CHEST PAIN, HYPOKALEMIA
Instructions/Education Provided:	Exercise Stress Echocardiogram, Care After
Prescriptions:	See Medication Section
Additional Instructions/Education:	Please take the prescribed medications as per the instructions.
Health Concerns:	Chest pain , ruled out MI

Care Plan and Goals:
manage acute and chronic conditions

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA, ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary

Discharge Instructions:

DISCHARGE
Date: 06/03/20
Discharge Diagnosis: chest pain
Discharge Disposition: ROUTINE HOME/SELF CARE

PATIENT INFORMATION

Temperature/F: 98.0
Pulse: 79
Respirations: 20
Blood Pressure: 150/93
SpO2 (%): 95
Oxygen Device: ROOM AIR
O2 Amount (L/min): 0
Pain Scale at Discharge: 0/10
Pain Medication Given: NO
Condition Upon Leaving:
ALERT
ORIENTED
ABLE TO COMMUNICATE
Isolation:
NONE
Feeding: INDEPENDENT
Ambulating: INDEPENDENT
Transferring: INDEPENDENT

DISCHARGE INSTRUCTIONS

Discharge Date 06/03/20
Discharge Home
Discharge Patient To HOME
Discharge Transportation
Discharge Transport By PRIVATE AUTO
Family Notification
Patient Family/Representative Notified Of Discharge: YES
Patient Instructions
Recommended Activity NO RESTRICTIONS
Bath SHOWER
Recommended Diet CARDIAC DIET

Potential Complications

Follow with your primary physician or local ER if any of the following occur:
* Worsening Symptoms: Temperature, Swelling, Pain, Shortness of Breath, etc.

Pending Tests/Diagnostics

Follow with your physician for updates and outcomes on the following pending tests:
* NONE

Imaging Results

Impressions
NUCLEAR MEDICINE - NM REST/STRESS w/ MOTION + EFRAC 06/02 1717
*** Report Impression - Status: SIGNED Entered: 06/02/2020 1742
Impression:

1. No evidence of myocardium at ischemic risk.
 2. The left ventricular ejection fraction is 71%.
- Impression By: DRBUIKE - Kevin T. Bui, MD

Discharge Medications

Prescriptions Provided YES
Medication Reconciliation Done YES

Follow-Up Clinic

THE FOLLOWING TELE-MEDICINE APPOINTMENT HAS BEEN SET UP FOR YOUR FOLLOW-UP CARE:

06/08/2020 AT 10:00AM

THE CONTINUITY CARE CLINIC

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA, ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary

5450 JEFFERSON AVE. STE 3
CHINO, CA 91710
909-464-8722

IF YOU ARE UNABLE TO KEEP THIS APPOINTMENT, PLEASE CALL THEM DIRECTLY TO RESCHEDULE.

Admit Reason

Patient admitted for: CHEST PAIN, HYPOKALEMIA

Admitting Diagnosis

Chest pain, r/o ACS VS GERD

Hypokalemia 2.8

Mild dehydration BUN 19, Cr 1.0

HTN, controlled BP 105/69

H/o migranes

DVT prophylaxis

Discharge Diagnosis

Chest pain, r/o ACS VS GERD RESOLVED

Hypokalemia 2.8 RESOLVED

Mild dehydration BUN 19, Cr 1.0

HTN, controlled BP 105/69

H/o migranes

DVT prophylaxis

Procedures

Impressions

NUCLEAR MEDICINE - NM REST/STRESS w/ MOTION + EFRAC 06/02 1717

*** Report Impression - Status: SIGNED Entered: 06/02/2020 1742

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

Impression By: DRBUKE - Kevin T. Bui, MD

Hospital Course

PATIENT WAS ADMITTED FOR CHEST PAIN AND HYPOKALEMIA. PATIENT RECEIVED A CARDIO CONSULT WITH DR. CHOU. pOTASSUM WAS REPLACED AND HYPOKALEMIA RESOLVED

Trops x2 negative, trend q8

Cardiology consult Dr. Chou : EKG showed normal sinus rhythm without acute ischemic changes.

Troponins have been negative x 2. Chest pain - ruled out for myocardial infarction; constellation of symptoms suggest secondary to stress.. Patient received stress test

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

Psychiatry consult pending. Per patient request. patient has been under extreme amount of stress and is requesting to speak with Psychiatrist. Dr. Idrees to see patient for psych clearance.

If patient is clear by psyc patient is clear for discharge home . Patient is ambulating without assistance and is tolerating diet

History of Present Illness

This is 74 YOM with PMH of HTN, migranes and GERD came to ED with c/o substernal chest tightness and pressure with radiation to the left shoulder left arm and jaw for 1 hour at rest associated with nausea but no vomiting or diaphoresis. Patient stated he had a cardiac catheterization about 5 or 6 years ago and he showed mild disease but no stents were placed. Pt was given 2 nitro and one tab of ASA at home. Pt denies fever, chills, cough, SOB, vomiting, diarrhea, or body aches. No risk factors or symptoms suspicious for COVID at the moment.

He had 1 brother die at almost 50 years old and a second brother die at 65 years old from heart attack.

Complications

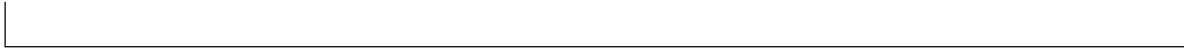
None

Condition Upon Discharge STABLE

Chino Valley Medical Center
5451 Walnut Avenue
Chino, CA 91710

Patient Name: HANNA,ADEL S
Med Rec #: M000273781
Date: 06/04/20

Patient Health Summary



Discharge Summary

[no DISCHARGE SUMMARY available]

<Final Page>

EMERGENCY DEPT REPORT Site Code: CVMC Name: HANNA, ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino, California 91710
(909) 464-8600

ED PHYSICIAN DOCUMENTATION

HISTORY OF PRESENT ILLNESS

CHIEF COMPLAINT: CHEST PAIN

TIME SEEN BY PHYSICIAN: 0012

INITIAL COMMENTS:

74-year-old male with substernal chest tightness and pressure with radiation to the left shoulder left arm and jaw for 1 hour at rest associated with nausea but no vomiting or diaphoresis. Patient is an ex-smoker but stopped over 40 years ago. He does have a history of hypertension. There is significant family history for heart disease. He had 1 brother die at almost 50 years old and a second brother die at 65 years old from heart attack. Patient states he had a cardiac catheterization about 5 or 6 years ago and he showed mild disease but no stents were placed. He denies hypercholesterolemia. Denies drug use. He is not diabetic. He reports no back pain or focal weakness or paresthesias. He reports no fevers chills cough runny nose sore throat or COVID risk factors. He was given 2 nitro in the field and he took aspirin at home. Currently he rates his pain as a 5/10 but is declining any additional medication.

PAST MEDICAL HISTORY

ALLERGIES

Coded Allergies:

metoclopramide (From REGLAN) (Intermediate, 06/01/20)

IMMUNIZATIONS: Unknown

PAST MEDICAL HISTORY:

Significant History

...

MIGRAINE HEADACHE

SURGICAL HISTORY: Cholecystectomy, Other (Nissen fundoplication)

FAMILY HISTORY

SIGNIFICANT FAMILY HISTORY: No Pertinent Family Hx

SOCIAL HISTORY

SMOKER: Non-Smoker

ALCOHOL: None

ILLICIT DRUGS: None

LIVES WITH: Family

EMERGENCY DEPT REPORT Site Code: CVMC Name: HANNA, ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

REVIEW OF SYSTEMS

COMMENTS:

All other systems reviewed and are negative except as per history of present illness.

PHYSICAL EXAM

VITAL SIGNS:

Vital Signs

	Result	Date Time
Pulse Ox	95	06/01 0141
B/P	105/69	06/01 0141
B/P Mean	79	06/01 0141
Pulse	74	06/01 0141
Resp	18	06/01 0141
Temp	98.3	06/01 0020

INITIAL VITAL SIGNS: Reviewed by me.

GENERAL: Alert and interactive. No acute distress.

HEAD: Head is normocephalic.

EYES: EOMI. PERRL. No scleral icterus. No conjunctival injection.

ENT: Moist mucous membranes. No drooling.

NECK: Supple. No masses. Full range of motion. No JVD. Trachea midline. No bruit.

RESPIRATORY: No tachypnea. Clear breath sounds bilaterally. No wheezing. No rales. No rhonchi. No stridor.

CV: Regular rate and rhythm. No murmurs. No rubs or gallops. Normal heart tones. No heaves, lifts or thrills.

ABDOMEN: Soft, non-distended, non-tender. No guarding. No rebound. No masses. No organomegaly. Normal bowel sounds.

BACK: No obvious deformity.

EXTREMITIES: No deformity. No clubbing or cyanosis. No edema. No signs of DVT.

SKIN: Warm and dry. No diaphoresis. No purpura or petechiae.

NEUROLOGIC: Alert and oriented. Face is symmetric. Speech is normal. Moves all extremities equally. Motor and sensory distally intact.

LYMPHATIC: No palpable nodes.

HEMATOLOGIC: No purpura. No abnormal bruising.

VASCULAR: Radial and carotid pulses are equal and symmetric without pulse deficit.

COURSE

ORDERS:

Orders

Procedure	Date/time	Status
-----------	-----------	--------

EMERGENCY DEPT REPORT Site Code: CVMC Name: HANNA, ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

XR CHEST: 1V (AP/PA)	06/01 0012	Complete
TROPONIN I	06/01 0012	Complete
THYROID PANEL	06/01 0012	Complete
PARTIAL THROMBOPLASTIN TIME	06/01 0012	Complete
PROTHROMBIN TIME	06/01 0012	Complete
LIPID PROFILE	06/01 0012	Complete
LIPASE	06/01 0012	Complete
LDL DIRECT	06/01 0012	Complete
COMPREHENSIVE METABOLIC PANEL	06/01 0012	Complete
CREATINE KINASE (CK)	06/01 0012	Complete
CBC	06/01 0012	Complete
BRAIN NATRIURETIC PEPTIDE	06/01 0012	Complete
AMMONIA	06/01 0012	Complete

Medications

Medication	Dose	Sig/Sch	Start time Stop Time	Status	Last Admin
Magnesium Oxide	400 MG	ONCE ONE	06/01 0146 06/01 0147	DC	
Potassium Chloride	60 MEQ	ONCE ONE	06/01 0146 06/01 0147	DCr	

DIAGNOSTIC TEST INTERPRETATION

EKG:

12-lead EKG Interpretation by F. Ornelas, MD:
 Normal Sinus Rhythm with ventricular rate of 89 beats per minute
 No significant axis deviation
 Normal intervals
 No acute ST or T wave changes. No obvious STEMI
 Impression: No acute ischemia

X-RAY INTERPRETATION:

Single AP VIEW Portable Chest X-ray was interpreted independently and contemporaneously by F. Ornelas, MD:
 No cardiomegaly
 Normal mediastinum
 Elevation of the right hemidiaphragm
 Bilateral lower lobe atelectasis
 No lung infiltrates

EMERGENCY DEPT REPORT Site Code: CVMC Name: HANNA, ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

No pneumothorax
 No soft tissue or bony abnormalities

LAB INTERPRETATION:

Laboratory Results

	06/01 0040	06/01 0040	06/01 0040	06/01 0040	06/01 0040
Chemistry					
Ammonia (11 - 32 umol/L)					14
Creatine Kinase (39 - 308 U/L)			74		
Troponin I (0.00 - 0.10 ng/mL)	< 0.017				
B-Natriuretic Peptide (0 - 100 pg/mL)				40.17	
TSH (0.36 - 3.74 uIU/mL)		1.740			
Free T4 (0.76 - 1.46 ng/dL)		1.28			
Free T4 Index (1.4 - 4.5 ug/dL)		2.3			
Thyroxine (T4) (4.7 - 13.3 ug/dL)		7.2			
Total T3 (ng/mL)		0.97			
T3 Uptake (33 - 39 % UPTAKE)		32.0 L			

	06/01 0040
Chemistry	
Sodium (136 - 145 mmol/L)	143
Serum Potassium (3.5 - 5.1 mmol/L)	2.8 P
Chloride (98 - 107 mmol/L)	107
Carbon Dioxide (21 - 32 mmol/L)	21.4
BUN (7.0 - 18.0 mg/dL)	19.0 H
Creatinine (0.7 - 1.3 mg/dL)	1.0
Creatinine w Est GFR (mL/min)	TNP
Glucose (74 - 106 mg/dL)	103
Calcium (8.5 - 10.1 mg/dL)	8.1 L
Total Bilirubin (0.20 - 1.00 mg/dL)	0.6
AST (15 - 37 U/L)	11 L
ALT (16 - 63 U/L)	18
Alkaline Phosphatase (46 - 116 U/L)	35 L
Serum Total Protein (6.4 - 8.2 g/dL)	6.7
Albumin (3.4 - 5.0 g/dL)	3.5
Globulin (1.5 - 3.5 g/dL)	3.2
Albumin/Globulin Ratio (1.1 - 1.8 g/dL)	1.1
Triglycerides (< 150 mg/dL)	144
Cholesterol (< 200 mg/dL)	130

EMERGENCY DEPT REPORT Site Code: CVMC Name: HANNA, ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Cholesterol Risk Factor (0.0 - 5.5)	3.0
LDL Cholesterol Direct (< 100 mg/dL)	69
VLDL Cholesterol (mg/dL)	23.04
HDL Cholesterol (40 - 60 mg/dL)	44
Cholesterol/HDL Ratio (mg/dL)	3.0
Lipase (73 - 393 IU/L)	126
Coagulation	
PT (8.8 - 11.0 sec)	10.8
INR (0.9 - 1.2)	1.1
PTT (Dade) (20.2 - 29.8)	24.2
Hematology	
WBC (4.5 - 11.0 K/mm ³)	5.6
RBC (4.52 - 5.90 M/mm ³)	5.24
Hgb (13.0 - 18.0 g/dL)	14.8
Hct (42 - 52 %)	46
MCV (80 - 99 fl)	87
MCH (27 - 31 pg)	28
RDW (11.5 - 14.5 %)	16.0 H
Plt Count (130 - 400 x10 ³ mcL)	165
MPV (7.4 - 10.4 fl)	9.7
Add Manual Diff	NO
Neutrophils % (40 - 70 %)	63.0
Lymphocytes % (25 - 45 %)	25.4
Monocytes % (2.5 - 10.0 %)	9.3
Eosinophils % (0.0 - 11.0 %)	1.6
Basophils % (0 - 2 %)	0.7
RBC Morphology	NO
PUBS MCHC (32 - 37 pg)	33

DEPARTURE

DISPOSITION: XTR TO INTERNAL ACUTE CARE

MEDICAL DECISION MAKING:

Differential would include ACS, pulmonary embolism, CHF, aortic dissection, cardiac tamponade, pneumonia, pneumonitis, massive pleural effusion, pericardial effusion, endocarditis, myocarditis, pericarditis, pulmonary hypertension, costochondritis, anxiety, trauma, GI disorders, Boerhaave syndrome, but not limited to the above

EMERGENCY DEPT REPORT Site Code: CVMC Name: HANNA, ADEL S
ACCT: V00000905328
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The patient was placed under observation status at (midnight) for ongoing evaluation and risk stratification of their acute (chest pain). During their time in observation they receive serial examinations of both heart lung and neurologic status. Serial vital signs were monitored. Patient required serial treatments as well.

Any available medical records were reviewed including social and family history when available. On reassessment at (2 AM) the patient's medical condition has not yet stabilized. Currently patient is resting comfortably. However having chest pressure and tightness at rest for 1 hour he will require further work-up and is unstable for transfer at this time. Patient admitted to telemetry by Dr. Crudo

DIAGNOSIS:

Chest pain
Hypokalemia

Dictated Date/Time: 06/01/20 0027
Signed By: Ornelas, Francisco
Date Signed: 06/01/20 Time Signed: 0152

CHIEF COMPLAINT: _____
 TEMP _____ PULSE _____ RESP _____ B/P _____ OX RA _____ WT. _____ kgs
 TRIAGE TIME _____ TO ROOM TIME _____ M.D. EVAL TIME _____

Arrival in ER via: Paramedic/EMT Automobile Police Patient is Ambulatory Wheelchair Assisted Bedridden
 Review Prehosp. Notes _____

Prehospital Treatment:
 • Preferred Language English Other _____ Translator Yes No
 • Unable to obtain Hx from patient Reasons _____
 • Other/Additional Sources of Medical Information _____
 • **HISTORY OF PRESENT ILLNESS:** (time nature onset, location, severity, duration, quality, modifying factors, associated signs & symptoms, provokes, relieves, context)

REVIEW OF SYSTEMS (circle all positives)

<p>NEG</p> <p><input type="checkbox"/> Const: fever chills wt loss fatigue ↓ appetite diaphoresis</p> <p><input type="checkbox"/> Eyes: pain discharge redness visual change foreign body</p> <p><input type="checkbox"/> ENT: pain bleeding congestion sore throat dysphagia discharge</p> <p><input type="checkbox"/> Resp: SOB cough sputum wheezing pain</p> <p><input type="checkbox"/> CV: chest pain palpitations DOE PND edema</p> <p><input type="checkbox"/> GI: ↓ appetite pain nausea vomiting diarrhea blood constipation</p> <p><input type="checkbox"/> GU: dysuria hematuria flank pain discharge bleeding</p> <p><input type="checkbox"/> Gyne: LMP <input type="checkbox"/> NLP Normal _____ Date _____</p>	<p>NEG</p> <p><input type="checkbox"/> Musc: bone/joint pain back pain neck pain restricted ROM</p> <p><input type="checkbox"/> Integ: rash skin lesions erythema laceration bruising</p> <p><input type="checkbox"/> Neuro: HA dizziness syncope seizure focal-weakness</p> <p><input type="checkbox"/> Endo: polyuria polydypsia dry-skin temp-intolerance</p> <p><input type="checkbox"/> Lymph: adenopathy tender nodes lymphedema</p> <p><input type="checkbox"/> Psych: hallucinations depression anxiety suicidal ideation</p> <p><input type="checkbox"/> Immun: urticaria rhinitis pruritus immunodeficiency</p>
--	---

Additional Comments/other systems: Last PO _____ Last BM _____ Last meds _____

PAST MEDICAL, SOCIAL, FAMILY HISTORY

• **MEDICATIONS:** None See AMR Confirmed – list reviewed _____
 • **ALLERGIES:** See AMR NKDA No food allergies Other _____
 • **IMMUNIZATIONS:** UTD Tet. Current Pneumovax Influenza Vac Other _____
 • **MEDICAL:** None CAD CHF Asthma/COPD CVA HTN Seizures DM Other _____
 • **SURG:** None CABG Hyst BACK Other _____
 • **FAMILY Hx:** NEG CAD DM HTN CA Heart Stroke Other: _____
 Soc Hx: Tobacco: Alcohol Illicit Drug Lives alone SNF Married Lives with family
 • **EMPLOYMENT** _____ **EXPOSURES** _____

PHYSICAL EXAMINATION

Infant: Active Playful Fontanelle flat Well-hydrated Crying/consolable Feeding Good eye contact ounces taken
Const: Well-developed Well nourished Alert No distress Oriented x 3 Memory intact

Psych: Mood / Affect NL No Anxiety No Depression No Confusion Non Suicidal _____
Head: Normocephalic Atraumatic No Laceration No Hematoma Other _____
Eyes: PERRL Conjunctiva NL Fundi, disc NL EOMI Lids NL Non Icteric Other _____

ENMT: External EN NL TMS NL Canal NL Nasal mucosa, septum NL Oral mucosa, tongue, lips, teeth NL Oropharynx NL

Neck: Supple Nontender No JVD No Bruits No masses No thyromegaly No nuchal rigidity _____

Resp: NL respiratory effort CTA BS = bilat No Wheezing No Rales
 No Rhonchi No chest wall tenderness/crepitus Normal to inspection RR at time of exam _____
CV: HR at time of exam RRR No murmurs/extra sounds Pulses NL No edema

GI: Abdomen NL to inspection No surgical scars Nontender No rebound, guarding No masses Liver, spleen NL
 bs present rectal: No mass, guaiac _____

GU: Male: penis NL scrotum NL prostate NL no CVA tenderness Discharge _____
 Female: external genitalia NL vagina NL cervix NL No CMT uterus NL adnexae NL
 no CVA tenderness

Musc: Extremities NL to inspection Digits and nails NL Extremities NL to palpitation Gait and stance NL
 Spine non tender No limitations

Neuro: Mental status NL Speech NL CNS II-XII Intact DTRs symmetric Sensation NL Strength NL Focal weakness None

Skin: Turgor NL No rash or lesions No Echyrosis No Laceration No Puncture No Diaphoresis

Lymph: Lymph nodes NL Nontender Not enlarged Other _____

NURSES NOTES REVIEWED **Comments** _____

Chino Valley Medical Center
 5451 WALNUT AVENUE, CHINO, CA, 91710



PATIENT ID
HANNA, ADEL S
 Att Dr.,
03/29/1946 M 74Y **M000273781**
V00000905328 ER 06/01/2020

EMERGENCY DEPARTMENT PHYSICIAN RECORD
 PHSI-110-003A CVMC (10/11) Page 1 of 4
 ORIGINAL - CHART COPY1 - PHARMACY COPY2 - ER PHYSICIAN COPY3 - BILLING



erpc01 06/01/2020

Documentation & Dictation Guidelines

- Time and method of arrival
- Time of first physician contact
- Source of history and competency statement
- Indicate additional or alternative sources of information
- Indicate use of interpreter and identify the interpreter
- CHIEF COMPLAINT/-REASON FOR PRESENTATION/-PRESENT ILLNESS
(List if more than one)
- History of Present Illness (be system focused and time & date specific)
- ROS: 10 systems required with 2 elements mentioned from each system for Level 5
State each system that you have inquired about. They are:

Constitutional/Eyes/ENT/CVS/Pulmonary/GI/GU/Gyne/Musculoskeletal/Skin/Neuro/
Psych/Endocrine/Hematologic/Immunity
- Personal – Family – Social –
 - Not required for Levels 1, 2, 3
 - 3 components are:
 - PMH Family History Social History
 - Mention one element from each area to qualify for level 4 & 5
- Physical Exam
- Management
 - Investigations (Diagnostics)
 - EKG, X-Ray, Pulse Oximetry, Monitor Strips require a physician order, interpretation, and mention of any treatment or intervention
 - Intervention & Treatment
- Review of Pre-Hospital Care notes
- Review of Nursing Notes
- Review Previous Medical Records
- INTERVAL NOTES
 - Note time and specifics of each re-exam and change of therapy
- Medical Decision Making
- Procedures
- Diagnostic Impression
- Discharge time and plan
- CRITICAL CARE TIME
 - A time driven code required minimum of 30 minutes of patient dedication activity and does not include procedure time

Chino Valley Medical Center
5451 WALNUT AVENUE, CHINO, CA, 91710

EMERGENCY DEPARTMENT PHYSICIAN RECORD
PHSI-110-003A CVMC (10/11) Page 2 of 4
ORIGINAL - CHART COPY1 - PHARMACY COPY2 - ER PHYSICIAN COPY3 - BILLING

PATIENT ID

HANNA, ADEL S

Att Dr.;

03/29/1946 M 74Y

M000273781

V00000905328 ER 06/01/2020



erp01 06/01/2020

LAB:

X-RAY:

SAO₂% _____ NL Hypoxemia Corrective Action _____

Cardiac Monitor: NSR ABNORMAL

EKG:

Informed Consent: The patient was apprised of the risks, benefits, alternatives, and aims of further management, had no further questions, and wished to proceed. Physician's Initials: _____

Procedures: Digital Block ETT Intubation NG Tube Gastric Lavage
 Cardiovert CPR/ACLS Splint/Immobilization IV Disloc/Reduction
 Central Line Cerumen Removal Foley Epistaxis Control Lumbar Puncture
 Chest Tube Time Out Performed ASA Score _____ Sedation

Laceration: Simple Intermediate Complex Wound Length _____

Wound Depth _____ cm Inspection _____

Prep _____ Irrigation _____

Anesthesia _____ Suture Type # _____

Staples # _____ Dermabond Dressing: _____

DIAGNOSTIC IMPRESSION

1. Chest Pain 3.

2. Hypokalemia 4.

Admit Accepting Physician Institution Time Accepted _____
Transfer _____ Level of care OUS

Other disposition: Discharge with After Care Instruction AMA LWBS ELOPED DOA Expired

Disposition to: Home SNF Convalescent Other _____

Transportation: Auto Taxi EMT Other _____

Left dept: Ambulatory Wheelchair Gurney Other _____

Condition on discharge: Good Stable Fair Serious Critical

Signature: _____

Supervising Physician Signature ID # _____ Date 6/1 Time _____

No Dictation Required Dictated Job # _____

Chino Valley Medical Center
51 WALNUT AVENUE, CHINO, CA, 91710

EMERGENCY DEPARTMENT PHYSICIAN RECORD
PHSI-110-003A CVMC (10/11) Page 3 of 4
ORIGINAL - CHART COPY1 - PHARMACY COPY2 - ER PHYSICIAN COPY3 - BILLING

PATIENT ID
HANNA, ADEL S
Att Dr.,
03/29/1946 M 74Y M000273781
V00000905328 ER 06/01/2020



erpc01 06/01/2020

Documentation & Dictation Guidelines

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 - Investigations (Diagnostics)
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- Review of Nursing Notes
- Review Previous Medical Records
- INTERVAL NOTES
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- Procedures
- Diagnostic Impression
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Chino Valley Medical Center
5451 WALNUT AVENUE, CHINO, CA, 91710

EMERGENCY DEPARTMENT PHYSICIAN RECORD
PHSI-110-003A CVMC (10/11) Page 4 of 4
ORIGINAL - CHART COPY1 - PHARMACY COPY2 - ER PHYSICIAN COPY3 - BILLING

PATIENT ID

HANNA, ADEL S

Att Dr.,

03/29/1946 M 74Y

M000273781

V00000905328 ER 06/01/2020



erpc01_06/01/2020

Demographics

3019 SONG OF THE WINDS
CHINO HILLS, CA 91709
(949)244-7729 CELL

Insurance: BLUE CROSS PRUDENT BUYER
Next of Kin: KAWAGUCHI,IRMA
Relation: WIFE
Phone: (909)374-7216 CELL

PCP: NONE, per patient
Family Doctor: NONE, per patient
Referring:

General Data

ED Physician: Ornelas, Francisco, ST
Practitioner:
Nurse:

Arrival Date/Time: 06/01/20 - 0010
Triage Date/Time: 06/01/20 - 0020
Date of Birth: 03/29/1946

Stated Complaint: CHEST PAIN, HYPOKALEMIA

Chief Complaint: CHEST PAIN

Priority: 3

Status Event History:

06/01/20 0010 NEW PATIENT
0012 MSE COMPLETED BY ER MD
0016 PATIENT IN ROOM
0151 MSE COMPLETED BY ER MD
0153 HOSPITAL ADMISSION
0250 REMOVE PATIENT FROM TRACKER

ASSESSMENT DATA

Travel History

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0020	Abacherli,Darin, RN	06/01/20	0020	Abacherli,Darin, RN

Travel outside of the country in the last 30 days: N
Fever: N
Respiratory Symptoms: N
Traveled from affected geographical area within 14 days: N
Fever with severe lower respiratory illness: N
Close contact with confirmed case of COVID-19: N
Travel to an Ebola outbreak location within past 21 days: N

Adult Triage

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0020	Abacherli,Darin, RN	06/01/20	0028	Abacherli,Darin, RN

ESI TRIAGE LEVEL: LEVEL 3
Date: 06/01/20
Time: 0020
Workers Comp: N
Has pt traveled out of the country in the last 30 days: NO
MICN Run: Y

** CONTINUED ON NEXT PAGE **

Mode: AMR ALS AMBULANCE
Informant: PARAMEDIC
Chief Complaint:
CHEST PAIN.
Mode of Injury:
PRESSURE LIKE PAIN X1 HR
NAUSEA
Medications:
ANTENOLOL, UNRECALLED CALCIUM CHANNEL BLOCKER
Temperature/F: 98.3
Pulse: 94
Blood Pressure: 116/75
Source: ORAL
Respirations: 16
SpO2 (%): 93
On: ROOM AIR
Pain Scale: 6/10
Height - Feet: 5
In: 7
Cm: 170.2
WT Source: ACTUAL - SCALE
Weight - Lb: 176
Kg: 79.83
BMI: 0
*****MEDICATION GIVEN IN TRIAGE:
NONE
Prior Medical History: Y
Other:
MIGRAINE HEADACHE
GALLBLADDER REMOVED
HTN: Y
Do you have a fixed and regular nighttime residence: Y
Do you think of yourself as: STRAIGHT OR HETEROSEXUAL
Date: 06/01/20
Time: 0027
Recent Procedure: N
Antibiotic Therapy: N
Temp <36 C (96.8 F) or >38.3 C (100.9 F): N
Respiratory Rate > 20: N
Heart Rate > 90: Y
SBP <90 or MAP <65 mmHG: N
New Acute Mental Status Changes: N
Patient on CPAP,BIPAP,or VENT: N
ALL 3 Sections are YES: N

ED Assessment

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0040	Abacherli,Darin, RN	06/01/20	0041	Abacherli,Darin, RN

NEUROLOGICAL Assessment Within Normal Limits: Y
Additional Neuro Assessment Performed and WNL: Y
Psychosocial Assessment Within Normal Limits: Y
RESPIRATORY Assessment Within Normal Limits: N
Breath Sounds: CLEAR
Location: BILATERAL
Effort: REGULAR
Chest Expansion: SYMMETRIC
O2 @: 2L/Min

** CONTINUED ON NEXT PAGE **

Via: NASAL CANNULA
Pulse Oximetry: Y
SpO2 (%): 95
Probe Location: HAND, RIGHT
Comment:

SEE NOTES.

CARDIAC Assessment Within Normal Limits: N
Chest Pain: Y
Provoked: N
Quality: PRESSURE
Radiating: Y
Location/Describe:

L ARM

Pain Level: 6/10
Time/Duration:

1 HR

Heart Rate Irregular: N
Vertigo/Dizziness: N
Syncope/Fainting: N
Pt placed on O2: Y
O2 @: 2L/Min
Via: NASAL CANNULA
Pt placed on Cardiac Monitor: Y
Cardiac Rhythm: NORMAL SINUS RHYTHM
Comment:

SEE NOTES.

GASTROINTESTINAL Assessment Within Normal Limits: Y
UROLOGY Assessment Within Normal Limits: Y
SKIN Assessment Within Normal Limits: Y
NEUROVASCULAR Assessment Within Normal Limits: Y
MUSCULOSKELETAL Assessment Within Normal Limits: Y
EYE Assessment Within Normal Limits: Y
EAR Assessment Within Normal Limits: Y
NOSE Assessment Within Normal Limits: Y
Has Patient Been Placed in Isolation: N
Isolation: STANDARD PROCEDURES

Vital Signs

Occurred

Date Time User
06/01/20 0141 Abacherli,Darin, RN

Recorded

Date Time User
06/01/20 0142 Abacherli,Darin, RN

Blood Pressure: 105/69
MAP (mm Hg): 79
Respirations: 18
BP Source: AUTOMATIC
Resp Source: OBSERVED
Pulse: 74
Pulse Source: MONITOR, CARDIAC
SpO2 (%): 95
Pain Level: 0/10
On O2: Y

Critical Result Notification

Occurred

Date Time User
06/01/20 0144 Abacherli,Darin, RN

Recorded

Date Time User
06/01/20 0145 Abacherli,Darin, RN

** CONTINUED ON NEXT PAGE **

Test:
POTASSIUM
Test Date: 06/01/20
Time Licensed Caregiver Notified: 0144
Licensed Caregiver Notified By:
REX LAB TECH
Critical Result:
2.8
Physician Notified: ORNFR

Bed Request Information

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0153	Castellanos,Brenda B	06/01/20	0153	Castellanos,Brenda B

Diagnosis:
CHEST PAIN,HYPOKALEMIA
Admitting: CRUJE
Attending: CRUJE
Admission Type: IN-PATIENT
Called by (ED):
BRENDA
Received by (UNIT):
JASON
Date: 06/01/20
Time Called: 0153

Bed Request Information

** EDIT **

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0153	Castellanos,Brenda B	06/01/20	0219	Castellanos,Brenda B

Room #:
[] 237A
Time Assigned:[] 0219

Bed Request Information

** EDIT **

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0153	Castellanos,Brenda B	06/01/20	0225	Castellanos,Brenda B

Room #:
[237A] 250B
Time Assigned:[0219] 0225

Personal Belongings List

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0157	Abacherli,Darin, RN	06/01/20	0157	Abacherli,Darin, RN

Inventory Date: 06/01/20
Inventory Time: 0157
Performed By:
Abacherli,Darin
Reason For Inventory: ADMISSION (ED STAFF)

- N
** CONTINUED ON NEXT PAGE **

- Y
Disposition: BELONGINGS KEPT BY PT
- N
- N
- N
Any Belongings Sent To Hospital Safe: N
Any Belongings Sent Home With Family: N

ED Discharge

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0237	Abacherli,Darin, RN	06/01/20	0250	Abacherli,Darin, RN

Home: N
Admit/Transfer/Other: Y
Time: 0237
Disposition: ADMIT
Facility/Room:
260B
Accompanied By: NURSE
Mode: GURNEY
Report Called To:
TYRONE RN
Personal Belongings Sent With Patient: Y
Patient Belongings Sent with Family: N
Blood Pressure: 105/69
Pulse: 74
Respirations: 18
Temperature/F: 98.3
SpO2 (%): 98
Pain Level: 0/10
IV DC'd: N
Condition on Discharge: GUARDED
Phys requests additional DC Plan: N
Medications Reviewed With Patient: YES
Medications Reviewed/Reconciled By Physician: YES
Did patient request electronic discharge instructions: N
Electronic DIS Instructions provided upon patient request: N

Treatments

EKG

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0025	Rivero,Nicholas A	06/01/20	0025	Rivero,Nicholas A

EKG Done: Y
Comment:
DONE AND READ BY DR ORNELAS.

Cardiac Monitor

Occurred			Recorded		
Date	Time	User	Date	Time	User
06/01/20	0029	Abacherli,Darin, RN	06/01/20	0029	Abacherli,Darin, RN

Pt placed on Cardiac Monitor: Y
** CONTINUED ON NEXT PAGE **

Cardiac Rhythm: NORMAL SINUS RHYTHM

IV Management

Occurred		Recorded
Date	Time User	Date Time User
06/01/20	0029 Abacherli,Darin, RN	06/01/20 0029 Abacherli,Darin, RN

IV ESTABLISHED PTA: Y
 Established -- Date: 06/01/20
 IV Location:
 L HAND
 Catheter Size (ga.): 20
 Comment:
 FLUSHED WELL WITH 10MLS OF NS, NO SIGNS OF INFILTRATION.

Pulse Oximetry

Occurred		Recorded
Date	Time User	Date Time User
06/01/20	0030 Abacherli,Darin, RN	06/01/20 0030 Abacherli,Darin, RN

Pulse Oximetry: Y
 SpO2 (%): 93

Oxygen

Occurred		Recorded
Date	Time User	Date Time User
06/01/20	0033 Abacherli,Darin, RN	06/01/20 0033 Abacherli,Darin, RN

Pt placed on Oxygen: Y
 O2 @: 2L/Min
 Via: NASAL CANNULA

Allergies

Allergy/Adverse Reaction	Type/Category	Severity	Date	Ver
metoclopramide	Allergy/Drug	Intermed	06/01/20	Y

Home Meds

Prescriptions/Reported Meds	Type	Issued	Provider	Last Edit
[AUGMENTIN] 875 MG TAB No Conflict Check	Rx	12/24/14	DALWIDO	06/01/20
1 TAB BY MOUTH TWICE A DAY For CHRONIC SINUSITIS				
30 Days REF 0				
Discontinue Reason: NLT				
PREDNISONE 20 MG TAB	Rx	12/24/14	DALWIDO	06/01/20
1 TAB BY MOUTH TWICE A DAY #10 TAB REF 0				
Discontinue Reason: NLT				
Prednisone (Prednisone*) 20 MG TAB	Rx	12/24/14	DALWIDO	06/01/20
20 MG BY MOUTH DAILY For CHRONIC SINUSITIS 5 Days				
REF 0				
Discontinue Reason: NLT				
FLUTICASONE FUROATE (VERAMYST) 27.5 MCG/Actuation SPR	Rx	12/24/14	DALWIDO	06/01/20
2 Spray NASAL DAILY For SINUSITIS #10 GM REF 3				
Discontinue Reason: NLT				
ATENOLOL 50 MG TABLET	Reported			06/01/20
1 TAB BY MOUTH DAILY #30 TAB REF 5				
Discontinue Reason: NLT				

** CONTINUED ON NEXT PAGE **

Prescriptions/Reported Meds
 ASPIRIN (ASPI-COR) 81 MG CTB
 81 MG BY MOUTH DAILY

Type Issued Provider Last Edit
 Reported 06/01/20

Ordered Meds

Ordered	Medication	Provider
06/01/20 0012	SODIUM CHLORIDE 0.9% 1,000 ML BAG IV/ONCE/ONE	ORNFR
06/01/20 0147	POTASSIUM CHLORIDE 60 MEQ TAB.PRT.SR PO/ONCE/ONE	ORNFR
06/01/20 0147	MAGNESIUM OXIDE 400 MG TABLET PO/ONCE/ONE	ORNFR

Meds Received (MAR)

Medication

Sch Date-Time	Ordered Dose	Admin Dose	Site	User
06/01/20-0012	SODIUM CHL 0.9% 1,000 ML	1,000 MLS		
06/01/20-0018	Y			Nguyen,Cindy N , RN

====MEDICATION ADMINISTRATION DETAILS====
 Route Of Administration: INTRAVENOUS
 Injection Site:
 IV Site: LH
 Document Type of Fluid Used to Mix Medication If Applicable:
 :
 IV Rate: 125.0 MLS/HR IV Start Time: 0018 IV End Time:
 Total Amount Infused: (MLS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Y Transfer Time: 0237
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:

06/01/20-0146	POTASSIUM CHLORIDE 20 MEQ TAB.PRT.SR (KLOR-CON M20) PO/ONCE/ONE	60 MEQ		
06/01/20-0151	Y			Abacherli,Darin , RN

====MEDICATION ADMINISTRATION DETAILS====
 Route Of Administration: ORAL
 Injection Site:
 IV Site:
 Document Type of Fluid Used to Mix Medication If Applicable:
 :
 IV Rate: MLS/HR IV Start Time: IV End Time:
 Total Amount Infused: (MLS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Transfer Time:
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:

MAGNESIUM OXIDE 400 MG TAB (MAG-OX 400) PO/ONCE/ONE
 ** CONTINUED ON NEXT PAGE **

Medication

Sch Date-Time Ordered Dose Admin Dose
 Override Comment
 06/01/20-0146 400 MG 400 MG
 06/01/20-0152 Y Abacherli,Darin , RN
 ====MEDICATION ADMINISTRATION DETAILS====
 Route Of Administration: ORAL
 Injection Site:
 IV Site:
 Document Type of Fluid Used to Mix Medication If Applicable:
 :
 IV Rate: MLS/HR IV Start Time: IV End Time:
 Total Amount Infused: (MLS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Transfer Time:
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:

Notes

Entered by Abacherli,Darin, RN on 06/01/20 at 0033
 PT BIB AMR AMBULANCE FOR C/O CHEST PAIN THAT STARTED APPROX 1 HR PTA. PER
 MEDICS PT REPORTED THE CP WOKE HIM UP FROM HIS SLEEPING. MEDICS REPORT THAT PT
 SELF ADMINISTERED 162MG OF ASA PRIOR TO THEIR ARRIVAL. MEDICS REPORT THEY ALSO
 GAVE ANOTHER 162 OF ASA ALONG WITH 2 DOSES OF 0.4 SL NITRO AND 4MG OF ZOFRAN
 FOR NAUSEA. PER MEDICS PT REPORTED A DECREASE IN PAIN AFTER ADMINISTRATION OF
 THE NITRO. UPON ARRIVAL PT A/O X4. PT COMPLAINS OF 6/10 PRESSURE LIKE CP THAT
 RADIATES TO HIS L ARM AND SOB. PT DENIES ANY NAUSEA AT THIS TIME. PT LUNG
 SOUNDS CLEAR TO AUSULTATION. PT DENIES ANY COUGH, FEVER, OR RECENT SICK
 CONTACTS. PT STATES HE RECENTLY TESTED NEGATIVE FOR COVID-19. PT DENIES THE
 NEED FOR ANY PAIN MEDICATION STATING "I DON'T LIKE TAKING MEDICATIONS". PT RESP
 ARE E/U. NO ACUTE DISTRESS NOTED.

Entered by Abacherli,Darin, RN on 06/01/20 at 0142
 PT RESTING IN BED WITH EYES CLOSED. PT VITALS ARE STABLE. PT REMAINS TO 2L OF
 O2 VIA NC. EQUAL CHEST RISE AND FALL OF PTS CHEST NOTED. NO ACUTE DISTRESS
 NOTED.

Entered by Abacherli,Darin, RN on 06/01/20 at 0227
 REPORT GIVEN TO TYRONE RN TO ASSUME CARE OF PT.

Orders

Ordered	Order	Ordering Provider	E-Signed
06/01/20 0012	SODIUM CHL 0.9%	Ornelas, Francisco	Yes
06/01/20 0012	CBC	Ornelas, Francisco	Yes
06/01/20 0012	COMPREHENSIVE METABOLIC PANEL	Ornelas, Francisco	Yes
06/01/20 0012	BRAIN NATRIURETIC PEPTIDE	Ornelas, Francisco	Yes
06/01/20 0012	CREATINE KINASE (CK)	Ornelas, Francisco	Yes
06/01/20 0012	TROPONIN I	Ornelas, Francisco	Yes
06/01/20 0012	PROTHROMBIN TIME	Ornelas, Francisco	Yes
06/01/20 0012	PARTIAL THROMBOPLASTIN TIME	Ornelas, Francisco	Yes
06/01/20 0012	LIPID PROFILE	Ornelas, Francisco	Yes
06/01/20 0012	THYROID PANEL	Ornelas, Francisco	Yes
06/01/20 0012	AMMONIA	Ornelas, Francisco	Yes

** CONTINUED ON NEXT PAGE **

06/01/20	0012	LIPASE	Ornelas, Francisco	Yes
06/01/20	0012	LDL DIRECT	Ornelas, Francisco	Yes
06/01/20	0012	URINALYSIS	Ornelas, Francisco	Yes
06/01/20	0012	XR CHEST: 1V (AP/PA)	Ornelas, Francisco	Yes
06/01/20	0012	ELECTROCARDIOGRAM	Ornelas, Francisco	Yes
06/01/20	0012	IV Insertion	Ornelas, Francisco	Yes
06/01/20	0012	Oxygen	Ornelas, Francisco	Yes
06/01/20	0012	Cardiac Monitor	Ornelas, Francisco	Yes
06/01/20	0012	Pulse Ox	Ornelas, Francisco	Yes
06/01/20	0147	KLOR-CON M20	Ornelas, Francisco	Yes
06/01/20	0147	MAG-OX 400	Ornelas, Francisco	Yes

Lab

Test	Day	Date	Time	Result	Reference	Units
=> WBC	1	JUN 1	0040	5.6	(4.5-11.0)	K/mm3
=> RBC	1	JUN 1	0040	5.24	(4.52-5.90)	M/mm3
=> HGB	1	JUN 1	0040	14.8	(13.0-18.0)	g/dL
=> HCT	1	JUN 1	0040	46	(42-52)	%
=> MCV	1	JUN 1	0040	87	(80-99)	fl
=> MCH	1	JUN 1	0040	28	(27-31)	pg
=> MCHC	1	JUN 1	0040	33	(32-37)	pg
=> RDW	1	JUN 1	0040	16.0 H	(11.5-14.5)	%
=> PLT	1	JUN 1	0040	165	(130-400)	x10^3mcL
=> MPV	1	JUN 1	0040	9.7	(7.4-10.4)	fl
=> NEUT %	1	JUN 1	0040	63.0	(40-70)	%
=> LYMPH %	1	JUN 1	0040	25.4	(25-45)	%
=> MONO %	1	JUN 1	0040	9.3	(2.5-10.0)	%
=> EOS %	1	JUN 1	0040	1.6	(0.0-11.0)	%
=> BASO %	1	JUN 1	0040	0.7	(0-2)	%
=> MANUAL DIFF REQ	1	JUN 1	0040	NO		
=> MORPH REQUIRED	1	JUN 1	0040	NO		
=> PROTIME	1	JUN 1	0040	10.8	(8.8-11.0)	sec
=> INR	1	JUN 1	0040	1.1	(0.9-1.2)	
=> PTT	1	JUN 1	0040	24.2	(20.2-29.8)	
=> B NATRIURETIC P	1	JUN 1	0040	40.17 (a)	(0-100)	pg/mL
=> NA	1	JUN 1	0040	143	(136-145)	mmol/L
=> K	1	JUN 1	0040	2.8 (b) P	*v0c0T(3.5-5.1)	mmol/L
=> CL	1	JUN 1	0040	107	(98-107)	mmol/L
=> CO2	1	JUN 1	0040	21.4	(21-32)	mmol/L
=> GLUCOSE	1	JUN 1	0040	103	(74-106)	mg/dL
=> BUN	1	JUN 1	0040	19.0 H	(7.0-18.0)	mg/dL
=> CREAT	1	JUN 1	0040	1.0	(0.7-1.3)	mg/dL
=> GFR1	1	JUN 1	0040	(c)		mL/min
=> TOTAL PROT	1	JUN 1	0040	6.7	(6.4-8.2)	g/dL
=> ALB	1	JUN 1	0040	3.5	(3.4-5.0)	g/dL
=> GLOB	1	JUN 1	0040	3.2	(1.5-3.5)	g/dL
=> A/G	1	JUN 1	0040	1.1	(1.1-1.8)	g/dL

NOTES: (a) BNP<100 PG/ML CHF VERY UNLIKELY (2%)
 BNP 100-500 PG/ML INDETERMINATE
 BNP>500 PG/ML CHF VERY LIKELY (95%)
 (b) Called results (and readback confirmed) to:EDAD
 on 06/01/20 at 0143 by Millares,Marzarex
 (c) Test not performed

** CONTINUED ON NEXT PAGE **

=> CA	1	JUN 1	0040	8.1	L	(8.5-10.1)	mg/dL
=> TBI	1	JUN 1	0040	0.6		(0.20-1.00)	mg/dL
=> AST/SGOT	1	JUN 1	0040	11	L	(15-37)	U/L
=> ALT	1	JUN 1	0040	18		(16-63)	U/L
=> ALKP TOTAL	1	JUN 1	0040	35 (d)	L	(46-116)	U/L
=> CKI	1	JUN 1	0040	74		(39-308)	U/L
=> LIPASE	1	JUN 1	0040	126		(73-393)	IU/L
=> AMM	1	JUN 1	0040	14		(11-32)	umol/L
=> TRIG	1	JUN 1	0040	144		(<150)	mg/dL
=> CHOL	1	JUN 1	0040	130		(<200)	mg/dL
=> HDL	1	JUN 1	0040	44		(40-60)	mg/dL
=> LDL,DIRECT	1	JUN 1	0040	69		(<100)	mg/dL
=> VLDL	1	JUN 1	0040	23.04			mg/dL
=> CHOL/HDL	1	JUN 1	0040	3.0 (e)			mg/dL
=> RISK	1	JUN 1	0040	3.0		(0.0-5.5)	
=> T3 UP	1	JUN 1	0040	32.0	L	(33-39)	% UPTAKE
=> T3 TOTAL	1	JUN 1	0040	0.97 (f)			ng/mL
=> FREE T4	1	JUN 1	0040	1.28		(0.76-1.46)	ng/dL
=> T4 (THYROXINE)	1	JUN 1	0040	7.2		(4.7-13.3)	ug/dL
=> FTI	1	JUN 1	0040	2.3		(1.4-4.5)	ug/dL
=> TSH	1	JUN 1	0040	1.740		(0.36-3.74)	uIU/mL
=> TROP I	1	JUN 1	0040	< 0.017		(0.00-0.10)	ng/mL

NOTES: (d) Please note new reference range as of 02-22-2015
 (e)

ESTIMATED CORONARY RISK INTERPRETATION

Cholesterol (mg/dl)	HDL Chol (mg/dL)	Risk Factor (Chol/HDL)	Risk Assess
<200 Desireable level	>45	<5.0	Decreased
200-239 Borderline	MALES 45	5.0	Average
High	<45	>5.0	Increased
>239 High Level	FEMALES >55	<4.4	Decreased
	55	4.4	Average
	<55	>4.4	Increased

(f) Reference Interval:
 Euthyroid 0.60 - 1.81 ng/mL
 Hypothyroid < 0.60 ng/mL
 Hyperthyroid > 1.81 ng/mL

Departure

Primary Impression: CHEST PAIN,HYPOKALEMIA

Secondary Impressions:

Disposition: XTR TO INTERNAL ACUTE CARE

Departure Date/Time: 06/01/20 - 0237

Comment:

Condition:

Referrals:

** CONTINUED ON NEXT PAGE **

Pt Instructions:

Departure Forms:

** CONTINUED ON NEXT PAGE **

** END OF REPORT **

HISTORY AND PHYSICAL Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

HISTORY AND PHYSICAL

Dictated/Documented By: Dr. Zarina Khabibulina RES Date/Time: 06/01/20 0201
Service Date/Time: 06/01/20 0201

History of Present Illness

Informant

The history is obtained from the patient, who is alert, oriented to person, place and time and appears to be an accurate historian, comprehends and speaks English adequately.

Chief Complaint

chest pain x1 day

History of Present Illness

This is 74 YOM with PMH of HTN, migranes and GERD came to ED with c/o substernal chest tightness and pressure with radiation to the left shoulder left arm and jaw for 1 hour at rest associated with nausea but no vomiting or diaphoresis. Patient stated he had a cardiac catheterization about 5 or 6 years ago and he showed mild disease but no stents were placed. Pt was given 2 nitro and one tab of ASA at home. Pt denies fever, chills, cough, SOB, vomiting, diarrhea, or body aches. No risk factors or symptoms suspicious for COVID at the moment.

He had 1 brother die at almost 50 years old and a second brother die at 65 years old from heart attack.

Past Medical History

as above

Past Surgical History Cholecystectomy

Home Medications

Discontinued Scripts

[AUGMENTIN] 1 TAB PO BID

PREDNISONE 1 TAB PO BID

PREDNISONE 1 TAB PO BID #10 TAB

Prov: 12/24/14

DC: 06/01/20 0155 PATIENT NO LONGER TAKING

Prednisone (Prednisone*) 20 MG PO DAILY

FLUTICASONONE FUROATE (VERAMYST) 2 Spray NA DAILY

FLUTICASONONE FUROATE (VERAMYST) 2 Spray NA DAILY #10 GM Ref 3

Prov: 12/24/14

DC: 06/01/20 0155 PATIENT NO LONGER TAKING

HISTORY AND PHYSICAL Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

HISTORY AND PHYSICAL

Dictated/Documented By: Dr. Zarina Khabibulina RES Date/Time: 06/01/20 0201
Service Date/Time: 06/01/20 0201

Reported Medications

ASPIRIN (ASPI-COR) 81 MG PO DAILY
ATENOLOL 100 MG PO DAILY
Amlodipine Besylate 5 MG PO DAILY

Discontinued Reported Medications

ATENOLOL 1 TAB PO DAILY
ATENOLOL 1 TAB PO DAILY #30 TAB Ref 5
DC: 06/01/20 0155 PATIENT NO LONGER TAKING

Allergies

Coded Allergies:

metoclopramide (From REGLAN) (Intermediate, 06/01/20)

Family History

No Known Family History.

Social History

Tobacco

no

Alcohol None

Drugs None

Residence With Family

Martial Status

Current Status: **M**

D: Divorced; **M:** Married; **S:** Single; **W:** Widow; **U:** Unknown

Occupation

HISTORY AND PHYSICAL Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

HISTORY AND PHYSICAL

Dictated/Documented By: Dr. Zarina Khabibulina RES Date/Time: 06/01/20 0201
Service Date/Time: 06/01/20 0201

PHYSICIAN

Point of Contact(POC)

IRMA

POC Home Phone

(909)374-7216 CELL

Relationship

Next Of kin relationship: **WI**

AU:AUNT; BC:BOARD AND CARE OPERATOR; BL:BROTHER IN LAW; BR:BROTHER; CN:COUSIN
DA:DAUGHTER; DL:DAUGHTER IN LAW; EM:EMPLOYER; EX:EX SPOUSE; FA:FATHER
FI:FIANCE; FL:FATHER IN LAW; FO:FAMILY/OTHER; FR:FRIEND;GD:GRANDDAUGHTER
GF:GRANDFATHER; GM:GRANDMOTHE R; GS:GRANDSON; HU:HUSBAND; LP:LIFE PARTNER
MO:MOTHER; NE:NEPHEW; NI:NIECE; NO:NONE; OT:OTHER
SD:STEPDAUGHTER;SF:STEP FATHER; SI:SISTER; SIG:SIGNIFICANT OTHER
SIL:SISTER IN LAW;SL:SON IN LAW; SM:STEP MOTHER; SO:SON; SS:STEPSON
SP:SELF/SAME AS PATIENT; UN:UNCLE; UNK:UNKNOWN; WI:WIFE

Resuscitation Code FULL CODE

Review of Systems

General

Denies Fever, Denies Chills, Denies Weight loss, Denies Night Sweats

Skin

Denies Rash, Denies Lesions

HEENT

Denies Headaches, Denies Trauma, Denies Ear Pain, Denies Decreased Vision

Oral

Denies Mouth Soreness, Denies Tongue Soreness, Denies Mouth Ulcers

Throat

Denies Sore Throat, Denies Laryngitis

Neck

Denies Goiter, Denies Sweating, Denies ROM Limitations

Respiratory

Positive Chest Pain, Denies Asthma, Denies Cough, Denies Recent Upper Resp Infect, Denies Night

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Sweats, Denies Dyspnea

Cardiovascular

Positive Chest Pain, Positive Chest Pressure, Denies Dyspnea, Denies Cardiac Irregularities, Denies Orthopnea, Denies Edema

Gastrointestinal

Positive Nausea, Denies Food Intolerances, Denies Vomiting, Denies Hematemesis, Denies Pain, Denies Melena

Genitourinary

Denies Frequency, Denies Hesitancy, Denies Pyuria

Endocrine

Denies Weight loss/gain, Denies Thyroid disease, Denies Diabetes Mellitus

Hematology

Denies History of Anemia

Lymph

Denies Enlarged lymph nodes, Denies Swollen lymph nodes

Extremities/Musculoskeletal

Denies Trauma, Denies Fractures, Denies Joint Pain

Neurological

Denies Headaches, Denies Seizures, Denies Parathesias/Numbness

Psychological

Denies Anxiety, Denies Nervousness, Denies Hallucinations

Exam

General

The patient is a 74 Male, well-developed, well-nourished, well-hydrated, alert and oriented to person, place and time.

Vitals

VITALS	RESULTS
Temperature	98.3
Pulse	74

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Respirations	18
Blood Pressure	105/69
Pain Scale	
Weight (KG)	
BMI	0

HEENT

Normocephalic/atraumatic. The patient has binocular vision. No glasses, no contact lenses. Pupils equal, round, reactive to light. Extraocular movements intact.

Skin

Skin is warm, dry, with good turgor. Normal color and pigmentation without lesions.

Neck

Supple. Full range of motion. No jugular venous distention. No bruit. No lymphadenopathy. No thyroid enlargement and/or other masses. Trachea is midline without obstruction

Breasts

Deferred

Lungs

Clear to auscultation. No rhonchi, rales, wheeze or crepitus.

Heart

Regular rate at -89 beats per minute without murmur. Normal S1 and S2. No S3, S4, thrill, friction rubs, and/or gallops.

Abdomen

Bowel sounds are present and are normoactive. Abdomen is soft and non-tender, no guarding, pinpoint tenderness, or rebound. No organomegaly noted.

Genitalia

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Deferred

Rectal

Deferred

Ext/Msk/Osteo

Joint examination reveals no tenderness, swelling, redness, restriction of range of motion. No clubbing, cyanosis or edema. Radial, femoral, popliteal and pedal pulses are palpable and equal bilaterally. Upper and lower extremities are normal for size, shape strength and symmetry.

Foot

Capillary refill time less than 2 seconds, no elevation pallor, varicosities, or stasis ulcers.

Lymph

No cervical, axillary, supraclavicular lymphadenopathy.

Neuro

The patient's general behavior reveals level of consciousness oriented to person, place, and time.
CN II, III, IV, VI: The patient has binocular vision and visual acuity within normal limits. EOM intact. Pupils equal and reactive to light and accommodation. No nystagmus.
CN VII: The patient demonstrates muscles of facial expressions.
CN XI: The patient can turn head in all directions against resistance. The patient can shrug shoulders symmetrically.
CN XII: The patient can protrude tongue in the midline, no atrophy or fasciculations.

Muscle size and strength are within normal limits. No involuntary muscle movements are noted. Biceps, triceps, brachioradialis, patellar and Achilles DTR's are 2+ /4+ and equal bilaterally without clonus.

Diagnostic Data

Diagnostic Data

Labs/Imaging

Laboratory Tests

	06/01 0040	06/01 0040	06/01 0040	06/01 0040	06/01 0040
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Chemistry				
Ammonia (11 - 32 umol/L)				14
Creatine Kinase (39 - 308 U/L)			74	
Troponin I (0.00 - 0.10 ng/mL)	< 0.017			
B-Natriuretic Peptide (0 - 100 pg/mL)			40.17	
TSH (0.36 - 3.74 uIU/mL)		1.740		
Free T4 (0.76 - 1.46 ng/dL)		1.28		
Free T4 Index (1.4 - 4.5 ug/dL)		2.3		
Thyroxine (T4) (4.7 - 13.3 ug/dL)		7.2		
Total T3 (ng/mL)		0.97		
T3 Uptake (33 - 39 % UPTAKE)		32.0 L		

	06/01 0040
Chemistry	
Sodium (136 - 145 mmol/L)	143
Serum Potassium (3.5 - 5.1 mmol/L)	2.8 P
Chloride (98 - 107 mmol/L)	107
Carbon Dioxide (21 - 32 mmol/L)	21.4
BUN (7.0 - 18.0 mg/dL)	19.0 II
Creatinine (0.7 - 1.3 mg/dL)	1.0
Creatinine w Est GFR (mL/min)	TNP
Glucose (74 - 106 mg/dL)	103
Calcium (8.5 - 10.1 mg/dL)	8.1 L
Total Bilirubin (0.20 - 1.00 mg/dL)	0.6
AST (15 - 37 U/L)	11 I
ALT (16 - 63 U/L)	18
Alkaline Phosphatase (46 - 116 U/L)	35 L
Serum Total Protein (6.4 - 8.2 g/dL)	6.7
Albumin (3.4 - 5.0 g/dL)	3.5
Globulin (1.5 - 3.5 g/dL)	3.2
Albumin/Globulin Ratio (1.1 - 1.8 g/dL)	1.1
Triglycerides (< 150 mg/dL)	144
Cholesterol (< 200 mg/dL)	130

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Cholesterol Risk Factr (0.0 - 5.5)	3.0
LDL Cholesterol Direct (< 100 mg/dL)	69
VLDL Cholesterol (mg/dL)	23.04
HDL Cholesterol (40 - 60 mg/dL)	44
Cholesterol/HDL Ratio (mg/dL)	3.0
Lipase (73 - 393 IU/L)	126
Coagulation	
PT (8.8 - 11.0 sec)	10.8
INR (0.9 - 1.2)	1.1
PTT (Dade) (20.2 - 29.8)	24.2
Hematology	
WBC (4.5 - 11.0 K/mm3)	5.6
RBC (4.52 - 5.90 M/mm3)	5.24
Hgb (13.0 - 18.0 g/dL)	14.8
Hct (42 - 52 %)	46
MCV (80 - 99 fl)	87
MCH (27 - 31 pg)	28
RDW (11.5 - 14.5 %)	16.0 H
Plt Count (130 - 400 x10^3mcL)	165
MPV (7.4 - 10.4 fl)	9.7
Add Manual Diff	NO
Neutrophils % (40 - 70 %)	63.0
Lymphocytes % (25 - 45 %)	25.4
Monocytes % (2.5 - 10.0 %)	9.3
Eosinophils % (0.0 - 11.0 %)	1.6
Basophils % (0 - 2 %)	0.7
RBC Morphology	NO
PUBS MCHC (32 - 37 pg)	33

Assessment
Assessment

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Chest pain, r/o ACS VS GERD
Hypokalemia 2.8
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Plan

Plan

Chest pain, r/o ACS VS GERD

- o ED course: Magnesium, Potassium
- o CXR: No cardiomegaly. Normal mediastinum. Elevation of the right hemidiaphragm. Bilateral lower lobe atelectasis.
- o EKG: Normal Sinus Rhythm with ventricular rate of 89 beats per minute. No acute ischemia
- o Admit to tele
- o Trops x1 negative, trend q8
- o ACS protocol: Metoprolol 12.5 BID, Nitro PRN, ASA 81 mg, Lisinopril 5 mg, Atorvastatin 10 mg
- o ECHO pending
- o HEART score: 4 points, Moderate score
- o Consult cardiology
- o VS: BP 105/69 RR 18 HR 89 T 98.3F SAt 95% on RA
- o Omeprazole 20 mg and Tums added

Hypokalemia 2.8

- o Repleted in ED with 60 Meq PO
- o Monitor

Mild dehydration BUN 19, Cr 1.0

- o Monitor
- o Encourage PO intake

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HTN, controlled BP 105/69
o Home med Amlodipine 5 mg held
o Monitor BP

H/o migranes
o On prophylactic Atenolol 100 mg at home
o Currently on hold

DVT prophylaxis
o BLE SCD

Incomplete data due to pending results

Advance Care Planning

Advance Care Planning

Parties in Attendance: [Pt]

Patient Decisional Capacity: [Capable]

Discussion:

I spoke to the patient regarding his code status.

Patient states he is full code.

If his heart stops he wants chest compressions.

If he stops breathing, he is OK with intubation and placed on a ventilatory machine.

The patient is OK with tube feedings.

He wants to be home when the time comes that he passes away.

POA/Surrogate: [IRMA, wife]

Code Status: [Full code]

Time Spent:

Total time spent face to face in education and discussion directly related to advance care planning: >

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Service Date/Time: 06/01/20 0201

16 min

SIGNED DATE AND TIME: 06/01/20 / 0317
ELECTRONICALLY SIGNED BY: Dr. Zarina Khabibulina RES

I was physically present for the key portions of the service provided to patient by Dr. Zarina Khabibulina RES. I have reviewed the documentation, discussed the case with the resident and agree with the resident's documentation except as noted below.

COSIGNED DATE AND TIME: 06/01/20 / 2345
ELECTRONICALLY SIGNED BY: Dr. Jeffrey J. Crudo

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History of Present Illness

Informant

The history is obtained from the patient, who is alert, oriented to person, place and time and appears to be an accurate historian, comprehends and speaks English adequately.

Chief Complaint

chest pain x1 day

History of Present Illness

This is 74 YOM with PMH of HTN, migranes and GERD came to ED with c/o substernal chest tightness and pressure with radiation to the left shoulder left arm and jaw for 1 hour at rest associated with nausea but no vomiting or diaphoresis. Patient stated he had a cardiac catheterization about 5 or 6 years ago and he showed mild disease but no stents were placed. Pt was given 2 nitro and one tab of ASA at home. Pt denies fever, chills, cough, SOB, vomiting, diarrhea, or body aches. No risk factors or symptoms suspicious for COVID at the moment.

He had 1 brother die at almost 50 years old and a second brother die at 65 years old from heart attack.

Past Medical History

as above

Past Surgical History Cholecystectomy

Home Medications

Discontinued Scripts

[AUGMENTIN] 1 TAB PO BID

PREDNISONE 1 TAB PO BID

PREDNISONE 1 TAB PO BID #10 TAB

Prov: 12/24/14

DC: 06/01/20 0155 PATIENT NO LONGER TAKING

Prednisone (Prednisone*) 20 MG PO DAILY

FLUTICASONE FUROATE (VERAMYST) 2 Spray NA DAILY

FLUTICASONE FUROATE (VERAMYST) 2 Spray NA DAILY #10 GM Ref 3

Prov: 12/24/14

DC: 06/01/20 0155 PATIENT NO LONGER TAKING

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Reported Medications

ASPIRIN (ASPI-COR) 81 MG PO DAILY
ATENOLOL 100 MG PO DAILY
Amlodipine Besylate 5 MG PO DAILY

Discontinued Reported Medications

ATENOLOL 1 TAB PO DAILY
ATENOLOL 1 TAB PO DAILY #30 TAB Ref 5
DC: 06/01/20 0155 PATIENT NO LONGER TAKING

Allergies

Coded Allergies:

metoclopramide (From REGLAN) (Intermediate, 06/01/20)

Family History

No Known Family History.

Social History

Tobacco

no

Alcohol None

Drugs None

Residence With Family

Martial Status

Current Status: **M**

D: Divorced; **M:** Married; **S:** Single; **W:** Widow; **U:** Unknown

Occupation

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Resuscitation Code FULL CODE

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Denies Rash, Denies Lesions

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Denies Sore Throat, Denies Laryngitis

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Denies Weight loss/gain, Denies Thyroid disease, Denies Diabetes Mellitus

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Denies History of Anemia

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Denies Enlarged lymph nodes, Denies Swollen lymph nodes

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Denies Anxiety, Denies Nervousness, Denies Hallucinations

Exam

General

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VITALS	RESULTS
Temperature	98.3
Pulse	74

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Respirations	18
Blood Pressure	105/69
Pain Scale	
Weight (KG)	
BMI	0

HEENT

Normocephalic/atraumatic. The patient has binocular vision. No glasses, no contact lenses. Pupils equal, round, reactive to light. Extraocular movements intact.

Skin

Skin is warm, dry, with good turgor. Normal color and pigmentation without lesions.

Neck

Supple. Full range of motion. No jugular venous distention. No bruit. No lymphadenopathy. No thyroid enlargement and/or other masses. Trachea is midline without obstruction

Breasts

Deferred

Lungs

Clear to auscultation. No rhonchi, rales, wheeze or crepitus.

Heart

Regular rate at -89 beats per minute without murmur. Normal S1 and S2. No S3, S4, thrill, friction rubs, and/or gallops.

Abdomen

Bowel sounds are present and are normoactive. Abdomen is soft and non-tender, no guarding, pinpoint tenderness, or rebound. No organomegaly noted.

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Deferred

Rectal

Deferred

Ext/Msk/Osteo

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Capillary refill time less than 2 seconds, no elevation pallor, varicosities, or stasis ulcers.

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Diagnostic Data

Diagnostic Data

Labs/Imaging

Laboratory Tests

	06/01 0040	06/01 0040	06/01 0040	06/01 0040	06/01 0040
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TSH (0.36 - 3.74 uIU/mL)		1.740			
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 Service Date/Time: 06/01/20 0201

Cholesterol Risk Factr (0.0 - 5.5)	3.0
LDL Cholesterol Direct (< 100 mg/dL)	69
VLDL Cholesterol (mg/dL)	23.04
HDL Cholesterol (40 - 60 mg/dL)	44
Cholesterol/HDL Ratio (mg/dL)	3.0
Lipase (73 - 393 IU/L)	126
Coagulation	
PT (8.8 - 11.0 sec)	10.8
INR (0.9 - 1.2)	1.1
PTT (Dade) (20.2 - 29.8)	24.2
Hematology	
WBC (4.5 - 11.0 K/mm3)	5.6
RBC (4.52 - 5.90 M/mm3)	5.24
Hgb (13.0 - 18.0 g/dL)	14.8
Hct (42 - 52 %)	46
MCV (80 - 99 fl)	87
MCH (27 - 31 pg)	28
RDW (11.5 - 14.5 %)	16.0 H
Plt Count (130 - 400 x10 ³ mcL)	165
MPV (7.4 - 10.4 fl)	9.7
Add Manual Diff	NO
Neutrophils % (40 - 70 %)	63.0
Lymphocytes % (25 - 45 %)	25.4
Monocytes % (2.5 - 10.0 %)	9.3
Eosinophils % (0.0 - 11.0 %)	1.6
Basophils % (0 - 2 %)	0.7
RBC Morphology	NO
PUBS MCHC (32 - 37 pg)	33

Assessment
Assessment

HISTORY AND PHYSICAL Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

HISTORY AND PHYSICAL

Dictated/Documented By: Dr. Zarina Khabibulina RES Date/Time: 06/01/20 0201
Service Date/Time: 06/01/20 0201

Chest pain, r/o ACS VS GERD
Hypokalemia 2.8
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Plan

Plan

Chest pain, r/o ACS VS GERD
oED course: Magnesium, Potassium
oCXR:No cardiomegaly.Normal mediastinum.Elevation of the right hemidiaphragm.Bilateral lower lobe atelectasis.
oEKG:Normal Sinus Rhythm with ventricular rate of 89 beats per minute.No acute ischemia
oAdmit to tele
oTrops x1 negative, trend q8
oACS protocol: Metoprolol 12.5BID, Nitro PRN, ASA 81 mg, Lisinopril 5 mg, Atorvastatin 10 mg
oECHO pending
oHEART score:4 points, Moderate score
oConsult cardiology
oVS: BP 105/69 RR 18 HR 89 T 98.3F SAt 95% on RA
oOmeprozole 20 mg and Tums added

Hypokalemia 2.8
oRepleted in ED with 60 Meq PO
oMonitor

Mild dehydration BUN 19, Cr 1.0
oMonitor
oEncourage PO intake

HISTORY AND PHYSICAL Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

HISTORY AND PHYSICAL

Dictated/Documented By: Dr. Zarina Khabibulina RES Date/Time: 06/01/20 0201
Service Date/Time: 06/01/20 0201

HTN, controlled BP 105/69
oHome med Amlodipine 5 mg held
oMonitor BP

H/o migranes
oOn prophylactic Atenolol 100 mg at home
oCurrently on hold

DVT prophylaxis
oBLE SCD

Incomplete data due to pending results

Advance Care Planning

Advance Care Planning

Parties in Attendance: [Pt]

Patient Decisional Capacity: [Capable]

Discussion:

I spoke to the patient regarding his code status.

Patient states he is full code.

If his heart stops he wants chest compressions.

If he stops breathing, he is OK with intubation and placed on a ventilatory machine.

The patient is OK with tube feedings.

He wants to be home when the time comes that he passes away.

POA/Surrogate: [IRMA, wife]

Code Status: [Full code]

Time Spent:

Total time spent face to face in education and discussion directly related to advance care planning: >

HISTORY AND PHYSICAL Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
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Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

HISTORY AND PHYSICAL

Dictated/Documented By: Dr. Zarina Khabibulina RES Date/Time: 06/01/20 0201
Service Date/Time: 06/01/20 0201

16 min

SIGNED DATE AND TIME: 06/01/20 / 0317
ELECTRONICALLY SIGNED BY: Dr. Zarina Khabibulina RES

I was physically present for the key portions of the service provided to patient by Dr. Zarina Khabibulina RES. I have reviewed the documentation, discussed the case with the resident and agree with the resident's documentation except as noted below.

COSIGNED DATE AND TIME: 06/01/20 / 2345
ELECTRONICALLY SIGNED BY: Dr. Jeffrey J. Crudo

CHINO VALLEY MEDICAL CENTER
5451 Walnut Avenue, Chino, CA 91710
Ph: (909)464-8600

Patient Name : HANNA ADEL S DOB : 03-29-1946 SEX : M
Account# : V00000905328 MR# : M000273781 Report : CON Dictating Dr :
IDREES ZAHEIB

Consultation Report

REFERRING PROVIDER: Dr. Crudo.

REASON FOR CONSULTATION: Anxiety.

IDENTIFICATION: A 74-year-old male admitted to Chino Valley Medical Center under the diagnosis of chest pain.

CHIEF COMPLAINT: "work has been stressful."

HISTORY OF PRESENT ILLNESS: A 74-year-old male with no previous cardiac history, also with no previous mental health history, admitted to Chino Valley Medical Center due to chest pain. The patient has had a full cardiac workup, which has been negative thus far. The patient was visited at bedside by this provider due to increasing anxiety and stress. The patient reports that he has been having a significant amount of stress at his work at the Chino prison. He reports that he has achieved psychiatrist there and has been there for over 20 years. He reports that he has been doing well there and that he enjoys his job until recent change of supervisors. He reports that he was previously reporting to the chief psychologist and receiving his evaluation and critique and feedback from this individual and he reports that he was doing well and had an open discussion and relationship with this person; however, recently over the past 2 months, his reporting person has changed to the CEO of the prison. He reports that the CEO has been very critical of him. He feels that the CEO has been very unfair in his criticisms, has not had an open discussion with him and this has been worsening and has been causing a lot of stress. He also reports that he overheard the CEO talking among others about wanting to remove the patient as the psychiatrist in the prison and his role as chief psychiatrist. The patient reports that ever since hearing this his anxiety has been increasing. He has been feeling restless. He has been feeling anxious and worried and has not been able to sleep. He has reached out to multiple people for a consolation and how to proceed going forward. However, this has been causing an immense amount of stress for the patient. He reports that prior to this, he was doing well, tolerating stress well. No depression, no anxiety and no other psychiatric conditions. He reports that if his reporting person changes to a different person other than the CEO, he feels that his anxiety will relieve and he will no longer have severe stress, anxiety, insomnia and chest pain.

PAST PSYCHIATRIC HISTORY: The patient denies.

PAST MEDICAL HISTORY, ALLERGIES, VITALS AND LABORATORIES: All reviewed in chart.

SOCIAL HISTORY: The patient works as a chief psychiatrist at Chino prison. He is married and has supportive relationship with his wife. He has 3 adult children who no longer live at home, but he also maintains a good relationship with them.

LEGAL HISTORY: Denies.

ABUSE HISTORY: Denies.

FAMILY HISTORY: Denies.

SUBSTANCE USE HISTORY: The patient denies, but reports infrequent alcohol use of 1 drink periodically in a social setting.

MENTAL STATUS EXAMINATION: The patient is an adult male sitting up comfortably in his hospital bed. He is tearful and anxious and depressed throughout the interview. He reports his mood is depressed and anxious as well. His speech is within normal limits. His thought process is linear. He is denying any suicidal or homicidal thoughts. He is denying any hallucinations or paranoia. He is alert and oriented x4. His insight, judgment and impulse control appear to be fair.

ASSESSMENT: A 74-year-old male admitted to Chino Valley Medical Center under the diagnosis of chest pain. His cardiac workup has been unremarkable. Psychiatry was consulted for anxiety and stress. The patient has been at the same employment at the Chino prison for over 20 years, doing well and has been serving as a chief psychiatrist for many years as well. He appeared to be doing very well with no psychiatric symptoms and tolerating stressors well and overall reporting that he lived "a good life" until a recent change of supervisors now having to report to the prison CEO. He reports that this change has caused an immense amount of distress due to being treated unfairly. He reports he also has overheard conversations of him being removed. He also reports that his feedback has been unfair and his attempts to remedy any issues have not been successful with this individual. Since then, the patient has been endorsing high anxiety, high distress, difficulties with sleep, changes in his appetite causing physical issues, including the chest pain.

PROVISIONAL DIAGNOSES: Adjustment disorder with depressed mood and anxious distress, rule out major depression with anxious distress.

TREATMENT PLAN: The patient does not meet LPS hold criteria. The patient's symptoms seem very consistent with an adjustment disorder given that if we were to remove the stressor, the patient's symptoms appear will most likely resolve. Therefore, advised the patient remain off work for the next 2 months. Also, advised the patient follow up with outpatient mental health. Also, we will prescribe the patient Ambien CR 6.25 mg at bedtime as needed for insomnia and we also reviewed the risks, benefits and alternatives of the medication. We also thoroughly reviewed 911 and ER precautions, including for any suicidal or homicidal thoughts, worsening of symptoms or side effects to the medication.

Thank you for the consultation, Dr. Crudo. Please call for any questions or concerns.

ZAHEIB IDREES, MD

DR: ZI DD: 06/05/2020 12:20 DT: 06/05/2020 12:45 JOB ID:371185 DICTATION ID: 3826015

Electronically Authenticated by:
Zaheib Idrees, DO on 06/12/2020 09:08 PM MDT

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/01/20 1530
Service Date/Time: 06/01/20 1530

History of Present Illness.

Reason For Consult:

chest pain

History of Present Illness

The patient is a 74 year-old male who presented with chest pain amongst a constellation of other symptoms including shortness of breath, inability to sleep, and loss of appetite. He reports onset of symptoms after a negative encounter with his supervisor at work several days ago. He is the chief psychiatrist at the Chino correction facility, and has been under increased stress related to the current COVID-19 pandemic.

EKG showed normal sinus rhythm without acute ischemic changes. Troponins have been negative x 2.

He reports having a coronary angiogram 4-5 years ago at Pomona Valley Medical Center in the setting of chest pain, and was found to have mild nonobstructive coronary artery disease with a 30% lesion in the left anterior descending artery.

Past Medical History

Past Medical History

Hypertension

Migraine headaches

Family History CAD (myocardial infarction)

Past Surgical History Cholecystectomy, Nissen fundoplication

Past Social History

Smoke Quit

Alcohol None

Drugs None

Review of Systems

Other

14 point review of systems negative other than per HPI.

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/01/20 1530
Service Date/Time: 06/01/20 1530

Allergies

Coded Allergies:

metoclopramide (From REGLAN) (Intermediate, 06/01/20)

Current Medications

Current Medications

Atorvastatin Calcium 10 MG PM PO
Aspirin 81 MG DAILY PO
Docusate Sodium 100 MG BID PO
Lisinopril 5 MG DAILY PO
Metoprolol Tartrate 12.5 MG BID PO
Omeprazole 20 MG BID AC PO
Sodium 1,000 ML CONT IV
Calcium Carbonate 500 MG TID PRN PO
Nitroglycerin 0.4 MG Q4HP PRN SL
Acetaminophen 650 MG Q6HP PRN PO
Hydrocodone Bitart/Acetaminophen 1 TAB Q4HP PRN PO
Morphine Sulfate 2 MG Q3HP PRN IV
Ondansetron HCl 4 MG Q4HP PRN IV
Magnesium Oxide 400 MG ONCE ONE PO (DC)
Potassium Chloride 60 MEQ ONCE ONE PO (DCr)
Sodium 1,000 ML ONCE ONE IV (DC)

Examination

Vital Signs

VITALS	RESULTS
Temperature	97.4
Pulse	60

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
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Chino Valley Medical Center
 5451 Walnut Avenue
 Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/01/20 1530
 Service Date/Time: 06/01/20 1530

Respirations	17
Blood Pressure	110/65
Pain Scale	0/10
Weight (KG)	74.162
BMI	0

General Appearance Alert, Cooperative, No Acute Distress
HEENT Atraumatic, Mucous Membr. moist/pink
Lungs Clear to Auscultation, Normal Air Movement
Cardiovascular Regular Rate, Normal S1, Normal S2
Abdomen Soft, No Tenderness
Extremities No Clubbing, No Cyanosis, No Edema
Skin No Significant Lesion
Neurological Normal Speech
Psych/Mental Status Mental Status NL

Diagnostic Data

Diagnostic Data
Laboratory Results
 Laboratory Tests

	06/01 0040	06/01 0040	06/01 0040	06/01 0040	06/01 0040
Chemistry					
Sodium (136 - 145 mmol/L)	143				
Serum Potassium (3.5 - 5.1 mmol/L)	2.8 P				
Chloride (98 - 107 mmol/L)	107				
Carbon Dioxide (21 - 32 mmol/L)	21.4				
BUN (7.0 - 18.0 mg/dL)	19.0 II				
Creatinine (0.7 - 1.3 mg/dL)	1.0				

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/01/20 1530
 Service Date/Time: 06/01/20 1530

Creatinine w Est GFR (mL/min)	TNP			
Glucose (74 - 106 mg/dL)	103			
Calcium (8.5 - 10.1 mg/dL)	8.1 L			
Total Bilirubin (0.20 - 1.00 mg/dL)	0.6			
AST (15 - 37 U/L)	11 L			
ALT (16 - 63 U/L)	18			
Alkaline Phosphatase (46 - 116 U/L)	35 L			
Ammonia (11 - 32 umol/L)		14		
Creatine Kinase (39 - 308 U/L)			74	
B-Natriuretic Peptide (0 - 100 pg/mL)		40.17		
Serum Total Protein (6.4 - 8.2 g/dL)	6.7			
Albumin (3.4 - 5.0 g/dL)	3.5			
Globulin (1.5 - 3.5 g/dL)	3.2			
Albumin/Globulin Ratio (1.1 - 1.8 g/dL)	1.1			
Triglycerides (< 150 mg/dL)	144			
Cholesterol (< 200 mg/dL)	130			
Cholesterol Risk Factr (0.0 - 5.5)	3.0			
LDL Cholesterol Direct (< 100 mg/dL)	69			
VLDL Cholesterol (mg/dL)	23.04			
IIDL Cholesterol (40 - 60 mg/dL)	44			
Cholesterol/HDL Ratio (mg/dL)	3.0			
Lipase (73 - 393 IU/L)	126			
TSH (0.36 - 3.74 uIU/mL)				1,740
Free T4 (0.76 - 1.46 ng/dL)				1.28
Free T4 Index (1.4 - 4.5 ug/dL)				2.3
Thyroxine (T4) (4.7 - 13.3 ug/dL)				7.2
Total T3 (ng/mL)				0.97
T3 Uptake (33 - 39 % UPTAKE)				32.0 L
Coagulation				
PT (8.8 - 11.0 sec)	10.8			
INR (0.9 - 1.2)	1.1			
PTT (Dade) (20.2 - 29.8)	24.2			
Hematology				
WBC (4.5 - 11.0 K/mm3)	5.6			

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
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 MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/01/20 1530
 Service Date/Time: 06/01/20 1530

RBC (4.52 - 5.90 M/mm3)	5.24			
Hgb (13.0 - 18.0 g/dL)	14.8			
Hct (42 - 52 %)	46			
MCV (80 - 99 fl)	87			
MCH (27 - 31 pg)	28			
RDW (11.5 - 14.5 %)	16.0 H			
Plt Count (130 - 400 x10 ³ mcL)	165			
MPV (7.4 - 10.4 fl)	9.7			
Add Manual Diff	NO			
Neutrophils % (40 - 70 %)	63.0			
Lymphocytes % (25 - 45 %)	25.4			
Monocytes % (2.5 - 10.0 %)	9.3			
Eosinophils % (0.0 - 11.0 %)	1.6			
Basophils % (0 - 2 %)	0.7			
RBC Morphology	NO			
PUBS MCHC (32 - 37 pg)	33			

	06/01 0040	06/01 0900	06/01 0900
Chemistry			
Sodium (136 - 145 mmol/L)		141	
Serum Potassium (3.5 - 5.1 mmol/L)		4.2	
Chloride (98 - 107 mmol/L)		108 H	
Carbon Dioxide (21 - 32 mmol/L)		25.4	
BUN (7.0 - 18.0 mg/dL)		15.0	
Creatinine (0.7 - 1.3 mg/dL)		0.9	
Creatinine w Est GFR (mL/min)		TNP	
Glucose (74 - 106 mg/dL)		93	
Calcium (8.5 - 10.1 mg/dL)		8.3 L	
Troponin I (0.00 - 0.10 ng/mL)	< 0.017		< 0.02

Microbiology Results
Microbiology

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/01/20 1530
Service Date/Time: 06/01/20 1530

Date/Time Source	Procedure - Status Growth
06/01 0307 NARES	MRSA Screen - RECD

Assessment

Assessment

1. Chest pain - ruled out for myocardial infarction; constellation of symptoms suggest secondary to stress
2. Mild nonobstructive coronary artery disease - patient reports 30% lesion in left anterior descending artery seen on coronary angiogram 4-5 years ago
3. Hypertension
4. Migraine headaches

Plan

Plan

- follow up transthoracic echocardiogram
 - obtain Lexiscan SPECT tomorrow

 - continue aspirin 81mg daily
 - agree with addition of atorvastatin 10mg daily despite LDL< 70 given coronary artery disease seen on prior coronary angiogram

 - continue lisinopril 5mg daily
 - continue metoprolol 12.5mg BID
 - adjust anti-hypertensive medications as needed

 - follow up psychiatry evaluation
-

SIGNED DATE AND TIME: 06/01/20 / 1538
ELECTRONICALLY SIGNED BY: Dr. Chou, Stanley B .

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/02/20 1559
Service Date/Time: 06/02/20 1559

Subjective

Review of Systems

Events since last encounter

No acute events.

Lexiscan SPECT today.

Other Systems

14 point review of systems without changes.

Objective

Exam

Vitals and I/O

VITALS	RESULTS
Temperature	97.0
Pulse	59
Respirations	20
Blood Pressure	141/80
Pain Scale	0/10
Weight (KG)	74.162
BMI	0

Intake & Output

	06/02 2300
Intake Total	1560
Output Total	

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/02/20 1559
 Service Date/Time: 06/02/20 1559

Balance	1560
---------	------

General Appearance Alert, Cooperative, No Acute Distress
HEENT Atraumatic, Mucous Membr. moist/pink
Lungs Clear to Auscultation, Normal Air Movement
Neck Supple
Cardiovascular Regular Rate, Normal S1, Normal S2
Abdomen Soft, No Tenderness
Extremities No Clubbing, No Cyanosis, No Edema
Skin No Significant Lesion
Neurological Normal Speech
Psych/Mental Status Mental Status NL
Laboratory & Imaging Results:
 Laboratory Tests

	06/01 1650	06/02 0501
Chemistry		
Sodium (136 - 145 mmol/L)		141
Serum Potassium (3.5 - 5.1 mmol/L)		3.7
Chloride (98 - 107 mmol/L)		106
Carbon Dioxide (21 - 32 mmol/L)		27.1
BUN (7.0 - 18.0 mg/dL)		11.0
Creatinine (0.7 - 1.3 mg/dL)		1.0
Creatinine w Est GFR (mL./min)		TNP
Glucose (74 - 106 mg/dL)		102
Calcium (8.5 - 10.1 mg/dL)		8.4 L
Phosphorus (2.5 - 4.9 mg/dL)		3.1
Magnesium (1.8 - 2.4 mg/dL)		2.2
Troponin I (0.00 - 0.10 ng/mL)	< 0.02	
Hematology		
WBC (4.5 - 11.0 K/mm3)		4.1 L
RBC (4.52 - 5.90 M/mm3)		5.09
Hgb (13.0 - 18.0 g/dL)		14.7

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/02/20 1559
Service Date/Time: 06/02/20 1559

Hct (42 - 52 %)		45
MCV (80 - 99 fl)		87
MCH (27 - 31 pg)		29
RDW (11.5 - 14.5 %)		16.4 H
Plt Count (130 - 400 x10 ³ mcL)		142
MPV (7.4 - 10.4 fl)		10.3
Add Manual Diff		NO
Neutrophils % (40 - 70 %)		55.0
Lymphocytes % (25 - 45 %)		33.2
Monocytes % (2.5 - 10.0 %)		6.8
Eosinophils % (0.0 - 11.0 %)		4.5
Basophils % (0 - 2 %)		0.5
RBC Morphology		NO
PUBS MCHC (32 - 37 pg)		33

Assessment

Assessment

1. Chest pain - ruled out for myocardial infarction; constellation of symptoms suggest secondary to stress
2. Mild nonobstructive coronary artery disease - patient reports 30% lesion in left anterior descending artery seen on coronary angiogram 4-5 years ago
3. Hypertension
4. Migraine headaches

Plan

Plan

- follow up transthoracic echocardiogram
- follow up Lexiscan SPECT results

- continue aspirin 81mg daily
- continue atorvastatin 10mg daily despite LDL < 70 given coronary artery disease seen on prior coronary

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/02/20 1559
Service Date/Time: 06/02/20 1559

angiogram

- combine metoprolol to succinate form at 25mg daily
- continue lisinopril 5mg daily
- follow up psychiatry evaluation

SIGNED DATE AND TIME: 06/02/20 / 1601
ELECTRONICALLY SIGNED BY: Dr. Chou, Stanley B .

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Zaheib Idrees Date/Time: 06/03/20 1125
Service Date/Time: 06/02/20 1600

Plan

Plan

Attempted to see patient today 06/02/20 but patient is in Lexiscan
will follow up tomorrow 06/03/20.

SIGNED DATE AND TIME: 06/03/20 / 1126
ELECTRONICALLY SIGNED BY: Dr. Idrees, Zaheib

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/03/20 1649
Service Date/Time: 06/03/20 1649

Subjective

Review of Systems

Events since last encounter

Lexiscan SPECT negative for ischemia.

Other Systems

14 point review of systems without changes.

Objective

Exam

Vitals and I/O

VITALS	RESULTS
Temperature	98.0
Pulse	79
Respirations	20
Blood Pressure	150/93
Pain Scale	0/10
Weight (KG)	74.162
BMI	0

Intake & Output

	06/03 2300
Intake Total	4400
Output Total	
Balance	4400

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/03/20 1649
Service Date/Time: 06/03/20 1649

General Appearance Alert, Cooperative, No Acute Distress
HEENT Atraumatic, Mucous Membr. moist/pink
Lungs Clear to Auscultation, Normal Air Movement
Neck Supple
Cardiovascular Regular Rate, Normal S1, Normal S2
Abdomen Soft, No Tenderness
Extremities No Clubbing, No Cyanosis, No Edema
Skin No Significant Lesion
Neurological Normal Speech
Psych/Mental Status Mental Status NL

Assessment

Assessment

1. Chest pain - ruled out for myocardial infarction; constellation of symptoms suggest secondary to stress
2. Mild nonobstructive coronary artery disease - patient reports 30% lesion in left anterior descending artery seen on coronary angiogram 4-5 years ago; current Lexiscan SPECT negative
3. Hypertension
4. Migraine headaches

Plan

Plan

- echocardiogram normal
- Lexiscan SPECT negative for ischemia
- no additional cardiac work up at this time

- continue aspirin 81mg daily
- continue atorvastatin 10mg daily despite LDL < 70 given coronary artery disease seen on prior coronary angiogram

- continue metoprolol succinate 25mg daily

CONSULTATION REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date:06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

CONSULTATION REPORT

Dictated/Documented By: Dr. Stanley B . Chou Date/Time: 06/03/20 1649
Service Date/Time: 06/03/20 1649

- continue lisinopril 5mg daily
- follow up psychiatry evaluation

SIGNED DATE AND TIME: 06/03/20 / 2109
ELECTRONICALLY SIGNED BY: Dr. Chou, Stanley B .

OPERATIVE REPORT Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Aveue
Chino,CA 91710

PROCEDURE NOTE

Dictated/Documented By: Dr. Stanley B . Chou
Service Date/Time: 06/02/20 1602

Date/Time: 06/02/20 1602

Procedure Note

Summary

Date of Procedure: 6/2/2020

Procedure Performed: Lexiscan SPECT

Indication: chest pain

Findings:

Resting EKG showed normal sinus rhythm.

Stress EKG without ischemic ST segment changes or arrhythmia.

Conclusions:

Normal Lexiscan stress EKG results.

Imaging results to be reported seperately.

SIGNED DATE AND TIME: 06/02/20 / 1605
ELECTRONICALLY SIGNED BY: Dr. Chou, Stanley B .

PROGRESS NOTES Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

PROGRESS NOTE

Dictated/Documented By: Dr. Sushma Thiruvoipati RES
Service Date/Time: 06/01/20 0656

Date/Time: 06/01/20 0656

Subjective - Teaching Service

Review of Systems

Events since last encounter

Pt was seen and examined under the supervision of Dr. Crudo, MD.

Trops x2 negative, trend q8
Cardiology consult pending
Psychiatry consult pending
Echo pending

Subjective

Pt reports chest pain is alleviated. Pt reported that he has had a lot of work stress lately as he is the chief psychiatrist for 4 prisons in the area and 457 prisoners of his patients have Covid 19. Pt was tested 4 days ago and was found to be negative. Pt requested a psychiatrist consult.

General

Positive Fatigue, Denies Chills, Denies Malaise

HEENT

Denies Head Aches, Denies Eye Pain, Denies Ear Pain, Denies Sore Throat

Pulmonary

Denies Dyspnea, Denies Cough, Denies Pleuritic Chest Pain

Cardiovascular

Denies Chest Pain, Denies Palpitations, Denies Orthopnea, Denies Edema

Gastrointestinal

Denies Nausea, Denies Vomiting, Denies Abdominal Pain, Denies Diarrhea, Denies Constipation

Genitourinary

Denies Dysuria, Denies Frequency, Denies Incontinence

Musculoskeletal

Denies Neck Pain, Denies Shoulder Pain, Denies Arm Pain, Denies Back Pain

Neurological

Denies Weakness, Denies Numbness, Denies Incoordination

Objective

PROGRESS NOTES Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

PROGRESS NOTE

Dictated/Documented By: Dr. Sushma Thiruvoipati RES
Service Date/Time: 06/01/20 0656

Date/Time: 06/01/20 0656

Exam
Vitals and I/O

VITALS	RESULTS
Temperature	97.4
Pulse	60
Respirations	17
Blood Pressure	110/65
Pain Scale	0/10
Weight (KG)	74.162
BMI	0

Intake & Output

	06/01 2300
Intake Total	700
Output Total	
Balance	700

General Appearance Alert, Oriented X3, Cooperative, No Acute Distress
HEENT Atraumatic, PERRLA, Mucous Membr. moist/pink
Lungs Clear to Auscultation, Normal Air Movement, No Rhonchi/Rales/Wheeze
Neck Supple, No Lymphadenopathy
Cardiovascular Regular Rate, Normal S1, Normal S2, No Murmurs/Gallops/Rubs
Abdomen Normal Bowel Sounds, Soft, No Tenderness
Extremities No Clubbing, No Cyanosis, No Edema
Skin No Rashes, No Breakdown, No Significant Lesion
Neurological Normal Speech, Normal Tone, Sensation Intact
Psych/Mental Status Mental Status NL, Mood NL
LAB AND IMAGING Results

PROGRESS NOTES Site Code: CVMC Name: HANNA, ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino, CA 91710

PROGRESS NOTE

Dictated/Documented By: Dr. Sushma Thiruvoipati RES
 Service Date/Time: 06/01/20 0656

Date/Time: 06/01/20 0656

Laboratory Tests

	06/01 0900	06/01 0900	06/01 0040	06/01 0040	06/01 0040
Chemistry					
Sodium (136 - 145 mmol/L)		141			
Serum Potassium (3.5 - 5.1 mmol/L)		4.2			
Chloride (98 - 107 mmol/L)		108 H			
Carbon Dioxide (21 - 32 mmol/L)		25.4			
BUN (7.0 - 18.0 mg/dL)		15.0			
Creatinine (0.7 - 1.3 mg/dL)		0.9			
Creatinine w Est GFR (mL/min)		TNP			
Glucose (74 - 106 mg/dL)		93			
Calcium (8.5 - 10.1 mg/dL)		8.3 L			
Creatine Kinase (39 - 308 U/L)					74
Troponin I (0.00 - 0.10 ng/mL)	< 0.02		< 0.017		
TSH (0.36 - 3.74 uIU/mL)				1.740	
Free T4 (0.76 - 1.46 ng/dL)				1.28	
Free T4 Index (1.4 - 4.5 ug/dL)				2.3	
Thyroxine (T4) (4.7 - 13.3 ug/dL)				7.2	
Total T3 (ng/mL)				0.97	
T3 Uptake (33 - 39 % UPTAKE)				32.0 L	

	06/01 0040	06/01 0040	06/01 0040
Chemistry			
Sodium (136 - 145 mmol/L)			143
Serum Potassium (3.5 - 5.1 mmol/L)			2.8 P
Chloride (98 - 107 mmol/L)			107
Carbon Dioxide (21 - 32 mmol/L)			21.4
BUN (7.0 - 18.0 mg/dL)			19.0 H
Creatinine (0.7 - 1.3 mg/dL)			1.0
Creatinine w Est GFR (mL/min)			TNP
Glucose (74 - 106 mg/dL)			103
Calcium (8.5 - 10.1 mg/dL)			8.1 L

PROGRESS NOTES Site Code: CVMC Name: HANNA, ADEL S
 ACCT: V00000905328
 MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
 5451 Walnut Avenue
 Chino, CA 91710

PROGRESS NOTE

Dictated/Documented By: Dr. Sushma Thiruvoipati RES
 Service Date/Time: 06/01/20 0656

Date/Time: 06/01/20 0656

Total Bilirubin (0.20 - 1.00 mg/dL)			0.6
AST (15 - 37 U/L)			11 L
ALT (16 - 63 U/L)			18
Alkaline Phosphatase (46 - 116 U/L)			35 L
Ammonia (11 - 32 umol/L)		14	
B-Natriuretic Peptide (0 - 100 pg/mL)	40.17		
Serum Total Protein (6.4 - 8.2 g/dL)			6.7
Albumin (3.4 - 5.0 g/dL)			3.5
Globulin (1.5 - 3.5 g/dL)			3.2
Albumin/Globulin Ratio (1.1 - 1.8 g/dL)			1.1
Triglycerides (< 150 mg/dL)			144
Cholesterol (< 200 mg/dL)			130
Cholesterol Risk Factr (0.0 - 5.5)			3.0
LDL Cholesterol Direct (< 100 mg/dL)			69
VLDL Cholesterol (mg/dL)			23.04
HDL Cholesterol (40 - 60 mg/dL)			44
Cholesterol/HDL Ratio (mg/dL)			3.0
Lipase (73 - 393 IU/L)			126
Coagulation			
PT (8.8 - 11.0 sec)			10.8
INR (0.9 - 1.2)			1.1
PTT (Dade) (20.2 - 29.8)			24.2
Hematology			
WBC (4.5 - 11.0 K/mm ³)			5.6
RBC (4.52 - 5.90 M/mm ³)			5.24
Hgb (13.0 - 18.0 g/dL)			14.8
Hct (42 - 52 %)			46
MCV (80 - 99 fl)			87
MCH (27 - 31 pg)			28
RDW (11.5 - 14.5 %)			16.0 H
Plt Count (130 - 400 x10 ³ mcL)			165
MPV (7.4 - 10.4 fl)			9.7
Add Manual Diff			NO
Neutrophils % (40 - 70 %)			63.0

PROGRESS NOTES Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

PROGRESS NOTE

Dictated/Documented By: Dr. Sushma Thiruvoipati RES
Service Date/Time: 06/01/20 0656

Date/Time: 06/01/20 0656

Lymphocytes % (25 - 45 %)			25.4
Monocytes % (2.5 - 10.0 %)			9.3
Eosinophils % (0.0 - 11.0 %)			1.6
Basophils % (0 - 2 %)			0.7
RBC Morphology			NO
PUBS MCHC (32 - 37 pg)			33

Assessment

Assessment

Chest pain, r/o ACS VS GERD
Hypokalemia 2.8 > > 4.2, repleted
Mild dehydration BUN 19, Cr 1.0
HTN, controlled BP 105/69
H/o migranes
DVT prophylaxis

Plan

Plan

Chest pain likely 2/2 Anxiety attack, r/o ACS VS GERD

- o CXR:No cardiomegaly.Normal mediastinum.Elevation of the right hemidiaphragm.Bilateral lower lobe atelectasis.
- o EKG:Normal Sinus Rhythm with ventricular rate of 89 beats per minute.No acute ischemia
- o Admit to tele
- o Trops x2 negative, trend q8
- o ACS protocol: Metoprolol 12.5BID, Nitro PRN, ASA 81 mg, Lisinopril 5 mg, Atorvastatin 10 mg
- o ECHO pending
- o HEART score:4 points, Moderate score
- o Consult cardiology pending
- o Psychiatry consult pending

PROGRESS NOTES Site Code: CVMC Name: HANNA,ADEL S
ACCT: V00000905328
MR: M000273781 DOB: 03/29/46 Visit Date: 06/01/20

Chino Valley Medical Center
5451 Walnut Avenue
Chino,CA 91710

PROGRESS NOTE

Dictated/Documented By: Dr. Sushma Thiruvoipati RES
Service Date/Time: 06/01/20 0656

Date/Time: 06/01/20 0656

-
- Omeprazole 20 mg and Tums added

Hypokalemia 2.8 > 4.2, repleted

- Repleted in ED with 60 Meq PO
- Monitor

HTN, controlled BP 105/69

- Home med Amlodipine 5 mg held
- Monitor BP

H/o migranes

- On prophylactic Atenolol 100 mg at home
- Currently on hold

DVT prophylaxis

- BLE SCD

SIGNED DATE AND TIME: 06/01/20 / 1544
ELECTRONICALLY SIGNED BY: Dr. Sushma Thiruvoipati RES

I was physically present for the key portions of the service provided to patient by Dr. Sushma Thiruvoipati RES. I have reviewed the documentation, discussed the case with the resident and agree with the resident's documentation except as noted below.

COSIGNED DATE AND TIME: 06/01/20 / 2345
ELECTRONICALLY SIGNED BY: Dr. Jeffrey J. Crudo

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 2

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Grudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	BNP	20200601-0124	06/01/20	0012	S		POM	CMP	ORNER
Other Provider :		Sig Lvl Provider :							
Collected By Care Area:		N							
Comments to Phlebotomist:									
Specimen Comment:									

Order's Audit Trail of Events

1	06/01/20	0012	DRORNFR	Order ENTER in EDM/POM
2	06/01/20	0012	DRORNFR	Order from set: Franko's Chest Pain
3	06/01/20	0012	DRORNFR	Ordering Doctor: Ornelas, Francisco
4	06/01/20	0012	DRORNFR	Order Source: PROVIDER ORDER MGMT
5	06/01/20	0012	DRORNFR	Signed by Ornelas, Francisco
6	06/01/20	0013	interface	order's status changed from TRANS to LOGGED by LAB
7	06/01/20	0013	interface	order's status changed from LOGGED to IN PRO by LAB
8	06/01/20	0133	interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	CK	20200601-0125	06/01/20	0012	S		POM	CMP	ORNER
Other Provider :		Sig Lvl Provider :							
Collected By Care Area:		N							
Comments to Phlebotomist:									
Specimen Comment:		*****FOR MB INDEX, ORDER BOTH CK AND CKMB*****							

Order's Audit Trail of Events

1	06/01/20	0012	DRORNFR	Order ENTER in EDM/POM
2	06/01/20	0012	DRORNFR	Order from set: Franko's Chest Pain
3	06/01/20	0012	DRORNFR	Ordering Doctor: Ornelas, Francisco
4	06/01/20	0012	DRORNFR	Order Source: PROVIDER ORDER MGMT
5	06/01/20	0012	DRORNFR	Signed by Ornelas, Francisco
6	06/01/20	0013	interface	order's status changed from TRANS to LOGGED by LAB
7	06/01/20	0013	interface	order's status changed from LOGGED to IN PRO by LAB
8	06/01/20	0142	interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	TROP	20200601-0126	06/01/20	0012	S		POM	CMP	ORNER
Other Provider :		Sig Lvl Provider :							
Collected By Care Area:		N							
Comments to Phlebotomist:									
Specimen Comment:									

Order's Audit Trail of Events

1	06/01/20	0012	DRORNFR	Order ENTER in EDM/POM
2	06/01/20	0012	DRORNFR	Order from set: Franko's Chest Pain
3	06/01/20	0012	DRORNFR	Ordering Doctor: Ornelas, Francisco
4	06/01/20	0012	DRORNFR	Order Source: PROVIDER ORDER MGMT
5	06/01/20	0012	DRORNFR	Signed by Ornelas, Francisco
6	06/01/20	0013	interface	order's status changed from TRANS to LOGGED by LAB
7	06/01/20	0013	interface	order's status changed from LOGGED to IN PRO by LAB
8	06/01/20	0132	interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	PP	20200601-0127	06/01/20	0012	S		POM	CMP	ORNER
Other Provider :		Sig Lvl Provider :							

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<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 3

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V0000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1	06/01/20 0012 DRORNFR	Order ENTER in EDM/POM
2	06/01/20 0012 DRORNFR	Order from set: Franko's Chest Pain
3	06/01/20 0012 DRORNFR	Ordering Doctor: Ornelas, Francisco
4	06/01/20 0012 DRORNFR	Order Source: PROVIDER ORDER MGMT
5	06/01/20 0012 DRORNFR	Signed by Ornelas, Francisco
6	06/01/20 0013 interface	order's status changed from TRANS to LOGGED by LAB
7	06/01/20 0013 interface	order's status changed from LOGGED to IN PRO by LAB
8	06/01/20 0133 interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	PTT	20200601-0128	06/01/20	0012	S		POM	OMP	ORNER

Other Provider : Sig Lvl Provider :

Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1	06/01/20 0012 DRORNFR	Order ENTER in EDM/POM
2	06/01/20 0012 DRORNFR	Order from set: Franko's Chest Pain
3	06/01/20 0012 DRORNFR	Ordering Doctor: Ornelas, Francisco
4	06/01/20 0012 DRORNFR	Order Source: PROVIDER ORDER MGMT
5	06/01/20 0012 DRORNFR	Signed by Ornelas, Francisco
6	06/01/20 0013 interface	order's status changed from TRANS to LOGGED by LAB
7	06/01/20 0013 interface	order's status changed from LOGGED to IN PRO by LAB
8	06/01/20 0133 interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	LIPID	20200601-0129	06/01/20	0012	S		POM	OMP	ORNER

Other Provider : Sig Lvl Provider :

Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1	06/01/20 0012 DRORNFR	Order ENTER in EDM/POM
2	06/01/20 0012 DRORNFR	Order from set: Franko's Chest Pain
3	06/01/20 0012 DRORNFR	Ordering Doctor: Ornelas, Francisco
4	06/01/20 0012 DRORNFR	Order Source: PROVIDER ORDER MGMT
5	06/01/20 0012 DRORNFR	Signed by Ornelas, Francisco
6	06/01/20 0013 interface	order's status changed from TRANS to LOGGED by LAB
7	06/01/20 0013 interface	order's status changed from LOGGED to IN PRO by LAB
8	06/01/20 0144 interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	THYPAN	20200601-0130	06/01/20	0012	S		POM	OMP	ORNER

Other Provider : Sig Lvl Provider :

Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

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<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 4

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MU	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

1 06/01/20 0012 DRORNFR Order ENTER in EDM/TOM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco
6 06/01/20 0013 interface order's status changed from TRANS to LOGGED by LAB
7 06/01/20 0013 interface order's status changed from LOGGED to IN PRO by LAB
8 06/01/20 0142 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	AMM	20200601-0131	06/01/20	0012	S		POM	CMP	ORNER	

Other Provider : Sig Lvl Provider :
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1 06/01/20 0012 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco
6 06/01/20 0013 interface order's status changed from TRANS to LOGGED by LAB
7 06/01/20 0013 interface order's status changed from LOGGED to IN PRO by LAB
8 06/01/20 0132 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	LIP	20200601-0132	06/01/20	0012	S		POM	CMP	ORNER	

Other Provider : Sig Lvl Provider :
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1 06/01/20 0012 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco
6 06/01/20 0013 interface order's status changed from TRANS to LOGGED by LAB
7 06/01/20 0013 interface order's status changed from LOGGED to IN PRO by LAB
8 06/01/20 0144 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	LDD	20200601-0133	06/01/20	0012	S		POM	CMP	ORNER	

Other Provider : Sig Lvl Provider :
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1 06/01/20 0012 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 5

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V0000905328	LOC: MU	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

6 06/01/20 0013 interface order's status changed from TRANS to LOGGED by LAB
7 06/01/20 0013 interface order's status changed from LOGGED to IN PRO by LAB
8 06/01/20 0144 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	UA	20200601-0134	06/01/20	0012	S		POM		CNC	ORNER

Other Provider : Sig Lvl Provider :
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:
Urine Specimen Source: Void

Order's Audit Trail of Events

1 06/01/20 0012 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco
6 06/01/20 0013 interface order's status changed from TRANS to LOGGED by LAB
7 06/01/20 0013 interface order's status changed from LOGGED to IN PRO by LAB
8 06/03/20 0000 interface order's status changed from IN PRO to CANCEL by LAB

Cancel comment: Auto-cancelled after 1 day.

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
RAD	CXRIV	20200601-0004	06/01/20	0012	S	1	POM		OMP	ORNER

Other Provider : Sig Lvl Provider :
Mode of Transportation: PORTABLE
Reason for Exam: chest pain
Comment:

Order's Audit Trail of Events

1 06/01/20 0012 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco
6 06/01/20 0013 interface order's status changed from TRANS to LOGGED by RAD
7 06/01/20 0032 interface order's status changed from LOGGED to IN PRO by RAD
8 06/01/20 0048 EDAD order viewed
9 06/01/20 0049 EDCHB order viewed
10 06/01/20 0059 interface order's status changed from IN PRO to COMP by RAD

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
EKG	EKG	20200601-0001	06/01/20	0012	S		POM		TRN	ORNER

Other Provider : Sig Lvl Provider :
***** PAGE CARDIOPULMONARY TECH FOR ALL STAT ORDERS *****

Doctor To Read:

Order's Audit Trail of Events

1 06/01/20 0012 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0012 DRORNFR Order from set: Franko's Chest Pain
3 06/01/20 0012 DRORNFR Ordering Doctor: Ornelas, Francisco
4 06/01/20 0012 DRORNFR Order Source: PROVIDER ORDER MGMT
5 06/01/20 0012 DRORNFR Signed by Ornelas, Francisco

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 7

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

Order's Audit Trail of Events

1 06/01/20 0147 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0147 DRORNFR Ordering Doctor: Ornelas, Francisco
3 06/01/20 0147 DRORNFR Order Source: PROVIDER ORDER MGMT
4 06/01/20 0147 DRORNFR Signed by Ornelas, Francisco
5 06/01/20 0147 DRORNFR VIEWED LAB TEST RESULTS
6 06/01/20 0147 DRORNFR Test Group PHAK
7 06/01/20 0147 DRORNFR LABORATORY
8 06/01/20 0147 DRORNFR Date Time Test Result Flag Normal Range
9 06/01/20 0147 DRORNFR 06/01/20 0040 K 2.8 P 3.5-5.1 mmol/L
10 06/01/20 0147 DRORNFR Called results (and roadback confirmed) to:EDAD
11 06/01/20 0147 DRORNFR
12 06/01/20 0147 DRORNFR on 06/01/20 at 0143 by Millares,Marzaretz
13 06/01/20 0147 SCHEDULER DISCONTINUE in PHA
14 06/01/20 0151 EDAD order acknowledged

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200601-0041	06/01/20	0146	R		POM	CMP	CRNER

Other Provider : Sig Lvl **Provider :**
RX: 004149947 **Start:** 06/01/20 0146 ONE CMP
Stop: 06/01/20 0147

Magnesium Oxide 400MG Tab. (Mag-Ox 400MG Tab.)

Dose: 400 MG

Route: PO

Direction: ONCE

Order's Audit Trail of Events

1 06/01/20 0147 DRORNFR Order ENTER in EDM/POM
2 06/01/20 0147 DRORNFR Ordering Doctor: Ornelas, Francisco
3 06/01/20 0147 DRORNFR Order Source: PROVIDER ORDER MGMT
4 06/01/20 0147 DRORNFR Signed by Ornelas, Francisco
5 06/01/20 0147 SCHEDULER DISCONTINUE in PHA
6 06/01/20 0152 EDAD order acknowledged

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
ADM	ADMSTATUS	20200601-0001	06/01/20	0159	R		POM	TRN	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

Comment:

Admit to Inpatient (Expected to stay 2 mid-nights or more):

Inpatient Status

Level of Care:

Telemetry

Admit to Inpatient Status for Inpatient Surgery:

No

Place in Outpatient Status for Observation Services Only:

No

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Admission Set
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J.
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina,Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina,Zarina
7 06/01/20 0303 NURCTB order viewed from Order Management
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J.
9 06/01/20 1455 NURBIA order viewed

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 8

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
CODE	RSCODE	20200601-0001	06/01/20	0159	R		POM	TRN		CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

Resuscitation Status: FULL CODE

** Modified Code **

Chest Compressions:

Intubation/Reintubation:

Defibrillation:

ACLS Drugs/Vasopressors:

BiPAP (Non Invasive PPV):

Cardioversion:

** IF Patient is DNR, Fill out the DNR Order Set **

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20	0200	DRCHAZARES	Order from set: Admission Set
3	06/01/20	0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J.
4	06/01/20	0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
5	06/01/20	0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
6	06/01/20	0200	DRCHAZARES	Signed by Khabibulina, Zarina
7	06/01/20	0304	NURCTB	order viewed from Order Management
8	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J.
9	06/01/20	1455	NURBLA	order viewed
10	06/01/20	2247	NURDSL	order viewed from Order Management

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
DIAGNOSIS	DIAGNOSIS	20200601-0001	06/01/20	0159	R		POM	TRN		CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

Admitting Diagnosis: chest pain

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20	0200	DRCHAZARES	Order from set: Admission Set
3	06/01/20	0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J.
4	06/01/20	0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
5	06/01/20	0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
6	06/01/20	0200	DRCHAZARES	Signed by Khabibulina, Zarina
7	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J.

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
DIAGNOSIS	CONDITION	20200601-0002	06/01/20	0159	R		POM	TRN		CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

Condition: Guarded

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20	0200	DRCHAZARES	Order from set: Admission Set
3	06/01/20	0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J.
4	06/01/20	0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
5	06/01/20	0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
6	06/01/20	0200	DRCHAZARES	Signed by Khabibulina, Zarina
7	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J.

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
NUR	VS	20200601-0002	06/01/20	0159			POM	LPR		CRUJE

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<Continued>

RUN DATE: 06/11/20
 RUN TIME: 1118
 RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
 Discharge Report

PAGE 9

PATIENT: HANNA,ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MU	DISCH/DEP: 06/03/20
ATTEND DR: Crudo, Jeffrey J.	RM: 260	STATUS: DIS IN
	BD: B	UNIT NO: M0002/3/81

Other Provider : CHAZARES Sig Lvl Provider :

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
 2 06/01/20 0200 DRCHAZARES Order from set: Admission Set
 3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J.
 4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
 5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina,Zarina
 6 06/01/20 0200 DRCHAZARES Signed by Khabibulina,Zarina
 7 06/01/20 0200 interface order's status changed from TRANS to ACTIVE by NUR
 8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J.
 9 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
 10 06/02/20 1741 DRCHOST Signed by Chou, Stanley B.
 11 06/02/20 1807 NURAE1 Order RECEIVE in POM
 12 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B.
 13 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
 14 06/02/20 1807 NURAE1 Order continued upon patient transfer.
 15 06/02/20 1808 NURAE1 order acknowledged

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
NUR	DVTSCD	20200601-0003	06/01/20	0159			POM	IPR	CRUJE

Other Provider : CHAZARES Sig Lvl Provider :

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
 2 06/01/20 0200 DRCHAZARES Order from set: Admission Set
 3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J.
 4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
 5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina,Zarina
 6 06/01/20 0200 DRCHAZARES Signed by Khabibulina,Zarina
 7 06/01/20 0200 interface order's status changed from TRANS to ACTIVE by NUR
 8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J.
 9 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
 10 06/02/20 1741 DRCHOST Signed by Chou, Stanley B.
 11 06/02/20 1807 NURAE1 Order RECEIVE in POM
 12 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B.
 13 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
 14 06/02/20 1807 NURAE1 Order continued upon patient transfer.
 15 06/02/20 1808 NURAE1 order acknowledged

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200601-0042	06/01/20	0900	R		POM	CMP	CRUJE

Other Provider : CHAZARES Sig Lvl Provider :

RX: 004149955 **Start:** 06/01/20 0900 **SCH** **CMP**
Stop: 07/01/20 0859

Docusate Sodium 100MG cap (Colace 100MG cap)

Dose: 100 MG

Route: PO

Direction: BID

Special Instructions: Constipation.

Thank you very much!

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
 2 06/01/20 0200 DRCHAZARES Order from set: Admission Set
 3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J.
 4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT

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<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 10

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VENLL01 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
9 06/01/20 0909 NURAE1 order acknowledged
10 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
11 06/02/20 1741 DRCHOST Signed by Chou, Stanley B .
12 06/02/20 1807 NURAE1 Order RECEIVE in POM
13 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B .
14 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
15 06/02/20 1807 NURAE1 Order continued upon patient transfer.
16 06/02/20 1807 NURAE1 order acknowledged
17 06/03/20 2113 DISCHARGE DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
PHA	MED	20200601-0043	06/01/20	0156	R		POM		CMP	CRUJE
Other Provider : CHAZARES Sig Lvl Provider :										
RX: 004149961							Start: 06/01/20	0156	PRN	CMP
							Stop: 07/01/20	0155		
Ondansetron Hcl 4MG inj. (Zofran 4MG inj.)										
Dose: 4 MG										
Route: IV Direction: Q4HP										
PRN Reason: NAUSEA/VOMITING										
Special Instructions: Nausca/Vomiting.										

Thank you very much!

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from act: Admission Set
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VENLL01 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
9 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
10 06/02/20 1741 DRCHOST Signed by Chou, Stanley B .
11 06/02/20 1807 NURAE1 Order RECEIVE in POM
12 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B .
13 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
14 06/02/20 1807 NURAE1 Order continued upon patient transfer.
15 06/02/20 1807 NURAE1 order acknowledged
16 06/03/20 2113 DISCHARGE DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
PHA	IV	20200601-0044	06/01/20	0700	R		POM		CMP	CRUJE
Other Provider : CHAZARES Sig Lvl Provider :										
RX: 004149951							Start: 06/01/20	0700	SCH	CMP
Route: IV							Stop: 07/01/20	0659		
NS 0.9% 1000ML							Volume: 1,000 ML			
Premixed at 1,000 ML							(1,000 ML)			
Total Volume: 1,000 mls										
Rate: 100 ML/HR Direction: CONT										
Bag Duration: 10 HR										
Rx Duration: 30 Days										

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<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 11

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
ATTEND DR: Crudo, Jeffrey J.	RM: 260	STATUS: DIS IN
	BD: B	UNIT NO: M0002/3/81

Special Instructions: IVF Hydration.
Thank you very much!

Order's Audit Trail of Events

1	06/01/20 0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20 0200	DRCHAZARES	Order from set: Admission Set
3	06/01/20 0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J.
4	06/01/20 0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
5	06/01/20 0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
6	06/01/20 0200	DRCHAZARES	Signed by Khabibulina, Zarina
7	06/01/20 0251	VENLL01	VERIFIED in PHA
8	06/01/20 0509	NURCTB	order acknowledged
9	06/01/20 0841	DRCRUJE	Signed by Crudo, Jeffrey J.
10	06/02/20 1741	DRCHOST	Order marked to be continued upon patient transfer.
11	06/02/20 1741	DRCHOST	Signed by Chou, Stanley B.
12	06/02/20 1807	NURAE1	Order RECEIVE in POM
13	06/02/20 1807	NURAE1	Ordering Doctor: Chou, Stanley B.
14	06/02/20 1807	NURAE1	Order Source: PROVIDER ORDER MGMT
15	06/02/20 1807	NURAE1	Order continued upon patient transfer.
16	06/02/20 1807	NURAE1	order acknowledged
17	06/03/20 2113	DISCHARGE	DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
PHA	MED	20200601-0045	06/01/20	0156	R		POM		CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

RX: 004149952 **Start:** 06/01/20 0156 **PRN** **CMP**
Stop: 07/01/20 0155

Acetaminophen 325MG Tab (TYLENOL 325MG TABLET)
Dose: 650 MG
Route: PO **Direction:** Q6HP
PRN Reason: TEMP > 100.4/ HEADACHE
Special Instructions: PRN temp > 100.4 or headache

Thank you very much!

Order's Audit Trail of Events

1	06/01/20 0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20 0200	DRCHAZARES	Order from set: Admission Set
3	06/01/20 0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J.
4	06/01/20 0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
5	06/01/20 0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
6	06/01/20 0200	DRCHAZARES	Signed by Khabibulina, Zarina
7	06/01/20 0251	VENLL01	VERIFIED in PHA
8	06/01/20 0841	DRCRUJE	Signed by Crudo, Jeffrey J.
9	06/02/20 1741	DRCHOST	Order marked to be continued upon patient transfer.
10	06/02/20 1741	DRCHOST	Signed by Chou, Stanley B.
11	06/02/20 1807	NURAE1	Order RECEIVE in POM
12	06/02/20 1807	NURAE1	Ordering Doctor: Chou, Stanley B.
13	06/02/20 1807	NURAE1	Order Source: PROVIDER ORDER MGMT
14	06/02/20 1807	NURAE1	Order continued upon patient transfer.
15	06/02/20 1807	NURAE1	order acknowledged
16	06/03/20 2113	DISCHARGE	DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
PHA	MED	20200601-0046	06/01/20	0156	R		POM		CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 13

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	DRUGABUSE	20200601-0136	06/01/20	0159	R		POM		CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order	ENTER	in	EDM/POM						
2	06/01/20	0200	DRCHAZARES	Order	from	set:	Admission Set						
3	06/01/20	0200	DRCHAZARES	Ordering	Doctor:	Crudo,	Jeffrey J .						
4	06/01/20	0200	DRCHAZARES	Order	Source:	PROVIDER	ORDER MGMT						
5	06/01/20	0200	DRCHAZARES	Other	Doctor:	Khabibulina,	Zarina						
6	06/01/20	0200	DRCHAZARES	Signed	by	Khabibulina,	Zarina						
7	06/01/20	0200	interface	cc'd	doctors	edited	in	LAB					
8	06/01/20	0200	interface	order's	status	changed	from	TRANS	to	LOGGED	by	LAB	
9	06/01/20	0217	interface	order's	status	changed	from	LOGGED	to	IN	PRO	by	LAB
10	06/01/20	0841	DRCRUJE	Signed	by	Crudo,	Jeffrey J .						
11	06/03/20	0458	interface	order's	specimen	number	changed	from	0601:C00053R	to	0603:C00081R		
12	06/03/20	0555	interface	order's	status	changed	from	IN	PRO	to	COMP	by	LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
MIC	MRSAC	20200601-0005	06/01/20	0159	R		POM		CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**
Specimen Description: BILATERAL

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order	ENTER	in	EDM/POM						
2	06/01/20	0200	DRCHAZARES	Order	from	set:	Admission Set						
3	06/01/20	0200	DRCHAZARES	Ordering	Doctor:	Crudo,	Jeffrey J .						
4	06/01/20	0200	DRCHAZARES	Order	Source:	PROVIDER	ORDER MGMT						
5	06/01/20	0200	DRCHAZARES	Other	Doctor:	Khabibulina,	Zarina						
6	06/01/20	0200	DRCHAZARES	Signed	by	Khabibulina,	Zarina						
7	06/01/20	0200	interface	cc'd	doctors	edited	in	LAB					
8	06/01/20	0200	interface	order's	status	changed	from	TRANS	to	LOGGED	by	LAB	
9	06/01/20	0217	interface	order's	status	changed	from	LOGGED	to	IN	PRO	by	LAB
10	06/01/20	0841	DRCRUJE	Signed	by	Crudo,	Jeffrey J .						
11	06/02/20	0848	interface	order's	status	changed	from	IN	PRO	to	COMP	by	LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
CK	ECG	20200601-0002	06/01/20	1434	R	1	POM		CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**
***** PAGE CARDIOPULMONARY TECH FOR ALL STAT ORDERS *****

Service Requested: cf
Cardiologist To Read: Chou, Stanley B .

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order	ENTER	in	EDM/POM					
2	06/01/20	0200	DRCHAZARES	Order	from	set:	Chest Pain					
3	06/01/20	0200	DRCHAZARES	Ordering	Doctor:	Crudo,	Jeffrey J .					
4	06/01/20	0200	DRCHAZARES	Order	Source:	PROVIDER	ORDER MGMT					
5	06/01/20	0200	DRCHAZARES	Other	Doctor:	Khabibulina,	Zarina					
6	06/01/20	0200	DRCHAZARES	Signed	by	Khabibulina,	Zarina					
7	06/01/20	0200	interface	order's	status	changed	from	TRANS	to	LOGGED	by	LAB

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 14

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V0000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
9 06/01/20 1435 interlace order's status changed from LOGGED to IN PRO by RAD
10 06/01/20 1442 interlace order service time edited: old value - 0159
11 06/02/20 1612 interlace order's status changed from IN PRO to COMP by RAD

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
EKG	EKG	20200601-0003	06/01/20	2330	R		POM	TRN		CRUJE

Other Provider : CHAZARES Sig Lvl Provider :
***** PAGE CARDIOPULMONARY TECH FOR ALL STAT ORDERS *****

Doctor To Read:

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Order created as part of series
7 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	TROP	20200601-0137	06/01/20	0900	R		POM	CMP		CRUJE

Other Provider : CHAZARES Sig Lvl Provider :
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Order created as part of series
7 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
8 06/01/20 0200 interface cc'd doctors edited in LAB
9 06/01/20 0200 interface order's status changed from TRANS to LOGGED by LAB
10 06/01/20 0217 interface order's status changed from LOGGED to IN PRO by LAB
11 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
12 06/01/20 1013 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	TROP	20200601-0138	06/01/20	1700	R		POM	CMP		CRUJE

Other Provider : CHAZARES Sig Lvl Provider :
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina

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<Continued>

RUN DATE: 06/11/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 15

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

6 06/01/20 0200 DRCHAZARES Order created as part of series
7 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
8 06/01/20 0200 interlace cc'd doctors edited in LAB
9 06/01/20 0200 interlace order's status changed from TRANS to LOGGED by LAB
10 06/01/20 0217 interlace order's status changed from LOGGED to IN PRO by LAB
11 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J.
12 06/01/20 1800 interlace order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200601-0048	06/01/20	0900	R		POM	CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**
RX: 004149953 **Start:** 06/01/20 0900 **SCH** **CMP**
Stop: 07/01/20 0859

Aspirin Ec 81MG (Aspirin Ec 81MG)
Dose: 81 MG
Route: PO **Direction:** DAILY

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J.
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VENLL01 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J.
9 06/01/20 0910 NURAEI order acknowledged
10 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
11 06/02/20 1741 DRCHOST Signed by Chou, Stanley B.
12 06/02/20 1807 NURAEI Order RECEIVE in POM
13 06/02/20 1807 NURAEI Ordering Doctor: Chou, Stanley B.
14 06/02/20 1807 NURAEI Order Source: PROVIDER ORDER MGMT
15 06/02/20 1807 NURAEI Order continued upon patient transfer.
16 06/02/20 1807 NURAEI order acknowledged
17 06/03/20 2113 DISCHARGE DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200601-0049	06/01/20	0158	R		POM	CMP	CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**
RX: 004149960 **Start:** 06/01/20 0158 **PRN** **CMP**
Stop: 07/01/20 0157

Nitroglycerin 0.4MG Sl. tab. (Nitrostat 0.4MG Sl. tab.)
Dose: 0.4 MG
Route: SL **Direction:** Q4HP
PRN Reason: FOR SBP > 160, DBP>100
Special Instructions: chest pain

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J.
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VENLL01 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J.
9 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 16

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V0000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

10 06/02/20 1741 DRCHOST Signed by Chou, Stanley B .
11 06/02/20 1807 NURAEI Order RECEIVE in POM
12 06/02/20 1807 NURAEI Ordering Doctor: Chou, Stanley B .
13 06/02/20 1807 NURAEI Order Source: PROVIDER ORDER MGMT
14 06/02/20 1807 NURAEI Order continued upon patient transfer.
15 06/02/20 1807 NURAEI order acknowledged
16 06/03/20 2113 DISCHARGE DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
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PHA MED 20200601-0050 06/01/20 0900 R POM CMP CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

RX: 004149958 **Start:** 06/01/20 0900 **SCH** **CMP**
Stop: 07/01/20 0859

Metoprolol Tartrate 25MG tab. (Lopressor 25MG tab.)

Dose: 12.5 MG

Route: PO

Direction: BID

Dose Instructions: HOLD IF SBP <120 OR HR <60/MIN.

Special Instructions: acs protocol

DC Comments: MEDICATION CHANGED

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VERN101 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
9 06/01/20 0909 NURAEI order acknowledged
10 06/02/20 1601 DRCHOST Order DC in POM
11 06/02/20 1601 DRCHOST Ordering Doctor: Chou, Stanley B .
12 06/02/20 1601 DRCHOST Order Source: PROVIDER ORDER MGMT
13 06/02/20 1602 DRCHOST Order's Rx has been discontinued.
14 06/02/20 1602 DRCHOST Signed by Chou, Stanley B .
15 06/02/20 1602 DRCHOST DISCONTINUE
16 06/02/20 1602 DRCHOST **DC COMMENTS:**
17 06/02/20 1602 DRCHOST **MEDICATION CHANGED**
18 06/02/20 1643 NURAEI order acknowledged

Cancel comment: MEDICATION CHANGED

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
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PHA MED 20200601-0051 06/01/20 2100 R POM CMP CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

RX: 004149954 **Start:** 06/01/20 2100 **SCH** **CMP**
Stop: 07/01/20 2059

Atorvastatin 10MG tab. (Lipitor 10MG tab.)

Dose: 10 MG

Route: PO

Direction: PM

Special Instructions: acs protocol

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina

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<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 17

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VENLL01 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
9 06/01/20 1932 NURDSL order acknowledged
10 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
11 06/02/20 1741 DRCHOST Signed by Chou, Stanley B .
12 06/02/20 1807 NURAE1 Order RECEIVE in POM
13 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B .
14 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
15 06/02/20 1807 NURAE1 Order continued upon patient transfer.
16 06/02/20 1808 NURAE1 order acknowledged
17 06/03/20 2113 DISCHARGE DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
PHA	MED	20200601-0052	06/01/20	0900	R		POM	CMP		CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

RX: 004149957 **Start:** 06/01/20 0900 **SCH** **CMP**
Stop: 07/01/20 0859

Lisinopril 5MG Tab (Zestril 5MG Tab)

Dose: 5 MG

Route: PO **Direction:** DAILY

Special Instructions: acs protocol

hold if SBP below 120

Order's Audit Trail of Events

1 06/01/20 0200 DRCHAZARES Order ENTER in EDM/POM
2 06/01/20 0200 DRCHAZARES Order from set: Chest Pain
3 06/01/20 0200 DRCHAZARES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 0200 DRCHAZARES Order Source: PROVIDER ORDER MGMT
5 06/01/20 0200 DRCHAZARES Other Doctor: Khabibulina, Zarina
6 06/01/20 0200 DRCHAZARES Signed by Khabibulina, Zarina
7 06/01/20 0251 VENLL01 VERIFIED in PHA
8 06/01/20 0841 DRCRUJE Signed by Crudo, Jeffrey J .
9 06/01/20 0909 NURAE1 order acknowledged
10 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
11 06/02/20 1741 DRCHOST Signed by Chou, Stanley B .
12 06/02/20 1807 NURAE1 Order RECEIVE in POM
13 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B .
14 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
15 06/02/20 1807 NURAE1 Order continued upon patient transfer.
16 06/02/20 1808 NURAE1 order acknowledged
17 06/03/20 2113 DISCHARGE DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
CONS	PHY	20200601-0001	06/01/20	0159	R		POM	TRN		CRUJE

Other Provider : CHAZARES **Sig Lvl Provider :**

Reason for consult: chest pain

Level of Participation:-

a. Consult Only: N

b. Assume Management of the Patient: N

c. Consult & may participate in the care and management: Y

Consulting Physician: Chou, Stanley B .

Specialty: CARDIOLOGY

Phone:

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<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 18

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MU	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

*****Consulting Physicians MUST Be Notified Personally

By The Requesting Physician*****

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20	0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J .
3	06/01/20	0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
4	06/01/20	0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
5	06/01/20	0200	DRCHAZARES	Signed by Khabibulina, Zarina
6	06/01/20	0745	CACM	order viewed
7	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J .
8	06/01/20	1455	NURDLA	order viewed
9	06/02/20	1049	SWRLI	order viewed
10	06/02/20	1933	NURZX	order viewed from Order Management
11	06/03/20	1625	CMPJ	order viewed

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	BMP	20200601-0139	06/01/20	0800	S		POM	CMP	CMP	CRUJE

Other Provider : CHAZARES Sig Lvl Provider :

Collected By Care Area: N

Comments to Phlebotomist:

Specimen Comment:

Order's Audit Trail of Events

1	06/01/20	0200	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20	0200	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J .
3	06/01/20	0200	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
4	06/01/20	0200	DRCHAZARES	Other Doctor: Khabibulina, Zarina
5	06/01/20	0200	DRCHAZARES	Signed by Khabibulina, Zarina
6	06/01/20	0200	interface	cc'd doctors edited in LAB
7	06/01/20	0200	interface	order's status changed from TRANS to LOGGED by LAB
8	06/01/20	0217	interface	order's status changed from LOGGED to IN PRO by LAB
9	06/01/20	0809	interface	order's status changed from IN PRO to LOGGED by LAB
10	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J .
11	06/01/20	0849	interface	order's status changed from LOGGED to IN PRO by LAB
12	06/01/20	0942	interface	order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
FNS	CARD	20200601-0004	06/01/20	B			POM	CMP	CMP	CRUJE

Other Provider : CHAZARES Sig Lvl Provider :

***** Caution Tray Needed *****

N

Comment:

Order's Audit Trail of Events

1	06/01/20	0219	DRCHAZARES	Order ENTER in EDM/POM
2	06/01/20	0219	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J .
3	06/01/20	0219	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
4	06/01/20	0219	DRCHAZARES	Other Doctor: Khabibulina, Zarina
5	06/01/20	0219	DRCHAZARES	Signed by Khabibulina, Zarina
6	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J .
7	06/02/20	0731	System	order's status changed from TRANS to COMP
8	06/02/20	0731	System	Order Replaced with New Diet
9	06/02/20	1710	NURAH1	order viewed from Order Management

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 19

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200601-0056	06/01/20	0315	R		POM	CMP	CRUJE
Other Provider : CHAZARES Sig Lvl Provider :									
RX: 004149962				Start: 06/01/20		0315		PRN	CMP
				Stop: 07/01/20		0859			

Calcium Carbonate (Tums)

Dose: 500 MG

Route: PO

Direction: TID

PRN Reason: GERD

Order's Audit Trail of Events

1	06/01/20	0316	DRCHAZARES	Order ENTER in POM
2	06/01/20	0316	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J .
3	06/01/20	0316	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
4	06/01/20	0316	DRCHAZARES	Other Doctor: Khabibulina, Zarina
5	06/01/20	0316	DRCHAZARES	Signed by Khabibulina, Zarina
6	06/01/20	0334	VENLLO1	VERIFIED in PHA
7	06/01/20	0350	NURCTB	order acknowledged
8	06/01/20	0355	NURCTB	order acknowledged
9	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J .
10	06/02/20	1741	DRCHOST	Order marked to be continued upon patient transfer.
11	06/02/20	1741	DRCHOST	Signed by Chou, Stanley B .
12	06/02/20	1807	NURAE1	Order RECEIVE in POM
13	06/02/20	1807	NURAE1	Ordering Doctor: Chou, Stanley B .
14	06/02/20	1807	NURAE1	Order Source: PROVIDER ORDER MGMT
15	06/02/20	1807	NURAE1	Order continued upon patient transfer.
16	06/02/20	1808	NURAE1	order acknowledged
17	06/03/20	2113	DISCHARGE	DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200601-0057	06/01/20	0700	R		POM	CMP	CRUJE
Other Provider : CHAZARES Sig Lvl Provider :									
RX: 004149963				Start: 06/01/20		0700		SCH	CMP
				Stop: 07/01/20		0659			

Omeprazole 20MG cap (Prilosec 20MG cap)

Dose: 20 MG

Route: PO

Direction: BIDAC

Order's Audit Trail of Events

1	06/01/20	0316	DRCHAZARES	Order ENTER in POM
2	06/01/20	0316	DRCHAZARES	Ordering Doctor: Crudo, Jeffrey J .
3	06/01/20	0316	DRCHAZARES	Order Source: PROVIDER ORDER MGMT
4	06/01/20	0316	DRCHAZARES	Other Doctor: Khabibulina, Zarina
5	06/01/20	0316	DRCHAZARES	Signed by Khabibulina, Zarina
6	06/01/20	0334	VENLLO1	VERIFIED in PHA
7	06/01/20	0350	NURCTB	order acknowledged
8	06/01/20	0509	NURCTB	order acknowledged
9	06/01/20	0841	DRCRUJE	Signed by Crudo, Jeffrey J .
10	06/02/20	1741	DRCHOST	Order marked to be continued upon patient transfer.
11	06/02/20	1741	DRCHOST	Signed by Chou, Stanley B .
12	06/02/20	1807	NURAE1	Order RECEIVE in POM
13	06/02/20	1807	NURAE1	Ordering Doctor: Chou, Stanley B .
14	06/02/20	1807	NURAE1	Order Source: PROVIDER ORDER MGMT
15	06/02/20	1807	NURAE1	Order continued upon patient transfer.
16	06/02/20	1808	NURAE1	order acknowledged
17	06/03/20	2113	DISCHARGE	DISCONTINUE in PHA

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 20

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MU	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
CONS	PHY	20200601-0006	06/01/20		R		POM		TRN	CRUJE

Other Provider : THISURES **Sig Lvl Provider :**
Reason for consult: depression
Level of Participation:-
a. Consult Only: N
b. Assume Management of the Patient: N
c. Consult & may participate in the care and management: Y
Consulting Physician: Idrees, Zabeib
Specialty: PSYCHIATRY
Phone: 626-963-4467
*****Consulting Physicians MUST Be Notified Personally
By The Requesting Physician*****

Order's Audit Trail of Events

- 1 06/01/20 1013 DRTHISURES Order ENTER in POM
- 2 06/01/20 1013 DRTHISURES Ordering Doctor: Crudo, Jeffrey J .
- 3 06/01/20 1013 DRTHISURES Order Source: PROVIDER ORDER MGMT
- 4 06/01/20 1013 DRTHISURES Other Doctor: Thiruvoipati, Sushma
- 5 06/01/20 1013 DRTHISURES Signed by Thiruvoipati, Sushma
- 6 06/01/20 1052 NURAE1 order acknowledged
- 7 06/01/20 1455 NURBLA order viewed
- 8 06/01/20 1455 NURBLA order viewed
- 9 06/01/20 2259 DRCRUJE Signed by Crudo, Jeffrey J .
- 10 06/02/20 1049 SWRL1 order viewed
- 11 06/03/20 1457 NURMEA order viewed from Order Management
- 12 06/03/20 1625 CMPJ order viewed

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
CARDIO	SPESTPST	20200602-0001	06/02/20	1530	R		POM		TRN	CHOST

Other Provider : **Sig Lvl Provider :**
***** PAGE CARDIOPULMONARY TECH FOR ALL STAT ORDERS *****

Service Requested: Lexiscan SPECT
Cardiologist To Read: Chou, Stanley B .
Performing Dr: Chou, Stanley B .
Physician Time: 1530
Weight - lb: 163
Oz: 8
Kg: 74.162

Order's Audit Trail of Events

- 1 06/01/20 1540 DRCHOST Order ENTER in POM
- 2 06/01/20 1540 DRCHOST Order from set: Cardio/Lexi Stress Exams
- 3 06/01/20 1540 DRCHOST Ordering Doctor: Chou, Stanley B .
- 4 06/01/20 1540 DRCHOST Order Source: PROVIDER ORDER MGMT
- 5 06/01/20 1540 DRCHOST Signed by Chou, Stanley B .
- 6 06/01/20 1621 NURARI order acknowledged
- 7 06/03/20 1643 NURMEA order viewed from Order Management

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
NM	NMCOMBO 01	20200602-0001	06/02/20	1530	R	1	POM		OMP	CHOST

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 21

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J.	BD: B	UNIT NO: M0002/3/81

Other Provider : **Sig Lvl Provider :**
Mode of Transportation: AMBULATORY
Reason for Exam: chest pain
ED Bed #:
Current Diet: CARDIAC DIET-LOCHOL/LOFAT/2qNA
Diet Restrictions:
PT MUST BE NPO AT LEAST 4 HOURS PRIOR TO EXAM

NO CAFFEINE AT LEAST 12HRS PRIOR TO EXAM

Order's Audit Trail of Events

1	06/01/20	1540	DRCHOST	Order ENTER in POM
2	06/01/20	1540	DRCHOST	Order from set: Cardio/Lexi Stress Exams
3	06/01/20	1540	DRCHOST	Ordering Doctor: Chou, Stanley B .
4	06/01/20	1540	DRCHOST	Order Source: PROVIDER ORDER MGMT
5	06/01/20	1540	DRCHOST	Signed by Chou, Stanley B .
6	06/01/20	1540	interface	order's status changed from TRANS to LOGGED by RAD
7	06/01/20	1621	NURAE1	order acknowledged
8	06/01/20	1653	NURAE1	order viewed from Order Management
9	06/02/20	0238	NURLCP	order viewed from Order Management
10	06/02/20	1717	interface	order's status changed from LOGGED to IN PRO by RAD
11	06/02/20	1742	interface	order's status changed from IN PRO to COMP by RAD

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
FNS	NPOEXM	20200602-0002	06/02/20	L				POM	OMP	CHOST

Other Provider : **Sig Lvl Provider :**
NPO Reason: Lexiscan SPKCT
Comment:

Order's Audit Trail of Events

1	06/01/20	1540	DRCHOST	Order ENTER in POM
2	06/01/20	1540	DRCHOST	Ordering Doctor: Chou, Stanley B .
3	06/01/20	1540	DRCHOST	Order Source: PROVIDER ORDER MGMT
4	06/01/20	1540	DRCHOST	Signed by Chou, Stanley B .
5	06/01/20	1621	NURAE1	order acknowledged
6	06/02/20	1712	System	order's status changed from TRANS to COMP
7	06/02/20	1712	System	Order Replaced with New Diet

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
LAB	MG	20200602-0080	06/02/20	0500	R			POM	OMP	CRUJE

Other Provider : THISURES **Sig Lvl Provider :**
Collected By Care Area: N
Comments to Phlebotomist: trending labs
Specimen Comment: Thank you very much!

Order's Audit Trail of Events

1	06/01/20	1545	DRTHISURES	Order ENTER in POM
2	06/01/20	1545	DRTHISURES	Order from set: *Morning labs*
3	06/01/20	1545	DRTHISURES	Ordering Doctor: Crudo, Jeffrey J .
4	06/01/20	1545	DRTHISURES	Order Source: PROVIDER ORDER MGMT
5	06/01/20	1545	DRTHISURES	Other Doctor: Thiruvoipati, Sushma
6	06/01/20	1545	DRTHISURES	Signed by Thiruvoipati, Sushma
7	06/01/20	1545	interface	cc'd doctors edited in LAB
8	06/01/20	1545	interface	order's status changed from TRANS to LOGGED by LAB
9	06/01/20	1621	NURAE1	order acknowledged
10	06/01/20	2259	DRCRUJE	Signed by Crudo, Jeffrey J .

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 22

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MU	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

11 06/01/20 2353 interface order's status changed from LOGGED to IN PRO by LAB
12 06/02/20 0635 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	PHOS	20200602-0081	06/02/20	0500	R		POM	OMP	CRUJE

Other Provider : THISURES **Sig Lvl Provider :**
Collected By Care Area: N
Comments to Phlebotomist: trending labs
Specimen Comment: Thank you very much!

Order's Audit Trail of Events

1 06/01/20 1545 DRTHISURES Order ENTER in POM
2 06/01/20 1545 DRTHISURES Order from set: *Morning Labs*
3 06/01/20 1545 DRTHISURES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 1545 DRTHISURES Order Source: PROVIDER ORDER MGMT
5 06/01/20 1545 DRTHISURES Other Doctor: Thiruvoipati, Sushma
6 06/01/20 1545 DRTHISURES Signed by Thiruvoipati, Sushma
7 06/01/20 1545 interface cc'd doctors edited in LAB
8 06/01/20 1545 interface order's status changed from TRANS to LOGGED by LAB
9 06/01/20 1621 NURAEI order acknowledged
10 06/01/20 2259 DRCRUJE Signed by Crudo, Jeffrey J .
11 06/01/20 2353 interface order's status changed from LOGGED to IN PRO by LAB
12 06/02/20 0635 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	CBC	20200602-0082	06/02/20	0500	R		POM	OMP	CRUJE

Other Provider : THISURES **Sig Lvl Provider :**
Collected By Care Area: N
Comments to Phlebotomist: trending labs
Specimen Comment: Thank you very much!

Order's Audit Trail of Events

1 06/01/20 1545 DRTHISURES Order ENTER in POM
2 06/01/20 1545 DRTHISURES Order from set: *Morning Labs*
3 06/01/20 1545 DRTHISURES Ordering Doctor: Crudo, Jeffrey J .
4 06/01/20 1545 DRTHISURES Order Source: PROVIDER ORDER MGMT
5 06/01/20 1545 DRTHISURES Other Doctor: Thiruvoipati, Sushma
6 06/01/20 1545 DRTHISURES Signed by Thiruvoipati, Sushma
7 06/01/20 1545 interface cc'd doctors edited in LAB
8 06/01/20 1545 interface order's status changed from TRANS to LOGGED by LAB
9 06/01/20 1621 NURAEI order acknowledged
10 06/01/20 2259 DRCRUJE Signed by Crudo, Jeffrey J .
11 06/01/20 2353 interface order's status changed from LOGGED to IN PRO by LAB
12 06/02/20 0635 interface order's status changed from IN PRO to COMP by LAB

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
LAB	BMP	20200602-0083	06/02/20	0500	R		POM	OMP	CRUJE

Other Provider : THISURES **Sig Lvl Provider :**
Collected By Care Area: N
Comments to Phlebotomist: trending labs
Specimen Comment: Thank you very much!

Order's Audit Trail of Events

1 06/01/20 1545 DRTHISURES Order ENTER in POM
2 06/01/20 1545 DRTHISURES Order from set: *Morning Labs*
3 06/01/20 1545 DRTHISURES Ordering Doctor: Crudo, Jeffrey J .

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/11/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 23

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

4 06/01/20 1545 DRTHISURES Order Source: PROVIDER ORDER MGMT
5 06/01/20 1545 DRTHISURES Other Doctor: Thiruvoipati, Sushma
6 06/01/20 1545 DRTHISURES Signed by Thiruvoipati, Sushma
7 06/01/20 1545 interface cc'd doctors edited in LAB
8 06/01/20 1545 interface order's status changed from TRANS to LOGGED by LAB
9 06/01/20 1621 NURAE1 order acknowledged
10 06/01/20 2259 DRCRUJE Signed by Crudo, Jeffrey J .
11 06/01/20 2353 interface order's status changed from LOGGED to IN PRO by LAB
12 06/02/20 0635 interface order's status changed from IN PRO to COMP by LAB

Order Date: 06/02/20 Service
Category Procedure Order Number Date Time Pri Qty Ord Source Status Ordered By
EKG EKG 20200602-0007 06/02/20 1059 R W TRN CRUJE

Other Provider : Sig Lvl Provider :
***** PAGE CARDIOFULMONARY TECH FOR ALL STAT ORDERS *****

Doctor To Read:
Comment: EKG ALREADY DONE, ORDER USED FOR SERVER MATCHING

Order's Audit Trail of Events

1 06/02/20 1059 CAMC Order ENTER in OE
2 06/02/20 1059 CAMC Ordering Doctor: Crudo, Jeffrey J .
3 06/02/20 1059 CAMC Order Source: WRITTEN
4 06/02/20 1146 NURAE1 order acknowledged
5 06/02/20 1150 DRCRUJE Signed by Crudo, Jeffrey J .
6 06/03/20 1646 NURMEA order viewed from Order Management

Category Procedure Order Number Date Time Pri Qty Ord Source Status Ordered By
LAB CBC 20200603-0042 06/03/20 0500 R POM CMP DUMJH

Other Provider : GLOAN Sig Lvl Provider :

Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

1 06/02/20 1127 NPGLOAN Order ENTER in POM
2 06/02/20 1127 NPGLOAN Ordering Doctor: Dumlaog, Jhoette
3 06/02/20 1127 NPGLOAN Order Source: PROVIDER ORDER MGMT
4 06/02/20 1127 NPGLOAN Other Doctor: Glover, Andrea
5 06/02/20 1127 NPGLOAN Signed by Glover, Andrea
6 06/02/20 1128 interface cc'd doctors edited in LAB
7 06/02/20 1128 interface order's status changed from TRANS to LOGGED by LAB
8 06/02/20 1146 NURAE1 order acknowledged
9 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
10 06/02/20 1741 DRCHOST Signed by Chou, Stanley B .
11 06/02/20 1807 NURAE1 Order RECEIVED in POM
12 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B .
13 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
14 06/02/20 1807 NURAE1 Order continued upon patient transfer.
15 06/02/20 1808 NURAE1 order acknowledged
16 06/03/20 0003 interface order's status changed from LOGGED to IN PRO by LAB
17 06/03/20 0721 interface order's status changed from IN PRO to COMP by LAB
18 06/10/20 1441 DRDUMJH Signed by Dumlaog, Jhoette

Category Procedure Order Number Date Time Pri Qty Ord Source Status Ordered By
LAB BMP 20200603-0043 06/03/20 0500 R POM CMP DUMJH

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 24

PATIENT: HANNA, ADEL S **A/S:** 74 M **ADMIT:** 06/01/20
ACCOUNT NO: V0000905328 **LOC:** MJ **DISCH/DEP:** 06/03/20
ATTEND DR: Crudo, Jeffrey J. **RM:** 260 **STATUS:** DIS IN
BD: B **UNIT NO:** M0002/3/81

Other Provider : GLOAN **Sig Lvl Provider :**
Collected By Care Area: N
Comments to Phlebotomist:
Specimen Comment:

Order's Audit Trail of Events

- 1 06/02/20 1127 NPGLOAN Order ENTER in POM
- 2 06/02/20 1127 NPGLOAN Ordering Doctor: Dumlaog, Jhoette
- 3 06/02/20 1127 NPGLOAN Order Source: PROVIDER ORDER MGMT
- 4 06/02/20 1127 NPGLOAN Other Doctor: Glover, Andrea
- 5 06/02/20 1127 NPGLOAN Signed by Glover, Andrea
- 6 06/02/20 1128 interface cc'd doctors edited in LAB
- 7 06/02/20 1128 interface order's status changed from TRANS to LOGGED by LAB
- 8 06/02/20 1146 NURAE1 order acknowledged
- 9 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
- 10 06/02/20 1741 DRCHOST Signed by Chou, Stanley B.
- 11 06/02/20 1807 NURAE1 Order RECEIVE in POM
- 12 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B.
- 13 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
- 14 06/02/20 1807 NURAE1 Order continued upon patient transfer.
- 15 06/02/20 1808 NURAE1 order acknowledged
- 16 06/03/20 0003 interface order's status changed from LOGGED to IN PRO by LAB
- 17 06/03/20 0729 interface order's status changed from IN PRO to COMP by LAB
- 18 06/10/20 1441 DRDUMJH Signed by Dumlaog, Jhoette

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200602-0253	06/02/20	1530	R	1	PHA	CMP	CHOST

Other Provider : **Sig Lvl Provider :**
RX: 004150657 **Start:** 06/02/20 1530 **SCH** **CMP**
Stop: 06/02/20 1830

Regadenoson (Lexiscan)
Dose: 0.4 MG
Route: IV **Direction:** ONCH@1530

Order's Audit Trail of Events

- 1 06/02/20 1445 RXLKAJ Order ENTER in PHA
- 2 06/02/20 1445 RXLKAJ Ordering Doctor: Chou, Stanley B.
- 3 06/02/20 1445 RXLKAJ Order Source: PHARMACY
- 4 06/02/20 1606 DRCHOST Signed by Chou, Stanley B.
- 5 06/02/20 1643 NURAE1 order acknowledged
- 6 06/02/20 1741 DRCHOST Order marked to be continued upon patient transfer.
- 7 06/02/20 1741 DRCHOST Signed by Chou, Stanley B.
- 8 06/02/20 1807 NURAE1 Order RECEIVE in POM
- 9 06/02/20 1807 NURAE1 Ordering Doctor: Chou, Stanley B.
- 10 06/02/20 1807 NURAE1 Order Source: PROVIDER ORDER MGMT
- 11 06/02/20 1807 NURAE1 Order continued upon patient transfer.
- 12 06/02/20 1808 NURAE1 order acknowledged
- 13 06/02/20 1830 SCHEDULER DISCONTINUE in PHA

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord Source	Status	Ordered By
PHA	MED	20200603-0013	06/03/20	0900	R		POM	CMP	CHOST

Other Provider : **Sig Lvl Provider :**

PERMANENT MEDICAL RECORD COPY

<Continued>

RUN DATE: 06/17/20
RUN TIME: 1118
RUN USER: HILM

Chino Valley Medical Center OE **LIVE**
Discharge Report

PAGE 26

PATIENT: HANNA, ADEL S	A/S: 74 M	ADMIT: 06/01/20
ACCOUNT NO: V00000905328	LOC: MJ	DISCH/DEP: 06/03/20
	RM: 260	STATUS: DIS IN
ATTEND DR: Crudo, Jeffrey J .	BD: B	UNIT NO: M0002/3/81

2	06/02/20	1712	NURAE1	Ordering Doctor: Chou, Stanley B .
3	06/02/20	1712	NURAE1	Order Source: TELEPHONE/READ BACK
4	06/02/20	1712	NURAE1	Signed by Barreto, Eida
5	06/02/20	1715	NURAE1	order acknowledged
6	06/02/20	1741	DRCHOST	Order marked to be continued upon patient transfer.
7	06/02/20	1741	DRCHOST	Signed by Chou, Stanley B .
8	06/02/20	1807	NURAE1	Order RECEIVE in POM
9	06/02/20	1807	NURAE1	Ordering Doctor: Chou, Stanley B .
10	06/02/20	1807	NURAE1	Order Source: PROVIDER ORDER MGMT
11	06/02/20	1807	NURAE1	Order continued upon patient transfer.
12	06/02/20	1808	NURAE1	order acknowledged
13	06/03/20	1724	NURMEA	order viewed from Order Management
14	06/03/20	1724	NURMEA	order viewed from Order Management

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
TRANSFER	TRANSFER	20200602-0004	06/02/20	1741	R		POM		CMP	CHOST

Other Provider : Sig Lvl Provider :
Transfer To: Medical-Surgical Unit
Comments:

Order's Audit Trail of Events

1	06/02/20	1741	DRCHOST	Order ENTER in POM during patient transfer.
2	06/02/20	1741	DRCHOST	Ordering Doctor: Chou, Stanley B .
3	06/02/20	1741	DRCHOST	Order Source: PROVIDER ORDER MGMT
4	06/02/20	1741	DRCHOST	Signed by Chou, Stanley B .
5	06/02/20	1748	NURAE1	order viewed from Order Management
6	06/02/20	1807	NURAE1	Transfer Order has been completed upon receive.
7	06/02/20	1808	NURAE1	order acknowledged
8	06/02/20	1824	MUMBA	order viewed from Order Management
9	06/02/20	1828	MURGCC	order viewed from Order Management

Order Date: 06/03/20 **Service**

Category	Procedure	Order Number	Date	Time	Pri	Qty	Ord	Source	Status	Ordered By
DISCHARGE	DCDIS	20200603-0019	06/03/20	2029	R		POM		FRN	DUMJH

Other Provider : MURHERES **Sig Lvl Provider :**
Date: 06/03/20
Time:
Discharge Diagnosis: chest pain
Discharge Disposition: ROUTINE HOME/SELF CARE
D/C IV: Y
D/C Central Line: Y
D/C Urinary Catheter: Y
D/C JP Drain: Y

Order's Audit Trail of Events

1	06/03/20	2029	DRMURHERES	Order ENTER in POM
2	06/03/20	2029	DRMURHERES	Ordering Doctor: Dumlao, Jhoette
3	06/03/20	2029	DRMURHERES	Order Source: PROVIDER ORDER MGMT
4	06/03/20	2029	DRMURHERES	Other Doctor: Maragan, Hemalatha
5	06/03/20	2029	DRMURHERES	Signed by Muragan, Hemalatha
6	06/03/20	2038	NURSI6	order acknowledged
7	06/10/20	1441	DRDUMJH	Signed by Dumlao, Jhoette

PERMANENT MEDICAL RECORD COPY

Chino Valley Medical Center OE
Admit
ORDER No.0601-0001
1080 Admitting Center Work Area

NAME: HANNA,ADEL S
PHYS: Ornelas, Francisco
DOB: 03/29/46 AGE/SEX: 74 M
ADM NO: V00000905328
ROOM: - LOC: ED

M000273781
TYPE: REG ER

Resuscitation Status: FULL CODE

Allergies/ADRs: metoclopramide

HT: 5 FT 7 IN 170.18 CM WT: 176 LB 0 OZ 79.832 KG

Admitting Diagnosis:
Comment:

Admit Orders (ADMSTATUS)
=====

ROUTINE

SER DATE: 06/01/20
TIME: 0159

ORDER SOURCE: O - POM

Admit to Inpatient (Expected to stay 2 mid-nights or more): Inpatient Status
Level of Care: Telemetry

Admit to Inpatient Status for Inpatient Surgery: No
Place in Outpatient Status for Observation Services Only: No

ORDERED BY: Crudo, Jeffrey J .
OTHER PROV: Khabibulina,Zarina

ENTERED BY: DRCHAZARES 06/01/20 0200 CVRPC02.2

RUN DATE: 06/11/20
 RUN TIME: 0925

PAGE 1

CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

PATIENT: HANNA, ADEL S ACCT #: V00000905328 LOC: MU U #: M000273781
 REG DR: Crudo, Jeffrey J. AGE/SX: 74/M ROOM: 260 REG: 06/01/20
 DOB: 03/29/46 BED: B DIS: 06/03/20
 STATUS: DIS IN TLOC:

**** HEMATOLOGY ****

Day Date Time	3 06/03/20 0611	2 06/02/20 0501	1 06/01/20 0040	Reference	Units
WBC	3.9 L 06/03/20 0720	4.1 L 06/02/20 0653	5.6 06/01/20 0108	(4.5-11.0) Verified Date Time	K/mm3
RBC	5.26 06/03/20 0720	5.09 06/02/20 0653	5.24 06/01/20 0108	(4.52-5.90) Verified Date Time	M/mm3
HGB	14.9 06/03/20 0720	14.7 06/02/20 0653	14.8 06/01/20 0108	(13.0-18.0) Verified Date Time	g/dL
HCT	46 06/03/20 0720	45 06/02/20 0653	46 06/01/20 0108	(42-52) Verified Date Time	%
MCV	87 06/03/20 0720	87 06/02/20 0653	87 06/01/20 0108	(80-99) Verified Date Time	fL
MCH	28 06/03/20 0720	29 06/02/20 0653	28 06/01/20 0108	(27-31) Verified Date Time	pg
MCHC	33 06/03/20 0720	33 06/02/20 0653	33 06/01/20 0108	(32-37) Verified Date Time	pg
RDW	15.9 H 06/03/20 0720	16.4 H 06/02/20 0653	16.0 H 06/01/20 0108	(11.5-14.5) Verified Date Time	%
PLT	141 06/03/20 0720	142 06/02/20 0653	165 06/01/20 0108	(130-400) Verified Date Time	x10 ³ m
MPV	10.3 06/03/20 0720	10.3 06/02/20 0653	9.7 06/01/20 0108	(7.4-10.4) Verified Date Time	fL
NEUT %	57.9 06/03/20 0720	55.0 06/02/20 0653	63.0 06/01/20 0108	(40-70) Verified Date Time	%
LYMPH %	30.2 06/03/20 0720	33.2 06/02/20 0653	25.4 06/01/20 0108	(25-45) Verified Date Time	%

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20
 RUN TIME: 0925

CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

HEMATOLOGY (Continued)

Day	3	2	1		Reference	Units
Date	06/03/20	06/02/20	06/01/20			
Time	0611	0501	0040			
MONO %	7.6	6.8	9.3		(2.5-10.0) %	
	06/03/20	06/02/20	06/01/20		Verified Date	
	0720	0653	0108		Time	
EOS %	3.9	4.5	1.6		(0.0-11.0) %	
	06/03/20	06/02/20	06/01/20		Verified Date	
	0720	0653	0108		Time	
BASO %	0.4	0.5	0.7		(0-2) %	
	06/03/20	06/02/20	06/01/20		Verified Date	
	0720	0653	0108		Time	
MANUAL DIFF REQ	NO	NO	NO			
	06/03/20	06/02/20	06/01/20		Verified Date	
	0720	0653	0108		Time	
MORPH REQUIRED	NO	NO	NO			
	06/03/20	06/02/20	06/01/20		Verified Date	
	0720	0653	0108		Time	

**** COAGULATION ****

Day	1				Reference	Units
Date	06/01/20					
Time	0040					
PROTIME	10.8				(8.8-11.0) sec	
	06/01/20				Verified Date	
	0133				Time	
INR	1.1				(0.9-1.2)	
	06/01/20				Verified Date	
	0133				Time	
PTT	24.2				(20.2-29.8	
	06/01/20				Verified Date	
	0133				Time	

** CONTINUED ON NEXT PAGE **

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

**** CHEMISTRY ****

Day	3	2	1	Reference	Units
Date	06/03/20	06/02/20	06/01/20		
Time	0611	0501	1650 0900	0900	
NA	139	141	141	(136-145)	mmol/L
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
K	3.7	3.7	4.2	(3.5-5.1)	mmol/L
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
CL	105	106	108 H	(98-107)	mmol/L
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
CO2	28.1	27.1	25.4	(21-32)	mmol/L
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
GLUCOSE	97	102	93	(74-106)	mg/dL
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
BUN	8.0	11.0	15.0	(7.0-18.0)	mg/dL
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
CREAT	0.9	1.0	0.9	(0.7-1.3)	mg/dL
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
GFR1	(a)	(b)	(c)		mL/min
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0941		
CA	8.5	8.4 L	8.3 L	(8.5-10.1)	mg/dL
	06/03/20	06/02/20	06/01/20	Verified Date	Time
	0729	0635	0942		
PHOS		3.1		(2.5-4.9)	mg/dL
		06/02/20		Verified Date	Time
		0635			
MAGNESIUM		2.2		(1.8-2.4)	mg/dL
		06/02/20		Verified Date	Time
		0635			

NOTES: (a) Test not performed
 (b) Test not performed
 (c) Test not performed

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20
RUN TIME: 0925

PAGE 4

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
Reg: 06/01/20 Disch: 06/03/20

CHEMISTRY (continued)

Day	3	2	1	Reference	Units
Date	06/03/20	06/02/20	06/01/20		
Time	0611	0501	1650 0900	0900	
TROP I			< 0.02	< 0.02	(0.00-0.10 ng/mL)
			06/01/20	06/01/20	Verified Date
			1800	1013	Time

Day	1	Reference	Units
Date	06/01/20		
Time	0040 0040 0040 0040 0040		
NA		143	(136-145) mmol/L
		06/01/20	Verified Date
		0144	Time
K		2.8(d) P	(3.5-5.1) mmol/L
		06/01/20	Verified Date
		0144	Time
CL		107	(98-107) mmol/L
		06/01/20	Verified Date
		0144	Time
CO2		21.4	(21-32) mmol/L
		06/01/20	Verified Date
		0144	Time
GLUCOSE		103	(74-106) mg/dL
		06/01/20	Verified Date
		0144	Time
BUN		19.0 H	(7.0-18.0) mg/dL
		06/01/20	Verified Date
		0144	Time
CREAT		1.0	(0.7-1.3) mg/dL
		06/01/20	Verified Date
		0144	Time
GFR1		(e)	mL/min
		06/01/20	Verified Date
		0143	Time

NOTES: (d) Called results (and readback confirmed) to:EDAD
on 06/01/20 at 0143 by Millares,Marzarex
(e) Test not performed

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20
 RUN TIME: 0925

PAGE 5

CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

CHEMISTRY (continued)

Day	1					Reference	Units
Date	06/01/20						
Time	0040	0040	0040	0040	0040		
TOTAL PROT					6.7	(6.4-8.2)	g/dL
					06/01/20	Verified Date	
					0144	Time	
ALB					3.5	(3.4-5.0)	g/dL
					06/01/20	Verified Date	
					0144	Time	
GLOB					3.2	(1.5-3.5)	g/dL
					06/01/20	Verified Date	
					0144	Time	
A/G					1.1	(1.1-1.8)	g/dL
					06/01/20	Verified Date	
					0144	Time	
CA					8.1 L	(8.5-10.1)	mg/dL
					06/01/20	Verified Date	
					0144	Time	
TBI					0.6	(0.20-1.00)	mg/dL
					06/01/20	Verified Date	
					0144	Time	
AST/SGOT					11 L	(15-37)	U/L
					06/01/20	Verified Date	
					0144	Time	
ALT					18	(16-63)	U/L
					06/01/20	Verified Date	
					0144	Time	
ALKP TOTAL					35(f) L	(46-116)	U/L
					06/01/20	Verified Date	
					0144	Time	
CKI				74		(39-308)	U/L
				06/01/20		Verified Date	
				0142		Time	
LIPASE					126	(73-393)	IU/L
					06/01/20	Verified Date	
					0144	Time	
AMM			14			(11-32)	umol/L
			06/01/20			Verified Date	
			0132			Time	

NOTES: (f) Please note new reference range as of 02-22-2015

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20
 RUN TIME: 0925

PAGE 6

CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

CHEMISTRY (continued)

Day Date Time	1 06/01/20					Reference	Units
	0040	0040	0040	0040	0040		
TRIG					144	(<150)	mg/dL
					06/01/20	Verified Date	
					0144	Time	
CHOL					130	(<200)	mg/dL
					06/01/20	Verified Date	
					0144	Time	
HDL					44	(40-60)	mg/dL
					06/01/20	Verified Date	
					0144	Time	
LDL, DIRECT					69	(<100)	mg/dL
					06/01/20	Verified Date	
					0144	Time	
VLDL					23.04		mg/dL
					06/01/20	Verified Date	
					0144	Time	
CHOL/HDL					3.0 (g)		mg/dL
					06/01/20	Verified Date	
					0144	Time	

NOTES: (g)

ESTIMATED CORONARY RISK INTERPRETATION

Cholesterol (mg/dl)	HDL Chol (mg/dL)	Risk Factor (Chol/HDL)	Risk Assess
<200 Desireable level	>45	<5.0	Decreased
200-239 Borderline	MALES 45	5.0	Average
High	<45	>5.0	Increased
>239 High Level	>55	<4.4	Decreased
	FEMALES 55	4.4	Average
	<55	>4.4	Increased

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20
 RUN TIME: 0925

PAGE 7

CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

CHEMISTRY (continued)

Day	1					Reference	Units
Date	06/01/20						
Time	0040	0040	0040	0040	0040		
RISK					3.0	(0.0-5.5)	
					06/01/20	Verified Date	
					0144	Time	
T3 UP		32.0 L				(33-39) % UPTA	
		06/01/20				Verified Date	
		0142				Time	
T3 TOTAL		(h)				ng/mL	
		06/01/20				Verified Date	
		0132				Time	
FREE T4		1.28				(0.76-1.46 ng/dL	
		06/01/20				Verified Date	
		0142				Time	
T4 (THYROXINE)		7.2				(4.7-13.3) ug/dL	
		06/01/20				Verified Date	
		0142				Time	
FTI		2.3				(1.4-4.5) ug/dL	
		06/01/20				Verified Date	
		0142				Time	
TSH		1.740				(0.36-3.74 uIU/mL	
		06/01/20				Verified Date	
		0142				Time	
TROP I	(j)					(0.00-0.10 ng/mL	
	06/01/20					Verified Date	
	0132					Time	

NOTES: (h) 0.97
 See also (i)
 (i) Reference Interval:
 Euthyroid 0.60 - 1.81 ng/mL
 Hypothyroid < 0.60 ng/mL
 Hyperthyroid > 1.81 ng/mL
 (j) < 0.017

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20

PAGE 8

RUN TIME: 0925

CHINO VALLEY MEDICAL CENTER
5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
Reg: 06/01/20 Disch: 06/03/20

**** URINE DRUG SCREEN ****

Day	3					Reference	Units
Date	06/03/20						
Time	0430						
PCP UR	(k)					(See below	
	06/03/20					Verified Date	
	0555					Time	
BENZODIAZEPINE	(l)					(See below	
	06/03/20					Verified Date	
	0555					Time	
COCAINE UR	(m)					(See below	
	06/03/20					Verified Date	
	0555					Time	
AMPHETAMINE	(n)					(See below	
	06/03/20					Verified Date	
	0555					Time	
THC UR QUAL	(o)					(See below	
	06/03/20					Verified Date	
	0555					Time	
OPIATES UR	(p)					(See below	
	06/03/20					Verified Date	
	0555					Time	

NOTES: (k) NONE DETECTED
(l) NONE DETECTED
(m) NONE DETECTED
(n) NONE DETECTED
(o) NONE DETECTED
(p) NONE DETECTED

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20
 RUN TIME: 0925

PAGE 9

CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

URINE DRUG OF ABUSE SCREEN.... (continued)

Day	3	Reference	Units
Date	06/03/20		
Time	0430		
BARBITURATE	(q) 06/03/20 0555		(See below Verified Date Time

NOTES: (q) NONE DETECTED
 See also (r)
 (r)

Method:	Reference Range:
PCP	Neg <=25 ng/mL Phencyclidine
BENZ	Neg <=200 ng/mL Lorazepam
COC	Neg <=300 ng/mL Benzoyllecgonine
AMPH	Neg <=1000 ng/mL d-Methamphetamine
THC	Neg <=50 ng/mL 11 nor-d9-THC-carboxylic acid
OPI	Neg <=2000 ng/mL Morphine
BARB	Neg <=200 ng/mL Secobarbital

This Drug Screen method provides only a preliminary analytical test result. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GS/MS) is the preferred confirmatory method. Other chemical confirmatory methods are available. Clinical consideration and professional judgement should be applied to any drug of abuse test result, particularly when preliminary results are used.

** CONTINUED ON NEXT PAGE **

RUN DATE: 06/11/20

PAGE 10

RUN TIME: 0925 CHINO VALLEY MEDICAL CENTER
 5451 WALNUT AVE. CHINO, CALIFORNIA 91710 (909) 464-8600
 Reda M. Tadros, M.D., Medical Director

Summary Report By Patient

 Name: HANNA, ADEL S Age/Sex: 74/M Attend Dr: Crudo, Jeffrey J .
 Acct#: V00000905328 Unit#: M000273781 Status: DIS IN Location: MU 260-B
 Reg: 06/01/20 Disch: 06/03/20

Test	Date	Time	Result	Reference	Units
B NATRIURETIC	06/1/20	0040	40.17(s)	(0-100)	pg/mL

 Specimen: 20:M0004820R Collected: 06/01/20-0307 Status: COMP Req#: 01971085
 Received: 06/01/20-0547 Source: NARES Sp Desc: BILATERAL
 Subm Dr: Crudo, Jeffrey J .

Ordered: MRSA CULTURE
 MRSA CULTURE
 Final 06/02/20
 NO MRSA ISOLATED

NOTES: (s)

BNP<100 PG/ML CHF VERY UNLIKELY (2%)
 BNP 100-500 PG/ML INDETERMINATE
 BNP>500 PG/ML CHF VERY LIKELY (95%)

** END OF REPORT **

CHINO VALLEY MEDICAL CENTER
5451 Walnut Avenue, Chino, CA 91710
Ph: (909)464-8600

Patient Name: HANNA, ADEL S
Unit No: M000273781

EXAM# TYPE/EXAM RESULT
001120769 NM/NM REST/STRESS w/ MOTION+EFR

Procedure: NM REST/STRESS w/ MOTION+EFRAC

Exam Date: 6/2/2020 3:30 PM

Clinical History: Chest pain

Comparison Study: None

Myocardial Perfusion Study with SPECT

Technique: The patient received an intravenous injection of 10.3 mCi of Technetium-99m sestamibi while at rest. After a short delay, SPECT tomographic images of the heart were obtained. The patient then went to the stress lab where he received an intravenous infusion of Lexiscan utilizing standard protocol. 32.2 mCi of Technetium-99m sestamibi was injected intravenously two minutes after the start of the infusion. After a short delay, gated SPECT tomographic images of the heart were acquired and processed.

Findings:

Normal left ventricular volume. No left ventricular wall defect on rest or stress imaging. No gross wall motion abnormality. The left ventricular ejection fraction is 71%.

Impression:

1. No evidence of myocardium at ischemic risk.
2. The left ventricular ejection fraction is 71%.

** REPORT SIGNED IN OTHER VENDOR SYSTEM 06/02/2020 **
Reported By: Kevin T. Bui, MD

CC: Stanley B . Chou; Jeffrey J . Crudo; per patient NONE

Technologist: JOSEF R PAN, NM

Transcribed Date/Time: 06/02/2020 (1742)

Transcriptionist: PSCRIBE

Printed Date/Time: 06/02/2020 (1742)

PAGE 1

Signed Report

CHINO VALLEY
MEDICAL CENTER
5451 WALNUT AVE
CHINO CA 91710
PH: 909.464.8643
FAX: 909.464.8886

Name: HANNA, ADEL S
Phys: Chou, Stanley B .
DOB: 03/29/1946 Age: 74 Sex: M Status: ADM IN
Acct No: V00000905328 Loc: 260T B
Order Date: 06/02/2020 Report Date: 06/02/20
Exam Date(YYYYMMDD): 20200602 Radiology No:

CHINO VALLEY MEDICAL CENTER
5451 Walnut Avenue, Chino, CA 91710
Ph: (909)464-8600

Patient Name: HANNA,ADEL S
Unit No: M000273781

EXAM# TYPE/EXAM RESULT
001120725 RAD/XR CHEST: 1V (AP/PA)

Clinical History
CHEST PAIN

Comparison
XR CHEST on 11/19/2008, 1 images.

Technique: Chest one view

Without Contrast

Findings
HANNA, ADEL, M000273781

Bibasilar atelectasis. Trace right pleural effusion is not excluded. Probable right upper lobe scarring. No focal consolidation. No pneumothorax. The heart size is within normal limits. Tortuous aorta. No evidence of acute osseous pathology. Stable elevation of the right hemidiaphragm.

IMPRESSION:

1. Bibasilar atelectasis.
2. Trace right pleural effusion is not excluded.
3. Probable right upper lobe scarring.
4. Stable elevation of the right hemidiaphragm.

This report was electronically signed by William Paik MD on 6/1/2020 12:54:16 AM.

** REPORT SIGNED IN OTHER VENDOR SYSTEM 06/01/2020 **
Reported By: William N. Paik,MD

CC: Francisco Ornelas

Technologist: MISAEL CORTEZ,RT(R)

Transcribed Date/Time: 06/01/2020 (0059)

Transcriptionist: PSCRIBE

Printed Date/Time: 06/01/2020 (0059)

PAGE 1

Signed Report

CHINO VALLEY
MEDICAL CENTER
5451 WALNUT AVE
CHINO CA 91710
PH: 909.464.8643
FAX:909.464.8886

Name: HANNA,ADEL S
Phys: Ornelas, Francisco
DOB: 03/29/1946 Age: 74 Sex: M Status: REG ER
Acct No: V00000905328 Loc: ED
Order Date: 06/01/2020 Report Date: 06/01/20
Exam Date(YYYYMMDD): 20200601 Radiology No:

CHINO VALLEY MEDICAL CENTER
 5451 Walnut Avenue, Chino, CA 91710
 Ph: (909)464-8600

Patient Name: HANNA,ADEL S
 Unit No: M000273781

EXAM# TYPE/EXAM RESULT
 001120729 CE/CARDIAC ECHO

----- APPROVED REPORT -----

EXAM: Comprehensive 2D, Doppler, and color-flow Echocardiogram

Vitals

HR: 64 bpm Blood Pressure: 123/72 mmHg Rhythm: NSR

Indications

ICD: Chest pain 07.9, HYPOKALEMIA

Past Medical History

HTN, GERD

2D Dimensions

RVdD: 28.31 (20-42 mm) LVEF(%): 60.45 (>50%)
 IVSd: 10.78 (6-11mm) LVOT Diam: 20.53 (17-21 mm)
 IVSs: 12.73
 LVdD: 45.92 (42-59 mm)
 LVPWs: 12.42 mm
 Pwd: 10.76 (6-11mm) Ascending Aorta: 35.13 mm
 LVDs: 31.15 (23-39 mm)
 Left Atrium: 38.70 (30-40 mm)
 LA Area: 1659.6 (1000-1900 mm²)
 Right Atrium: 27.0 (29-45 mm) Simpson's LVEF: 65.05 %
 LV Single Plane 4CH: 64.68 % EDV (Teich): 74.23 mL
 LV Single Plane 2CH: 65.42 % ESV (Teich): 26.22 mL

M-Mode Dimensions

Left Atrium: 34.88 (30-40 mm)
 Aortic Root: 32.54 (22-37 mm)
 Aortic Cusp Exc.: 17.19 (15-26 mm)

Volumes

Left Atrial Volume (Systole)
 Single Plane 4CH: 47.40 mL Single Plane 2CH: 48.63 mL
 Biplane LA Volume: 49.11 mL LA ESV Index: 27.11 mL/m²

Aortic Valve

AoV Peak Vel.: 1.24 (1.0-1.8 m/s) AI PHT: 639.66 ms
 AO Peak Gr.: 6.16 (2.0-9.0 mmHg)
 AO Mean Gr.: 3.43 (2.0-4.0 mmHg) LV Max PG: 4.84 (2.0-6.0 mmHg)
 AO V2 Mean: 0.89 (0.7-0.9 m/s) LV Mean PG: 2.64 (1.0-3.0 mmHg)
 AO V2 VTI: 267.81 mm LV Max: 1.10 (0.7-1.1 m/s)
 AVA (VTI): 2.98 (2.0-4.0 cm²) LV Mean: 0.77 (0.6-0.8 m/s)

PAGE 1 Signed Report (CONTINUED)

CHINO VALLEY
 MEDICAL CENTER
 5451 WALNUT AVE

Name: HANNA,ADEL S
 Phys: Crudo, Jeffrey J .
 DOB: 03/29/1946 Age: 74 Sex: M Status: ADM IN

CHINO CA 91710
PH: 909.464.8643
FAX:909.464.8886

Acct No: V00000905328 Loc: 260T B
Order Date: 06/01/2020 Report Date: 06/02/20
Exam Date(YYYYMMDD): 20200601 Radiology No:

Patient Name: HANNA,ADEL S
Unit No: M000273781

EXAM#	TYPE/EXAM	RESULT
001120729	CE/CARDIAC ECHO	

AVA Vmax: 2.94 (2.0-4.0 cm2) LV V1 VTI: 241.27 (200-300 mm)
AI DT: 2205.73 ms LVOT Area: 331.16 mm²
AI Slope: 2.29 m/s² SV (LVOT): 79.90 mL

Mitral Valve

E/A Ratio: 0.8 (0.8-1.5)
MV E Max Vel.: 0.80 (0.6-1.3 m/s) MV Decel. Time: 225.71
(104.0-258.0 ms)
MV A Vel.: 0.97 m/s MV Decel. Slope: 3.48 m/s²
MV PHT: 65.46 (30-60 ms)
MVA (PHT): 3.36 (4-6 cm²)

TDI

E/Medial E': 13.33 (>13 = abnormal)
Medial E' Vel.: 0.06 m/s

Pulmonary Valve

PV Peak Velocity: 0.87 (0.4-0.8 m/s) PV Peak Gr.: 3.00 mmHg

Tricuspid Valve

TR Peak Vel.: 2.59 (1.0-2.8 m/s) RAP Estimate: 8 mmHg
TR Peak Gr.: 26.75 mmHg RVSP: 34.75 (>25 = abnormal)
TV E pt: 0.4 m/s

Left Ventricle

The left ventricle is normal size. The left ventricular systolic function is normal. The left ventricular ejection fraction is within the normal range. There is upper limits of normal left ventricular wall thickness. There is normal LV segmental wall motion. Transmitral Doppler flow pattern suggests impaired LV relaxation. LVEF is 60-65%.

Right Ventricle

The right ventricle is normal size. The right ventricular systolic function is normal.

Atria

The left atrium size is normal. The right atrium size is normal.

Aortic Valve

The aortic valve is mildly sclerotic. There is no aortic valvular stenosis. Mild aortic regurgitation.

Mitral Valve

The mitral valve is normal in structure. Noted in color, but no velocity available/possible.

PAGE 2

Signed Report

(CONTINUED)

CHINO VALLEY
MEDICAL CENTER
5451 WALNUT AVE

Name: HANNA,ADEL S
Phys: Crudo, Jeffrey J .
DOB: 03/29/1946 Age: 74

Sex: M Status: ADM IN

CHINO CA 91710
PH: 909.464.8643
FAX:909.464.8886

Acct No: V00000905328 Loc: 260T B
Order Date: 06/01/2020 Report Date: 06/02/20
Exam Date(YYYYMMDD): 20200601 Radiology No:

Patient Name: HANNA,ADEL S
Unit No: M000273781

EXAM# TYPE/EXAM RESULT
001120729 CE/CARDIAC ECHO

Tricuspid Valve

The tricuspid valve is normal in structure. Mild tricuspid regurgitation. The RVSP is 26 mmHg plus right atrial pressure.

Pulmonic Valve

The pulmonary valve is normal in structure. There is no pulmonic valvular regurgitation.

Great Vessels

The aortic root is normal in size. The IVC was not visualized.

Pericardium

There is no pericardial effusion.

Other Information

Study Quality: Adequate.

Conclusion

1. The left ventricle is normal in size and systolic function.
2. Estimated left ventricular ejection fraction of 60-65%.
3. Grade 1 diastolic dysfunction.

Electronically signed by : Stanley Chou, 06/02/2020 16:11:46

** REPORT SIGNED IN OTHER VENDOR SYSTEM 06/01/2020 **
Reported By: Chou,Stanley MD

CC: Zarina Khabibulina; Jeffrey J . Crudo; per patient NONE;
Francisco Ornelas
Technologist: MYRIAM OWIECKI

Transcribed Date/Time: 06/02/2020 (1612)
Transcriptionist: INFINITT
Printed Date/Time: 06/02/2020 (1612)

PAGE 3

Signed Report

CHINO VALLEY
MEDICAL CENTER
5451 WALNUT AVE
CHINO CA 91710
PH: 909.464.8643
FAX:909.464.8886

Name: HANNA,ADEL S
Phys: Crudo, Jeffrey J .
DOB: 03/29/1946 Age: 74 Sex: M Status: ADM IN
Acct No: V00000905328 Loc: 260T B
Order Date: 06/01/2020 Report Date: 06/02/20
Exam Date(YYYYMMDD): 20200601 Radiology No:

H000273.ecg

HANNA ADEL

6/2/2020 1:47:38 PM

DOB: 5/29/1986 14 Years

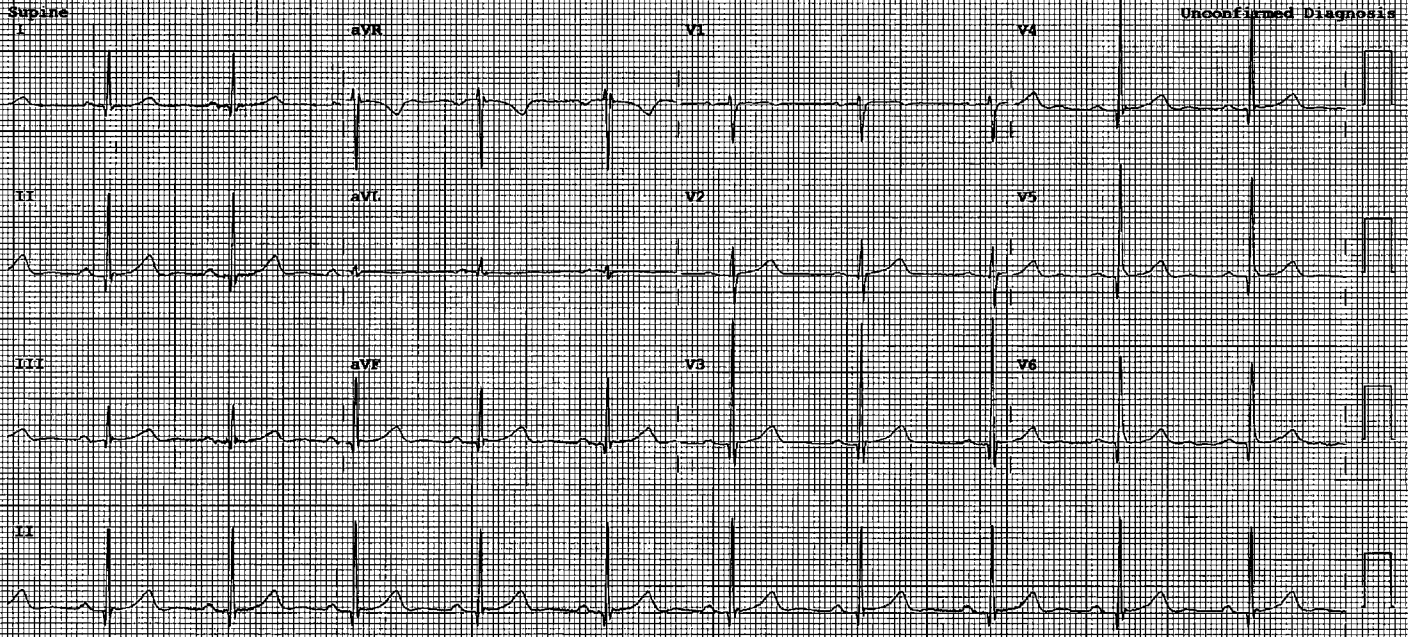
Male

163 LB 67 In

Rate 62 Sinus rhythm normal P axis, V-rate 60-99
 RR 970
 PR 187
 QRS 85
 QT 430
 QTc 426
 --AXIS--
 P 54
 QRS 59
 T 63

- NORMAL ECG -

Unconfirmed Diagnosis



Device: Chino Val15 Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV

PS60-0.05-150 Hz

PH130C B CLIP

Page 1 of 1

M006273781
HANNA ADEL
Acquired 6/2/2020 4:04:45 PM

Male
DOB: 3/29/1946

STAGE REPORT
Exercise Stage 1

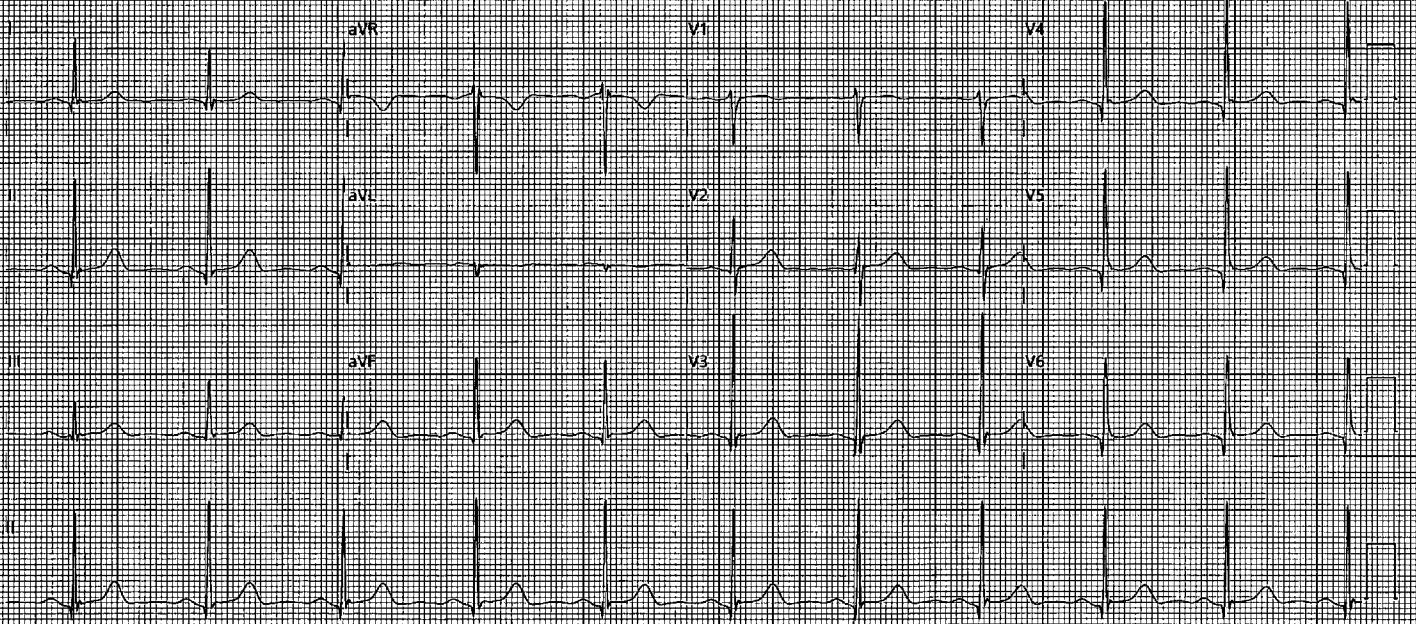
ST measurement based on 1+60 ms

CHINO VALLEY MEDICAL CENT...

EXSCAN

Exercise: 01:00
Stage 1: 01:00

HR: 62 BP: 147/87 Speed: -- Grade: --



Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV FS: 60 0.05-150 Hz Page 1 of 1

M000273788

HANNA ADEL

Acquired: 6/2/2020 4:04:46 PM

Male

DOB: 3/29/1946

STAGE REPORT

Recovery Stage 1

ST measurement based on J + 60 ms

CHINO VALLEY MEDICAL CENT...

LEXSCAN

Recovery: 00:00

Stage 1: 00:00

HR: 63 BP: 147/87 Speed: -- Grade: --



Device: Chino Valley Medical Center

Peak Exercise

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV F S: 60 - 0.05 150 Hz

Page 1 of 1

M000273781
HANNA ADEL
Acquired: 6/27/2020 4:05:45 PM

Male
DOB: 3/29/1946

STAGE REPORT
Recovery Stage 1

CHINO VALLEY MEDICAL CENTER

ST measurement based on J+60 ms

LEXISCAN

Recovery: 00:59
Stage 1: 00:59

HR: 87 BP: 137/84 Speed: -- Grade: --



Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV FS: 60 ± 0.05 150 Hz
Page 1 of 1

M000273781

Male

STAGE REPORT

CHINO VALLEY MEDICAL CENT...

HANNA ADEL

DOB: 3/29/1946

Recovery Stage 1

Acquired: 6/2/2020 4:06:45 PM

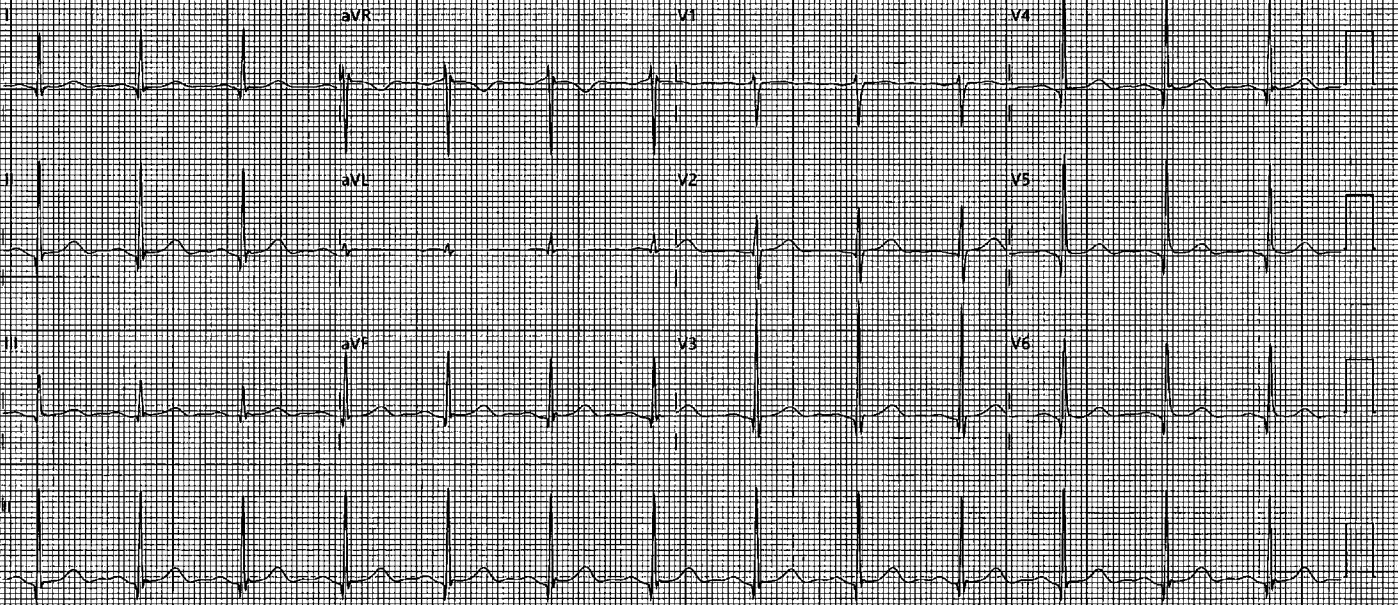
ST measurement based on J+60 ms

LEXISCAN

Recovery: 01:59

HR: 79 BP: 145/84 Speed: -- Grade: --

Stage 1: 01:59



Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV FS 60 ~ 0.05-150 Hz Page 1 of 1

M000273781
HANNA ADEL
Acquired: 6/2/2020 4:07:45 PM

Male
DOB: 3/23/1946

STAGE REPORT

Recovery Stage 1

ST measurement based on J +60 ms

CHINO VALLEY MEDICAL CENTER

LEXISCAN

Recovery: 02:59
Stage 1: 02:59

HR: 78 BP: 143/83 Speed: Grade:



Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV FS: 60 0.05-50 Hz
Page 1 of 1

M000273781
HANNA ADEL
Acquired: 6/2/2020 3:54:53 PM

Male
DOB: 3/29/1946

Max ST Report

Pre Exercise

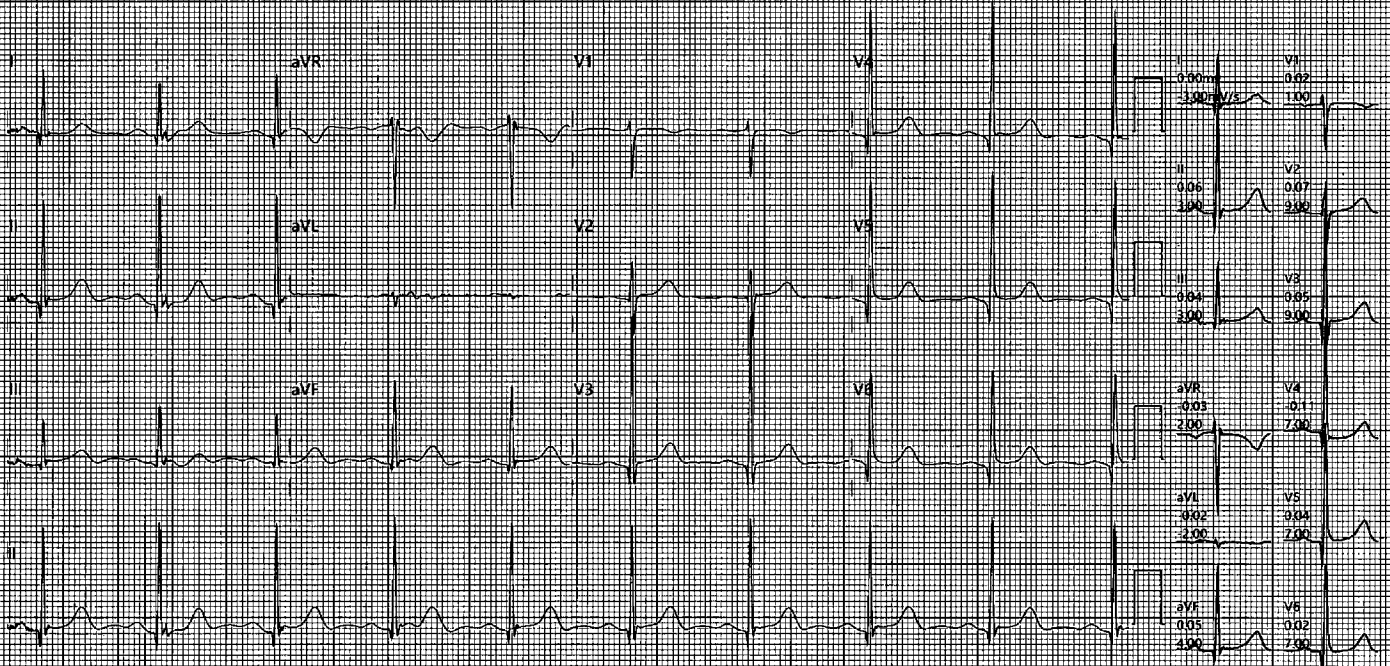
ST measurement based on 1x60 ms

CHINO VALLEY MEDICAL CENT...

LEXISCAN

PreExercise: 07:55

HR: 67 BP: / / Speed: Grade:



Max ST
Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV P-S: 60-0.05-150 Hz
Unconfirmed Report

M000273781

Male

ST Comparison Report mV

CHINO VALLEY MEDICAL CENT...

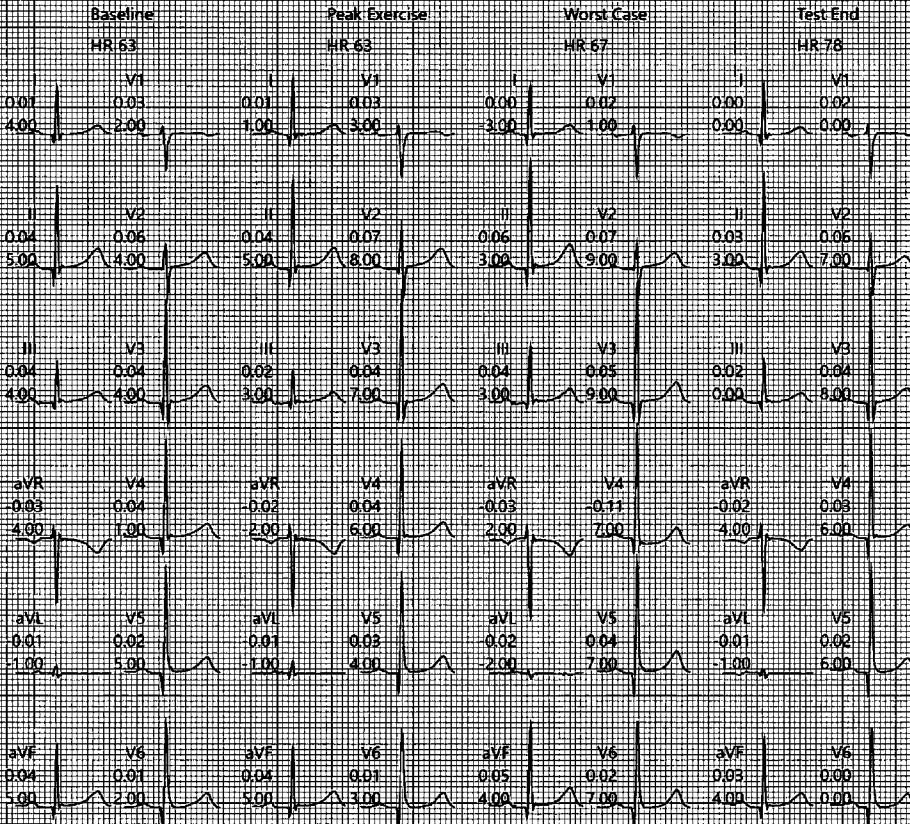
HANNA ADEL

DOB: 3/29/1946

ST measurement based on J+60 ms

LEXISCAN

Start: 6/2/2020 3:41:58 PM



Pre Stage 1
00:50

Peak Exercise
00:00

Pre Stage 1
07:55

Rec Stage 1
05:02

Device: Chino Valley Medical Center

Unconfirmed Report

M000273781
HANNA ADEL

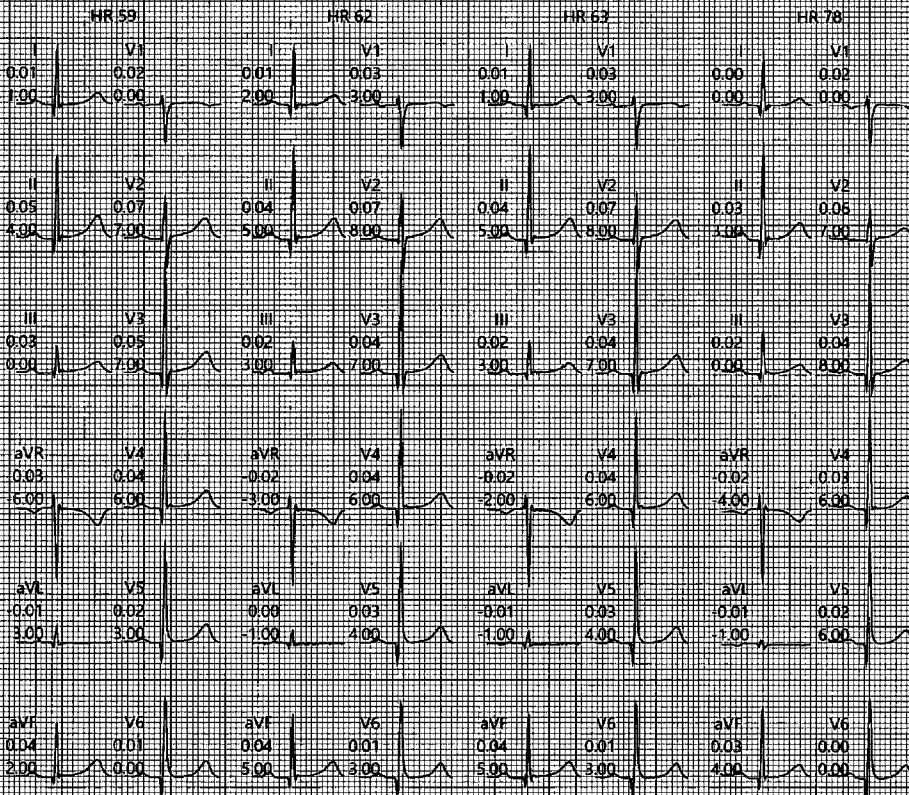
Male
DOB: 3/29/1946

AVERAGE QRS BY STAGEmV CHINO VALLEY MEDICAL CENT...

Start: 6/27/2020 3:41:58 PM

ST measurement based on J-T60 ms

LEXSCAN



Pre Stage 1
16:47

Exe Stage 1
01:00

Peak Exercise
00:00

Rec Stage 1
05:02

Device: Chino Valley Medical Center

Unconfirmed Report

M000273781

Male

SUMMARY TABLE

CHINO VALLEY MEDICAL CENT...

MANNA ADEL

DOB:3/29/1946

Start:6/2/2020 3:41:58 PM

ST measurement based on J-T60 ms

LEXSCAN

STAGE SUMMARY (ST-UNIT: mV)

Phase Time	MPH	Grade (%)	Max HR (BPM)	BP (mmHg)	METS	HR-BP	SpO2	I	II	aVR	aVL	aVF	V1	V2	V3	V4	V5	V6	
Pre-Exercise-16:47	0.0	0.0		/	1.00														
Start-Exe-01:00	0.0	0.0	70	111/77	1.00			0.01	0.05	-0.03	-0.03	-0.01	-0.04	-0.02	0.07	0.05	0.04	0.02	0.01
Exe-Stage-1-01:00	0.0	0.0	63	147/87	3.00	9114		0.01	0.04	0.02	-0.02	0.00	-0.04	-0.03	0.07	0.04	0.04	0.03	0.01
Rec-Stage-1-05:02	0.0	0.0	87	146/85	1.00	11388		0.00	0.03	0.02	-0.02	-0.01	0.03	0.02	0.06	0.04	0.03	0.02	0.00

M000273781
 HANNA ADEL
 Start: 6/2/2020 3:41:58 PM

Male
 DOB: 3/29/1946

SUMMARY REPORT

CHINO VALLEY MEDICAL CENT...

ST measurement based on 1-60 ms

LEXISCAN

Summary		Max Values		
Exercise Time:	01:00	METs:	1.00	Exe: 00:00
Max Speed:	0.0MPH	HR:	87 BPM	Exe: 01:57
Max Grade:	0.0%	%Max Predicted HR:	59	
Leads with 0.1 mV ST:	V4	SBP:	147/87 mmHg	Exe: 00:32
PVCs:	0	DBP:	147/87 mmHg	Exe: 00:32
FAT%:	70.3	HR*BP:	12702 BPM * mmHg	Exe: 04:35
Duke Score:		SpO2:	- %	
Angina:				

Reference Values		Max ST and ST Changes from Reference				
Reference HR:	63 BPM	ST elevation:	0.09	mV	inV2	Exe: 00:00
Reference BP (Sys/Dia):	-/-	ST depression:	-0.11	mV	inV4	Exe: 00:00
Reference	Supine Pre 05:49	ST elevation change:	0.02	mV	inAVR	Exe: 02:52
		ST depression change:	-0.02	mV	inV4	Exe: 02:47
		ST/HR Index:	1.00	uV/bpm	inV4	Exe: 02:47

Reason for End

Symptoms

Narrative Summary	

Signed: _____ Date: _____
 Device: Chino Valley Medical Center

UnConfirmed Report

M000273781
HANNA ADEL

Male
DOB: 3/29/1946

PATIENT DATA

CHINO VALLEY MEDICAL CENT...

Start: 6/2/2020 3:41:58 PM

ST measurement based on J+60 ms

LEXSCAN

Patient Information		History	
Patients ID:	M000273781	Smoker:	Unknown
Last Name:	HANNA	Prior CABG:	Unknown
First Name:	ADEL	Prior PCI:	Unknown
Additional Name:		History of MI:	Unknown
Alternate ID:		Heart Failure:	Unknown
Date Of Birth:	3/29/1946	Prior CABG:	Unknown
Age:	74 years	Prior Heart Valve Surgery:	Unknown
Target HR:	124 BPM	Diabetic:	Unknown
Gender:	Male	Angina:	Unknown
Race:		Family History of CV Disease:	Unknown
Height:	67 in.	History Notes:	
Weight:	163 LB		
BMI:	25.5		
Physician		Order	
Attending Physician:		Encounter ID:	
Referring Physician:		Order Number:	
Operator ID:		Account Number:	
Nurse Name:		Address:	
Nuclear Tech Name:		Home Telephone:	
Echo Tech Name:		Work Telephone:	
Custom Fields		Indication	
Medications/Dosages/Frequency		Notes	

Device: Chino Valley Medical Center

Unconfirmed Report

M000273.r81

HANNA ADEL

Acquired 6/27/2020 4:09:45 PM

Male

DOB: 3/29/1946

STAGE REPORT

Recovery Stage 1

CHINO VALLEY MEDICAL CENTER

ST measurement based on J+60 ms

LEXISCAN

Recovery: 04:59

Stage 1: 04:59

HR: 77 BP: 146/86 Speed: Grade:



Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV FS 60 ~ 0.05-150 Hz Page 1 of 1

M000273781

Male

STAGE REPORT

CHINO VALLEY MEDICAL CENT...

HANNA/ADEL

DOB: 3/29/1946

Recovery Stage 1

Acquired: 6/2/2020 4:08:45 PM

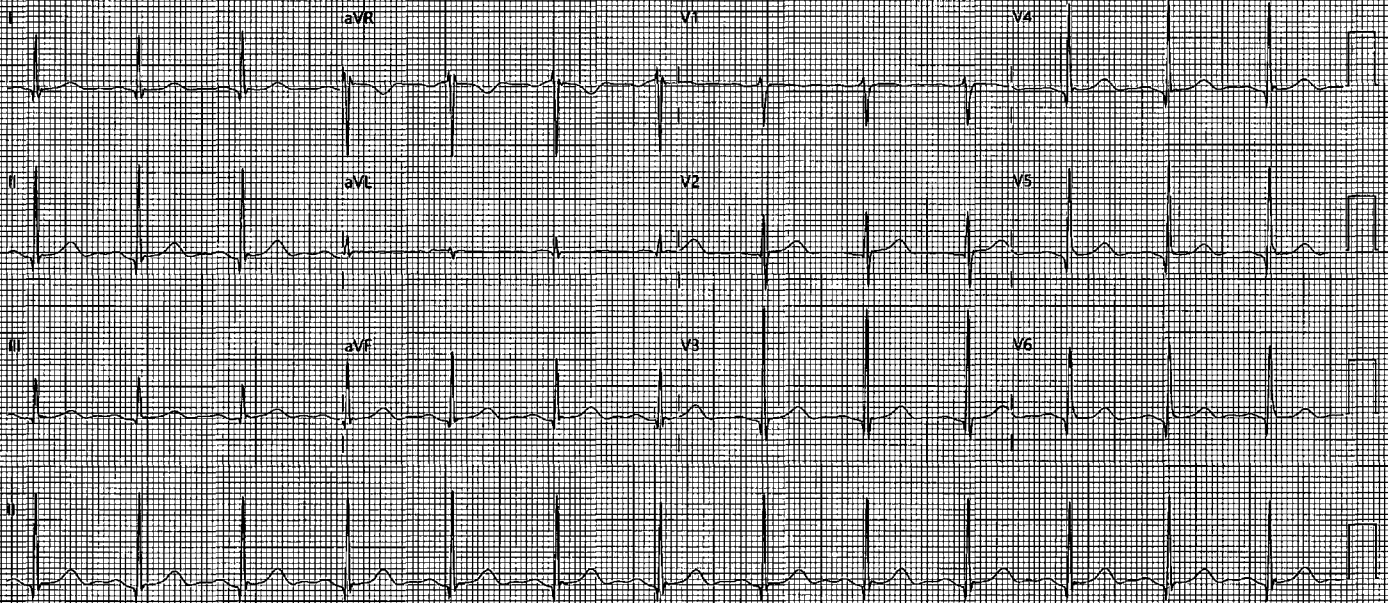
ST measurement based on J + 60 ms

LEXISCAN

Recovery: 03:59

HR: 78 BP: 146/85 Speed: -- Grade: --

Stage 1: 03:59



Device: Chino Valley Medical Center

Speed: 25 mm/s Limb: 10 mm/mV Chest: 10 mm/mV FS: 60 0.05-150 Hz Page 1 of 1

CVMC-M000273781 HANNA, ADEL
Born 3/29/1946 74 Years Male

6/2/2020 05:29:14 (DST)
(19)

Chino Valley Medical Center
DU

Rate 54 . Sinus rhythm.....normal P axis, V-rate 50- 99 Room: 260T
Borderline prolonged PR interval.....PR >212, V-rate 50- 90 Operator: DP
FR 213 . Baseline wander in lead(s) V1
QRSD 86
QT 452
QTc 429

--AXIS--

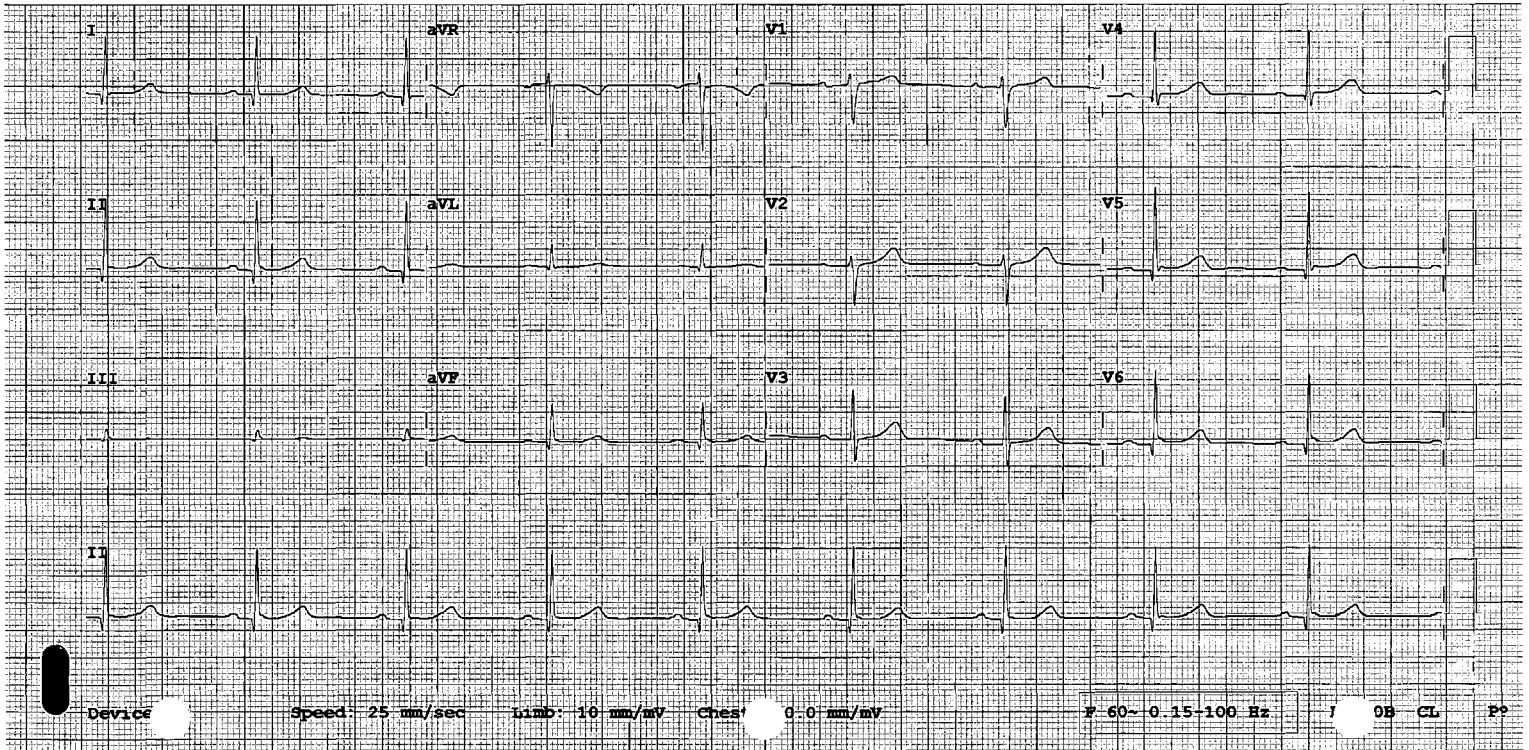
P 35
QRS 41
T 40

12 Lead; Standard Placement

- BORDERLINE ECG -

Requested by: Jeffrey Crudo
Unconfirmed Diagnosis

Chino Valley Medical Center
HANNA, ADEL S 99914/1
Att. Dr: Crudo, Jeffrey J.
03/29/46 M 74Y M000273781
V00000905328 ADM IN 06/01/20



M000273781
74 Years

HANNA, ADEL
Male

6/1/2020 12:14:10 AM (DST)
CVMCED (20)
CHINO VALLEY MEDICAL CENTER

Rate 89 Sinus rhythm.....normal P axis, V-rate 50- 99

Operator: EDRN1

PR 173
QRSD 91
QT 378
QTc 460

HANNA, ADEL S
V00000905328
DOB: 03/29/46
DOS: 06/01/20

CVMC
ER

M/74
MR#: M000273781



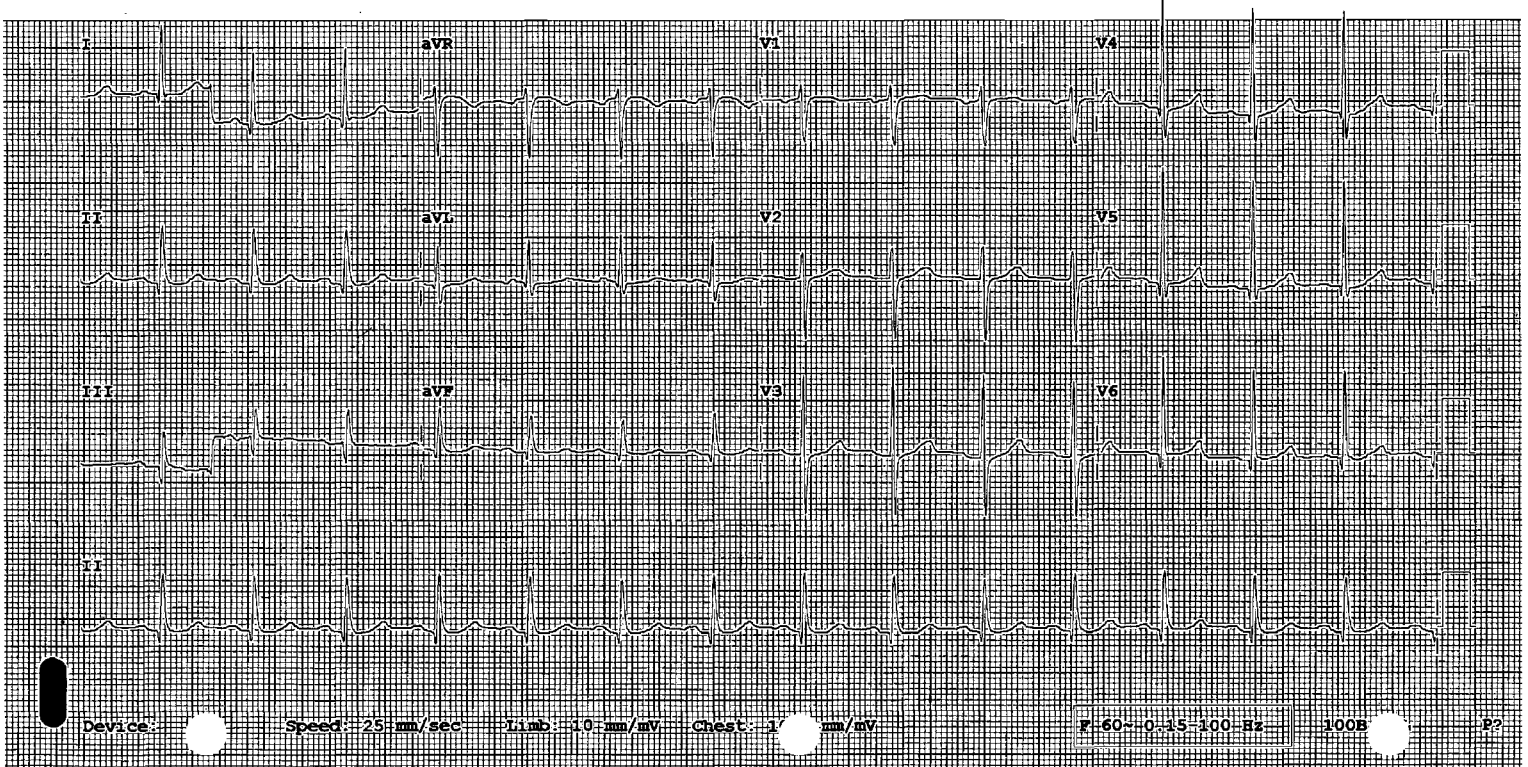
--AXIS--

P 37
QRS 47
T 16

- NORMAL ECG -

Requested by: WINN.
Unconfirmed Diagnosis

12 Lead; Standard Placement



Pat ID CVMC-M000273781 06/02/2020 05:29:14
03/29/1946 74 yrs

HANNA, ADEL
Other Race Male
Account # V00000905328

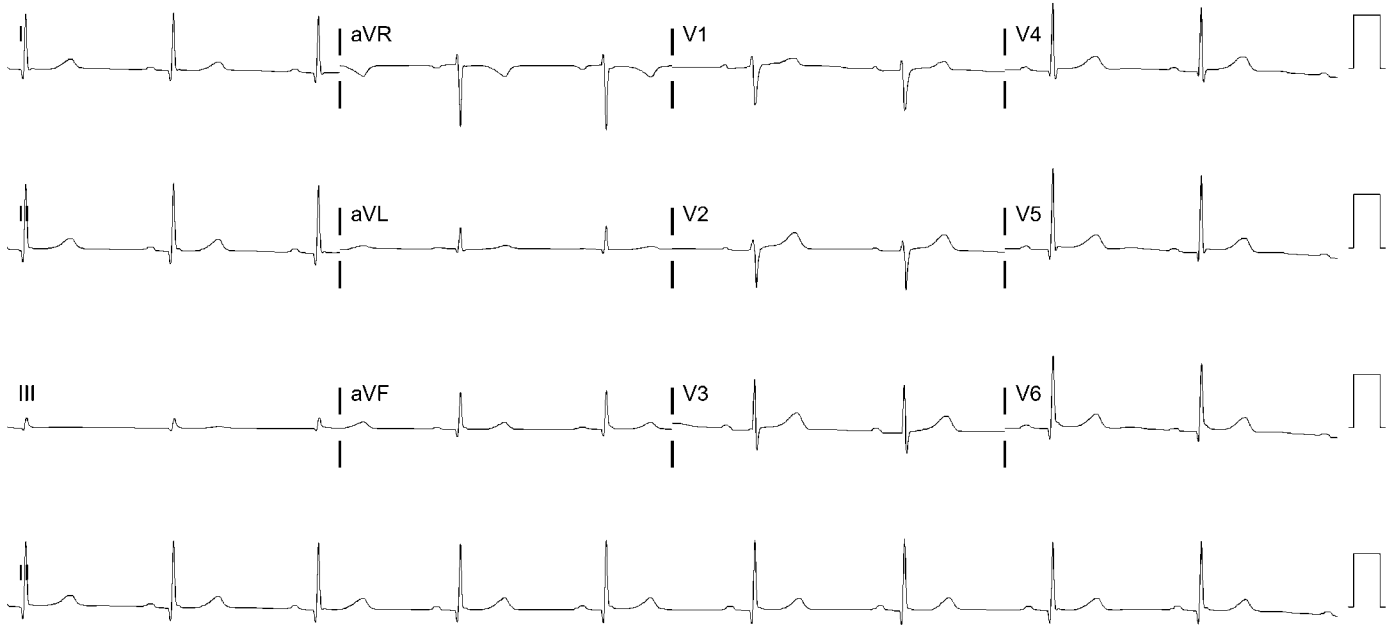
Chino Valley Medical Center
Dept DU
Room 260T B
Tech DP

RX
DX
Rate 54 Sinus rhythm
PR 213 Borderline prolonged PR interval
QRSd 86 BaseLine wander in lead(s) V1
QT 452 Electronically Signed On 6-2-2020 16:16:17 PD by Stanley Chou
QTc 429
--Axis--
P 35
QRS 41
T 40

Req Provider: Jeffrey Crudo
V# V00000905328
Site Code: CVMC
Category: EKG
19

- Borderline ECG -

Confirmed By: Stanley Chou 06/02/2020 16:16:17



Philips PageWriter TC

25 mm/sec

10.00 mm/mV

F 60~ 0.15 - 100 Hz

Pat ID CVMC-M000273781 06/01/2020 00:14:10
03/29/1946 74 yrs

HANNA, ADEL
Male
Account # V00000905328

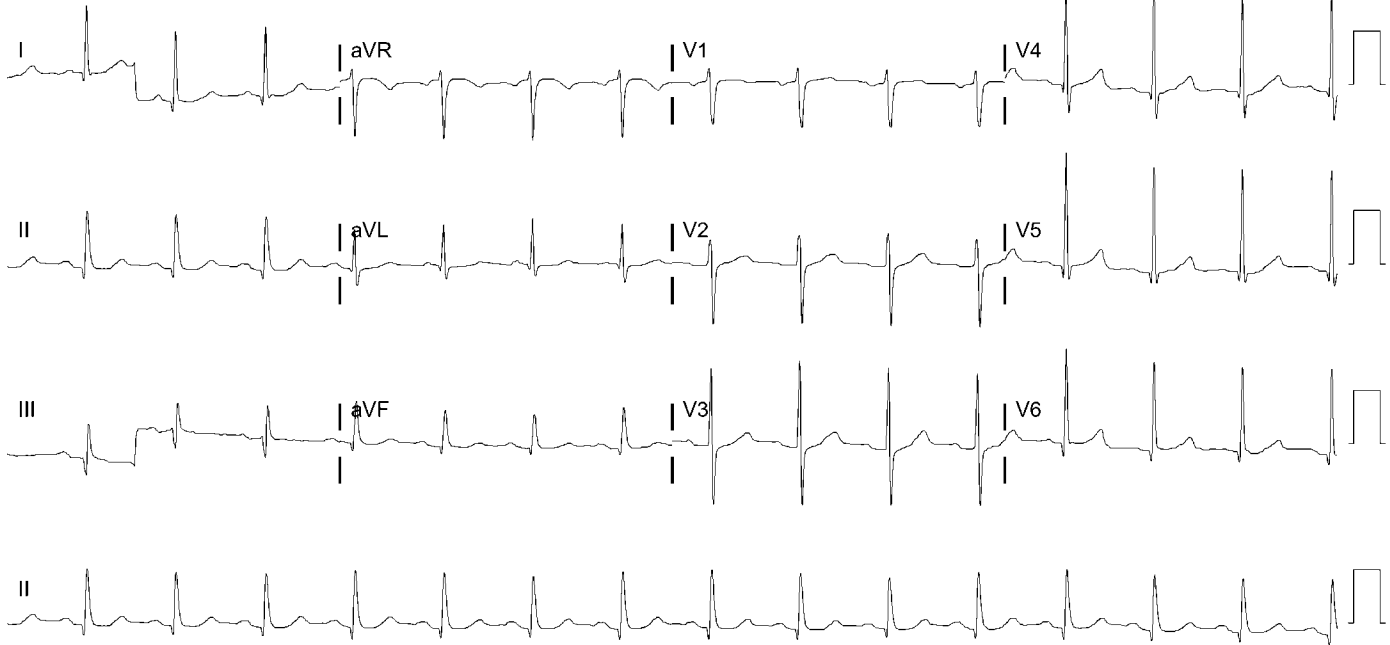
Chino Valley Medical Center
Dept
Room 260
Tech EDNR1

RX
DX
Rate 89 Sinus rhythm
PR 173 Electronically Signed On 6-29-2020 6:49:14 PDM by Frank Ornelas
QRSd 91
QT 378
QTc 460
--Axis--
P 37
QRS 47
T 16

Req Provider: Francisco Ornelas
V# V00000905328
Site Code: CVMC
Category: EKG
20

- Normal ECG -

Confirmed By: Frank Ornelas 06/29/2020 06:49:14



Philips PageWriter TC

25 mm/sec

10.00 mm/mV

F 60~ 0.15 - 100 Hz

VERIFICATION RECORDS

Site Code: CVMC

Name: HANNA, ABBY J

Root: 00000905528

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE 1

NAME: HANNA ADELS
UNIT #: N000273781
ACCT #: V00000905328

ADMIT DATE: 06/01/20
DISCHARGE DATE: 06/03/20
STATUS: S I N

AGE: 74
SEX: M

CODED ALLERGIES: net ocl opr ani de (From REGLAN)
CODED ADRS:
UNCODED ALLERGIES: PATIENT ALLERGIES NOT ENTERED
UNCODED ADRS:

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20

START/
STOP

*** CONTINUED ON PAGE 2 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 2

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:	START/STOP
0000 06/01/20 to 2359 06/01/20 (Continued)	

SCD UN CHL 0.9% 1,000 ML
(SCD UN CHL OR DE 0.9% 1,000 ML BAG)
 125 MLS/HR IV (SEE TIME/CRZ)
 % #: 00449959

START/STOP	DETAILS
06/01/20	EDOC 0012 EDICH at 0018 CRVE: 1,000 MLS
06/01/20	-----MEDICATION ADMINISTRATION DETAILS-----
	Route of Administration: INTERVENOUS
	Injection Site:
	IV Site: LH
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	IV Rate: 125.0 MLS/HR IV Start Time: 0018 IV End Time:
	Total Amount Infused: (MIS)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Y Transfer Time: 0237
	** Document VS If Applicable **
	Temperature/F:
	Pulse:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	EDOC 06/01/20-0018 by zHNEN
	EDOC 06/01/20-1040 by EDGB
	TERMINAL changed from ERPC01.2 to ERPC02.1
	Old Quotes: -----MEDICATION ADMINISTRATION DETAILS-----
	Route of Administration: INTERVENOUS
	Injection Site:
	IV Site: LH
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	IV Rate: 125.0 MLS/HR IV Start Time: 0018 IV End Time:
	Total Amount Infused: (MIS)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VS If Applicable **
	Temperature/F:
	Pulse:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	New Quotes: -----MEDICATION ADMINISTRATION DETAILS-----
	Route of Administration: INTERVENOUS
	Injection Site:
	IV Site: LH
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	IV Rate: 125.0 MLS/HR IV Start Time: 0018 IV End Time:

*** CONTINUED ON PAGE 3 ***
 This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 3

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

Total Amount Infused: (MIS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Y Transfer Time: 0237
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:
 ENTER 0012 DRORNER
 MO 0016 EDWIN
 DO 0811 SCHMIDTKE

KLOR CON MEO (POTASSI UM CHLOR IDE 20 MEQ TAB PRF. SR)

60 MEQ DO QUE CIME/ONE

Comments: DO NOT CRUSH
AVAILABLE IN PKGS: 2M, 2N, 2S, CL, ER, OCC
SN #: 004269946

06/01/20
06/01/20

0.46 BIRD at 0.51 QWB: 60 MEQ
 NDC/DIR: (SOURCE: H08)
 02453 999 K70 - Potassium Chloride 20 Eq Tab..
 ---MEDICATION ADMINISTRATION DETAILS---
 Route of Administration: ORAL
 Injection Site:
 IV Site:
 Document Type of Fluid Used to Mix Medication If Applicable:
 :
 IV Rate: MLS/HR IV Start Time: IV End Time:
 Total Amount Infused: (MIS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Transfer Time:
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:
 FDOC 05/01/20-0152 by SHAD
 ENTER 0147 DRORNER
 DO 0147 SCHEDULEL
 AO 0151 FRAD

*** CONTINUED ON PAGE 4 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 4

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V00000905328

ADMINISTRATION PERIOD:	START/STOP
0000 06/01/20 to 2359 06/01/20 (Continued)	

MAG OX 400 (MAGNESIUM OXIDE 400 MG TAB)

400 MG PO Q3H TID/PRN

Comments: AVAILABLE IN PYXIS: 2M2, 2M, 2N, 2S, ED, ICG

RX #: 00449947

06/01/20	0136 BIDE at 0137 GMB: 400 MG
06/01/20	NDG/BN: (SOURCE: MDR)
	100670028 MW - Magnesium Oxide 400 MG Tab
	---MEDICATION ADMINISTRATION DETAILS---
	Route of Administration: ORAL
	Injection Site:
	IV Site:
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	IV Rate: MGS/HR IV Start Time: IV End Time:
	Total Amount Infused: (ML)
	TV Push Start Time: TV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document V0 If Applicable **
	Temperature/PR:
	Pulse:
	Respirations:
	Blood Pressure:
	Brain Scale:
	Comment:
	PDCC 06/01/20-0152 by RMD
	ENTER 0147 DRCPNER
	DO 0147 SCHEDLER
	MO 0152 RMD

*** CONTINUED ON PAGE 5 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 5

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

COLACE (Docusate Sod 100 MG CAP)

100 MG PO TWICE A DAY

Spec Ins: Constipation.

Thank you very much!
Comments: AVAILABLE IN FIXES: 2M, 2M2, 2N, 2S, ED, ICD, ICD OF
FOR EM
TX #: 00449035

06/01/20
07/01/20

ENTER 0200 MCHADPARES
ED 0251 VENULOL
*0900 NURSEL at 0909 REFUSED
NDC/DIN: (SOURCE: eMAR)
6068/1291L 03L100 - Docusate Sodium 100 MG Cap

---MEDICATION ADMINISTRATION DETAILS---
Route of Administration: ORAL
Injection Site:
IV Site:

Document Type of Fluid Used to Mix Medication, if Applicable:
:
TV Rate: MGS/HR IV Start Time: TV End Time:
Total Amount Infused: (MGS)
TV Push Start Time: TV Push Stop Time:
Med Still Infusing at Transfer: Transfer Time:

** Document VS If Applicable **
Temperature/F:
Pulse:
Respirations:
Blood Pressure:
Pain Scale:

Comment:
FOC 06/01/20-0913 by NURSEL
20 0909 MAR66L

2100 NURSEL at 2115 GAVE: 100 MG
NDC/DIN: (SOURCE: eMAR)
6068/1291L 03L100 - Docusate Sodium 100 MG Cap

---MEDICATION ADMINISTRATION DETAILS---
Route of Administration: ORAL
Injection Site:
IV Site:

Document Type of Fluid Used to Mix Medication, if Applicable:
:
TV Rate: MGS/HR IV Start Time: TV End Time:
Total Amount Infused: (MGS)
TV Push Start Time: TV Push Stop Time:
Med Still Infusing at Transfer: Transfer Time:

** Document VS If Applicable **
Temperature/F:
Pulse:
Respirations:
Blood Pressure:
Pain Scale:

Comment:
FOC 06/01/20-2115 by NURSEL

*** CONTINUED ON PAGE 6 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 6

NAME: HANNA ADEL S

UNIT #: M00273781

KEY #: V00000905328

ADMINISTRATION PERIOD:

0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

*** CONTINUED ON PAGE 7 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 7

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

SDI UM CHL 0.9% 1,000 ML
(SDI UM CHL OR DE 0.9% 1,000 ML BAG)
100 MGS/HR IV CONTINUOUS
Spec Test: IVF Hydration.
Thank you very much!
RX #: 0041499a1

06/01/20	ENTER 0200 IRCHADARES
07/01/20	ED 0250 VENLLO1
	Z0 0509 NURC7E
	0700 NURC7E at 0603 GAVE: 1,000 MLG
	REC'DIN: (SOURCE: eBAR)
	026478009
	NS1000 - Sodium Chloride 0.9% 1,000 ML..
	----MEDICATION ADMINISTRATION DETAILS----
	Route of Administration: INTAVENOUS
	Injection Site:
	IV Site: LH
	Document Type of Fluid Used to Mix Medication, if Applicable:
	:
	IV Rate: 100.0 MGS/HR IV Start Time: IV End Time:
	Total Amount Infused: 1000 (MGS)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VS If Applicable **
	Temperature/F:
	Pulse:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	FOC 06/01/20-0603 by NURC7E
	** 500 NURAR1 at 1606 INTAVENOUS
	FOC 06/01/20-1606 by NURAR1
	2300 NURC8L at 2115 GAVE: 1,000 MLG
	----MEDICATION ADMINISTRATION DETAILS----
	Route of Administration: INTAVENOUS
	Injection Site:
	IV Site:
	Document Type of Fluid Used to Mix Medication, if Applicable:
	:
	IV Rate: MGS/HR IV Start Time: IV End Time:
	Total Amount Infused: (MGS)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VS If Applicable **
	Temperature/F:
	Pulse:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	FOC 06/01/20-2115 by NURC8L

*** CONTINUED ON PAGE 8 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 8

NAME: HANNA ADEL S

UNIT #: M00273781

NYCT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

ASPIRIN EC (ASPIRIN 81 MG TABLET)

81 MG PO QDLY

Comments: AVAILABLE IN PKTS: 2M, 2G, 2D, 10M, 2M, 10G OF
ENTERIC COATED - DO NOT CRUSH

RX #: 004199a3

06/01/20

07/01/20

ENTER 0200 DRCHAZAPES

EO 0251 VEMLE01

0900 NUSARI at 0900 GANT: 81 MG

MEC/DIN: (SOURCE: eBAR)

63/382121C

ECC01 - Aspirin 81 MG Tabec

----MEDICATION ADMINISTRATION DETAILS----

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication, If Applicable:

:

IV Rate: MG/HR IV Start Time: IV End Time:

Total Amount Infused: (MG)

IV Flush Start Time: IV Flush Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document VS If Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comments:

FROM 06/01/20-0913 by MICHAEL

AO 0910 NUSARI

*** CONTINUED ON PAGE 9 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 9

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

LOPRESSOR (METOPROLOL TARTRATE 25 MG TABLET)

12.5 MG PO TWICE A DAY

Dose Ins: HOLD IF SBP <120 OR HR <60/MIN

Spec Ins: acm protocol

Comments: AVAILABLE IN PKGS: 2M, 2N, 2S, 3L, 6L, 10U

** BLACK BOX WARNING, REFER TO MICROMEDEX **

RX #: 00429958

06/01/20

07/01/20

ENTER 0200 IRCHADRES

ED 0251 VENNLO1

0900 NURSEL at 0909 GAVE: 12.5 MG

MDC/DIN: (SOURCE: eMAR)

6258/2651

L0P25

- Metoprolol Tartrate 25 MG Tablet

---MEDICATION ADMINISTRATION DETAILS---

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication, if Applicable:

:

TV Rate: MGS/HR IV Start Time: TV End Time:

Total Amount Infused: (MS)

TV Push Start Time: TV Push Stop Time:

Med Still Infusing at Consent: Transfer Time:

** Document VS If Applicable **

Temperature/F:

Pulse: 68

Respirations:

Blood Pressure: 145/79

Pain Scale:

Comment:

FDC 05/01/20-0913 by NURSEL

20 0909 MAR66L

2100 NURSEL at 2114 GAVE: 12.5 MG

MDC/DIN: (SOURCE: eMAR)

6258/2651

L0P25

- Metoprolol Tartrate 25 MG Tablet

---MEDICATION ADMINISTRATION DETAILS---

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication, if Applicable:

:

TV Rate: MGS/HR IV Start Time: TV End Time:

Total Amount Infused: (MS)

TV Push Start Time: TV Push Stop Time:

Med Still Infusing at Consent: Transfer Time:

** Document VS If Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comment:

FDC 05/01/20-2115 by NURSEL

*** CONTINUED ON PAGE 10 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 10

NAME: HANNA ADEL S

UNIT #: M000273781

NYT #: V00000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

LIPITOR (ATORVASTATIN 10 MG TAB)
10 MG PO EVERY EVENING
Spec Ins: acc protocol
Comments: AVAILABLE IN PIXIS: ICC, 23, 24, 2K2, 2N
RX #: 00419924

06/01/20	ENTER 0200 DRCHAZAPES
07/01/20	EO 0251 VENELO1
	AO 1932 NUREST
	2100 NURESL at 2111 GAVE: 10 MG
	NEC/DIN: (SOURCE: eMAR)
	0904629062
	-----MEDICATION ADMINISTRATION DETAILS-----
	Route Of Administration: ORAL
	Injection Site:
	IV Site:
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	IV Rate: MG/HR IV Start Time: IV End Time:
	Total Amount Infused: (MG)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VS If Applicable **
	Temperature/s:
	Pulse:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	FOO: 05/01/20-2115 by NUREST

*** CONTINUED ON PAGE 11 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 11

NAME: HANNA ADEL S

UNIT #: M000273781

NYT #: V00000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

ZESTRA L/PRI N/M L (LISINAPRIL 5 MG TABLET)

5 MG PO QDLY

Spec Ins: was protocol

hold if SBP below 120

Comments: HOLD IF SBP <100

RX #: 00429957

06/01/20

07/01/20

ENTER 0200 DRCHADRES

ED 0251 VENTL01

0500 NURSEL at 0500 GIVE: 5 MG

NDC/DIN: (SOURCE: eMAR)

09046/9/62

ZES5

- Lisinopril 5 MG Tablet

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

TV Site:

Document Type of Fluid Used to Mix Medication if Applicable:

:

TV Rate: MCS/HR TV Start Time: TV End Time:

Total Amount Infused: (MIS)

TV Push Start Time: TV Push Stop Time:

Med Still Infusing at Closeout: Transfer Time:

** Document WS if Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comment:

POC 06/01/20-0913 by NURSEL

ZZ 0509 MAR62L

*** CONTINUED ON PAGE 12 ***

This document is part of the legal medical record.

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

PPI LOSEC (OMEPRAZOLE 20 MG CAPS)

20 MG PO TWICE A DAY BEFORE MEALS

Comments: AVAILABLE IN PAYS: 24, 24Z, 2N, 2S, ED, IG, IGO OF
SUBSTITUTION MEDICATION FROM THE FOLLOWING:
SUBSTITUTE FOR PROTONIX/ PREVACID/ NEXIUM PER HOSPITAL
FORMULARY; GIVE BEFORE MEAL
*** DO NOT CRUSH OR CHEW ***
TX #: 00449953

06/01/20
07/01/20

ENTER 0316 DISCHARGES
ED 0324 VENDOR
70 0569 NURSE
0700 NURSE at 0646 GAVE: 20 MG
NDC/DIN: (SOURCE: eMAR)
502960191L
PR120 - Omeprazole 20 MG Caps

-----MEDICATION ADMINISTRATION DETAILS-----
Route of Administration: ORAL
Injection Site:
IV Site:
Document Type of Fluid Used to Mix Medication, if Applicable:
:
IV Rate: MCS/HR IV Start Time: IV End Time:
Total Amount Infused: (MS)
IV Push Start Time: IV Push Stop Time:
Med Still Infusing at Transfer: Transfer Time:
** Document VS If Applicable **
Temperature/F:
Pulse:
Respirations:
Blood Pressure:
Pain Scale:
Comment:
FDC 06/01/20-0647 by NURSE

1630 NURSE at 1634 GAVE: 20 MG
NDC/DIN: (SOURCE: eMAR)
502960191L
PR120 - Omeprazole 20 MG Caps

-----MEDICATION ADMINISTRATION DETAILS-----
Route of Administration: ORAL
Injection Site:
IV Site:
Document Type of Fluid Used to Mix Medication, if Applicable:
:
IV Rate: MCS/HR IV Start Time: IV End Time:
Total Amount Infused: (MS)
IV Push Start Time: IV Push Stop Time:
Med Still Infusing at Transfer: Transfer Time:
** Document VS If Applicable **
Temperature/F:
Pulse:
Respirations:
Blood Pressure:
Pain Scale:
Comment:
FDC 06/01/20-1636 by NURSE

*** CONTINUED ON PAGE 13 ***
This document is part of the legal medical record.

NAME: HANNA ADEL S UNIT #: M00273781 NCTT #: V00000905328

ADMINISTRATION PERIOD: 0000 06/01/20 to 2359 06/01/20 (Continued)	START/ STOP
--	----------------

ZOFTRAN (ONDANSETRON HCL 4 MG/2 ML VIAL)
4 MG EQ EVERY 4 HOURS AS NEEDED/PRN
 PRN Reason: NAUSEA/VOMITING
 Spec Ins: Nausea/Vomiting.
 Thank you very much!
 Comments: AVAILABLE IN PKGS: 2M, 24P, 2N, 2S, 6I, 3D, 10I, 6T, 6P,
 10I, 6P
 MAY CAUSE DROWSINESS
 RX #: 00449951

06/01/20	ENTER 0200	DRUGSAPES
07/01/20	ED 0251	VENLL01

TYLENOL (ACETAMINOPHEN 325MG TAB)
650 MG EQ EVERY 6 HOURS AS NEEDED/PRN
 PRN Reason: TEMP > 100.4/ HEADACHE
 Spec Ins: PRN temp > 100.4 or headache
 Thank you very much!
 Comments: FOR TEMP > 100.4, HEADACHE, AND MILD PAIN
 ACETAMINOPHEN IS NOT TO EXCEED 3250MG/DAY!
 AVAILABLE IN PKGS: 2N, 2S, 6D, 10U, 6P5
 RX #: 00449952

06/01/20	ENTER 0200	DRUGSAPES
07/01/20	ED 0251	VENLL01

NORCO 7.5/325 TABLET (HYDROCODONE/APAP 7.5/325 TAB)
1 TAB EQ EVERY 4 HOURS AS NEEDED/PRN
 PRN Reason: MODERATE PAIN (4-6)
 Spec Ins: Pain.
 Thank you very much!
 Comments: AVAILABLE IN PKGS: 24, 2N, 2S, 10U, 6I, 6D
 SUBSTITUTE FOR VICODIN ES PER HOSPITAL SUPPLIARY
 MAY CAUSE DROWSINESS
 ACETAMINOPHEN IS NOT TO EXCEED 3250MG/DAY!
 RX #: 00449956

06/01/20	ENTER 0200	DRUGSAPES
06/02/20	ED 0251	VENLL01

*** CONTINUED ON PAGE 14 ***
 This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 14

NAME: HANNA ADEL S

UNIT #: M00273781

NYCT #: V0000905328

ADMINISTRATION PERIOD:

0000 06/01/20 to 2359 06/01/20 (Continued)

START/
STOP

MORPHINE SULFATE (MORPHINE SULFATE 2 MG/ML SYR)

2 MG BY EVERY 3 HOURS AS NEEDED/PRN
PRN Reason: SEVERE PAIN (7-10)
Spec Inst: Pain.

06/01/20 ENTER 0200 DRCHAPANS
06/05/20 ED 0231 VENNLOI

Thank you very much!
Comments: AVAILABLE IN FXIS: 2H, 2N, 2S, CL, EL, GI, ICU, OR
MAY CAUSE DROWSINESS
RX #: 00449909

NITROSTAT (NITROGLYCERIN 0.4 MG TAB)

0.4 MG ST. EVERY 4 HOURS AS NEEDED/PRN
PRN Reason: FOR PRP > 160, DEP>100
Spec Inst: chest pain.

06/01/20 ENTER 0200 DRCHAPANS
07/01/20 PD 0251 VENNLOI

Comments: AVAILABLE IN FXIS: 2H, 2S, ED, ICU, OPS, OR
QS PATH. FOR CHEST PAIN; NXX3
*** DO NOT CRUSH ***
RX #: 00449980

*** CONTINUED ON PAGE 15 ***
This document is part of the legal medical record.

06/ 09/ 20

MEDICATION DISCHARGE SUMMARY

PAGE: 15

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:	START/STOP	
0000 06/01/20 to 2359 06/01/20 (Continued)		

TUMS (CALCIUM CARBONATE 500 MG CHEW 500 MG PG 3 TABLETS A DAY: 0900,1300,2100/BRN 3rd Reason: GERD Comments: AVAILABLE IN PKTGS: TBL, PG, 2M CHEW TABLET RX #: 004149952	06/01/20	ENTER 0316 DISCHARGES
	07/01/20	ED 0334 VENUELOL 741 0355 NURETE 0356 NURETE at 0356 GRNT: 500 MG MED/DIR: (SOURCE: eMAR) 6868/98853 TMS - Calcium Carbonate 500 MG Chew ----MEDICATION ADMINISTRATION DETAILS---- Route of Administration: ORAL Injection Site: IV Site: Document Type of Fluid Used to Mix Medication, If Applicable: : : IV Rate: MG/HR IV Start Time: IV End Time: Total Amount Infused: (ML) IV Flush Start Time: IV Flush Stop Time: Med Still Infusing at Discharge: Transfer Time: ** Document VS If Applicable ** Temperature/PR: Pulse: Respirations: Blood Pressure: Pain Scale: Comment: ELEM 06/01/20-0356 by NURETE

ADMINISTRATION PERIOD:	START/STOP	
0000 06/02/20 to 2359 06/02/20		

*** CONTINUED ON PAGE 16 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 16

NAME: HANNA ADEL S

UNIT #: M00273781

NYCT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/02/20 to 2359 06/02/20 (Continued)

START/
STOP

COLACE (Docusate Sod 100 MG CAP)

100 MG PO THREE A DAY

Spec Ins: Constipation.

Comments: AVAILABLE IN FIXES: 2M, 2M2, 2N, 2S, ED, ICD, ICU OF
FOR EM

TX #: 00449935

06/01/20
07/01/20

0900 NURDEL at 0910 GIVE: 100 MG
NDC/INN: (SOURCE: NURS)

0904645862

03L100

- Docusate Sodium 100 MG Cap

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication If Applicable:

IV Rate: mL/HR IV Start Time: IV End Time:

Total Amount Infused: (ML)

IV Push Start Time: IV Push Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document V# If Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comment:

FOCC 06/02/20-0915 by NURAB

2100 NURDEL at 2111 GIVE: 100 MG

NDC/INN: (SOURCE: NURS)

0904645862

03L100

- Docusate Sodium 100 MG Cap

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication If Applicable:

IV Rate: mL/HR IV Start Time: IV End Time:

Total Amount Infused: (ML)

IV Push Start Time: IV Push Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document V# If Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comment:

FOCC 06/02/20-2111 by NURDST

*** CONTINUED ON PAGE 17 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 17

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/02/20 to 2359 06/02/20 (Continued)

START/
STOP

SODIUM CHL 0.9% 1,000 ML
(SODIUM CHLORIDE 0.9% 1,000 ML BAG)
100 MG/HR IV CONTINUOUS
Spec Test: IVF Hydration.
Thank you very much!
RX #: 0041499sl

06/01/20	0700 NURSE1 at 0641 GAVE: 1,000 ML
07/01/20	-----MEDICATION ADMINISTRATION DETAILS-----
	Route of Administration: INTRAVENOUS
	Injection Site:
	IV Site:
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	TV Rate: MG/HR IV Start Time: TV End Time:
	Total Amount Infused: (MG)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VS If Applicable **
	Temperature/F:
	R: set:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	FLOR 06/02/20-0641 by NURSE1
	1500 NURSE1 at 1707 GAVE: 1,000 ML
	NDC/LOT: (SOURCE: eMAR)
	0264780028 NS1000 - Sodium Chloride 0.9% 1,000 ML...
	-----MEDICATION ADMINISTRATION DETAILS-----
	Route of Administration: INTRAVENOUS
	Injection Site:
	IV Site: LB
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	TV Rate: MG/HR IV Start Time: TV End Time:
	Total Amount Infused: (MG)
	IV Push Start Time: IV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VS If Applicable **
	Temperature/F:
	R: set:
	Respirations:
	Blood Pressure:
	Pain Scale:
	Comment:
	1000 06/02/20-1707 by NURSE1
	2300 NURSE1 at 2141 GAVE: 1,000 ML
	-----MEDICATION ADMINISTRATION DETAILS-----
	Route of Administration: INTRAVENOUS
	Injection Site:
	IV Site:

*** CONTINUED ON PAGE 18 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 18

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:

0000 06/02/20 to 2359 06/02/20 (Continued)

START/
STOP

Document Type of Fluid Used to Mix Medication If Applicable:
 :
 IV Rate: MGS/HR IV Start Time: IV End Time:
 Total Amount Infused: (MLS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Transfer Time:
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:
 PDOC 05/02/20-2141 by NURDST.

ASPIRIN EC (ASPIRIN 81 MG TABLET)

81 MG PO TABLET

Comments: AVAILABLE IN PACKS: 2N, 2S, ED, 10U, 2M, 10U OF ENTERIC COATED - DO NOT CRUSH.

RX #: 00449953

06/01/20 0500 NURSEL at 0910 GAVE: 81 MG
 07/01/20 NDC/WH: (SOURCE: eMAR) E008L - Aspirin 81 MG Tablet
 5/8/9698112
 ----MEDICATION ADMINISTRATION DETAILS----
 Route of Administration: ORAL
 Injection Site:
 IV Site:
 Document Type of Fluid Used to Mix Medication If Applicable:
 :
 IV Rate: MGS/HR IV Start Time: IV End Time:
 Total Amount Infused: (MLS)
 IV Push Start Time: IV Push Stop Time:
 Med Still Infusing at Transfer: Transfer Time:
 ** Document VS If Applicable **
 Temperature/F:
 Pulse:
 Respirations:
 Blood Pressure:
 Pain Scale:
 Comment:
 PDOC 05/02/20-0915 by NURDST.

*** CONTINUED ON PAGE 19 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 20

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD: 0000 06/02/20 to 2359 06/02/20 (Continued)	START/ STOP	
--	----------------	--

ZESTRA L/PRI N M L (LISI NCFR L 5 MG TABLET)

5 MG PO QDLY

Spec Ins: was protocol

Hold if SBP below 120

Comments: HOLD IF SBP <100

RX #: 00429937

06/01/20	0900 NUBAEL at 0900 QWED: 5 MG
07/01/20	MDX/DIN: (SOURCE: eDDE)
	0904679762 ZB55 - Lisinopril 5 MG Tablet
	---MEDICATION ADMINISTRATION DETAILS---
	Route of Administration: ORAL
	Injection Site:
	IV Site:
	Document Type of Fluid Used to Mix Medication If Applicable:
	:
	IV Rate: MGS/HR IV Start Time: IV End Time:
	Total Amount Infused: (ML)
	TV Push Start Time: TV Push Stop Time:
	Med Still Infusing at Transfer: Transfer Time:
	** Document VA If Applicable **
	Temperature/PR:
	Pulse:
	Respirations:
	Blood Pressure:
	Brain Scale:
	Comment:
	POCC 06/02/20-0915 by NUBAR

*** CONTINUED ON PAGE 21 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 21

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/02/20 to 2359 06/02/20 (Continued)

START/
STOP

P1 LOSEC (OMEPRAZOLE 20 MG CAPS)

20 MG PO TWICE A DAY BEFORE MEALS

Comments: AVAILABLE IN PYXIS: 24, 24Z, 24, 25, ED, K0, K00, K00 WF
SUBSTITUTION FROM THE FOLLOWING:
SUBSTITUTE FOR PROTONIX/ PREVACID/ NEXIUM PER HOSPITAL
FORMULARY; GIVE BEFORE MEAL
*** DO NOT CRUSH OR CHEW ***
NY #: 00449953

06/01/20
07/01/20

0700 NURSE at 0601 GAVE: 20 MG
NDC/DIN: (SOURCE: 000E)
502866191
EPI20 - Omeprazole 20 MG Capsul

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication: "A" Applic'le:

IV Rate: MGS/HR IV Start Time: IV End Time:

Total Amount Infused: (ML)

IV Push Start Time: IV Push Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document VA If Applicable **

Temperature/F:

Pulse:

Respiration:

Blood Pressure:

Pain Scale:

Comment:

FOOC 06/02/20-0641 by NURSE:

1630 NUSAEI at 1603 GAVE: 20 MG

NDC/DIN: (SOURCE: 000E)

502866191
EPI20 - Omeprazole 20 MG Capsul

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication: "A" Applic'le:

IV Rate: MGS/HR IV Start Time: IV End Time:

Total Amount Infused: (ML)

IV Push Start Time: IV Push Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document VA If Applicable **

Temperature/F:

Pulse:

Respiration:

Blood Pressure:

Pain Scale:

Comment:

FOOC 06/02/20-1707 by NURSE:

*** CONTINUED ON PAGE 22 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 22

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/02/20 to 2359 06/02/20 (Continued)

START/
STOP

LEVI SCAN (RESPROSCON 0.08 MG ML SYR)
0.4 MG IV Q330(1530)
RX #: 004150657

06/02/20 ENTER 1445 FXLAJ
06/02/20 1530
DX: 1830 SCHEDULED

topROL XL 25 MG (METOPROLOL SUCCINATE 25 MG TAB ER 24H)
25 MG PO ERLY
Spec Inst: **HOLD IF SBP IS LESS THAN 100 OR HR IS LESS THAN 60**
Comments: AVAILABLE IN PPKTS: 2M, 4M, 2N, 1CU
*** DO NOT CRUSH ***
RX #: 004150679

06/03/20 ENTER 1602 DRCHOET
07/03/20 ED 1610 FOKK
FD 1610 FOKK

ADMINISTRATION PERIOD:
0000 06/03/20 to 2359 06/03/20

START/
STOP

COLACE (Docusate Sod 100 MG CAP)
100 MG PO BICEL A DAY
Spec Inst: Constipation.
Thank you very much!
Comments: AVAILABLE IN PPKTS: 2M, 2M2, 2N, 2S, ED, 1CU, 1CU 3F
FOR EM
RX #: 004149935

06/01/20 0900 NURSED at 0852 QMED: 100 MG
07/01/20 MDX/PHN: (SUNBEL: 8604) COLACE - Docusate Sodium 100 MG Cap
090444556
====MEDICATION ADMINISTRATION DETAILS====
Route of Administration: ORAL
Injection Site:
IV Site:
Document Type of Fluid Used to Mix Medication If Applicable:
IV Rate: MLS/HR IV Start Time: IV End Time:
Total Amount Infused: (ML)
TV Push Start Time: TV Push Stop Time:
Med Still Infusing at Transfer: Transfer Time:
** Document V8 If Applicable **
Temperature/F:
Pulse:
Respirations:
Blood Pressure:
Pain Scale:
Comment:
FOOC 05/03/20-0853 by NURMRA
*2100 NURSTG at 2108 REFUSED
FOOC 05/03/20-2108 by NURJG
DX: 2113 DISCHARGE

*** CONTINUED ON PAGE 23 ***
This document is part of the legal medical record.

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD: 0000 06/03/20 to 2359 06/03/20 (Continued)	START/ STOP	
<p>SCIIUM CHL 0.9% 1,000 ML (SCIIUM CHLOR DE 0.9% 1,000 ML BAG) 100 ML/HR IV CONTINUOUS Spc Ins: IVF Hydration. Thank you very much! RX #: 0041499sl</p>	<p>06/01/20 07/01/20</p>	<p>0700 NURSE1 at 0729 GAVE: 1,000 ML -----MEDICATION ADMINISTRATION DETAILS----- Route of Administration: INTRAVENOUS Injection Site: IV Site: Document: Type of Fluid Used to Mix Medication If Applicable: : IV Rate: ML/HR IV Start Time: IV End Time: Total Amount Infused: (MLS) IV Push Start Time: IV Push Stop Time: Med Still Infusing at Transfer: Transfer Time: ** Document V# If Applicable ** Temperature/F: Pulse: Respirations: Blood Pressure: Pain Scale: Comment: FOOC 06/02/20-0729 by NURMML 1500 NURMBA at 1539 GAVE: 1,000 ML -----MEDICATION ADMINISTRATION DETAILS----- Route of Administration: INTRAVENOUS Injection Site: IV Site: Document: Type of Fluid Used to Mix Medication If Applicable: : IV Rate: ML/HR IV Start Time: IV End Time: Total Amount Infused: (MLS) IV Push Start Time: IV Push Stop Time: Med Still Infusing at Transfer: Transfer Time: ** Document V# If Applicable ** Temperature/F: Pulse: Respirations: Blood Pressure: Pain Scale: Comment: FOOC 06/03/20-1540 by NURMBA DC 2113 DISCHARGE</p>

*** CONTINUED ON PAGE 24 ***
 This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 25

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD: 0000 06/03/20 to 2359 06/03/20 (Continued)	START/ STOP	
ZESTRA L/PRI N M L (LISI NCFR L 5 MG TABLET) 5 MG PO QDLY Spec: Ins: was protocol hold if SBP below 120 Comments: HOLD IF SBP <100 RX #: 00429937	06/01/20 07/01/20	0900 NUMBER at 0252 QNED: 5 MG MDC/DIC: (SOURCE: eDDE) 0904679762 ZB55 - Lisinopril 5 MG Tablet ---MEDICATION ADMINISTRATION DETAILS--- Route of Administration: ORAL Injection Site: IV Site: Document Type of Fluid Used to Mix Medication If Applicable: : IV Rate: MGS/HR IV Start Time: IV End Time: Total Amount Infused: (ML) TV Push Start Time: TV Push Stop Time: Med Still Infusing at Transfer: Transfer Time: ** Document VO If Applicable ** Temperature/SR: Pulse: Respirations: Blood Pressure: Skin Scale: Comment: FOOC 06/03/20-0853 by NURMBA DC 2113 DISCHARGE

*** CONTINUED ON PAGE 26 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 26

NAME: HANNA ADEL S

UNIT #: M00273781

NYT #: V0000905328

ADMINISTRATION PERIOD:
0000 06/03/20 to 2359 06/03/20 (Continued)

START/
STOP

P1 LOSEC (OMEPRAZOLE 20 MG CAPS)

20 MG PO TWICE A DAY BEFORE MEALS

Comments: AVAILABLE IN PYXIS: 24, 24Z, 28, 28Z, ED, K0, K0Z
SUBSTITUTION FROM THE FOLLOWING:
SUBSTITUTE FOR PROTONIX/ PREVACID/ NEXIUM PER HOSPITAL
FORMULARY; GIVE BEFORE MEAL
*** DO NOT CRUSH OR CHEW ***
TX #: 00449953

06/01/20
07/01/20

0700 NURSD at 0729 GAVE: 20 MG
NDC/DIN: (SOURCE: 000E)
502856131L H1120 - Omeprazole 20 MG Capsul

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication If Applicable:

IV Rate: MGS/HR IV Start Time: IV End Time:

Total Amount Infused: (ML)

IV Push Start Time: IV Push Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document VA If Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comment:

FOCC 06/03/20-0729 by NURSD

1630 NURSD at 1629 GAVE: 20 MG

NDC/DIN: (SOURCE: 000E)

502856131L H1120 - Omeprazole 20 MG Capsul

====MEDICATION ADMINISTRATION DETAILS====

Route of Administration: ORAL

Injection Site:

IV Site:

Document Type of Fluid Used to Mix Medication If Applicable:

IV Rate: MGS/HR IV Start Time: IV End Time:

Total Amount Infused: (ML)

IV Push Start Time: IV Push Stop Time:

Med Still Infusing at Transfer: Transfer Time:

** Document VA If Applicable **

Temperature/F:

Pulse:

Respirations:

Blood Pressure:

Pain Scale:

Comment:

FOCC 06/03/20-1640 by NURSD

DC 2113 DISCHARGE

*** CONTINUED ON PAGE 27 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 27

NAME: HANNA ADEL S

UNIT #: M00273781

NYCT #: V0000905328

ADMINISTRATION PERIOD: 0000 06/03/20 to 2359 06/03/20 (Continued)	START/ STOP	
--	----------------	--

**TOPROL XL 25 MG (METOPROLOL SUCCINATE 25 MG TAB ER 24H)
25 MG PO QDLY**
Spec Ins: **HOLD IF SBP IS LESS THAN 100 OR HR IS LESS THAN 60**
Comments: AVAILABLE IN FXXIS: 24, 250, 20, 100
*** DO NOT CRUSH ***
RX #: 004150679

06/03/20	DC 0853 NURMA	
07/03/20	0300 NURMA at 0853 GIVE: 25 MG	
	IND/DIN: (SOURCE: eDPS)	TOPROL XL Metoprolol Succinate 25 MG Tab.
	096463226	
---MEDICATION ADMINISTRATION DETAILS---		
Route of Administration: ORAL		
Injection Site:		
TV Site:		
Document Type of Fluid Used to Mix Medication: N/A Applicable:		
:		
IV Rate:	ML/HR	IV Start Date: IV End Time:
		(M/S)
	Total Amount Infused:	
	TV Push Start Time:	TV Push Stop Time:
	Med Start/Infusing at Transfer:	Transfer Time:
** Document VS If Applicable **		
Temperature/PR:		
Pulse:		
Respirations:		
Blood Pressure:		
Pain Scale:		
Comment:		
EDCC 06/03/20-0853 by NURMA		
DC 2113 DISCHARGE		

**ZOFRAN (ONDANSETRON HCL 4 MG 2 ML VIAL)
4 MG IV EVERY 4 HOURS AS NEEDED/PRN**
PRN Reason: NAUSEA/VOMITING
Spec Ins: Nausea/Vomiting.
Thank you very much!
Comments: AVAILABLE IN FXXIS: 20, 250, 20, 25, 01, 02, 03, 04, 05, 06, 07,
08, 09
MAY CAUSE DROWSINESS
RX #: 004149551

06/01/20	DC 2113 DISCHARGE
07/01/20	

*** CONTINUED ON PAGE 28 ***
This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 28

NAME: HANNA ADEL S

UNIT #: M00273781

NXT #: V00000905328

ADMINISTRATION PERIOD:

0000 06/03/20 to 2359 06/03/20 (Continued)

START/
STOP**TYLENOL (ACETAMINOPHEN 325MG TAB)****650 MG PO EVERY 6 HOURS AS NEEDED/PRN**

PRN Reason: TEMP > 100.4/ HEADACHE

Spec Ins: PRN temp > 100.4 or headache

06/01/20 DC 2113 DISCHARGE
07/01/20

Thank you very much!

Comments: FOR TEMP > 100.4, HEADACHE, AND MILD PAIN
ACETAMINOPHEN IS NOT TO EXCEED 3250MG/DAY!
AVAILABLE IN FXIS: 2N, 2S, ED, ICU, CPS

RX #: 00449952

NORCO 7.5/325 TABLET (HYDROCODONE/APAP 7.5/325 TAB)**1 TAB PO EVERY 4 HOURS AS NEEDED/PRN**

PRN Reason: MODERATE PAIN (4-6)

Spec Ins: Pain.

06/01/20 DC 2113 DISCHARGE
06/03/20

Thank you very much!

Comments: AVAILABLE IN FXIS: 2H, 2N, 2S, ICU, GI, ED
SUBSTITUTE FOR VIKODIN ES PER HOSPITAL FORMULARY
MAY CAUSE DROWSINESS
ACETAMINOPHEN IS NOT TO EXCEED 3250MG/DAY!

RX #: 00449956

MORPHINE SULFATE (MORPHINE SULFATE 2 MG/ML SYR)**2 MG IV EVERY 3 HOURS AS NEEDED/PRN**

PRN Reason: SEVERE PAIN (7-10)

Spec Ins: Pain.

06/01/20 DC 2113 DISCHARGE
06/03/20

Thank you very much!

Comments: AVAILABLE IN FXIS: 2H, 2N, 2S, CL, ED, GI, ICU, OR
MAY CAUSE DROWSINESS

RX #: 00449959

NITROSTAT (NITROGLYCERIN 0.4 MG TAB)**0.4 MG SQ EVERY 4 HOURS AS NEEDED/PRN**

PRN Reason: FOR SBP > 160, DBP>100

Spec Ins: chest pain.

Comments: AVAILABLE IN FXIS: 2H, 2S, ED, ICU, CPS, OR

QS RTN. FOR CHEST PAIN: NXX3

*** DO NOT CRUSH ***

RX #: 00449950

06/01/20 DC 2113 DISCHARGE
07/01/20

*** CONTINUED ON PAGE 29 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 29

NAME: HANNA ADEL S

UNIT #: M00273781

MYT #: V00000905328

ADMINISTRATION PERIOD:	START/STOP	
0000 06/03/20 to 2359 06/03/20 (Continued)		
TUMS (CALCIUM CARBONATE 500 MG CHEW 500 MG EC 3 TABLETS A DAY: 0900,1300,2100/BRN)	06/01/20 07/01/20	DC 2113 DISCHARGE
REF Reason: GEPD Comments: AVAILABLE IN PVTG: TCM, 2G, 2M CHEW TABLET RX #: 004129952		
ADMINISTRATION PERIOD:	START/STOP	
0000 06/03/20 to 2359 06/04/20		

*** CONTINUED ON PAGE 30 ***
This document is part of the legal medical record.

ADMINISTRATION PERIOD: 0000 06/04/20 to 2359 06/04/20 (Continued)	START/ STOP
--	----------------

LEGENDS

ACTIVITY CODES
 * - Not Administered
 AD - Nursing Acknowledged Order
 PD - Pharmacy Discontinuing
 VD - Pharmacy Edit or Verification
 ED00 - Nursing Edit Document
 ENTER - Order Entry
 FDOC - File Document

REASON CODES
 IMPUSING - IMPUSING - NOT DUE FOR CHANGE
 OCH - OTHER - SEE MEDICIN COMMENTS
 REFUSPD - DO REFUSED

SITE CODES

ELECTRONICALLY SIGNED BY

USER	USER NAME/TYPE	USER	USER NAME/TYPE	USER	USER NAME/TYPE	USER	USER NAME/TYPE
EDAD	Abachelli, Darin RN	EMKNI	Nguyen, Cindy D RN	MERSEL	Barreto, Elcio RN	KURCIB	Clovato, Tyrone B RN
NKJSL	Chesterfield, Sondra L RN	MURBEA	Marin Garcia, Elisse RN	MUSGUG	Sanzoval, Jackeline RN		

OTHER USERS

USER	USER NAME	USER	USER NAME	USER	USER NAME	USER	USER NAME
DEBAZAKEN	Khobulidina, Zorina	USCHSHF	Lhou, Stanley S	JKRNER	Ornelas, Francisco	RKJLJ	Liao, Aetelyn L
WNRK	Nguyen, Khoa	VNTJ01	Louis, Timus				

COMBINED ALLERGY HISTORY

DATE	MODULE	USER	ALLERGY DETAILS
09/14/12 1918	MRT	RWML	Hernandez, Maria T UCCNV Allergies: OLD: NEW: Converted from Medical Records Demo Recall Database UCCNV by RWML Other Allergies: OLD: NEW: Converted from Medical Records Demo Recall Database UCCNV by RWML Food Allergies: OLD: NEW: Converted from Medical Records Demo Recall Database ALLERGYES CONVERTED by RWML Metoprololamide OLD: NEW: Converted from EMR.CCMC Database DELETED by RWML Allergies: OLD: Allergies: deleted.
12/23/14 1008	TEM	EMAD	Wawziy Andhade, Tob DELETED by EMAD Allergies: OLD: Allergies: deleted.

*** CONTINUED ON PAGE 31 ***

This document is part of the legal medical record.

06/09/20

MEDICATION DISCHARGE SUMMARY

PAGE: 31

NAME: HANNA ADEL S

UNIT #: M00273781

NYCT #: V00000905328

ADMINISTRATION PERIOD:
0000 06/04/20 to 2359 06/04/20 (Continued)

START/
STOP

NEW:
TEXT:
Type: Allergy
Severity: Unknown
Text: Deleted.
CLD: RBGLAN
Date: 09/14/12
DELETED by EMDJ
Food Allergies:
CLD: Food Allergies: deleted.
NEW:
TEXT:
Type: Allergy
Severity: Unknown
Text: Deleted.
CLD: NKGA
Date: 09/14/12
DELETED by EMDJ
Other Allergies:
CLD: Other Allergies: deleted.
NEW:
TEXT:
Type: Allergy
Severity: UNKNOWN
Text: Deleted.
CLD: NKGA
Date: 09/14/12
ADDED by EMDJ
metoclopramide
CLD:
NEW: metoclopramide added. From RBGLAN
DELETED by EMDJ
MIX - Metoclopramide
CLD: MIX - Metoclopramide deleted.
NEW:
TEXT:
Type: Allergy
Severity: Unknown
Verified: N
Allergy ID: From Metoclopramide RC.
Date: 11/21/09

06/04/20 0020 EIM EMDJ - Abachar, L, Damin

PRINTED BY HEM 06/09/20 11:08
This document is part of the legal medical record.

RUN DATE: 06/03/20
RUN TIME: 2049
RUN USER: NURNVT

Chino Valley Medical Center NUR **LIVE**
PATIENT ASSESSMENT

PAGE 1

Personal Belongings Inventory

ient: HANNA, ADEL S
Account #: V00000905328
Admit Date: 06/01/20
Status: ADM IN
Attending: Crudo, Jeffrey J

Age/Sex: 74 M
Unit #: M000273781
Location: MU
Room/Bed: 260-B

Inventory Date: 06/03/20 Inventory Time: 2048 Performed By: Nguyen, Vina T
Reason For Inventory: DISCHARGE

-N Contacts	-Y Glasses	Disposition: BELONGINGS KEPT BY PT
-N Full Dentures		Disposition:
-N Partial Upper	-N Lower	Disposition:
-N Hearing Aid		Disposition:

Any Belongings Sent To Hospital Safe: N Any Belongings Sent Home With Family: N

NOTE: Chino Valley Medical Center will only be responsible for items logged at the time of admission. Should Dentures, Hearing Aids, Eye Glasses be brought to the patient after admission, they must be logged with the Primary Nurse or Charge Nurse. Chino Valley Medical Center will not be responsible for any item not logged on the Belongings Form.

<< RELEASE OF LIABILITY OF VALUABLES KEPT WITH PATIENT >>

By Signing Below I Indicate I Have Been Advised To Send My Valuables Home With Family/ Friends, And Have Been Given The Opportunity To Have My Valuables Locked Up.

If I Refuse To Have My Valuables Locked Up Or Sent Home With Family Or Friends,
Please Chino Valley Medical Center From Any Liability For Lost Valuables.

PATIENT: Adel S. Hanna, MD Date: 6-3-20

WITNESS: J RN

By Signing Below I Indicate I Have All My Belongings At The Time Of Discharge.

PATIENT: _____ Date: _____

WITNESS: _____

Occurred Date: 06/03/20 Occurred Time: 2048
Monogram: VTN Initials: NURNVT Name: Nguyen, Vina T Nurse Type: RN

Age/Sex: 74 M HANNA, ADEL S (ADM IN) Page: 1 of 1
 Unit #: M000273781 MU-260-B Printed 06/03/20 at 0458
 Account#: V0000905328 Crudo, Jeffrey J . 12 hours ending 06/03/20 at 0800
 Admitted: 06/01/20 at 0153 Chino Valley Medical Center NUR 24 HOUR CHECK

Coded Allergies/Adverse Reactions						
Name	Category	Severity	Ver?	Date	Time	User
Reaction						

Allergies
 metoclopramide Drug Intermediate Y 06/01/20 0020 DA
 (From REGLAN)

Resuscitation Status Detail					
Resuscitation Status	Order Date	Time	User	Source	Ordering Doctor

FULL CODE 06/01/20 0200 DRCHAZARES POM Crudo, Jeffrey J .

** Modified Code ** Chest Compressions: Intubation/Reintubation:
 Defibrillation: ACLS Drugs/Vasopressors: BiPAP (Non Invasive PPV):
 Cardioversion: ** IF Patient is DNR, Fill out the DNR Order Set **

Current Medications								
Rx #	Medication	Dose	Sig/Sch	Route	RF	Start	Stop	Note

004150679	toPROL XL 25 MG	25 MG	DAILY	PO		06/03/20	07/03/20	+5
004149954	LIPITOR	10 MG	PM	PO		06/01/20	07/01/20	
004149957	ZESTRIL/PRINIVIL	5 MG	DAILY	PO		06/01/20	07/01/20	
004149953	ASPIRIN EC	81 MG	DAILY	PO		06/01/20	07/01/20	
004149955	COLACE	100 MG	BID	PO		06/01/20	07/01/20	
004149962	TUMS	500 MG	TID/PRN	PO		06/01/20	07/01/20	
004149963	PriLOSEC	20 MG	BIDAC	PO		06/01/20	07/01/20	
004149951	SODIUM CHL 0.9%	1,000 ML	CONT	IV		06/01/20	07/01/20	
004149960	NITROSTAT	0.4 MG	Q4HP/PRN	SL		06/01/20	07/01/20	
004149952	TYLENOL	650 MG	Q6HP/PRN	PO		06/01/20	07/01/20	
004149961	ZOFRAN	4 MG	Q4HP/PRN	IV		06/01/20	07/01/20	
004149959	MORPHINE SULFATE	2 MG	Q3HP/PRN	IV		06/01/20	06/06/20	
004149956	NORCO 7.5/325 TABLET	1 TAB	Q4HP/PRN	PO		06/01/20	06/06/20	
004150657	LEXISCAN	0.4 MG	ONCE@153	IV		06/02/20	06/02/20	*DC
004149958	LOPRESSOR	12.5 MG	BID	PO		06/01/20	06/02/20	*DC

Service Date	Service Time	Procedure	Lab Orders Status
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06/03/20 0500 CBC IN PRO
 06/03/20 0500 BASIC METABOLIC PROFILE IN PRO

Monogram	Initials	Name	Nurse Type
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DA EDAD Abacherli, Darin RN

7P-7A
[Signature]
 7A-7P *(E)*

Age/Sex: 74 M
 Unit #: M000273781
 Account#: V00000905328
 Admitted: 06/01/20 at 0153

HANNA, ADEL S (ADM IN)
 DU-260T-B
 Crudo, Jeffrey J .
 Chino Valley Medical Center NUR

Page: 1 of 1
 Printed 06/02/20 at 1646
 12 hours ending 06/02/20 at 0500
 24 HOUR CHECK

Coded Allergies/Adverse Reactions						
Name	Category	Severity	Ver?	Date	Time	User
Reaction						

Allergies
 metoclopramide Drug Intermediate Y 06/01/20 0020 DA
 (From REGLAN)

Resuscitation Status Detail					
Resuscitation Status	Order Date	Time	User	Source	Ordering Doctor

FULL CODE 06/01/20 0200 DRCHAZARES POM Crudo, Jeffrey J .

** Modified Code ** Chest Compressions: Intubation/Reintubation:
 Defibrillation: ACLS Drugs/Vasopressors: BiPAP (Non Invasive PPV):
 Cardioversion: ** IF Patient is DNR, Fill out the DNR Order Set **

Current Medications								
Rx #	Medication	Dose	Sig/Sch	Route	RF	Start	Stop	Note

004150679	toPROL XL 25 MG	25 MG	DAILY	PO		06/03/20	07/03/20	+5
004149954	LIPITOR	10 MG	PM	PO		06/01/20	07/01/20	
004149957	ZESTRIL/PRINIVIL	5 MG	DAILY	PO		06/01/20	07/01/20	
004149953	ASPIRIN EC	81 MG	DAILY	PO		06/01/20	07/01/20	
004149955	COLACE	100 MG	BID	PO		06/01/20	07/01/20	
04149962	TUMS	500 MG	TID/PRN	PO		06/01/20	07/01/20	
04149963	PriLOSEC	20 MG	BIDAC	PO		06/01/20	07/01/20	
004149951	SODIUM CHL 0.9%	1,000 ML	CONT	IV		06/01/20	07/01/20	
004149960	NITROSTAT	0.4 MG	Q4HP/PRN	SL		06/01/20	07/01/20	
004149952	TYLENOL	650 MG	Q6HP/PRN	PO		06/01/20	07/01/20	
004149961	ZOFRAN	4 MG	Q4HP/PRN	IV		06/01/20	07/01/20	
004149959	MORPHINE SULFATE	2 MG	Q3HP/PRN	IV		06/01/20	06/06/20	
004149956	NORCO 7.5/325 TABLET	1 TAB	Q4HP/PRN	PO		06/01/20	06/06/20	
004150657	LEXISCAN	0.4 MG	ONCE@153	IV		06/02/20	06/02/20	+0
004149958	LOPRESSOR	12.5 MG	BID	PO		06/01/20	06/02/20	*DC

Electrocardiogram Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status

06/01/20 2330 ELECTROCARDIOGRAM TRANS

Pharmacy Orders				
Service Date	Service Time	Procedure	Status	

06/01/20 2100 MEDICATIONS ACTIVE

Monogram	Initials	Name	Nurse Type
----------	----------	------	------------

DA EDAD Abacherli, Darin RN

Handwritten: 6/2/20
 1200
 LM / se

Age/Sex: 74 M HANNA, ADEL S (ADM IN) Page: 1 of 2
 Unit #: M000273781 DU-260T-B Printed 06/02/20 at 0500
 Account#: V00000905328 Crudo, Jeffrey J . 24 hours ending 06/02/20 at 0500
 Admitted: 06/01/20 at 0153 Chino Valley Medical Center NUR 24 HOUR CHECK

Coded Allergies/Adverse Reactions						
Name	Category	Severity	Ver?	Date	Time	User

Allergies
 metoclopramide Drug Intermediate Y 06/01/20 0020 DA
 (From REGLAN)

Resuscitation Status Detail					
Resuscitation Status	Order	Date Time	User	Source	Ordering Doctor

FULL CODE 06/01/20 0200 DRCHAZARES POM Crudo, Jeffrey J .

** Modified Code ** Chest Compressions: Intubation/Reintubation:
 Defibrillation: ACLS Drugs/Vasopressors: BiPAP (Non Invasive PPV):
 Cardioversion: ** IF Patient is DNR, Fill out the DNR Order Set **

Current Medications								
Rx #	Medication	Dose	Sig/Sch	Route	RF	Start	Stop	Note

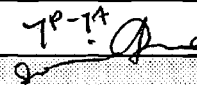
004149954	LIPITOR	10 MG	PM	PO		06/01/20	07/01/20	
004149957	ZESTRIL/PRINIVIL	5 MG	DAILY	PO		06/01/20	07/01/20	
004149958	LOPRESSOR	12.5 MG	BID	PO		06/01/20	07/01/20	
004149953	ASPIRIN EC	81 MG	DAILY	PO		06/01/20	07/01/20	
004149955	COLACE	100 MG	BID	PO		06/01/20	07/01/20	
04149962	TUMS	500 MG	TID/PRN	PO		06/01/20	07/01/20	
J04149963	PriLOSEC	20 MG	BIDAC	PO		06/01/20	07/01/20	
004149951	SODIUM CHL 0.9%	1,000 ML	CONT	IV		06/01/20	07/01/20	
004149960	NITROSTAT	0.4 MG	Q4HP/PRN	SL		06/01/20	07/01/20	
004149952	TYLENOL	650 MG	Q6HP/PRN	PO		06/01/20	07/01/20	
004149961	ZOFRAN	4 MG	Q4HP/PRN	IV		06/01/20	07/01/20	
004149959	MORPHINE SULFATE	2 MG	Q3HP/PRN	IV		06/01/20	06/06/20	
004149956	NORCO 7.5/325 TABLET	1 TAB	Q4HP/PRN	PO		06/01/20	06/06/20	
004149939	SODIUM CHL 0.9%	1,000 ML	ONCE/ONE	IV		06/01/20	06/01/20	*DC

Cardiac Echo Orders						
Service Date	Service Time	Procedure	Status	Result Code	Report Status	

06/01/20 1434 CARDIAC ECHO IN PRO

Consultations Orders						
Service Date	Service Time	Procedure	Status	Report Number	Report Status	

06/01/20 Unknown PHYSICIANS CONSULT TRANS

TP-14


Electrocardiogram Orders						
Service Date	Service Time	Procedure	Status	Report Number	Report Status	

06/01/20 2330 ELECTROCARDIOGRAM TRANS

Food and Nutrition Services Orders						
Service Date	Service Time	Procedure	Status	Report Number	Report Status	

6/01/20 B CARDIAC DIET-LOCHOL/LOFAT/2gNA TRANS New



Age/Sex: 74 M

HANNA, ADEL S (ADM IN)

Page: 2 of 2

Unit #: M000273781

DU-260T-B

Printed 06/02/20 at 0500

Account#: V00000905328

Crudo, Jeffrey J .

24 hours ending 06/02/20 at 0500

Admitted: 06/01/20 at 0153

Chino Valley Medical Center NUR

24 HOUR CHECK

Service Date	Service Time	Procedure	Lab Orders Status
06/01/20	0800	BASIC METABOLIC PROFILE	COMP
06/01/20	0900	TROPONIN I	COMP
06/01/20	1700	TROPONIN I	COMP

Service Date	Service Time	Procedure	Pharmacy Orders Status
06/01/20	0700	INTRAVENOUS	ACTIVE
06/01/20	0700	MEDICATIONS	ACTIVE
06/01/20	0900	MEDICATIONS	ACTIVE
06/01/20	0900	MEDICATIONS	ACTIVE
06/01/20	0900	MEDICATIONS	ACTIVE
06/01/20	0900	MEDICATIONS	ACTIVE
06/01/20	2100	MEDICATIONS	ACTIVE

Monogram	Initials	Name	Nurse Type
DA	EDAD	Abacherli, Darin	RN

Age/Sex: 74 M
 Unit #: M000273781
 Account#: V00000905328
 Admitted: 06/01/20 at 0153

HANNA, ADEL S (ADM IN)
 DU-260T-B
 Crudo, Jeffrey J .
 Chino Valley Medical Center NUR

Page: 1 of 2
 Printed 06/01/20 at 1725
 12 hours ending 06/01/20 at 0500
 24 HOUR CHECK

Name	Coded Allergies/Adverse Reactions	Category	Severity	Ver?	Date	Time	User
Reaction							

Allergies
 metoclopramide Drug Intermediate Y 06/01/20 0020 DA
 (From REGLAN)

Resuscitation Status Detail					
Resuscitation Status	Order Date	Time	User	Source	Ordering Doctor
FULL CODE	06/01/20	0200	DRCHAZARES	POM	Crudo, Jeffrey J .

** Modified Code ** Chest Compressions: Intubation/Reintubation:
 Defibrillation: ACLS Drugs/Vasopressors: BiPAP (Non Invasive PPV):
 Cardioversion: ** IF Patient is DNR, Fill out the DNR Order Set **

Current Medications								
Rx #	Medication	Dose	Sig/Sch	Route	RF	Start	Stop	Note
004149954	LIPITOR	10 MG	PM	PO		06/01/20	07/01/20	
004149957	ZESTRIL/PRINIVIL	5 MG	DAILY	PO		06/01/20	07/01/20	
004149958	LOPRESSOR	12.5 MG	BID	PO		06/01/20	07/01/20	
004149953	ASPIRIN EC	81 MG	DAILY	PO		06/01/20	07/01/20	
004149955	COLACE	100 MG	BID	PO		06/01/20	07/01/20	
004149962	TUMS	500 MG	TID/PRN	PO		06/01/20	07/01/20	
004149963	PriLOSEC	20 MG	BIDAC	PO		06/01/20	07/01/20	
004149951	SODIUM CHL 0.9%	1,000 ML	CONT	IV		06/01/20	07/01/20	
004149960	NITROSTAT	0.4 MG	Q4HP/PRN	SL		06/01/20	07/01/20	
004149952	TYLENOL	650 MG	Q6HP/PRN	PO		06/01/20	07/01/20	
004149961	ZOFRAN	4 MG	Q4HP/PRN	IV		06/01/20	07/01/20	
004149959	MORPHINE SULFATE	2 MG	Q3HP/PRN	IV		06/01/20	06/06/20	
004149956	NORCO 7.5/325 TABLET	1 TAB	Q4HP/PRN	PO		06/01/20	06/06/20	
004149939	SODIUM CHL 0.9%	1,000 ML	ONCE/ONE	IV		06/01/20	06/01/20	*DC
004149947	MAG-OX 400	400 MG	ONCE/ONE	PO		06/01/20	06/01/20	*DC
004149946	KLOR-CON M20	60 MEQ	ONCE/ONE	PO		06/01/20	06/01/20	*DC

Service Date	Service Time	Procedure	Admit Orders Status	Report Number	Report Status
06/01/20	0159	Admit Orders	TRANS		

Service Date	Service Time	Procedure	RESUSCITATION CODE STATUS	Orders Report Number	Report Status
06/01/20	0159	RESUSCITATION CODE STATUS	TRANS		

Service Date	Service Time	Procedure	Consultations Orders Status	Report Number	Report Status
06/01/20	0159	PHYSICIANS CONSULT	TRANS		

Service Date	Service Time	Procedure	DIAGNOSIS Orders Status	Report Number	Report Status
06/01/20	0159	Diagnosis-	TRANS		
06/01/20	0159	Condition	TRANS		

*6/1/20
 19:00
 WJ/a*

Age/Sex: 74 M
 Unit #: M000273781
 Account#: V00000905328
 Admitted: 06/01/20 at 0153

HANNA, ADEL S (ADM IN)
 DU-260T-B
 Crudo, Jeffrey J .
 Chino Valley Medical Center NUR

Page: 2 of 2
 Printed 06/01/20 at 1725
 12 hours ending 06/01/20 at 0500
 24 HOUR CHECK

Emergency Department Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0012	IV Insertion	TRANS		
06/01/20	0012	Oxygen	TRANS		
06/01/20	0012	Cardiac Monitor	TRANS		
06/01/20	0012	Pulse Ox	TRANS		

Electrocardiogram Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0012	ELECTROCARDIOGRAM	TRANS		

Lab Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0012	CBC	COMP		
06/01/20	0012	COMPREHENSIVE METABOLIC PANEL	COMP		
06/01/20	0012	BRAIN NATRIURETIC PEPTIDE	COMP		
06/01/20	0012	CREATINE KINASE (CK)	COMP		
06/01/20	0012	TROPONIN I	COMP		
06/01/20	0012	PROTHROMBIN TIME	COMP		
06/01/20	0012	PARTIAL THROMBOPLASTIN TIME	COMP		
06/01/20	0012	LIPID PROFILE	COMP		
06/01/20	0012	THYROID PANEL	COMP		
06/01/20	0012	AMMONIA	COMP		
06/01/20	0012	LIPASE	COMP		
06/01/20	0012	LDL DIRECT	COMP		
06/01/20	0012	URINALYSIS	IN PRO		
06/01/20	0159	DRUG SCREEN URINE (INHOUSE)	IN PRO		

Microbiology Orders					
Service Date	Service Time	Procedure	Status	Source	Organism
06/01/20	0159	MRSA CULTURE	IN PRO		NARES

Pharmacy Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0012	INTRAVENOUS	ONE		
06/01/20	0146	MEDICATIONS	DC		
06/01/20	0146	MEDICATIONS	DC		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0158	MEDICATIONS	ACTIVE		
06/01/20	0315	MEDICATIONS	ACTIVE		

Radiology Orders					
Service Date	Service Time	Procedure	Status	Result Code	Report Status
06/01/20	0012	XR CHEST: 1V (AP/PA)	COMP		Signed

Monogram	Initials	Name	Nurse Type
DA	EDAD	Abacherli, Darin	RN

Age/Sex: 74 M HANNA, ADEL S (ADM IN) Page: 1 of 3
 Unit #: M000273781 DU-260T-B Printed 06/01/20 at 0456
 Account#: V00000905328 Crudo, Jeffrey J . 12 hours ending 06/01/20 at 0500
 Admitted: 06/01/20 at 0153 Chino Valley Medical Center NUR 24 HOUR CHECK

Name	Coded Allergies/Adverse Reactions	Category	Severity	Ver?	Date	Time	User
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Allergies
 metoclopramide Drug Intermediate Y 06/01/20 0020 DA
 (From REGLAN)

Resuscitation Status Detail						
Resuscitation Status	Order	Date	Time	User	Source	Ordering Doctor
FULL CODE		06/01/20	0200	DRCHAZARES	POM	Crudo, Jeffrey J .

** Modified Code ** Chest Compressions: Intubation/Reintubation:
 Defibrillation: ACLS Drugs/Vasopressors: BiPAP (Non Invasive PPV):
 Cardioversion: ** IF Patient is DNR, Fill out the DNR Order Set **

Current Medications								
Rx #	Medication	Dose	Sig/Sch	Route	RF	Start	Stop	Note
004149954	LIPITOR	10 MG	PM	PO		06/01/20	07/01/20	
004149957	ZESTRIL/PRINIVIL	5 MG	DAILY	PO		06/01/20	07/01/20	
004149958	LOPRESSOR	12.5 MG	BID	PO		06/01/20	07/01/20	
004149953	ASPIRIN EC	81 MG	DAILY	PO		06/01/20	07/01/20	
04149955	COLACE	100 MG	BID	PO		06/01/20	07/01/20	
J4149962	TUMS	500 MG	TID/PRN	PO		06/01/20	07/01/20	
004149963	PriLOSEC	20 MG	BIDAC	PO		06/01/20	07/01/20	
004149951	SODIUM CHL 0.9%	1,000 ML	CONT	IV		06/01/20	07/01/20	
004149960	NITROSTAT	0.4 MG	Q4HP/PRN	SL		06/01/20	07/01/20	
004149952	TYLENOL	650 MG	Q6HP/PRN	PO		06/01/20	07/01/20	
004149961	ZOFRAN	4 MG	Q4HP/PRN	IV		06/01/20	07/01/20	
004149959	MORPHINE SULFATE	2 MG	Q3HP/PRN	IV		06/01/20	06/06/20	
004149956	NORCO 7.5/325 TABLET	1 TAB	Q4HP/PRN	PO		06/01/20	06/06/20	
004149939	SODIUM CHL 0.9%	1,000 ML	ONCE/ONE	IV		06/01/20	06/01/20	
004149947	MAG-OX 400	400 MG	ONCE/ONE	PO		06/01/20	06/01/20	*DC
004149946	KLOR-CON M20	60 MEQ	ONCE/ONE	PO		06/01/20	06/01/20	*DC

Service	Service	Admit Orders			
Date	Time	Procedure	Status	Report Number	Report Status

06/01/20 0159 Admit Orders TRANS

Service	Service	Cardiac Echo Orders			
Date	Time	Procedure	Status	Result Code	Report Status

06/01/20 0159 CARDIAC ECHO LOGGED

Service	Service	RESUSCITATION CODE STATUS Orders			
Date	Time	Procedure	Status	Report Number	Report Status

06/01/20 0159 RESUSCITATION CODE STATUS TRANS

Service	Service	Consultations Orders			
Date	Time	Procedure	Status	Report Number	Report Status

06/01/20 0159 PHYSICIANS CONSULT TRANS

Handwritten signatures and initials: "rc" and "AM"

Age/Sex: 74 M HANNA, ADEL S (ADM IN) Page: 2 of 3
 Unit #: M000273781 DU-260T-B Printed 06/01/20 at 0456
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DIAGNOSIS Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0159	Diagnosis-	TRANS		
06/01/20	0159	Condition	TRANS		

Emergency Department Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0012	IV Insertion	TRANS		
06/01/20	0012	Oxygen	TRANS		
06/01/20	0012	Cardiac Monitor	TRANS		
06/01/20	0012	Pulse Ox	TRANS		

Electrocardiogram Orders					
Service Date	Service Time	Procedure	Status	Report Number	Report Status
06/01/20	0012	ELECTROCARDIOGRAM	TRANS		

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06/01/20	0012	LIPID PROFILE	COMP		
06/01/20	0012	THYROID PANEL	COMP		
06/01/20	0012	AMMONIA	COMP		
06/01/20	0012	LIPASE	COMP		
06/01/20	0012	LDL DIRECT	COMP		
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06/01/20	0146	MEDICATIONS	ONE		
06/01/20	0146	MEDICATIONS	ONE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0156	MEDICATIONS	ACTIVE		
06/01/20	0158	MEDICATIONS	ACTIVE		
06/01/20	0315	MEDICATIONS	ACTIVE		

Radiology Orders					
Service Date	Service Time	Procedure	Status	Result Code	Report Status
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Monogram	Initials	Name	Nurse Type
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DA	EDAD	Abacherli, Darin	RN
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