BATES PAGES MEDCOM 8841-9440 HAVE BEEN WITHHELD PENDING REVIEW

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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
4Jun03	1650 Remains on Dopamine gtt @ 15mcg/Kg/min. See post op sheet

ADULT

12:54	150	97	99 / 71
12:52	155	97	102 / 69
12:50	157	97	104 / 71
12:48	[illegible]	97	110 / 74
12:46	131	97	105 / 73
12:44	135	97	105 / 67
11:44	115	[illegible]	[illegible]
11:42	118	98	[illegible]
11:40	123	[illegible]	98 / [illegible]

PROTOCOL

15:12	125	[illegible]	[illegible]
15:10	128	[illegible]	[illegible]
15:08	117	00	[illegible]

66-4

[redacted]

4 Jun 03

MEDCOM - 9441

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MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES

b 62 all

4 June 03 1700 Assumed care of pt. Report given, see TCU flowsheet for initial assessment — [redacted] 91WM

1800 zeroed A line, took manual cuff pressure, pressure correlated. Verified vent settings SIMV 16, peep 5, FIO2 50%, TV 750 mL. Bolus feeding 60 cc Ensure followed by 50cc flush. — [redacted] 91WMG

1900 Pt. heart rate increased to 190. Notified Dr. [redacted], VO given to reduce Dopamine by 5 mcg/kg/min and give 500cc Bolus of NS. see strip — [redacted]

2015- Increased dopamine to 15 mcg/kg/min, BP 85/70 map 84, manual cuff pressure 87/62, A line pressure 98/64, Pressure correlated. VO Dr. [redacted] for CBC — [redacted]

2030- Hooked int suction back to NG tube, dark red, coffee ground emesis noted. — [redacted]

2100- A line 85/65, cuff pressure 98/51, ↑ Dopamine to 20 mcg/kg/min

2400- Zantac, Unasyn given IVPB, 60cc Ensure c 30cc flush, Versed raised to 2 ml/hr. — [redacted] 91WM

5 June 03 0300 Pt. bathed, DRSG A to R buttock, bloodwork drawn and PCXRay completed. — [redacted] WMG

0330- 500cc Bolus of LR given to aid in B/P. Currently 92/61, cuff 87/59

0345- VO by Dr. [redacted] turn Vent settings ↓ 2 to 14, — [redacted]

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)	REGISTER NO.	WARD NO.

EPW [redacted]

b6-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
5 June 03	0420 - Dopamine lowered to 10 mcg/kg/min. — [redacted] b6-2
6/5	Surgery
	Pt. on vent after resp failure yesterday.
	T 101, VSS
	I/O good u.o.
	9.2 > 8.6 / 27 < 337 — 126 / 3.2 — 96 / 24 — 16 / 0.9 < 187
	Abd Soft, NT, incision healing nicely.
	Bonelike dressing c̄ ⊕
	A/P ① Resp - Cont c̄ vent, plan trach Tomorrow.
	② CV - VSS, Hct 27, cream Drops.
	③ Renal - Stable,
	④ ID - mild temp, cont. Abx
	⑤ GI - Need to advance TF's.
	[redacted] b6-2

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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
5Jun03	662-011
	0510 Report given. Initial assessment on DA Form 4700, 0375 [redacted]
	0730 Dr [redacted] @ bedside. orders received. ↓ Dopamine 5mcg/kg/min MAP 89. [redacted]
	0800 Ensure 1 Ring started @ 60cc/hr per MCT @ none. [redacted]
	0830 Deep Sx per RT. Thick, white color secretions noted [redacted]
	0900 Dopamine weaned to 5mcg/kg/min MAP 90. Dulcolax supp given. BP 100/60. VSS. RR 30's. ↑ distress noted HR 120's. ↑ edema bowel sounds noted [redacted]
	1200 Residuals ↓ 60cc feed back to pt. Dopamine @ 3mcg/kg/min.
	1300 Dopamine off. ↑ 1 Ring 500cc/hr
	1400 Bed bath given. Nose & oral secretions noted suction cleansed. [redacted]
	1600 Residuals greater than 100cc feed back to pt. Undated Dr on [redacted]

RELATIONSHIP TO SPONSOR | SPONSOR'S NAME: LAST | FIRST | MI | SPONSOR'S ID NUMBER (SSN or Other)

DEPART./SERVICE | HOSPITAL OR MEDICAL FACILITY | RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)* | REGISTER NO. | WARD NO.

66-4

[redacted] 5Jun03

PROGRESS NOTES
Medical Record

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LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES 66-2 all
5 June 03	1800 Received report on pt. Pt. sedated c̄ Versed 2mg/hr, Fentanyl 8mL/hr. Assessment performed see ICU I flowsheet. ~~1720~~ Will continue to monitor. [redacted] 91WMC
	2345 - Pt. temp rose to 102.7, 650 mg Acetaminophen given via NG ~~tube~~ c̄ 20 mL flush. 2300 feeding held due to < 100 residual. [redacted] 91WMC
6 June 03	0300 Notified Dr. [redacted] of PT & BP, 86/56, and decreased urinary output. VO to run 500CC NS IV Bolus now. [redacted]
	0400 - Second 500CC NS IV bolus given per VO Dr. Dixon. notified Dr. [redacted] of pts urinary output < 30cc per hour. [redacted]
6/6/03	pt continues on mechanical ventilation size 7 ETT placed @ 21 @ lip
RT 0650	parameters set SIMV RR 16 VT 750 FIO 50% PEEP 5 SaO_2 98% Bs clear LL R lobe course & diminished [redacted] SJ RT

STANDARD FORM 509 (REV. 5/1999) BACK

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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
6 June 03 0830	General Surgery Team Note Accepting care of pt Pt is a 57 yo EPW ♂ s/p GSW, s/p exploratory laparotomy, right hemicolectomy & end to end reanastomosis, cholecystectomy, partial hepatectomy, now POD #8, & subsequent (L) shoulder exploration & (R) hip exploration, now POD #6. Pt weaned from ventilation on POD #6 but placed back on ventilation shortly after w respiratory failure. Pt weaned off dopamine drip yesterday & subsequent hypotension overnight and ↓ UOP despite 500cc boluses IV x 3 (NS). Per report UOP 10cc hr x last 8 hrs. ID - Tmax - 102.7 @ 2345 Tc - 99.5 Abx day #7 Unasyn 3g q8° / Ceftriaxone 45mg q8 WBC - 6/6 - 14.5 6/8 - 8.2 CV - HR - 110's BP - 86/56 @ 0800 / 103/64 @ 0845 Resp/Lungs - Pox - 98% SIMV - RR-16 / VT-750 / FiO2-50% PEEP-5 Pt. 7 qrs pCO2 50.2 pO2 90 pH 7.33 BS - Clear LL / R base coarse & diminished

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST		MI	

b6 Plan per Dr [redacted] Trach over

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY b6-2	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No. or SSN; Sex; Date of Birth; Rank/Grade)* [redacted] WARD NO.

[redacted] b6-4

PROGRESS NOTES
Medical Record

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LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
6 Nov 03 0845 cont	Renal 20cc in last 7 hrs UOP since midnight - ~10cc/hr Cr - 1.9 6/6 despite NS bolus of 500cc x3 GI - 6/8 - 0.9 [redacted] Previously on Osmolite Tube Feeds d/c'd 2° ↑ residuals > 100cc currently on intermittent sections Abd distended but soft H/H - 6/4 8/25.5 6/8 8.6/26.8 Dressings - clean dry + intact Plan (1) Consider renal dose dopamine or lasix (2) Schedule tracheostomy (3) Consider blood transfusion (4) Consider restart Tube Feeds in AM (5) DP continues temp spike consider Δ Abx coverage (6) Δ Gent to Renal dosing [redacted] 0840 66:2 S/W & D/W Dr: [redacted]

STANDARD FORM 509 (REV. 5/1999) BACK

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66-2 all

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MEDICAL RECORD	CHRONOLOGICAL RECORD OF MEDICAL CARE
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*

6 Jun 03 1520. SpO2 98% - 99%. Remains @ 60% FiO2. L/S @ R clear, U BS in bases, diminished [redacted]
1630 ↓ FiO2 50%. SpO2 @ 99% - 98% [redacted]

6 June 03 1700 Received pt, report given, see ICU-1 flowsheet for initial assessment [redacted]
1900 - B/P low for pt. @ 87/55 A line, manual 90/52, P 112, RR 27, SpO2 95% @ 50%. Urinary output significantly decreased, to 720 ml/hr.
1930 - VO per Dr. [redacted] to give 1000 cc bolus NC. [redacted]
VO to give 2U of blood per Dr. [redacted] 2330 - Rec'd type O+ blood from lab; hooked into (R) SC site C bag no* 4823871. Vitals at this time, 95/61, P 98, T 98.1, RA SpO2 98% @ 50%. Will continue to monitor
2400 - S side effects thus far, 98/61, P 96, R 17, SpO2 98, T 98.3 Will continue to monitor [redacted]
7080845 0020 - 2nd U of PRBC started, vitals are 101/62, P 94, T 97.6, R 17, No side effects at this time.
7080845.5 Transfusion completed 0100, Vitals stable at this time. Will continue to monitor [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* 66-4

REGISTER NO.

WARD NO. ICU 1

[redacted] EPW

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
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FIRMR (41 CFR) 201-9.202-1

66-2 all

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MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
6 JUN 03	0510 Assumed care. Report given. See ICU-1 Flowsheet for initial assessment. [redacted]
	0530 ORSA A on OSC. [redacted]
	0630 Updated Dr [redacted] on ICU orders received [redacted]
	0700 Flush Foley c 30cc H2O. All [redacted]
	Balloon off 30cc in bag. [redacted]
	0940 500cc NS Bolus hung. [redacted]
	0900 O RRM drsg dry & intact. Suture intact. Place back in sling [redacted]
	1000 [redacted] 500cc bag NS hung. See orders. Bube pelvic x-ray taken. [redacted]
	1100 Updated given to Dr's. [redacted] 500cc Hr given [redacted]
	1215 3L NS Bolus given. [redacted]
	1330 4th 500cc NS Bolus given. [redacted]
	1440 Boluses completed. Deep suction, lung sounds clear. Off c 5002 bagging in progress by [redacted]
	1510 Updated back on next c [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* REGISTER NO. | WARD NO.

[redacted] 66-4

6 JUNE 03

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
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MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
0621 RT	Pt continues on mechanical ventilation size 7 ETT placed
6/7/03	24cm @ lip parameters set SIMV RR 14 VT 750 FIO2 40% PEEP 5
	HR 92 BP 122/62 SPO2 99% BBS Clear Diminished on (L) side. b6-7
	Pt not breathing over vent [redacted] RT SIG
6/6/03	0510 Assumed care. Report given, see TCU-1, Shift sheet for initial assessment. [redacted]
	0430 A-line drsg dry. Dc pt's site oral care given. [redacted]
	0440 Update given to Dr. [redacted]
	100 labs drawn per protocol. Urine test sent in. ABG & PCXR completed. [redacted]
	1230 labs reviewed, blood cultures, neuroders received. [redacted]
	1400 hygiene dry, partial bath given, oral care given. [redacted]
	1600 deep SX by RT, SPO2 dropped, bagging to 90 SPO2, RT @ bedside. [redacted]
	1630 SPO2 90s, placed on vent. [redacted]
	1700 on FIO2 50%, SPO2 96% [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAI[redacted]
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

Pt # [redacted]

b6-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
07 JUN 03 1935	OP NOTE
	PRE-OP DX – RIO BILE LEAK VS Abscess
	POST-OP DX – BILOMA
	PROCEDURE – EXPLORATORY LAPAROTOMY – WASHOUT
	SURGEONS – Dr. [redacted] b6-2 all
	TISSUE Ø FINDINGS – BILE PERITONITIS/BILOMA
	DESCRIPTION – GEN – Opened midline incision – Purulent of ~ 1000 cc Bile in peritoneal cavity – No active leak from liver bed seen. Small omental seam adhesions taken down w/ blunt dissection [redacted] ischemic bowel, diverticulosis sigmoid colon intact – No leak of succus or stool. Abdomen irrigated w/ S.L NS – Closed fascia w/ 2 running sutures of #1 Looped PDS. Skin/subcutaneous tissue left open & packed w/ Saline moistened gauze, staples removed from (L) shoulder wound / skin staples applied. Pt left prolonged intubated, transported to PCU extubated. JP's placed (1 in Bowel (LAT) 1 in Morrison's pouch (MEDIAL)) Pt left intubated – IV D5W 1/2 NS – 800 cc LR UO – 75 cc Drains – JP 3 x 2, Foley, NGT
	[redacted] MD

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME: LAST	FIRST	MI	SPONSOR'S ID NUMBER (SSN or Other)
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORD MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

EPW # [redacted] b6-4

REGISTER NO. | WARD NO.

PROGRESS NOTES
Medical Record

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MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
7 June 03	1735 Received report, assessment done, see ICU-1 Flowsheet for assessment, Prepared pt. for surgery. [redacted] 91WM
	1745 - Pt left for surgery. b6-2
	1920 - Pt returned for surgery, Pt VSS. Pt. returned from surgery c̄ 2 Jackson Pratt drains, in place. New vent settings, SIMV, 850, R12, P5, 50FIO2. Will continue to monitor —
8 June 03	[redacted] 91WM16 b6-2

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

[redacted] b6-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
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FIRMR (41 CFR) 201-9.202-1

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
	General Surgery
08 JUNE 03	S: Pt remains sedated on Propofol / Fentanyl - [redacted]
0900	monitors.
MEDS	O: Tm 99.1 Tc 99.1 P-100 BP 100/62 R-12 NGT-700
2054N	I/O 6718 / 5070 (+) 1648 40 - 50 - 200cc / hr JP- Bile Tmgd 40/25
ZANTAC	11.0 / 10.2 / 37.0 / 32.5 (Peak) 133 / 143 / 106 / 103 / 4.2 / 35 / 2.0 / 3.0 / 4.0 / 29 / 133 Ca-C.3 [redacted] Alb-1.3 Tbili 3.9 AST-170 Tprot. 5.0
PROPOFOL	
FENTANYL	
DOPAMINE - 3 µg/kg/hr	
	VENT - SIMC - 850cc, R-12 P-5 50%
	ABG 7.445 / 39 / 74 / 28 / 27 (BC 13) / 95% BE 3
	CXR - Pulmonary edema -
	CV - RRR
	Abdomen - Less distended NO BS - soft
	drains intact
	A: POD#1 Exp Lap - Bile peritonitis (2) Pulmonary Edema
	P: (1) Diuresis Fluids (2) Continue Vent Support
	(3) Wean off Dopamine (4) K replacement
	[redacted], MD
	[redacted] MAJ, MC USA
	CHIEF, DOS

AN4-367
GG7-35
AST-170
CR. 3289
BE 3
66-2

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MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

b6-2

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
8Jun03/0510	Report given, ~~Pt~~ initial assessment on Ward 4 Southeast [redacted]
	0600 std. thin clear secretion pad qd. oral care given [redacted]
	0730 labs repeat per Dr [redacted] orders received [redacted]
	0930 20mg lasix given IVP LFT drawn, emptied JP bulbs placed back to SX [redacted]
	1000 labs results reviewed by Dr [redacted] new orders received [redacted]
	1010 d/c LR 125, start K+Run @ 50cc/hr peripheral over 20. [redacted]
	1020 Albumin started @ 25cc/hr. [redacted]
	1130 Albumin completed. Pt diuresis 40mg. Pt ambulation noted [redacted]
	1350 Reposition & support. Bed bath given. Veserved turning well [redacted]
	1600 orders received. 500cc Boluses given [redacted]
	1630 Boluses completed [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

[redacted] EPW

b6-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
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b6-2 all

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MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
8 June 03	1700 Received pt from Capt [redacted]. Pt VSS. Pt sedated. Pt assessment done. Pt has LR @ 125cc/hr. Dop @ 11[illegible], Fent @ 4, Propofol @ 14ml/hr through L.S.C. cordis c̄ triple lumen catheter. Pt has green drainage seeping from abdominal wound — dressing reinforced. Pt has +1 edema in hands + feet. Pt is on vent. No other issues at this time — Sgt [redacted] RN
	2200 - Pt sedated. No change in assessment. No issues at this time — Sgt [redacted] LPN
	0330 - Suctioned pt. Pt became agitated. ↑ propofol to 21[illegible] ml/hr. — Sgt [redacted] LPN
	0400 - Suctioned pt again. Pt has thick white secretions. Pt has +3 edema to entire body — Sgt [redacted] LPN
	0450 - Dr. [redacted] notified of AM ABGs. Instructions to ↑ resp. rate to 14 — Sgt [redacted] LPN
9 JUNE 03	0510 RECEIVED PT FROM SGT [redacted]. VSS. PT SEDATED ON FENT @ 5 PROPOFOL @ 21.6 ml/h. SEE FULL ASSESSMENT PER DA 4700. ART LINE TO (R) FA ZEROED. TRIPLE LUMEN SC TO (R) SHOULDER PATENT Ø S/SX INFECTION. LUNGS COARSE SATS IN UPPER 90'S ON FIO2 60%. ABD INCISION C̄ DRAINAGE TO DRESSINGS GREEN IN COLOR. +3 EDEMA TO HANDS +2 TO FEET. PULSES PALPABLE. NO OTHER ISSUES @ THIS TIME. WILL CONTINUE TO MONITOR + ASSESS — [redacted] ICU RN
9 Jun 03 0609	Pt continues on mechanical ventilation size 7 ETT placed @ 24cm @ lip. Parameters SIMV RR 14 VT 850 FiO2 60% PEEP 5 BBS Coarse + diminished. HR 98 BP 106/61 Pt not breathing over vent SPO2 97% — [redacted] RT SGT

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORD [redacted]
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

[redacted]

b6-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
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MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE** 66-2 all

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
9 JUN 03	1310 PCXR verified by DR [redacted] RY. New orders received. [redacted]
	1350 DC'ed Dopamine. Versed gtt start @ 3cc/hr. [redacted]
	1355 Lasix 20mg IVP given [redacted]
	1400 250g Albumin in 500cc D5W started. P aspirated on NG tube. Versed gtt to 5cc/hr [redacted]
9 JUNE 03	1500 PT cleaned sheets Δ'd PT has altered skin integrity to (L) Heel. Covered c̄ 4x4 DRY. VSS. PT tol VERSED gtt c̄ DECREASED AGITATION ↑ to 20cc/o. UOP 700 p̄ LASIX BETWEEN 14+1500 ↓ to 500cc BETWEEN 15+1600. 1400 ZANTAC GIVEN NABIL VISITING c̄ PT NO RESPONSE. WILL CONTINUE TO MONITOR & ASSESS [redacted]
9 June 03	Received pt from Cpt [redacted], Pt. sedated c̄ Versed, [illegible] VSS. p 104/61, 121p, 21R, 97% @ 60%. [redacted] 1930. Suctioned pt. c̄ 14F suction cath, grey fluid, small amt. - SpO2 dropped to 80% during suctioning, returned to vent, SpO2 ↑ 97%. [redacted]
9 JUN 03	2015: Dopa gtt off per V.O. Dr [redacted] [redacted]
	2246: Received Pt c̄ Muscal. Pt VS Stable

HOSPITAL OR MEDICAL FACILITY: O2 Sat 100%. TV: | STATUS | DEPART./SERVICE | RECORDS MAINTAINED AT

SPONSOR'S NAME: [redacted] | SSN/ID NO. | RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.) | REGISTER NO. | WARD NO. Icu 1

EPW # [redacted]

66-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
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MEDICAL RECORD	CHRONOLOGICAL RECORD OF MEDICAL CARE
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
09 June 03	0800 DR [redacted] TO SEE PT. VERIFIED LAB + X RAY ELECTROLYTES + ABG'S REDRAWN pH 7.53, pCO2 35.9, PO2 76 @ 99.5° TEMP. FiO2 ↑ to 70% SpO2 100% BREATHING @ RATE OF 16 NONLABORED. RECEIVED ZANTAC b6-2 all NO OTHER ISSUES @ THIS TIME — [redacted] MC AN
9 JUNE 03	0813 DR [redacted] NOTIFIED OF ABG RESULTS VENT RATE ↓ TO 12 FiO2 70% PEEP ↑ to 10. PT RR ↓ to 12 NONLABORED. SATS 98% WILL CONTINUE TO MONITOR — [redacted]
9 JUNE 03	0900 ELECTROLYTES RETURNED PER LAB GLUCOSE 124 CREAT 2.0 Na 145 K 2.6 See FULL LAB REPORT. KCL 40 mEQ in 100 mL DSW RUNNING @ 50ml/o PT MOVING ABOUT WITH LOWER EXTS. PROPOFOL ↑ to 28.8 mL/o PT RESTING c̄ SEDATION @ THIS TIME BP 107/61 P109 R16 SpO2 99% WILL CONTINUE TO MONITOR + ASSESS — [redacted]
9 JUN 03	1200 TUBE ADVANCED TO 26 @ ~~lecture~~ [redacted] lips. Confirm via CXR once results available. SATS 98% ON FiO2 60% RR 10 PEEP 10. ABG @ 1115 c̄ pH 7.55 pCO2 31.0 PO2 160 HCO3 27 SO2 100% T 98° UOP > 30cc/o DRESSINGS TO TP #1+2 Δ'd Abd DRESSINGS REINFORCED c̄ TAPE. NO OTHER ISSUES @ THIS TIME WILL CONTINUE TO MONITOR — [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED [redacted]
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)*

REGISTER NO.	WARD NO.

EPW # [redacted]

b6-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1 USAPA V2.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
9Jun03	Transfer Summary
2100	Image Nguyen Admitted on Pt GSW to Abdomen, underwent Ex Debridement and (R) colectomy with Primary Anastamosis PoD#3 developed resp Distress, cardiac Arrhythmia, and AFib with RVR. underwent D/C Cardioversion with good result. PoD 5 Pt noted Abd pain & tenderness Pt Reexplored found to have Large Biloma. Abd irrigated & drained & 2 JP drains Now POD from that Procedure Doing well cx noted RLL collapse/ Atelectasis resistant to suction Now on 10 PEEP to address this concern (NO therapeutic bronch available) Current meds Propofol, Fentanyl, Zantac, Zosyn Heparin SQ [redacted] 66-2

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES

DATE	NOTES
	General Surgery
P9 June 03	51 Pt Sedated on Fentanyl/Propofol - (+) Purposeful movements
1250	D: Tm 99.5 Tc 98.4 P-100 SBP 112/62 R-10
	LPD 12° - 1713/2550 UO ~ 100 cc/hr Tubes & A
Dopamine-3	13.6 9.7 479 145 / 10L 33 / 21 / 30 124 a 7.5 LFTs unchanged
Propofol	
Fentanyl	
ZOSYN	
ZANTAC	
Aspirin 500	Vent: SIMV 10, TV-850, PEEP-10, 60%
5P	7.55/31/160/27/5/100
	CVR - Better Rhythm still wet - 66-2
	CV - RRR S1 (+)
	GI - No BS - No distension JP's w/ Bilious Drainage
	GU - Brisk UO -
	A: POD # 2 EXP LAP/BILE PERITONITIS w/ Bile leak
	POD # 11 - GSW DLP LAP/LIVER injury/RIGHT HEMICOLECTOMY/Shrapnel FED (Left)
	P: (1) Ventilator management (2) Continue current regimen
	(3) Will try Lasix again today w/ HCO.
	[redacted] MAJ, MC USA CHIEF DOS 66-2

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

EPW: #[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
	GENERAL SURGERY
09 June 03 1200	51 Pt Sedated on Fentanyl/Propofol - (+) Purposeful movements
	O: Tm 99.5 Tc 98.4 P-100 SBP 113/63 R-10
	L/D 12° - 1713/2550 UO ~ 100 cc/hr Tubes & A
Dopamine-3 Propofol Fentanyl Zofran Zosyn Heparin 5000 U SQ	13.6 → 9.7 / 31.3 (479) 145 / 106 (2.4) / 30 (-33) 2.0 / 124 a 7.5 LFTs unchanged
	Vent: SIMV 10, TV-850, PEEP-10, 60%
	7.55/31/160/27/5/100
	CVR - Better Aerated still wet -
	CV - RRR S1 (m)
	GI - No BS - No distension JP's w/ Bilious Drainage
	GU - Brisk UO -
	A: POD # 2 EXP LAP/BILE PERITONITIS w/ Bile leak
	POD # 11 - GSW DLP LAP/LIVER injury/RIGHT HEMICOLECTOMY/Shoulder JHD (Left)
	P: (1) Ventilator management (2) Continue current regimen
	(3) Will try Lasix again today w/ HCO.

[redacted] MD
CHIEF, USA
CHIEF, DS

b6-2

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

EPW # [redacted] b6-4

REGISTER NO. | WARD NO.

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)

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MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
10 JUNE 03 0645	DOPAMINE gtt. RESTARTED BP 100/54 ART LINE. PULSE 87-90'S. DR [redacted] to see pt. WILL REDRAW H+H UPON RETURN TO 28th CSH. JP bulbs putting out DK DRN COLORED DRAINAGE IN SMALL AMTS Ø FRANK BLEEDING ABD Soft to touch Ø NEW DRAINAGE @ ABD SITE. KCL RUNNING OVER NEXT 2 HOURS. NO OTHER ISSUES @ THIS TIME. WILL CONTINUE TO MONITOR + ASSESS — [redacted] 10M
10 JUNE 03 0800	PREPARING PT FOR TRANSFER BACK TO 28th CSH ATROPINE + EXTRA FLUSHES Ĉ PT VSS T99.8 [redacted]
10 June 03 0830	Transport back to 28th CSH — [redacted] 662 all
10 JUNE 03 0930	PT VSS 99/59 ART 97/53 NIPB 97/53 P88 R16. NO ISSUES WITH TRANSFER PT VSS SATS > 95% DRAINS EMPTIED. PT TRANSFERED FROM GURNEY BAK TO BED 7 BREATHING @ RATE OF 14 REGULAR Ø signs of DISTRESS. Fentanyl @ 70 VERSED @ 7. UR @ 125 cc/° HG to suction. foley Draining 100cc DK [redacted] urine. No other ISSUES @ this time. CBC, Lytes, ABGS DRAWN See Results upon ARRIVAL — [redacted]

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR [redacted] (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION. (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

EPW

[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
10 June 03 1100	HCT 24.4 Plan to transfuse Pt c̄ 2u pRBCs over 2°. CXR completed. Pt bathed + oral care completed. F_IO_2 ↓ to 60% Rate of 10. Received 20 sqn + KCl x2. UOP continues to be 50cc/o of dark urine. Abd incision Redressed per DR [redacted]. Well granulated. Packed c̄ NS soaked Kerlex covered c̄ gauze 4x4's + Reinforced c̄ Abds @ site. JP dressings Δ'd as well ∅ drainage @ site. Subclavian dressing changed some minimal greenish-yellowish exudate noted @ site. All ports patent to flush. Will premedicate for Blood c̄ Benadryl + Tylenol per DR's order — [redacted]
10 June 03 1145	Vent settings Δ'd Peep 10 Rate 10 F_IO_2 60% TV 850 Weaning F_IO_2 to keep Sats >94%. Currently 100% Will continue to monitor — [redacted]
1200	↓ F_IO_2 55%, SpO_2 100%. — [redacted]
1310	↓ F_IO_2 45%. 1st pRBC's. 4823864. SEE Blood Sheet for continuous US — [redacted]
1415 10 June 03	Receiving 1st unit of blood ∅ S/Sx of reaction Edema to hands +3 currently + Edema to feet +2 nonpitting. F_IO_2 ↓ to 45% Sats 99%. Breathing c̄ difficulty. Will continue to monitor — [redacted]
1430 10 June 03	ABG DRAWN pH 7.43 pCO_2 36.2 pO_2 91 HCO_3 24 SO_2 97% Pt temp 99.4. Will start second unit pRBCs. — [redacted]
1530 10 June 03	Receiving 2ND unit T 100.3 Now ↑ FROM 99.8 @ START OF 2ND UNIT. JP #2 c̄ 40 ml out over past 2° Will Cont to monitor [redacted]

STANDARD FORM 509 (REV. 3/1999) BACK

USAPA V1.00

66-2 dd

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
	GSW Surg
10 Jun 03 1043	Return to OR for 5-9 ASMC — Reg restrict of Dopamine
	Neuro - Sedated Normal/Fentanyl (+) Propofol minimal
	ID - Tm 102.3 Tc BP 100/54 P-93
Meds	- ZOSYN WBC - 14.3
ZOSYN	Resp - ABG - 7.565/33.5/114/30/8/99%
Norcuron	R-14 CXR —
Fentanyl	CV - RRR ± (m) H/H 8/23
Dopamine	GU - 110 2234/1648 (+) 589
Heparin	UO - 50-100 cc/hr [redacted] Bela
	143/106/2.3 Ca - 7.4 66-2
	(2.9) 31 36 110
	GI - Soft - No distension, No BS - Alb 1.2 Amyl 242 T.bil 3.9
	Rimal drang for vomit - hemal clm - Reported salivation - gated Kerlix
	A: POD #3 Ex-Lap w/ Bolam / Bela peritonitis w/ Bela leak
	POD #1-2 DOP LAP - cholecystectomy / Partial min resection / (R) Hemicolectomy
	P: (1) Transfuse 2 units PRBCs (2) Replace K
	(3) Diuresis
	[redacted], MD MAJ, MC USA CHIEF, DOS
	[redacted] 66-2

STANDARD FORM 509 (REV. 5/1999) BACK
USAPA V1.00

[redacted] 66-4

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
10 JUNE 03 0700	VSS. T 96.8. PT COVERED c̄ BLANKETS SKIN "COOL TO TOUCH VENT SETTINGS TV 850 RR 10 PEEP 10 SIMV. SATS 99-100% ON RIGHT SIDE @ PRESENT. UOP continues to be > 100 /. Straw colored URINE. No other Δs @ this time — [redacted]
10 JUNE 03 0900	VSS. T 97.3 ~~Spo2~~ O_2 Sats 99% on FIO_2 50%. Bite block removed + replaced c̄ tape. Open lesion to lower (R) lip. Cleaned + irrigated c̄ NS. Tube secure 24 @ teeth on (R) side of mouth. No other issues @ this time. Will continue to monitor + Assess — [redacted]
10 June 03 1015	PT moving about during bath fentanyl ↑ to 120 mcg/. Dressing to heel Δ'd greenish yellow exudate on old dressing. Sats 98% FIO_2 50%. Breathing s̄ issues @ this time. — [redacted]
10 June 03 1130	Suctioned peak ↓ to 40 TV 750 FIO_2 50% peep 8 Rate 11. PT given versed + fentanyl bolus to ease mout against ventilator. Will continue to monitor — [redacted]
11 JUNE 03 1315	LAB RESULTS RETURNED CRE 1.8 BUN 27 [redacted] 5.6 GIVING PT 40 mEQ KCL over 2° See lab Report for further results. ABGS show pH 7.425 pCO_2 42.1 HCO_3 28 BEECF 4 mmol/L SO_2 95% pt temp 100 pH 7.40 pCO_2 44.0 pO_2 88 FIO_2 50% PT resting comfortably ∅ issues @ this time. Will continue to monitor — [redacted]

662

STANDARD FORM 509 (REV. 5/1999) BACK

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all

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MEDICAL RECORD	PROGRESS NOTES

DATE	NOTES
	GSW Surgery
11 Jan 03	No events overnight
1030	Neuro: Purposeful movements (+) move all ext. Sedated
Meds	w/ Versed/Fentanyl
2054N	JP Tm 100.8 TC 98.8 BP 135/88 P-96
Versed	2054N Dg 4 WBC - 15.4
Fentanyl	Resp/ Vent SIMV 10, TV 850, P-10, 50%
Dopamine	ABG 7.49/43/98/32/10/98.2 PIP - 50
Nepenthe	CXR - RLL derated now! Less effusion
	CV - RRR (S) H/H 10/32.1 PLT-708
	GU - 110 5145/3201 (+)1944
	UO - 2100cc/hr
	GI - Soft - NO BS, No Distension
	Drains intact JPS - Medial - Bile 100cc; Lat - 20cc
	A: POD 4 4 OLP LAP w/ BILOMA - BILE LEAK -
	POD #13 - OLP LAP - Cholecystectomy / Partial liver resection / (R) Hemicolectomy
	P: (1) Antibiotics (2) Continue Antibiotics, cough + Incentive
	(3)
	66-2 [redacted] MD MAJ, MC USA CHIEF, DOS 66-2

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
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USAPA V1.00

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MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
1/Jun 03	GSW Surgery
1090	No events overnight
MEDS	Nurse - Purposeful movements (+) move all ext. Intubated
2054N	w/ Versed/Fentanyl
VERSED	ID Tm 100.8 TC 98.8 BP 135/88 P-96
FENTANYL	2054N Dg4 WBC - 15.4
DOPAMINE	RESP/ VSM7 SIMV 10, TV 850, P-10, 502
NEPRALINE	ABG 7.49/43/98/32/10/982 PIP - 50
	CXR - RLL derated now! Less effusion
	CV - RRR (m) H/H 10/32.1 PLT-708
	GU - I/O 5145/3201 (+)1944
	Lab - >100cc/hr
	GI - Soft - NO BS, No distension
	Drains intact JPS - Medial - Bile 100cc LUT - 20cc
	A: POD 4 4 OLP LAP w/ BILOMA - BILE LEAK -
	POD #13 - OLP LAP - cholecystectomy / Partial liver resection / (R) Hemicolectomy
	P: (1) Antibiotics (2) continue Antibiotics coming + Drains
	(3)
	[redacted] MD
	MAJ, MC USA CHIEF, DOS
	66-2

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
11 JUN 03 1700	Pt continues to be stable T 102 90% Sats 50% FiO_2 fentanyl + Versed running pt resting ē labored breathing. Tube advanced to 26@ lips per Respiratory. Pt suctioned ē thick brn secretions. Pulse upper 110-120. No other issues @ this time. Report given to CPT
66-2 all	[redacted]
1716	Report Recieved [redacted]
1818	Initial Assessment Completed and Documented on ICU Flowsheet Foley + Mouth Care Completed [redacted] CPT/AN
2200	Pt given Heparin 5000 q SQ, Zosyn IVPB, Zantac IVPB Pt Noted to be shivering, Blankets Applied [redacted] CPT/AN
2330	Pt Suctioned, developed ↓ SpO_2 70's ē ↑ HR + Shivering Dr Notified, FiO_2 on Vent ↑ 100% After Dr + CRNA Arrived bagged @ 100% FiO_2 to get SpO_2 ↑ 90% ABG 7.344 PCO_2 68.1 PO_2 54 [redacted] CPT/AN
2400	NG Dumped, NG Drainage tan looked like Coffee ground, Dr Notified [redacted] CPT/AN
12 JUN 03 0045	ABG Completed, Dr Notified, Orders Recieved [redacted] CPT AN
0132	Lasix 20mg IV Push given, Cipro 400mg IV PB started [redacted] CPT/AN
0400	AM Labs Drawn, ABG by I stat PH 7.46 P_{O_2} 69 P_{CO_2} 42.7 HCO_3 30 SpO_2 63 BE 7 [redacted] CPT/AN

STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER
			66-2 all

DATE	NOTES
12 JUNE 03 0600	RECEIVED PT FROM CPT [redacted] VSS. T 100.4. LUNGS MORE COARSE TODAY DIMINISHED IN BASES BILATERALLY. FiO2 60% SATS 98% c̄ RATE OF 15. AM CBC Showed WBC 18.3 Hgb/Hct 10.1/32.3. CXR not taken this am radiology notified. Abd soft c̄ midline incision dressings clean. BS absent in all 4 quads. Edema to hands + feet +2 see full Assessment per flowsheet. Vec @ 1.0 mcg/k/min, fent. 100 mcg/o, Dopamine 3.0 mcg/k/m. versed @ 9 mg/o. No other issues @ this time. Will continue to monitor + Assess — [redacted]
12 JUNE 03 0810	PT BP↓ to 80's/40's DOPAMINE↑ to 5.0 mcg/kg/min NIBP 75/42 Pulse in 100's. Will continue to monitor — [redacted]
12 JUNE 03 0900	BP ↑ to 138/74 ART 125/76 NIBP Pulse 89 T 99.4 Pt Bathed + heel dressing Δ'd. Total I+O Ratio for 8° 1448/1846. + 398. No other issues @ this time — [redacted]
12 JUNE 03 1100	BP 142/75 NIBP 128/71 DOPAMINE @ 3 mcg/kg/min pulse 109. T 100.4 Axillary. Sats 100% ON FiO2 60 TV 700 PEEP 10 RATE 15. DRESSING @ Abd Δ'd. old Dressing c̄ serosanguinous / light green exudate mixture Incision c̄ fresh tissue bilaterally 1 peasized blackened area noted 4/0 (L upper ⓡ of incision. packed c̄ NS soaked gauze + Covered c̄ gauze 4x4's reinforced c̄ Abd's. No other issues @ this time. [redacted]

STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
6/12/03@1716	Rpt Received From LT [redacted], Physical assessment Completed & Documented on ICU Flowsheet. [redacted] CPT/AN
12 June 03 1829	Surgery Pt placed on Vecuronium drip late pm when he began fighting vent + ↓ SAT. Hard for ↓ TV and ↑ CO_2. Adsln Crime & regimen when pt also had fever 103. Clinically felt to 102°. · CXR — appears normal this am · Fever all again ∑ erythema. Abdom Sept: No BS. A: Sepsis. P: Expand antibiotic coverage. ⊕ Vanc. [redacted], MD MAJ, MC USA CHIEF, DOS [redacted] CPT/AN
6/11/03@2200	Pt status Unchanged, Q2hr Turns [redacted] CPT/AN
6/11/03@2330	I+O 24 Totals IV in 4517 P/O 3130 N Gout 735 JP out 133 + 529 over 24hr [redacted] CPT/AN
6/11/03@2400	Pt bath Completed, [redacted] Pt Noted to be developing Decub 75cm in Coccyx Area. Suctioned X4 Moderate Amounts of Clear sputum [redacted] CPT/AN

RELATIONSHIP TO SPONSOR | SPONSOR'S NAME: LAST | FIRST | MI | SPONSOR'S ID NUMBER (SSN or Other)

DEPART./SERVICE | HOSPITAL OR MEDICAL FACILITY | RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade) | REGISTER NO. | WARD NO.

[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
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USAPA V1.00

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MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
17 June 03 0950	GENERAL SURGERY SVC POD # 7/17 - This patient has been deteriorating past 72' - ↓ UO and ↑ WBC - still on Dopamine and requires ↑ Flows. JP's consist liquid drainage, hence ↓ output. A: Probable undrained bile leak P: Plan to return to OR today for exploratory laparotomy for bile drainage, possibly tube placement, thrombectomy. [redacted] MAJ, MC USA, MD CHIEF, DOS b6-2

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

EPW [redacted] b6-4

PROGRESS NOTES
Medical Record

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MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES

6/13/03 @ 0045 Pt SBP ↓ < 90 MAP < 60, U/O ≥ 30 cc/hr, Fentanyl gtt ↓ 8 ml/hr Dr Notified Orders for Bolus received [redacted] CPT/AN 66-2 all

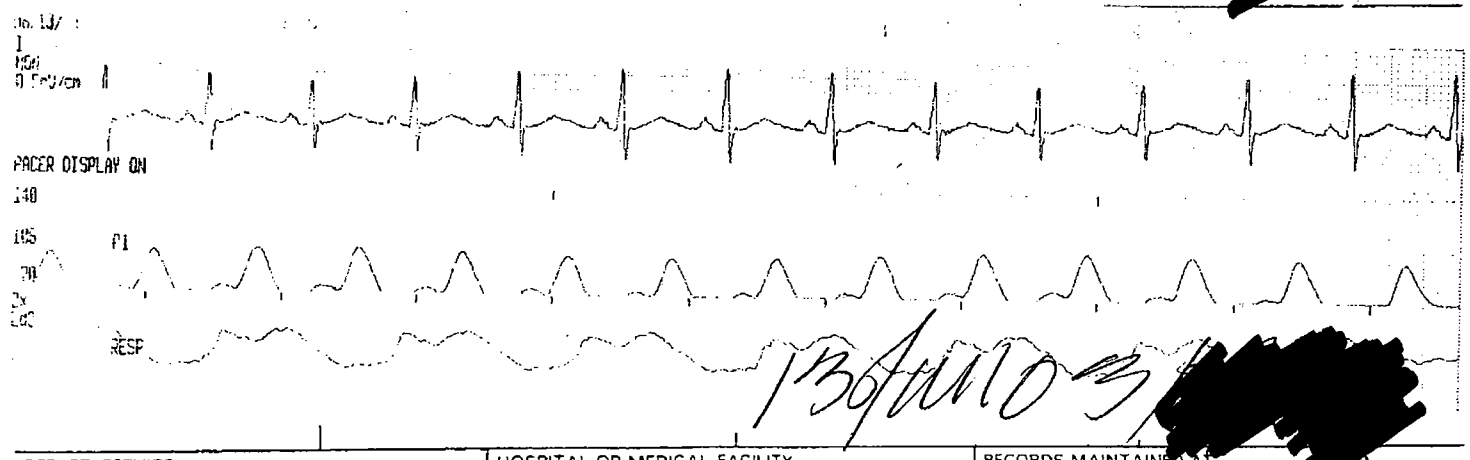
6/13/03 @ 0135 1LTR LR Bolus Completed SBP > 110 [redacted] CPT/AN

6/13/03 @ 0330 AM Labs Drawn + Sent, ABG PH 7.48 P_{O_2} 91 P_{CO_2} 43 HCO_3 31 SpO_2 97% BE 8 [redacted] CPT/AN

6/13/03 @ 0410 Vent Peak pressure Alarm > 50 Pt Suctioned X4 Scant Clear sputum suctioned [redacted] CPT/AN

6/13/03 @ 0430 AM Lab results recorded on ICU Flowsheet and Posted in chart [redacted] CPT/AN

6/13/03 0500 Assumed care. Report given see ICU-1 Flowsheet for initial assessment. [redacted] TR



DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT [redacted]

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] 66-4 13 Jun 03

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV 5/1999)
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USAPA V1.00

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MEDICAL RECORD	CHRONOLOGICAL RECORD OF MEDICAL CARE
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
13 Jun 03	Pt continues on mechanical ventilation size 7 ETT Placed 26cm
RT 0605	@ lip parameters set SIMV RR15 VT 700 FIO2 60% Peep 10 [redacted] RT
	BBS Diminished HR 10x BP 106/54 SPO2 99 [redacted]
13 Jun 03	Neb tx Given .5cc Alb c̄ 2.5cc NS BS coarse c̄ insp & exp wheez [redacted]
RT 1300	SPO2 100 Post Tx Slight improvement to BS SPO2 100% [redacted] RT
13 Jun 03 2330	Pt sedated w/ Fentanyl / Versed; pt paralyzed w/ Vec, pupils 2mm equal and reactive; pt continues on vent w/ sats 98-100%; pt running SR/ST 90s-100 w/ ∅ ectopy; BP 90s-100 systolic; LR @ 125cc/hr; Dopamine infusing @ 3mcg/kg/min; UOP 0 @ 1900 - pt given 40mg Lasix IVP - UOP increased to 30/hr for 2hrs; No UOP for 2300 - Dr [redacted] notified - pt given LR bolus 1000cc - currently infusing; JP drains w/ minimal output; NGT to LIS w/ moderate output; abd drsg CDI; will continue to assess and monitor; [redacted]
14 Jun 03 0230	Pt remains sedated / paralyzed; on vent SIMV: 700 / 60% / 15 / 10; Sats 99-100%; pt running SR/ST c̄ ∅ ectopy; JP/NG output minimal; UOP 15-30 cc/hr; 150cc out post LR bolus; Am labs drawn; ABG: 7.47/37/98/28/98%/4; will continue to assess and monitor [redacted] JP/AM

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORD [redacted] NTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* REGISTER NO. WARD NO.

Pt [redacted] 66-4

66-2 all

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
13Jun03	1500 CVP 30. 20mg Lasix IVP given. DR [redacted] @ bedside — [redacted]
13June 03 1515	Ø uop foley irrigated c̄ 30cc NS. — [redacted]
1530	30cc return from Foley, 500cc LR bolus started — [redacted] 1615 DR SC @ bedside, update given & new orders received — [redacted]
13Jun 03	Neb tx given .5cc Alb c̄ 2.5cc N.S BS coarse. No change after tx SpO2 98% — [redacted]
~~14June 03~~	~~VSS T 97.5~~
	66-2 ↑ all

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

[redacted] 13Jun03

66-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
6/13/03	0600 RT deep SX, 0 result, PF202 @ 100% during procedure — [redacted]
	0630 U 80%, SO2 @ 98%-99% — [redacted]
	0630 PCXR completed — [redacted]
	0800 emptied AP milk #1 75cc & seroSang #2 10cc & brown drainage noted. — [redacted]
	0900 remains on vecuronium @ 1mg/kg/min. Neuro stimulator used 4/4. Temp 102, Tylenol supp. given PR. Updated [redacted] on HR 140s. — [redacted]
	1050 labs & CXR reviewed by Dr [redacted] TPS flush by RA, 60cc clear fluid [redacted] IV pulses. — [redacted]
	1150 d/c vecuronium 0.5 mcg/kg/min with [redacted] recheck TOF — [redacted]
	1200 Heparin 500 IU bag hung — [redacted]
	1310 Neb treatment peak airway 90-94.
	1430 Tylenol supp given, PO2 500cc LR bolus given per Dr [redacted] @ bedside. — [redacted]

RELATIONSHIP TO SPONSOR | SPONSOR'S NAME: LAST | FIRST | MI | SPONSOR'S ID NUMBER (SSN or Other) [redacted]

DEPART./SERVICE | HOSPITAL OR MEDICAL FACILITY | RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade) | REGISTER NO. | WARD NO.

[redacted] 13 Jun 03

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
	Gen Surgery SVC
13 June 03	Neuro - Sedated + Paralyzed
1852	ID Tm 102 Tc-102 BP-122/64 P-130
	ZOSYN Dy-6 CIPRO Dy 2 Vancomycin Dy 1 WBC 17.7 8.9 28.9 (C4)
	Resp: VENT - SIMV - 700cc, R-15, P-10, FiO2 40 T.bilt 6.3
	CXR-Lung stable 7.98/43/91/31/8/97 2
	CV - Tachycardic
	GI - Nutrition NPO BS, No bowel flora
	GU - I/O 4577/3988 (+) 529 SPS - 2 - 90
	At POD #6 OLP LAP - Bleeding damage + Pt may be developing a fistula or Bile P
	POD 16 original GAP lap
	Pt certainly cannot manage - Consider exp lap
	[redacted] MD USA DOS
	66-2

STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
	2000
14 Jun	pt. given UD AIB. via inline @ 8Lpm
	P - 125 - 126
	RR - 15 - 15
	BBS ā diminished lower lobes ~~no Δ~~ p̄ coarse
15 Jun	0000 pt given UD AIB via inline @ 8Lpm
	P 114 - 114
	RR 24 - 18
	BBS ā diminished lower lobes clear p̄ no Δ
	0100 pt. given UD AIB via inline @ 8Lpm
	P 107 -
	RR 30 - 23
	BBS ā clear diminished lower lobes p̄ no Δ
	2000
	Pt. given UD AIB via inline @ 8Lpm
	P 109 - 113
	RR 19 - 20
	BBS ā clear diminished p̄ no Δ
16 Jun	000 Pt. given UD AIB via inline @ 8Lpm
	P 104 - 111 RR 36 - 30
	BBS ā diminished p̄ no Δ

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)	REGISTER NO.	WARD NO.
66-4 [redacted]		

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
6/14/03 @ 1725	Pt recieved from OR Report Recieved. Pt Settled, VS WNL's. Pt' Back washed + Patient turned to Right Side, ABG Completed PH 7.371 P_{CO_2} 46.5 P_{O_2} 73 BE 2 HCO_3 27 TCO_2 28 SpO_2 94% CBC + Chem 8 Drawn + Sent All Preop orders restarted [redacted] CPT/AN [redacted] CPT/AN
6/14/03 @ 1800	U/O 5 cc Dr Notified [redacted] CPT/AN
6/14/03 @ 1850	LR Bolus 1000 cc started [redacted] CPT/AN
6/14/03 @ 1920	Lasix 20mg IV Push [redacted] CPT/AN
6/14/03 @ 2108	Pt MAP ≤ 70 Dopamine ↑ 4 mcg/kg/min [redacted] CPT/AN
6/14/03 @ 2140	ABG + Chem 8 Completed, Orders Recieved [redacted] CPT/AN
6/14/03 @ 2200	Lasix 80mg IV Push Given [redacted] CPT/AN
6/14/03 @ 2280	ABG PH 7.43 P_{CO_2} 34.7 P_{O_2} 61 HCO_3 23 SpO_2 93% Base -2 [redacted] CPT/AN
6/14/03 @ 2320	Daily I+O U/O 558.5 EBL 100 NG 700 JP's 166.5 Total Out 1525 IV IN 8778.2 Δ + 7253.2 [redacted] CPT/AN
6/14/03 @ 2340	Neuro Stimulator used on (L) FA - Twitch felt for over 4 stimulations [redacted] CPT/AN
6/15/03 @ 0205	MAP ≤ 60 Dopamine ↑ 5 mcg/kg/min [redacted] CPT/AN
6/15/03 @ 0225	Dr Notified of ↓ MAP + SBP and ↓ U/O. Orders Recieved. [redacted] CPT/AN
6/15/03 @ 0250	Dr Notified of Results of Chem 8 + CVP. No Orders Recieved. [redacted] CPT/AN

STANDARD FORM 509 (REV. 5/1999) BACK
USAPA V1.00

b6-2 all

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **PROGRESS NOTES**

DATE | NOTES

Gen. Anesth 1653 96^3 - 117 - 15 95%

BP: 80/50 132/72

Fluids | Hespan 500cc

LR 2300

UO = 15cc - 20cc

EBL 100 QAb

8 Trach:

I+D Abd.
Gast. TF J-Tube
Trach.
B

Procedure
I+D Abd
J-Tube
Trach B

ORVS: 80/50

VS: 96^3-117-15 95%

Fluids
500 Hespan
LR 2300
UO 15-20cc
EBL 100

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT.

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(1O)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	GENERAL SURG OP NOTE — NOTES
14 June 03	PRE-OP DX — Sepsis
1700	POST-OP DX — BILOMA, VENT DEPENDENCY
	PROCEDURE — EXPLORATORY LAP w/ Washout/placement Feeding J-tube, Tracheostomy
	SURGEON Dr. [redacted] ASSIST - Dr. [redacted]
	TIME OF FINDING — 1100cc Bile in Peritoneum.
	DESCRIPTION — GEN — Abdomen opened - Filmy adhesions - 1100cc Bileous peritoneal fluid - No active leak seen, Small gallbladder - WNL. Colon WNL - Liver Bed is visible leak 16 Fr Robinson cath used for Feeding Jejunostomy. Placed 1 Foot distal to ligament of Treitz. Witzel technique. Suture to skin w/ 3-0 Nylon. Abdomen washed out w/ 3L NS, JP's placed back in original position. (medial in lower, lateral in Foramen of Winslow). Fascia closed w/ 2 long sutures Ethicon #1 / Maxon. Subcut packed w/ Saline soaked gauze. # 8 Shiley Tracheostomy tube placed using [redacted] technique - Stay sutures x2 w/ 3-0 Nylon. [redacted] MD PCA tolerated procedure. Transported to ICU 1 in stable condition.
	IV fluids in - 2300cc LR, 500cc Hespan. 66-2 all
	UO - 15cc EBL - Minimal
	[redacted] MD MAJ, MC

STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
1158 6/14/03	Neb tx given - 5cc Alb & 2.5cc NS HR % SpO2 98 BS coarse
Resp therapy	post Tx BS Diminished in Base SpO2 98% Pt Suctioned
	about 2 cc semi thick secretions [redacted]
14 JUNE 03	Anesthesia by to see pt. for preop eval. Suctioned
1230	Peak ↓ to 30's thick yellowish sputum produced &
	14fr suction catheter. Sats 99% FIO2 60% Continues to
	be COARSE & Diminished bases R>L. Will continue
	to monitor [redacted]
14 June 03	Continues to have uop ≥ 30cc/o. Transferring
1345	to OR VSS T 97.7 BP 103/56 HR 100 R 15 Sats 98
	[redacted]
	66-2 all

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO.	WARD NO.

[redacted] 6-6-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
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USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
14JUNE03	VSS. Pt T97.5 UOP ↓ to 20 then ↑ Between 4+5
0512	DR Notified. ORDERS NO Δ's. Received pt from
	Night shift ē No other issues. Sats 99%
	on SIMV FIO2 60% TV 700 Rate 15. pH 7.4
	pCO2 37.7 pO2 98 HCO3 28. See full
	Assessment on DA 4700 Flow Sheet. Will Continue
	to monitor + Assess — [redacted]
14Jun 03	Pt continues on mechanical ventilation parameters set SIMV [redacted]
RT 0845	VT 700 Peep 10 FIO2 60% BS clear HR 97 BP 106/63 SpO2 98%
	— [redacted]
14JuneO3	PT UOP ≈30/. Scrotal EDEMA UPON FOLEY CARE NOTED
0800	ELEVATED ē GAUZE. DRESSING TO HEEL Δ'd ē old
	SEROSANGUINOUS DRAINAGE. SATS 98-100% ON FIO2 60
	Peep 10 RATE 15. No OTHER ISSUES @ this time — [redacted]
14Jun 03	Neb tx given to pt. Sec Alb ē 2.5cc NS BS coarse + Dimmish
0840	SpO2 98% Post Tx BS Diminished SpO2 98 HR 74 — [redacted]
14JuneO3	UOP Remains 30/. Begin Administration of
1000	Albumin 25% in 1000mL LR over 30 minutes
	via pressure bag. Tubes drawn for crossmatch
	for PREOP pt status. DR [redacted] @ Bedside.
	Plan to return to OR this afternoon. Will
	Continue to monitor — [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RE[redacted]
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	66-2 all

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* | REGISTER NO. | WARD NO.

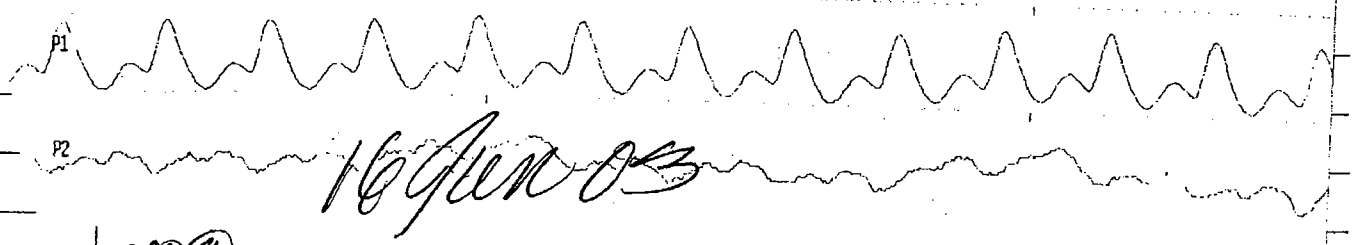
EPW # [redacted]

66-4

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
6/15/03 @ 2300	24° I+O IV in 4028 U/O 1333 N/G: 300 JP: 210 In Total 4028 Out Total 1843 Balance + 2185 [redacted] CPT/AW
6/16/03 @ 0200	U/O For Last 2hr (30 cc/hr Dr Notified [redacted] CPT/AW
6/16/03 @ 0210	Order Recieved [redacted] CPT/AW
6/16/03 @ 0244	Lasix 160 mg IVP over 10 mins [redacted] CPT/AW
6/16/03 @ 0340	AM Labs Collected. ABG PH 7.414 PCO_2 40.1 PO_2 55 HCO_3 26 SPO_2 90% Base Excess [redacted] CPT/AW
6/16/03 @ 0420	AM Lab Results WBC 11.7 RBC 2.80 Hgb 7.4 Hct 23.9 MCV 85.1 PLT 140 Lymph % 10.4 [redacted] CPT/AW
6/16/03	0510 Received report. Initial assessment on DA Form 4700, WBMC 0P375 [redacted]



6/16/03	0600 @ Repositioned c pillow/roll support & 0610 Flush J-Tube c 10cc H2O. [redacted] 0800 Dr [redacted] @ bedside. Orders received labs reviewed. Repeat on BUN, Creat. [redacted]

STANDARD FORM [redacted] (REV [redacted] 1991) BACK
USAPA V1.00

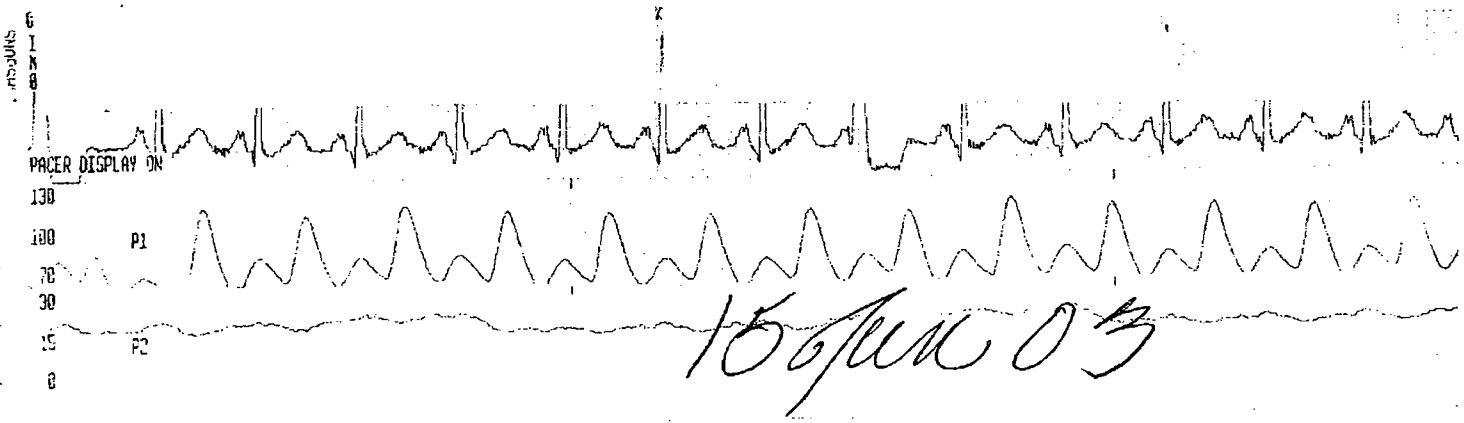
[redacted] 16 June

66-4 66-2 all

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES

DATE	NOTES
6/15/03@0400	AM Labs Collected, Pt Turned, AM ABG PH 7.46, Pco2 36.9 PO2 97 HCO3 26 SpO2 98 Base Excess +2 [redacted]
6/15/03	0500 Assumed care. Report given, see Turn Sheet for initial assessment. [redacted]



0615 16mg last IV IVP given over 2 minutes Dr [redacted] @ bedside. O2 FIO2 80%. SpO2 98% - 100%. [redacted]
0830 Dr [redacted] @ bedside. Pt's [redacted] placed back on. TUS. New Foley bag on. [redacted] urine meter. [redacted]
0900 Pt's [redacted] Turned. [redacted]

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	[redacted]

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT
		66-2

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

EPW [redacted] 66-4
15 Jun 03

REGISTER NO.	WARD NO.

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

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MEDICAL RECORD | **PROGRESS NOTES**

DATE	NOTES
15 Jun 03	0930 Updated Dr [redacted] on PUS. O/G Urin, Vecuronium gtt DC'ed. [redacted]
	1130 Turned & blanket support. [redacted]
	1215 ABG drawn, results given to Dr [redacted] leaned all lines [redacted]
	1300 PF02 150%. SpO2 99% [redacted]
	1400 16 mg Lasix IV given over 10 min &
	1530 Dr [redacted] @ bedside update given & new orders received [redacted]
	1610 ABG drawn, reviewed by Dr [redacted]
	1630 turned on new O2 tank, PF02 100%. SpO2 99% [redacted]
15 Jun 03	@ 1730 Report Recieved on Patient, Initial Assessment completed + recorded on ICU Flowsheet [redacted]
15 Jun 03	@ 1800 Pt Turned, Back Care done, Duodrum in place over Decub on Coccyx, Oral care Completed [redacted]
15 Jun 03	@ 2025 Pharmacy out of Ativan, Pt Switched to Propofol @ 15 mcg/kg/min [redacted]
15 Jun 03	@ 2130 T-Tube Flushed @ 10 cc H2O [redacted]

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

EPW [redacted]

66-4

REGISTER NO.	WARD NO.

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
16 Jan 03	Neb tx Given to pt .5cc Alb/2.5cc NS BS Diminished
1355	SPO2 96% HR 110 BP 102/64 Post Tx No A to BS
	SPO2 95 o/o [redacted] RT SGT
16 Jun	Neb tx given .5cc Alb/2.5cc NS BS Coarse HR 110 BP 92/48 RR 25
1630	SPO2 95% BS Coarse post Tx BS Diminished HR 108
	BP 89/51 SPO2 95 [redacted] RT SGT
17 Jun	Pt continues on mechanical ventilation size 8 Shiley trach
	parameters set SIMV RR 24 VT 750 PeeP 14 FIO2 80%
	HR 91 BP 116/71 SPO2 90% Pt Suctioned Removed about
	3cc brownish green blood tainted sputum. BS Diminished.
	[redacted]
0736	In line Neb tx given .5cc BS Diminished HR 69 BP 102/89
	SPO2 91% Post tx HR 90 BP 96/56 RR 24 SPO2 91%
	BS No change [redacted] RT
1227	Neb tx given to pt .5cc Alb c 2.5cc NS BS Diminished HR 98
	BP 102/63 SPO2 91 Post tx BS No A HR 98 SPO2 95
	[redacted] RT SGT
1650	Neb tx Given in line .5cc Alb/2.5cc NS BS Diminished
	HR 101 BP 100/54 SPO2 88 Post tx BS No A HR 69 b6-7 all ↑
	BP 105/59 SPO2 89

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] b6-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

66-2 all

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
6/16/03	0815 HR ↓ 60's. notified Dr [redacted]
	0820 Dr [redacted] remains @ bedside.
	HR 37 for few seconds, SBP 90's.
	Frequent PVC's present. HR return
	back to 90's c frequent PVC's [redacted]
	0830 HR 100-105 c occ PVC's noted.
	SBP 90's. Repeat lyte labs drawn [redacted]
	0900 Dr [redacted] alerted to give 160 mg
	Lasix x 10 min. [redacted]
	0930. Lasix gtt started @ 30 mg/hr [redacted]
	1090 Dr [redacted] @ bedside. orders received,
	labs reviewed.
	1100 Lasix 320 mg given over 20 minutes,
	Lasix gtt returns on. [redacted]
	1230 urine output. new Dx ® more fluid [redacted]
	1340 ↑ Lasix gtt 40 mg/hr per orders [redacted]
	1420 Vecuronium IVP given. vent settings
	rec'd by Dr [redacted]. sinus rate 24, peak
	14 to 450, FiO2 80% [redacted]
	1500 Vecuronium gtt started. ABG [redacted]
	results read by Dr. [redacted]
	1530 ABG drawn, reviewed by Dr [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RE[redacted]NED A[redacted]
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)* [redacted] | REGISTER NO. | WARD NO.

66-4

Tell-1

160/Lasix

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
16 Jun	0400 Pt given UD AIB via inline @ 8L/pm
	P 107 - 100
	RR 16 - 39
	BBS ā coarse p̄ diminished p̄
	pt. Suction ī no secretions
16 Jun	1800 pt. given UD AIB via inline @ 8L/pm
	P 106 - 110 RR 28 - 24
	BBS ā diminished p̄ NO Δ
	0000 TX not given in ER
	0400 pt. given UD AIB via inline @ 8L/pm
	P 87 - 94 RR 24 - 24
	BBS ā diminished p̄ NO Δ
17 Jun	1900 Pt. given UD AIB via inline ~~via~~ @ 8L/pm
	P 109 - 107 RR 24 24
	BBS ā rhonchi throughout p̄ NO Δ
	Nothing follows
	18 JUN 03

b6-4

STANDARD FORM 509 (REV. 5/1999) BACK
USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES

17 JUNE 03 — GENERAL SURGERY SVC — POD # 10/20

1030 — GEN – 5140 IRAQI Male – SP GSW to Abdomen requiring exploratory Lap w/ Cholecystectomy / Partial liver resection, Right Hemicolectomy. He subsequently dev. a Biloma w/ Bile Peritonitis requiring operative Drainage. He has ARDS + Renal Failure resistant to loop Diuretics. He will soon require Dialysis which is not offered here. Without Dialysis this patient will die. The question has been elevated up the chain of command for further consideration but at this point – our EPW patients requiring higher levels of medical care cannot leave the theater or be sent to IRAQI civilian hospitals.

NEURO – Sedated / Paralyzed

ID – Tm-98 Tc 98

2054W Day 10 CIPRO Day 6 Vancomycin Day 5 9.2 / 7.2 / 22.9 < 93

RESP – VENT – 90% FiO2, SIMV-24 TV-780, P-14

CVR – Very Wet – ARDS Picture ABG 7.40/35.6/57/22/-2/90%. PIP-40

GI – No BS – No Bowel Sounds. 10cc/hr TF

CL – 110 – 4424/820 D3C04 135/97 < [redacted] 66-2

42/21 118 ALT-23

AMY-126

AST-82

Central

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	83T-2)

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

EPW [redacted] 66-4

REGISTER NO. | WARD NO.

PROGRESS NOTES
Medical Record

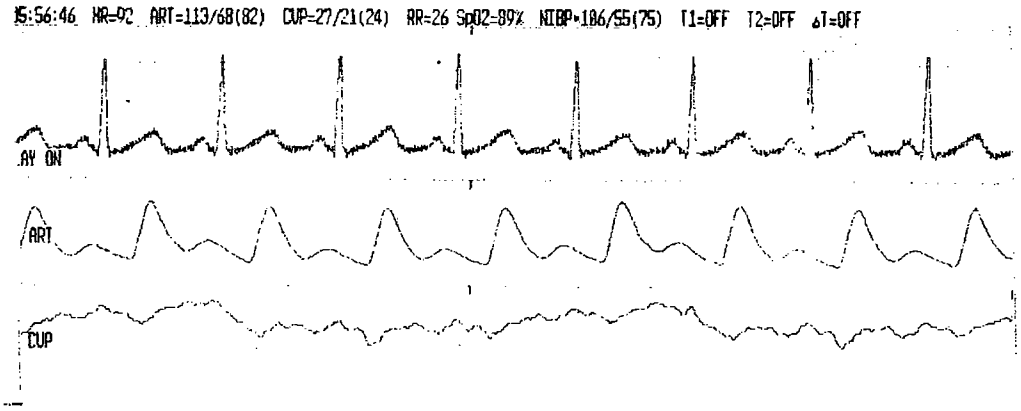
STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES

6/16/03 1600 Labs reviewed by Dr [redacted] & new orders noted. 1600 Report given. [redacted]

6/17/03



6/17/03 0530 Nursing: Oxygenation.
Received report from off going shift upon assessment pt's O2 sats floated between ~~88-92%~~ 88%-92%. RT notified. Pt was suctioned. dark yellowish secretion was suctioned from the trach. It took over 10-15 mins of bagging using the Ambu bag 100% O2 to bring O2 sat back from 85-92% [redacted] suctioning well tolerated to normal resp status. [redacted] 66-2 all

6/17/03 Nursing: Oxygenation/perfusion
0729 ABG done PO2 57, PH 7.46, PCO2 35.6, HCO3 22 mmol. Sat 89%

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] 66-4

FEU-1 16/11/03

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
	GS cont'd
	A: Cervical ARDS + Renal Failure -
	P: continue losix drip, ventilator management and antibiotics. Anticipate further guidance for higher level of care.
	b6-2
	[redacted] MD
	MAJ, MC USA
	CHIEF, DOS

STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
6/17/03 @ 0200	Pt Turned, suctioned, oral care completed [redacted]
6/17/03 @ 0350	Am Labs Collected, ABG PH 7.35 P_{CO_2} 38.6 P_{O_2} 54 HCO_3 22 Base Excess -4 SpO_2 87% on SIMV TV 750 RR 24 PEEP 14 FIO_2 100% [redacted]
	66-2

STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
6/17/03 1300	Nursing: Decubitus Ulcer. Pt has stage II Sacral Decub on mid Sacral region. Skin is ~~peeled~~ peeled off & active bleeding noted. area cleaned c̄ Sterile Saline gauze. Duoderm applied. Pt also has a Stage II Skin break down on the (R) Heel. Duoderm also applied p̄ cleaning the area. [redacted]
6/17/03 1617	Nursing: End of shift note. Pt remains fairly stable but doing poorly c̄ oxygenation. FiO2 ↑ to 100% 2° desaturation Episodes from sats of 95% down to as low as 88%. ABG is progressively poorer c̄ pH from 7.42 to now 7.34, ↑ pCO2 from 34-41, Bicarb not compensating @ 22 steady and O2 sat @ 81 c̄ PO2 dropping from 57 to 50. Pt does not respond fast enough with increased Sat c̄ Bagging using Amb bag c̄ 100% FiO2. O2 sat rather fluctuate erratically from high 90s to sudden drop to 80s. H.O notified. Will continue to monitor pt's status [redacted]
6/17/03 1732	Report from off going Nurses [redacted] Physical Assessment Completed + Recorded on ICU Flow Sheet [redacted] CRT/AW
6/17/03 2200	Back + Oral Care Completed [redacted] CRT/AW
6/17/03 2300	24° I/O IV 1411 U/O 862 N 930 [redacted] CRT/AW
	Balance (+) 2542

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME [redacted] LAST	FIRST	MI	SPONSOR'S ID NUMBER (SSN or Other) 66-2 all
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade) | REGISTER NO. | WARD NO.

EPW# [redacted] 66-4
ICU I

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
6/17/03	Nursing - Oxygenation: Oxygenation
0645	CXR show almost whited out both lung fields. CXR examined by H.O & consultant. Continue c current treatment Regimen: [redacted] CT An.
6/17/03	Nursing: Genitourinary
0930	Scrotal Edema very Enlarged - Serum Elevated. U/O range from 30-60cc/hr. Pt remains on Lasix drip now at 5mg/hr. Burn & Crest from Ace Tube remain high @ 55/5.6. H.O notified [redacted]
6/17/03	Nursing: Oxygenation
1023	Pt desatured to 85%. Taken off vent. Bagged c 100% O2 Sat remained in the high 80's to 90% RT notified, FiO2 ↑ 90% Sat ↑ 92% [redacted]
6/17/03	Nursing: Dsg Δ
1040	Midline Abdominal incision dsg change done. The wound has moderate amount of Serosanguinous drainage. & foul odor or any s/s of infection noted. wound is also moist c evidence of granulation on the other Edges. Using Sterile Technique & moist Super Sponge gauze were applied @ the wound bed & reinforced c Sterile 4x4 and Abd pads then taped c Medipore tape. Two JP's #1 & #2 are in place and intact. JP #1 Dumped 40cc while JP #2 only 10cc Dumped. (R) Lower flank has a hole less than one dime Coin size. Foul Smelling outer packing was removed. Moderately irrigated and Iodoform packing Sterilely applied and packed to wound reinforced c 4x4 Sterile dressing. (R) Shoulder Suture line has Serous drainage seeping out of old scarred [redacted] Staple lines dressed c 4x4 reinforced c medipore tape [redacted]

STANDARD FORM 509 ([redacted] 1991) BACK
USAPA V1.00

Cont-d

66-2 all

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
6/18/03	1500 Ø ∆ from previous assessment. Sx & Min Vent secretion per [redacted] 1050 Vent setting A/C per Dr. [redacted] ABG in 30 minutes [redacted]
6/18/03	1700 Received report from Cpl [redacted]. Assessment performed see ICU-flowsheet. Pt very edematous c̄ pitting. LS diminished (B), Hypoactive BS. (R) ⊼C-triple lumen patent, (R) brachial A-line patent. [redacted]
6/19/03	0230 When suctioning trach tube, upon removal of tubing frank blood noticed in trach tube, small amt. suctioned. Sats @ this time 65-67% [redacted] 0300 - Dark red blood noticed in g-tube. [redacted] 0330 - Pupils @ beginning of shift, were fixed, very little if no pupil movement, pupils were equal at 1700. Pupils are now unequal, fixed & dilated. OS larger than OD. Pupils fixed, dilated. [redacted]
	66-2 all

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT		

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO. | WARD NO.

[redacted] 66-4

18 Jun 03

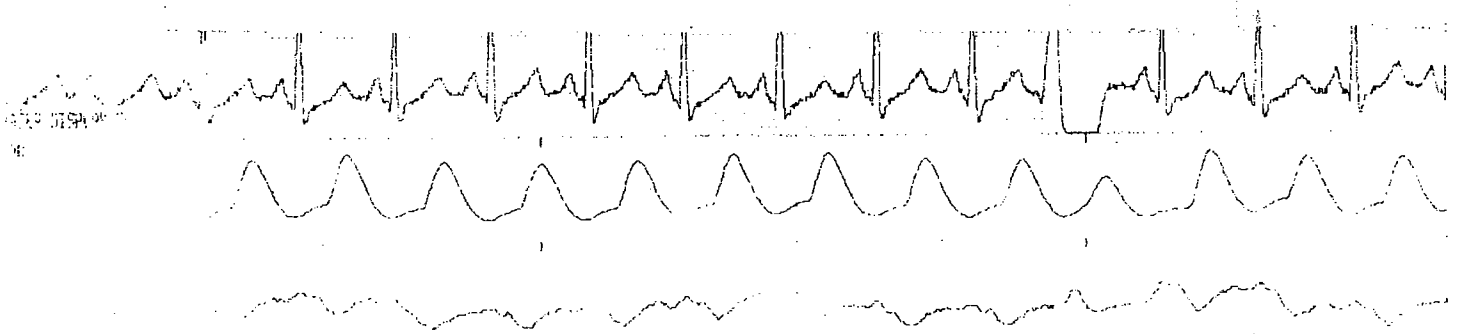
PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
6/18/03	1600 Assumed care. Report given, initial assessment on OA Ward 700, warm OK 37.5. [redacted]



18 Jun 03	0630 Deep sx'd, thick brown tenacious secretions noted at back. [redacted]
	0700 Hyperventilation & suppose, sx'd as before [redacted]
	0730 Labs repeat per Dr's [redacted]
	0800 Labs placed @ bedside [redacted]
	0930 Sx'd as before. [redacted]
	1050 Updated Dr. on labs. [redacted]
	1300 Orders received per Dr [redacted]
	1330 320mg Lasix IVP over 20 minutes [redacted]

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	66-2 all

PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)*	REGISTER NO.	WARD NO.
[redacted] 66-4 18 Jun 03		

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES
8 JUN 03 0800	~~pt remain on vent & follow setting SIMV RR 30 VT 550, peep 10, FIO2 80% P.O. ET tube 28 at the teeth alarm set and functioning~~ b.s. [redacted] Above entry in Error [redacted] ERT
8 JUN 03 0800	pt remain on vent & follow setting SIMV RR 24, VT 750, peep 14 FIO2 100%, ~~Trach, 24 Shiley~~ [redacted], MLT obtain, pt given ē 15cc alb/25cc NSS x duration of mech HR 121-122 b.s. ē o p̄ tro demand ē mild exp wheeze on (L) side, ~~then~~ A tro well P.O. 90-91% [redacted] CRT
16 Jun 1230	Neb tx given in line - 5cc Alb/2.5cc NS BS Diminished SpO2 87 HR 118 BP 86/56 pt Not breathing over vent post tx BS NO Δ HR 121 SpO2 88 [redacted] RT SGT
1630	Neb tx given in line Alb - 5cc Alb/2.5cc NS HR 107 BS Diminished SpO2 76% RR 25 Post tx BS Diminished SpO2 80 HR 111 [redacted] RT SGT
12Ø0	RT note: Neb UD Alb given via HHN, Requested per nursing staff BS ↓. SpO2 89 on 100%. HR-109 RR 25. Pt on mech. vent. Post tx HR - 110 RR 25 SpO2 - 91%. Suction pt ē little sputum obtain. Will continue to monitor — Sg [redacted] 9/2Ø
9 Jun 03 0715	Pt continues on mechanical ventilation size 8 Shiley trach Parameters Simv RR25 FIO2 100% Peep 18 VT 760 HR 89 BP 63/42 SpO2 71% on 100% FIO2 Pt Not breathing over vent [redacted]

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	66-21

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO.	WARD NO.

[redacted] 66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

LAST NAME	FIRST NAME	MIDDLE INITIAL	ID NUMBER

DATE	NOTES
19 Jan 03	Neb tx given to pt in line .5cc Alb/2.5cc NS Bs Diminished
0820	HR 89 SPO2 75% post tx BS No Change HR 90 SPO2 76
	[redacted] R
19 Jun 03	Pt Disconnected from vent care D/c'd
0920	[redacted] RT/Sig
	b6-2 all
	Nothing follows
	Sec [redacted]

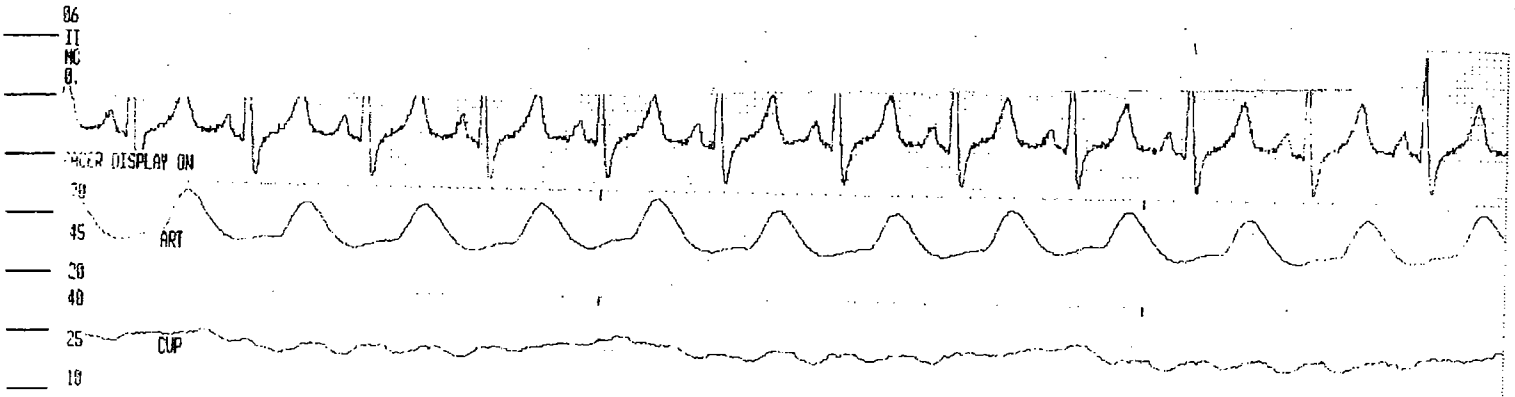
STANDARD FORM 509 (REV. 5/1999) BACK

USAPA V1.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	PROGRESS NOTES
DATE	NOTES

3/4/05 0500 Resumed care. Report given. See flowsheet for initial assessment. [redacted] JR



0610 RR [redacted] @ bedside. [redacted]
0900 Dopamine 800 mcg/kg/min on [redacted]
SBP 60's. SPO2 70's. HR 80's.

66-2

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	

DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY	RECORDS MAINTAINED AT

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO.	WARD NO.

EPW [redacted]

66-4

PROGRESS NOTES
Medical Record

STANDARD FORM 509 (REV. 5/1999)
Prescribed by GSA/ICMR FPMR (41CFR) 101-11.203(b)(10)
USAPA V1.00

NSN 7540-01-075-3786

MEDICAL RECORD [redacted] 66-4

EMERGENCY CARE AND TREATMENT *(Patient)*

LOG NUMBER	TREATMENT FACILITY
RECORDS MAINTAINED AT	

PATIENT'S HOME ADDRESS OR DUTY STATION

STREET ADDRESS

CITY | STATE | ZIP CODE

ARRIVAL: DATE *(Day, Month, Year)* 29 May 03 | TIME 0900

TRANSPORTATION TO FACILITY

SEX: M

AGE

DUTY/LOCAL PHONE: AREA CODE | NUMBER

HOME PHONE: AREA CODE | NUMBER

MILITARY STATUS

ITEM	YES	NO	N/A
PRP			
FLYING STATUS			
MEDICAL HISTORY OBTAINED FROM			

THIRD PARTY INSURANCE

ITEM	YES	NO
ADDITIONAL INSURANCE		
DD 2568 IN CHART		
NAME OF INSURANCE COMPANY		

CURRENT MEDICATIONS

ALLERGIES: NKDA

INJURY OR OCCUPATIONAL ILLNESS

ITEM	YES	NO	WHEN *(Date)*
IS THIS AN INJURY?	X		WHERE
INJURY/SAFETY FORMS			
HOW			

EMERGENCY ROOM VISIT: DATE LAST VISIT | 24 HOUR RETURN ☐ YES ☐ NO

TETANUS: DATE LAST SHOT | COMPLETED INTITIAL SERIES ☐ YES ☐ NO

CHIEF COMPLAINT: GSW x2 L shoulder + Upper Abdominal w/Exit wound (L) shoulder

CATEGORY OF TREATMENT

- [X] EMERGENT
- [ ] URGENT
- [ ] NON-URGENT

TIME: 0905

INITIALS: [redacted]

VITAL SIGNS

TIME	0905	0925	0935	0945
BP	155/90	125/61	137/81	147/76
PULSE	63	102	90	72
RESP		30	28	27
TEMP	98.9 A			
WT				

LAB ORDERS

X CBC/DIFF	ABG	PT/PTT	BHCG/URINE/BLOOD/QUANT
X URINE C&S	UA MSCC/CATH		X CHEM: P, a
X BLOOD C&S X		X Hemoccult	Hcg

X-RAY ORDERS

X CXR PA & LAT/PORTABLE	C-SPINE
X ACUTE ABDOMEN	LS SPINE
SINUS	HEAD CT
ANKLE R/L	X (L) shoulder
X KUB	

ORDERS

☐ PULSE OX ☐ MONITOR ☐ ECG

TIME	ORDERS	BY	COMPLETED BY	TIME	PATIENT'S RESPONSE
0905	Morphine 4mg	[redacted]	Cpt [redacted]	0905	Foley
	Tetanus 0.5 IM	[redacted]	Cpt [redacted]	0940	Morphine 4mg IM [redacted]
	Amcef 1gram	[redacted]	Col [redacted]		
	Ultrasound				

DISPOSITION: ☐ HOME ☐ FULL DUTY

DISPOSITION QUARTERS /OFF DUTY: ☐ 24 HRS. ☐ 48 HRS. ☐ 78 HRS.

MODIFIED DUTY UNTIL | RETURN TO DUTY

PATIENT/DISCHARGE INSTRUCTIONS: 66-2 all ↑

CONDITION UPON RELEASE: ☐ IMPROVED ☐ UNCHANGED ☐ DETERIORATED

ADMIT TO UNIT/SERVICE | TIME OF RELEASE

REFERRED ▶ TO | WHEN

I have received and understand these instructions.

PATIENT'S SIGNATURE

PATIENT'S IDENTIFICATION *(For typed or written entries, give: Name -- last, first, middle; ID no. (SSN or other); hospital or medical facility)*

EPW

000-00- [redacted] 66-4

EMERGENCY CARE AND TREATMENT *(Patient)*
Medical Record

STANDARD FORM 558 (REV. 9-96)
Prescribed by GSA/ICMR
FPMR (41 CFR) 101-11.203(b)(10)
USAPA V1.00

NSN 7540-01-075-3786

MEDICAL RECORD	EMERGENCY CARE AND TREATMENT *(Doctor)*	TIME SEEN BY PROVIDER

TEST RESULTS

CBC		SMAC		ABG/PULSE OX			RADIOLOGY	Check if read by radiologist ☐
	WBC							
	H/H			SUP O2	PH	PO2	RESULTS	
	PLT			PCO2	SAT	OTHER		
PT				U/A	DIP		EKG INTERPRETATION	
APTT		BHCG	ETOH	GLU	MICRO			

PROVIDER HISTORY/PHYSICAL

S: Drsi c̄ GSW today. Epigastric + (L) shoulder.

O: A+O, MAD BP-stable Extrm- neurovascular intact.
Lungs - CTAB Heart RRR
Abd. distended, tender, (+) epigastric entrance wound.
Back (-) wounds except (L) scapula exit wound.
(L) shoulder/humerus - (+) GSW c̄ entrance + exit.

CXR - (+) blunting (L) hemithorax (-) PTX.

A: GSW abd/(L) shoulder

P: To OR for exploration + management.

CONSULT WITH	TIME	ACTION

DIAGNOSIS

66-2

RES[redacted]DICAL STUDENT SIGNATURE AND STAMP

[redacted]D

PR[redacted]IGNATURE AND STAMP

MATME

EMT

CODES

PATIENT'S IDENTIFICATION *(For typed or written entries, give: Name (last, first, middle); ID no. (SSN or other); hospital or medical facility)*

EMERGENCY CARE AND TREATMENT *(Doctor)*
Medical Record

STANDARD FORM 558 (REV. 9-96)
Prescribed by GSA/ICMR
FPMR (41 CFR) 101-11.203(b)(10)
USAPA V1.00

MEDICAL RECORD

PREOPERATIVE/POSTOPERATIVE NURSING DOCUMENT

FOR Use of this form, see AR 40-407; the proponent agency is The Office of the Surgeon General.

1. AGE: [redacted]

HEIGHT: —

WEIGHT: ≈ 90 Kg

2. KNOWN ALLERGIC SENSITIVITIES (e.g., Iodine, Tape, Medication)
☒ NKDA ☐ PCN ☐ LATEX ☐ IODINE ☐ TAPE ☐ FOOD
REACTION:
Chart states "NKDA." —

3. PREVIOUS SURGERY [ ] NO [ ] YES (type):
emergency, unknown. —

4. PROPOSED SURGICAL PROCEDURE:
Exploratory laparotomy, shoulder exploration, right hip gunshot exploration.

5. ADDITIONAL INFORMATION: (Previous surgical and medical history) Skin Condition_____
Tobacco____ppd X___yrs. Body Piercing_____ Diabetes (Y) (N) ROM_____ ASA/Motrin w/72 hrs (Y) (N)
ETOH_____ Implants_____ Respiratory Disease (Asthma/COPD) (Y) (N) Anticoagulants (Y) (N)
Glasses/Contact (Y) (N) Dentures_____ Hypertension (Y) (N) Herbal Medicines (Y) (N) MEDS:

6. PATIENT PROBLEMS AND NEEDS	7. PATIENT GOALS AND EXPECTED OUTCOMES	8. OR NURSING INTERVENTIONS
A. PSYCHOSOCIAL ✓ Potential for anxiety related to: surgery, pain, unknown ✓ 1) Surgical Procedure & Operating Room Environment N/A 2) Separation Anxiety (Child) ✓ 3) Surgical Outcomes	o Pt. verbalizes any specific anxiety. o Pt. Exhibits relaxed body posture.	✓ Allow pt. to verbalize freely. ✓ Explain OR environment and answer questions regarding surgery. ✓ Offer comfort measures. (e.g., warm blanket, touch). ✓ Explain all nursing procedures before they are done. ✓ Remain with pt. whenever possible. ✓ Maintain family interface. Parents to stay with pt. N/A
B. AERATION ✓ Potential for respiratory dysfunction due to: ✓ 1) Positioning ✓ 2) Effects of Anesthesia ✓ 3) Medical/Smoking History	o Pt. will be able to breathe without difficulty during immediate intraoperative phase .	✓ Offer to elevate head of litter or offer pillow. ✓ Observe pt. while awaiting surgery for signs of distress. ✓ Assist anesthesia during intubation and extubation.
C. INTEGUMENT ✓ Potential impairment of skin integrity due to: ✓ 1) Intraoperative Immobility ✓ 2) ESU Pad Placement ✓ 3) Positional Aids N/A 4) Prosthesis ✓ 5) Pooling of Prep Solutions	o Pt. will not exhibit signs of impairment of skin integrity (e.g., reddened areas).	✓ Utilize pressure preventing devices on OR table and accessories. ✓ Check for proper positioning and support to maintain good body alignment. ✓ Pad pressure points. ✓ Place ESU ground pad on non compromised skin surface area. ✓ Keep prep fluids from pooling.

9. PATIENT'S IDENTIFICATION: (For typed or written entries give: Name- last, first, middle; grade; date; hospital or medical facility)
EPW [redacted] ICU 1 b6-4
b(2)-2

VERIFICATIONS AT HOLDING AREA:
! ID/Allergy Band ! Dentures Removed
! H & P ! Contacts Removed
! NPO Since_____ ! Jewelry Removed
! UHCG/LMP ! Body Pierce Removed
! Consent/Blood Transfusion Signed/Witnessed/Dated
! Surgical Site/Consent verified by Pt./Anesthesia/Surgeon
! Contact Precautions (Y) (N)
! Family/Friend:_____

6. PATIENT PROBLEMS AND NEEDS	7. PATIENT GOALS AND EXPECTED OUTCOMES	8. OR NURSING INTERVENTIONS
D. CIRCULATION ✓ Potential for inadequate tissue perfusion due to: ✓ 1) Intraoperative Mobility ✓ 2) Positioning ✓ 3) Existing Disease ✓ 4) Safety Devices ✓ 5) Hypothermia	o Pt. will exhibit signs of adequate tissue perfusion (e.g., color, warmth, pedal pulse.	o Check for support stockings or ace wraps. If none, check with doctors. N/A ✓ Check that safety straps are correctly applied. o Offer pillow for under knees. N/A o Place and take down legs from stirrups with slow bilateral motion. N/A ✓ Check that rings and all body piercing has been removed.
E. NEUROMUSCULAR CONTROL E.1. ✓ Potential impairment of mobility due to: ✓ 1) Pain ✓ 2) Intraoperative Hazards N/A 3) Prosthesis ✓ 4) Positioning ✓ 5) Transfer pt. to/from OR table E.2. ✓ Potential discomfort due to: ✓ 1) Length of Surgery ✓ 2) Positioning ✓ 3) Arthritis	o Pt. will be transferred to OR table without difficulty. o Pt. will not experience unnecessary physical discomfort.	✓ Have sufficient people available for transfer. ✓ Insure proper body alignment. ✓ Allow patient to lie in position of comfort while waiting for surgery. ✓ Offer support (i.e., pillows, bath towels, etc.) for positioning.
F. SPECIAL SENSES F.1. ✓ Diminished visual perception due to being: ✓ 1) Pre-Medicated N/A 2) W/O Glasses F.2. ✓ Potential for decreased communication due to: ✓ 1) Diminished Hearing ✓ 2) Language Barrier F.3. ✓ Potential injury due to dentures: N/A 1) Upper N/A 4) Caps N/A 2) Lower N/A 5) Crowns N/A 3) Bridges	o Pt. will be made aware of surroundings prior to anesthesia induction. o Pt. will be transferred safely to OR table. o Pt. will be able to understand instructions. o Minimize danger of injury during intraop period.	✓ Introduce self. Keep pt. informed as to where he/she is and what is happening. ✓ Inform pt. in which direction to move and assist if necessary. ✓ Speak clearly and slowly. ✓ Address pt. from either side. ✓ Validate pt.'s understanding of verbal communication. o Verify removal of dentures. N/A
G OTHER PATIENT PROBLEMS NEEDS Or continuation of above problems/needs. shot while stealing U.S. weapons.	OTHER PATIENT GOALS AND EXPECTED OUTCOMES. Or continuation of above goals and outcomes.	OTHER NURSING INTERVENTIONS Or continuation of above interventions

10. OR NURSING INTERVENTIONS COMPLETE D/ADDITIONAL INTRAOPERATIVE INTERVENTION S NOTED.

[redacted] Maj/AN 29 May 03 DATE

11. POSTOPERATIVE EVALUATION: SKIN INTEGRITY: Bovie Pad Site: ☒ Clean and Dry ☐ Red ☐ N/A DRESSING DRY & INTACT: (Y) (N)

LEVEL OF CONSCIOUSNESS: ☒ A&O ☐ Drowsy ☐ Sleepy ☐ Intubated BREATHING EASY: (Y) (N)

LEVEL OF ACTIVITY: ☒ Moves All Extremities ☐ Moves Upper Extremities ☐ Transferred to litter with roller due to spinal

b6.2

12. PREOPERATIVE EVALUATION PREPARED BY (Signature and Title) [redacted] Maj/AN

DATE: 29 May 03 TIME: 1020

13. POSTOPERATIVE EVALUATION PREPARED BY (Signature and Title) [redacted] CIV DN

DATE: 29 May 03 TIME: 1400

MEDICAL RECORD

PREOPERATIVE/POSTOPERATIVE NURSING DOCUMENT

FOR Use of this form, see AR 40-407; the proponent agency is The Office of the Surgeon General.

1. AGE: 52

HEIGHT:

WEIGHT:

2. KNOWN ALLERGIC SENSITIVITIES (e.g.. Iodine, Tape, Medication)
☒ NKDA ☐ PCN ☐ LATEX ☐ IODINE ☐ TAPE ☐ FOOD
REACTION:

3. PREVIOUS SURGERY [ ] NO [X] YES (type):
Exp

4. PROPOSED SURGICAL PROCEDURE:
Lt shoulder debridement & subscapular repair

5. ADDITIONAL INFORMATION: (Previous surgical and medical history) Skin Condition_____
Tobacco____ppd X___yrs. Body Piercing_____ Diabetes (Y) (N) ROM_____ ASA/Motrin w/72 hrs (Y) (N)
ETOH_____ Implants_____ Respiratory Disease (Asthma/COPD) (Y) (N) Anticoagulants (Y) (N)
Glasses/Contact (Y) (N) Dentures_____ Hypertension (Y) (N) Herbal Medicines (Y) (N) MEDS:

6. PATIENT PROBLEMS AND NEEDS	7. PATIENT GOALS AND EXPECTED OUTCOMES	8. OR NURSING INTERVENTIONS
A. PSYCHOSOCIAL ✓ Potential for anxiety related to: ✓ 1) Surgical Procedure & Operating Room Environment ___ 2) Separation Anxiety (Child) ✓ 3) Surgical Outcomes	o Pt. verbalizes any specific anxiety. o Pt. Exhibits relaxed body posture.	o Allow pt. to verbalize freely. o Explain OR environment and answer questions regarding surgery. o Offer comfort measures. (e.g.. warm blanket. touch). o Explain all nursing procedures before they are done. o Remain with pt. whenever possible. o Maintain family interface. Parents to stay with pt.
B. AERATION ✓ Potential for respiratory dysfunction due to: ___ 1) Positioning ✓ 2) Effects of Anesthesia ___ 3) Medical/Smoking History	o Pt. will be able to breathe without difficulty during immediate intraoperative phase .	o Offer to elevate head of litter or offer pillow. o Observe pt. while awaiting surgery for signs of distress. o Assist anesthesia during intubation and extubation.
C. INTEGUMENT ✓ Potential impairment of skin integrity due to: ✓ 1) Intraoperative Immobility ✓ 2) ESU Pad Placement ✓ 3) Positional Aids ___ 4) Prosthesis ✓ 5) Pooling of Prep Solutions	o Pt. will not exhibit signs of impairment of skin integrity (e.g., reddened areas).	o Utilize pressure preventing devices on OR table and accessories. o Check for proper positioning and support to maintain good body alignment. o Pad pressure points. o Place ESU ground pad on non compromised skin surface area. o Keep prep fluids from pooling.

9. PATIENT'S IDENTIFICATION: (For typed or written entries give: Name- last, first, middle; grade; date; hospital or medical facility)

EPW # [redacted] 66-4

VERIFICATIONS AT HOLDING AREA:
! ID/Allergy Band ! Dentures Removed
! H & P ! Contacts Removed
! NPO Since_____ ! Jewelry Removed
! UHCG/LMP ! Body Pierce Removed
! Consent/Blood Transfusion Signed/Witnessed/Dated
! Surgical Site/Consent verified by Pt./Anesthesia/Surgeon
! Contact Precautions (Y) (N)
! Family/Friend:_____

6. PATIENT PROBLEMS AND NEEDS	7. PATIENT GOALS AND EXPECTED OUTCOMES	8. OR NURSING INTERVENTIONS
D. CIRCULATION ✓ Potential for inadequate tissue perfusion due to: ✓ 1) Intraoperative Mobility ✓ 2) Positioning 3) Existing Disease 4) Safety Devices ✓ 5) Hypothermia	o Pt. will exhibit signs of adequate tissue perfusion (e.g., color, warmth, pedal pulse.	o Check for support stockings or ace wraps. If none, check with doctors. o Check that safety straps are correctly applied. o Offer pillow for under knees. o Place and take down legs from stirrups with slow bilateral motion. o. Check that rings and all body piercing has been removed.
E. NEUROMUSCULAR CONTROL E.1. ✓ Potential impairment of mobility due to: ✓ 1) Pain 2) Intraoperative Hazards 3) Prosthesis ✓ 4) Positioning ✓ 5) Transfer pt. to/from OR table E.2. ✓ Potential discomfort due to: ✓ 1) Length of Surgery ✓ 2) Positioning 3) Arthritis	o Pt. will be transferred to OR table without difficulty. o Pt. will not experience unnecessary physical discomfort.	o Have sufficient people available for transfer. o Insure proper body alignment. o Allow patient to lie in position of comfort while waiting for surgery. o Offer support (i.e., pillows, bath towels, etc.) for positioning.
F. SPECIAL SENSES F.1. ✓ Diminished visual perception due to being: ✓ 1) Pre-Medicated 2) W/O Glasses F.2. ✓ Potential for decreased communication due to: 1) Diminished Hearing ✓ 2) Language Barrier F.3. NA Potential injury due to dentures: 1) Upper 4) Caps 2) Lower 5) Crowns 3) Bridges	o Pt. will be made aware of surroundings prior to anesthesia induction. o Pt. will be transferred safely to OR table. o Pt. will be able to understand instructions. o Minimize danger of injury during intraop period.	o Introduce self. Keep pt. informed as to where he/she is and what is happening. o Inform pt. in which direction to move and assist if necessary. o Speak clearly and slowly. o Address pt. from _____ side o Validate pt.'s understanding of verbal communication. o Verify removal of dentures.
G OTHER PATIENT PROBLEMS NEEDS. Or continuation of above problems/needs.	OTHER PATIENT GOALS AND EXPECTED OUTCOMES. Or continuation of above goals and outcomes.	OTHER NURSING INTERVENTIONS Or continuation of above interventions

10. OR NURSING INTERVENTIONS COMPLETE D/ADDITIONAL INTRAOPERATIVE INTERVENTION S NOTED.

[redacted] MAJ AN 31 May 03 DATE

6-2 all

11. POSTOPERATIVE EVALUATION: SKIN INTEGRITY: Bovie Pad Site: ☑ Clean and Dry ☐ Red ☐ N/A DRESSING DRY & INTACT: (Y)(N)
LEVEL OF CONSCIOUSNESS: ☐ A&O ☐ Drowsy ☐ Sleepy ☑ Intubated BREATHING EASY: (Y) (N) Tousistance
LEVEL OF ACTIVITY: ☐ Moves All Extremities ☐ Moves Upper Extremities
☐ Transferred to litter ~~with roller due to spinal~~ by OR Staff

12. PREOPERATIVE EVALUATION PREPARED BY (Signature and Title)
[redacted] MAJ AN
DATE: 31 May 03 TIME: 0900

13. POSTOPERATIVE EVALUATION PREPARED BY (Signature and Title)
[redacted] MAJ AN
DATE: 31 May 03 TIME: 1253

REVERSE OF FORM 5179, JUN 91

USAPA V1.0

MEDICAL RECORD

PREOPERATIVE/POSTOPERATIVE NURSING DOCUMENT

FOR Use of this form, see AR 40-407; the proponent agency is The Office of the Surgeon General.

1. AGE: [redacted]

HEIGHT:

WEIGHT:

2. KNOWN ALLERGIC SENSITIVITIES (e.g.. Iodine, Tape, Medication)
? ☐ NKDA ☐ PCN ☐ LATEX ☐ IODINE ☐ TAPE ☐ FOOD
REACTION:

3. PREVIOUS SURGERY [ ] NO [✓] YES (type):
Exp. Lap, partial hepatectomy, Rt hemicolectomy, chole

4. PROPOSED SURGICAL PROCEDURE:
Exp Lap

5. ADDITIONAL INFORMATION: (Previous surgical and medical history) Skin Condition_____
Tobacco____ppd X___yrs. Body Piercing_____ Diabetes (Y) (N) ROM_____ ASA/Motrin w/72 hrs (Y) (N)
ETOH_____ Implants_____ Respiratory Disease (Asthma/COPD) (Y) (N) Anticoagulants (Y) (N)
Glasses/Contact (Y) (N) Dentures_____ Hypertension (Y) (N) Herbal Medicines (Y) (N) MEDS:

6. PATIENT PROBLEMS AND NEEDS	7. PATIENT GOALS AND EXPECTED OUTCOMES	8. OR NURSING INTERVENTIONS
A. PSYCHOSOCIAL ✓ Potential for anxiety related to: ✓ 1) Surgical Procedure & Operating Room Environment 2) Separation Anxiety (Child) ✓ 3) Surgical Outcomes	o Pt. verbalizes any specific anxiety. o Pt. Exhibits relaxed body posture.	o Allow pt. to verbalize freely. o Explain OR environment and answer questions regarding surgery. o Offer comfort measures. (e.g.. warm blanket. touch). o Explain all nursing procedures before they are done. o Remain with pt. whenever possible. o Maintain family interface. Parents to stay with pt.
B. AERATION ✓ Potential for respiratory dysfunction due to: 1) Positioning ✓ 2) Effects of Anesthesia ✓ 3) Medical/Smoking History	o Pt. will be able to breathe without difficulty during immediate intraoperative phase .	o Offer to elevate head of litter or offer pillow. o Observe pt. while awaiting surgery for signs of distress. o Assist anesthesia during intubation and extubation.
C. INTEGUMENT ✓ Potential impairment of skin integrity due to: 1) Intraoperative Immobility ✓ 2) ESU Pad Placement 3) Positional Aids 4) Prosthesis ✓ 5) Pooling of Prep Solutions	o Pt. will not exhibit signs of impairment of skin integrity (e.g., reddened areas).	o Utilize pressure preventing devices on OR table and accessories. o Check for proper positioning and support to maintain good body alignment. o Pad pressure points. o Place ESU ground pad on non compromised skin surface area. o Keep prep fluids from pooling.

9. PATIENT'S IDENTIFICATION: (For typed or written entries give: Name- last, first, middle; grade; date; hospital or medical facility)

EPW # [redacted] b6-4

VERIFICATIONS AT HOLDING AREA:
! ID/Allergy Band ! Dentures Removed
! H & P ! Contacts Removed
! NPO Since_____ ! Jewelry Removed
! UHCG/LMP ! Body Pierce Removed
! Consent/Blood Transfusion Signed/Witnessed/Dated
! Surgical Site/Consent verified by Pt./Anesthesia/Surgeon
! Contact Precautions (Y) (N)
! Family/Friend:_____

6. PATIENT PROBLEMS AND NEEDS	7. PATIENT GOALS AND EXPECTED OUTCOMES	8. OR NURSING INTERVENTIONS
D. CIRCULATION ✓ Potential for inadequate tissue perfusion due to: ✓ 1) Intraoperative Mobility ✓ 2) Positioning ___ 3) Existing Disease ___ 4) Safety Devices ✓ 5) Hypothermia	o Pt. will exhibit signs of adequate tissue perfusion (e.g., color, warmth, pedal pulse.	o Check for support stockings or ace wraps. If none, check with doctors. o Check that safety straps are correctly applied. o Offer pillow for under knees. o Place and take down legs from stirrups with slow bilateral motion. o Check that rings and all body piercing has been removed.
E. NEUROMUSCULAR CONTROL E.1. ✓ Potential impairment of mobility due to: ___ 1) Pain ✓ 2) Intraoperative Hazards ___ 3) Prosthesis ___ 4) Positioning ✓ 5) Transfer pt. to/from OR table E.2. ✓ Potential discomfort due to: ✓ 1) Length of Surgery ✓ 2) Positioning ___ 3) Arthritis	o Pt. will be transferred to OR table without difficulty. o Pt. will not experience unnecessary physical discomfort.	o Have sufficient people available for transfer. o Insure proper body alignment. o Allow patient to lie in position of comfort while waiting for surgery. o Offer support (i.e., pillows, bath towels, etc.) for positioning.
F. SPECIAL SENSES F.1. ✓ Diminished visual perception due to being: Intubated/Meds ___ 1) Pre-Medicated ___ 2) W/O Glasses F.2. ✓ Potential for decreased communication due to: ___ 1) Diminished Hearing ✓ 2) Language Barrier F.3. ___ Potential injury due to dentures: ___ 1) Upper ___ 4) Caps ___ 2) Lower ___ 5) Crowns ___ 3) Bridges	o Pt. will be made aware of surroundings prior to anesthesia induction. o Pt. will be transferred safely to OR table. o Pt. will be able to understand instructions. o Minimize danger of injury during intraop period.	o Introduce self. Keep pt. informed as to where he/she is and what is happening. o Inform pt. in which direction to move and assist if necessary. o Speak clearly and slowly. o Address pt. from _____ side. o Validate pt.'s understanding of verbal communication. o Verify removal of dentures.
G OTHER PATIENT PROBLEMS NEEDS. Or continuation of above problems/needs.	OTHER PATIENT GOALS AND EXPECTED OUTCOMES. Or continuation of above goals and outcomes.	OTHER NURSING INTERVENTIONS Or continuation of above interventions

10. OR NURSING INTERVENTIONS COMPLETE D/ADDITIONAL INTRAOPERATIVE INTERVENTION S NOTED.

[redacted] MN AN 7 Jun 03 DATE

66-2

11. POSTOPERATIVE EVALUATION: SKIN INTEGRITY: Bovie Pad Site: ✓ Clean and Dry ☐ Red ☐ N/A DRESSING DRY & INTACT: (Y) (N)
LEVEL OF CONSCIOUSNESS: ☐ A&O ☐ Drowsy ☐ Sleepy ☐ Intubated
LEVEL OF ACTIVITY: ☐ Moves All Extremities ☐ Moves Upper Extremities
☐ Transferred to litter with roller due to spinal
BREATHING EASY: (Y) (N)

12. PREOPERATIVE EVALUATION PREPARED BY (Signature and Title)
[redacted] MN AN
DATE: 7 Jun 03 TIME: 1720

13. POSTOPERATIVE EVALUATION PREPARED BY (Signature) [redacted]
DATE: 7 Jun 03 TIME: 1920

REVERSE OF FORM 5179, JUN 91

USAPA V1.0

b6-2 all

MEDICAL RECORD | **INTRAOPERAT... DOCUMENT**

For use of this form, see AR 40-66, the proponent agency is the office of The Surgeon General.

1. PATIENT TRANSPORTED TO OPERATING ROOM VIA: Litter BY Anesthesia Staff

2. PATIENT IDENTIFIED, RECORD REVIEWED AND PROCEDURE VERIFIED BY [redacted] Maj/AN

3. DATE 29 May 03 TIME PATIENT ARRIVED IN SUITE 1000

4. PATIENT IN ROOM TIME 1000 NUMBER 1-1

5. PREOPERATIVE EMOTIONAL STATUS

☐ CALM ☒ ANXIOUS ☐ EXCITED ☐ CRYING ☐ ANGRY ☐ WITHDRAWN ☐ OTHER (Specify)

COMMENTS: pt moaning + adjusting legs up + down at knees while supine on litter.

6. NURSING PERSONNEL

ASSIGNED SCRUB	SGT [redacted]	RELIEF SCRUB	
ASSIGNED CIRCULATOR	MAJ [redacted], LT [redacted] CPT [redacted]	RELIEF CIRCULATOR	MAJ [redacted] (11:20-11:3[illegible]

7. POSITION AND POSITIONAL AIDS (Specify) Both arms in anatomically correct position on padded armboards, entire O.R. padded, warm sheets given.

☒ SUPINE ☐ LITHOTOMY ☐ PRONE ☐ KRASKE LATERAL: ☐ LEFT SIDE UP ☐ RIGHT SIDE UP

COMMENTS:

8. SKIN PREPARATION

HAIR REMOVAL ☐ YES ☒ NO

DONE BY: ☐ OR ☐ NURSING UNIT

METHOD: ☐ DEPILATORY ☐ RAZOR ☐ CLIP

COMMENTS: None.

PREP SOLUTION (Specify) Betadine scrub + paint

SITE: bedside to bedside BY WHOM: LT [redacted]

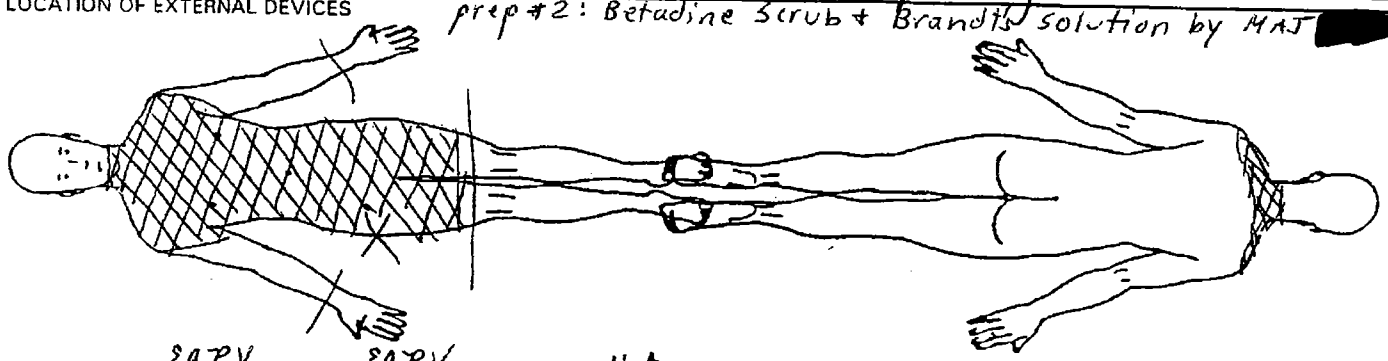
SITE: see legend #9 BY WHOM:

#2 prep: ① shoulder to elbow, to mid ⓒ chest, ⓐ neck, all around arm by MAJ [redacted]. Betadine + Br[illegible]

COMMENTS: No pooling noted.

9. LOCATION OF EXTERNAL DEVICES

prep #2: Betadine Scrub + Brandts solution by MAJ [redacted].



LEGEND: X Ground Pad (EAPV) -- Safety Strap (EAPV) = = = Tourniquet (N.A.) ▨ = skin prep

10. COUNTS

C = Correct I = Incorrect Initial: SGT [redacted]

		Other**	First Closing Count	Final Closing Count	SCRUB	CIRCULATOR
Sponge	☒ Yes ☐ No	N.A.				
Needle Sharp	☒ Yes ☐ No	N.A.				
Instrument*	☒ Yes ☐ No	N.A.				
Other	☐ Yes ☒ No	N.A.	N.A.	N.A.	N.A.	N.A.

11. PATIENT IDENTIFICATION (For typed or written entries give: Name - Last, first, middle; Grade; Date; Hospital or Medical Facility;)

EPW [redacted] b6-4 ICU I

B-2-2

12. ELECTROSURGERY DEVICE(S) (ESU) ☒ YES ☐ NO

☒ ESU NO: Valleylab Force 2, # 000390

GROUND PAD: BRAND Valleylab REM, II

Cut 50, coag 50 LOT NO: #68936, Lot 2005-03

☐ ESU NO: Ø

GROUND PAD: BRAND Ø

LOT NO: Ø

☐ BIPOLAR NO: Ø

MEDCOM - 9507

DA FORM 5179-1, OCT 95

13. PROSTHESIS, IMPLANTS ☐ YES ☒ NO IF YES NAME: ID NUMBER; MANUFACTURER

14. MEDICATIONS/ORDERS

IRRIGATION/MEDICATIONS GIVEN IN OPERATING ROOM (NOT BY ANESTHESIA) YES ☒ NO ☐

MEDICATIONS, SOLUTION	DOSAGE	TIME	METHOD	PREPARED BY	GIVEN BY
Surgicel absorb. hemostat	qs	prn	topical	Ethicon	Dr. [redacted]
Avitene collagen hemostat	qs	prn	topical	Davol	Dr. [redacted]

WOUND IRRIGATION ☒ YES ☐ NO, TYPE(S):

0.9% NaCL

OTHER ORDERS	TIME	CARRIED OUT BY
Surgicel = Lot #14382336, Exp. 2006-10		
Avitene = Lot #52EKF12A, Exp. 2003-05		

PHYSICIAN'S SIGNATURE

15. X-RAY IN OPERATING ROOM YES ☐ NO ☐ IF YES, SITE

16. LABORATORY SPECIMENS

SPECIMEN (S) YES ☐ NO ☒	NAME	NAME
FROZEN SECTION (FS) YES ☐ NO ☒	NAME	NAME
CULTURE (C) YES ☐ NO ☒	NAME	NAME
NAME	NAME	NAME
NAME	NAME	

17. TUBES, DRAINS/PACKING YES ☒ NO ☐

	1.	2.	3.
TYPE/SIZE	Foley from EMT		
SITE			

18. DRESSING/IMMOBILIZATION (Specify)

- ABD
8x4
Silk tape

(L) Shoulder
- ~~fluffs~~ Kerlix
- Combine
- Durapore tape

19. ADDITIONAL INFORMATION

Surgeons = Dr. [redacted], Dr. [redacted] — Dr. [redacted]
Anesthesiologist = Dr. [redacted]

20. OPERATION(S) PERFORMED

Ex Lap. Rt Hemicolectomy, Partial hepatolectomy, cholecystectomy, [redacted], MAJ, AN Debridement left shoulder wound.

21. PATIENT TRANSFERRED TO — ECU 1 TIME 1400 METHOD Litter c O2

22. REGISTERED NURSE SIGNATURE [redacted] CPT AN [redacted]

REVERSE OF DA FORM 5179-1, OCT 87 USAPA V1.01

MEDCOM - 9508

66-2 all

MEDICAL RECORD — **INTRAOPERAT[redacted] DOCUMENT**

For use of this form, see AR 40-66, the proponent agency is the office of The Surgeon General.

1. PATIENT TRANSPORTED TO OPERATING ROOM VIA: Litter BY CDT [redacted]

2. PATIENT IDENTIFIED, RECORD REVIEWED AND PROCEDURE VERIFIED BY MAJ [redacted]

3. DATE: 31 May 03 TIME PATIENT ARRIVED IN SUITE: 0945

4. PATIENT IN ROOM TIME: 0945 NUMBER: 1-1

5. PREOPERATIVE EMOTIONAL STATUS

☐ CALM ☐ ANXIOUS ☐ EXCITED ☐ CRYING ☐ ANGRY ☐ WITHDRAWN ☑ OTHER *(Specify)*

COMMENTS: Intubated

6. NURSING PERSONNEL

ASSIGNED SCRUB	SPC [redacted]	RELIEF SCRUB	
ASSIGNED CIRCULATOR	MAJ [redacted]	RELIEF CIRCULATOR	

7. POSITION AND POSITIONAL AIDS *(Specify)*

☐ SUPINE ☐ LITHOTOMY ☐ PRONE ☐ KRASKE LATERAL: ☐ LEFT SIDE UP ☐ RIGHT SIDE UP

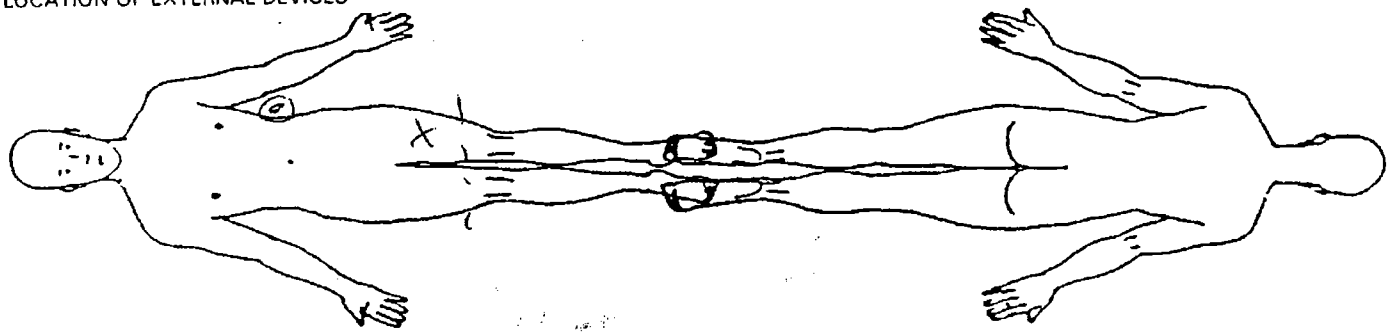
COMMENTS: Beach chair w/ pillow under knees, head on horseshoe headrest padded pad at left side

8. SKIN PREPARATION

HAIR REMOVAL ☐ YES ☑ NO
DONE BY: ☐ OR ☐ NURSING UNIT
METHOD: ☐ DEPILATORY ☐ RAZOR ☐ CLIP
COMMENTS:

PREP SOLUTION *(Specify)* Povidone scrub & Phenol sol.
SITE: Lt arm & shoulder BY WHOM: MAJ [redacted]
SITE: BY WHOM:
COMMENTS: No pooling of solution

9. LOCATION OF EXTERNAL DEVICES



LEGEND X Ground Pad -- Safety Strap = = = Tourniquet

C = Correct I = Incorrect

10. COUNTS		Other**	First Closing Count	Final Closing Count	SCRUB	CIRCULATOR
Sponge	☑ Yes ☐ No		C	C	[redacted]	[redacted]
Needle Sharp	☑ Yes ☐ No		C	C		
Instrument	☐ Yes ☑ No				SPC SPC	MAJ MAJ
Other	☐ Yes ☑ No					

11. PATIENT IDENTIFICATION *(For typed or written entries give: Name - Last, first, middle; Grade; Date; Hospital or Medical Facility;)*

EPW # [redacted] 66-4

12. ELECTROSURGERY DEVICE(S) (ESU) ☑ YES ☐ NO

☑ ESU NO: Valley lab #1
GROUND PAD: BRAND Valley lab
LOT NO: 68936

☐ ESU NO:
GROUND PAD: BRAND
LOT NO:

☐ BIPOLAR NO:

13. PROSTHESIS, IMPLANTS ☐ YES ☑ NO IF YES NAME: ID NUMBER; MANUFACTURER

14. MEDICATIONS/ORDERS

IRRIGATION/MEDICATIONS GIVEN IN OPERATING ROOM (NOT BY ANESTHESIA) YES ☑ NO ☐

MEDICATIONS SOLUTION	DOSAGE	TIME	METHOD	PREPARED BY	GIVEN BY
1% Xylocaine	12cc	Intra-op	Local	[redacted]	Dr [redacted]

WOUND IRRIGATION ☑ YES ☐ NO, TYPE(S): NS. X L.

OTHER ORDERS	TIME	CARRIED OUT BY

PHYSICIAN'S SIGNATURE

15. X-RAY IN OPERATING ROOM YES ☐ NO ☑ IF YES, SITE

16. LABORATORY SPECIMENS

SPECIMEN (S) YES ☐ NO ☑	NAME	NAME
FROZEN SECTION (FS) YES ☐ NO ☑	NAME	NAME
CULTURE (C) YES ☐ NO ☑	NAME	NAME
NAME	NAME	NAME
NAME	NAME	

17. TUBES, DRAINS/PACKING YES ☑ NO ☐

TYPE/SIZE	1. 10mm JP	2.	3.
SITE	1. Lt shoulder	2.	3.

18. DRESSING/IMMOBILIZATION *(Specify)*

Xeroform
4x8's
ABDs
Tape, Sling

19. ADDITIONAL INFORMATION

Surgeon: Dr [redacted]
Anes: CPT [redacted]
Cpg: 30 Cut: 30 Bovie plate

20. OPERATION(S) PERFORMED

Lt Shoulder debridement & Subscapular + conjoint tendon repair, Excision Coracoid process

21. PATIENT TRANSFERRED TO: ICU2 TIME: 1247 METHOD: Litter

22. REGISTERED NURSE SIGNATURE [redacted] 31 May 03

REVERSE OF DA FORM 5179-1, OCT 87 USAPA V1.01

MEDCOM - 9510

b6-2 all

MEDICAL RECORD — INTRAOPERATIVE DOCUMENT

For use of this form, see AR 40-66, the proponent agency is the office of The Surgeon General.

1. PATIENT TRANSPORTED TO OPERATING ROOM
VIA Litter BY MAJ [redacted] MAJ [redacted]

2. PATIENT IDENTIFIED, RECORD REVIEWED AND PROCEDURE VERIFIED BY MAJ [redacted]

3. DATE 7 Jun 03 TIME PATIENT ARRIVED IN SUITE 1755

4. PATIENT IN ROOM TIME 1755 NUMBER 1-1

5. PREOPERATIVE EMOTIONAL STATUS

☐ CALM ☐ ANXIOUS ☐ EXCITED ☐ CRYING ☐ ANGRY ☐ WITHDRAWN ☑ OTHER (Specify)

COMMENTS: Allergies: NKDA?
Intubated

6. NURSING PERSONNEL

ASSIGNED SCRUB	SPC [redacted]	RELIEF SCRUB	
ASSIGNED CIRCULATOR	MAJ [redacted] CPT [redacted]	RELIEF CIRCULATOR	CPT [redacted] (1800 EOC)

7. POSITION AND POSITIONAL AIDS (Specify)

☑ SUPINE ☐ LITHOTOMY ☐ PRONE ☐ KRASKE LATERAL: ☐ LEFT SIDE UP ☐ RIGHT SIDE UP

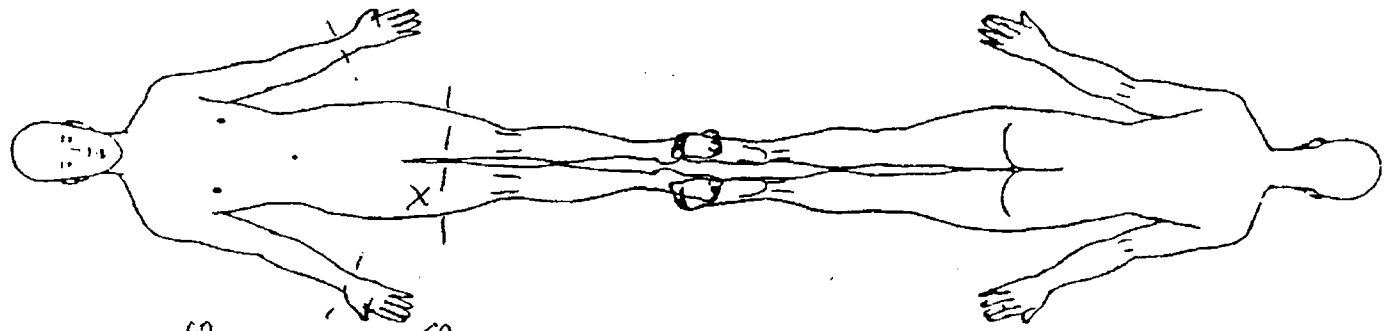
COMMENTS: Both arms on padded armboards at ∠ 90° angle. Foam Headrest under head

8. SKIN PREPARATION

HAIR REMOVAL ☑ YES ☐ NO
DONE BY: ☑ OR ☐ NURSING UNIT
METHOD: ☐ DEPILATORY ☐ RAZOR ☑ CLIP
COMMENTS: Abd. midline

PREP SOLUTION (Specify) Providine scrub & solution
SITE: abdomen BY WHOM:
SITE: BY WHOM: MAJ [redacted]
COMMENTS: No pooling of solution

9. LOCATION OF EXTERNAL DEVICES



LEGEND X Ground Pad (SD) -- Safety Strap (C) === Tourniquet

10. COUNTS — C = Correct I = Incorrect

		Other**	First Closing Count	Final Closing Count	SCRUB	CIRCULATOR
Sponge	☑ Yes ☐ No					
Needle Sharp	☑ Yes ☐ No		C	C		
Instrument	☑ Yes ☐ No				SPC [redacted]	CPT [redacted]
Other	☐ Yes ☑ No					

11. PATIENT IDENTIFICATION (For typed or written entries give: Name - Last, first, middle; Grade; Date; Hospital or Medical Facility;)

EPW # [redacted] b6-4

12. ELECTROSURGERY DEVICE(S) (ESU) ☑ YES ☐ NO

☑ ESU NO: Valleylab #1
GROUND PAD: BRAND Valleylab
LOT NO: 68936, Exp date 2005-03

☐ ESU NO:
GROUND PAD: BRAND
LOT NO:

☐ BIPOLAR NO:

13. PROSTHESIS, IMPLANTS ☐ YES ☒ NO IF YES NAME: ID NUMBER; MANUFACTURER

14. MEDICATIONS/ORDERS

IRRIGATION/MEDICATIONS GIVEN IN OPERATING ROOM (NOT BY ANESTHESIA) YES ☐ NO ☒

MEDICATIONS/SOLUTION	DOSAGE	TIME	METHOD	PREPARED BY	GIVEN BY

WOUND IRRIGATION ☒ YES ☐ NO, TYPE(S): NS.

OTHER ORDERS	TIME	CARRIED OUT BY

PHYSICIAN'S SIGNATURE [redacted]

15. X-RAY IN OPERAT[redacted]OOM IF YES, SITE
YES ☐ [redacted]

16. LABORATORY SPECIMENS

SPECIMEN (S) YES ☑ NO ☐	NAME s! Blood to lab for blood gas, Chem6, Hct	NAME
FROZEN SECTION (FS) YES ☐ NO ☐	NAME	NAME
CULTURE (C) YES ☐ NO ☐	NAME	NAME
NAME	NAME	NAME
NAME	NAME	

17. TUBES, DRAINS/PACKING YES ☒ NO ☐

TYPE/SIZE	1. JP X2	2.	3.
SITE	1 (R) Abd	2.	3.

18. DRESSING/IMMOBILIZATION *(Specify)*
Saline soaked Kerlix packing
4x8 covers
2X2 -> JPs

19. ADDITIONAL INFORMATION
WC
Surgeons: [redacted] Anesthesia: [redacted] Anesthesia Type: Gen Endo.

Bovie Pad site intact pre-op Clear; post-op C/I Bovie Settings: Coag/Cut 30/30

20. OPERATION(S) PERFORMED
Exploratory Laparotomy - Sm Bowel repair
anesthesia

21. PATIENT TRANSFERRED TO ICU 1 TIME 1625 METHOD Litter w/ Tube Gel c O2

22. REGISTERED NURSE SIGNATURE [redacted] 1 AN [redacted]

REVERSE OF DA FORM 5179-1, OCT 87 USAPA V1.01

MEDCOM - 9512

66-2all

66-2 all

MEDICAL RECORD — **INTRAOPERAT[illegible]OCUMENT**

For use of this form, see AR 40-66, the proponent agency is the office of The Surgeon General.

1. PATIENT TRANSPORTED TO OPERATING ROOM VIA: Gurney BY Anes. OIR Staff

2. PATIENT IDENTIFIED, RECORD REVIEWED AND PROCEDURE VERIFIED BY [redacted] CPT/AN

3. DATE 14 Jan 03 TIME PATIENT ARRIVED IN SUITE 1Cu → OR

4. PATIENT IN ROOM TIME 1405 NUMBER H/2

5. PREOPERATIVE EMOTIONAL STATUS

☐ CALM ☐ ANXIOUS ☐ EXCITED ☐ CRYING ☐ ANGRY ☐ WITHDRAWN ☐ OTHER *(Specify)*

COMMENTS: NKDA.

6. NURSING PERSONNEL

ASSIGNED SCRUB	PFC [redacted] (91D)	RELIEF SCRUB	
ASSIGNED CIRCULATOR	CPT. [redacted] (66E)	RELIEF CIRCULATOR	

7. POSITION AND POSITIONAL AIDS *(Specify)*

☑ SUPINE ☐ LITHOTOMY ☐ PRONE ☐ KRASKE LATERAL: ☐ LEFT SIDE UP ☐ RIGHT SIDE UP

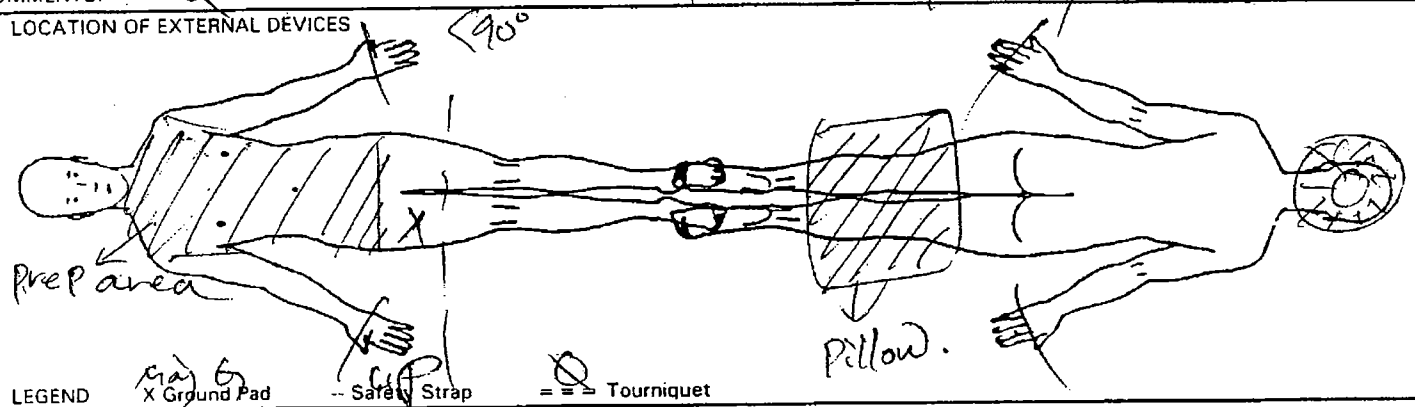
COMMENTS: Bil arm to padded arm board <90°. pillow under knee.

8. SKIN PREPARATION

HAIR REMOVAL ☐ YES ☑ NO
DONE BY: ☐ OR ☐ NURSING UNIT
METHOD: ☐ DEPILATORY ☐ RAZOR ☐ CLIP
COMMENTS: ∅

PREP SOLUTION *(Specify)* Betadine S/S
SITE: Abd BY WHOM: [redacted]
SITE: BY WHOM:
COMMENTS: ∅ pooling of Sol

9. LOCATION OF EXTERNAL DEVICES



LEGEND X Ground Pad -- Safety Strap = = = Tourniquet

10. COUNTS		C = Correct I = Incorrect: Other**	First Closing Count	Final Closing Count	SCRUB	CIRCULATOR
Sponge	☑ Yes ☐ No	C	C	C	PFC [redacted]	CPT. [redacted]
Needle Sharp	☑ Yes ☐ No					
Instrument	☑ Yes ☐ No	C	C	C	PFC [redacted]	CPT. [redacted]
Other	☑ Yes ☐ No					

11. PATIENT IDENTIFICATION *(For typed or written entries give: Name - Last, first, middle; Grade; Date; Hospital or Medical Facility;)*

EPW # [redacted] 66-4
51 yrs.

12. ELECTROSURGERY DEVICE(S) (ESU) ☑ YES ☐ NO

☑ ESU NO: Valley Lab #1
GROUND PAD: BRAND polyhesive II
LOT NO: 68936

☐ ESU NO:
GROUND PAD: BRAND
LOT NO:

☐ BIPOLAR NO:

Coag: 30
Cut: 30

DA FORM 5179-1, OCT 87 REPLACES D[illegible] MEDCOM - 9513 [illegible]ITION IS OBSOLETE. USAPA V1.01

13. PROSTHESIS, IMPLANTS ☐ YES ☑ NO IF YES NAME: ID NUMBER; MANUFACTURER

66-2all

14. MEDICATIONS/ORDERS

IRRIGATION/MEDICATIONS GIVEN IN OPERATING ROOM (NOT BY ANESTHESIA) YES [redacted] NO ☑

MEDICATIONS SOLUTION	DOSAGE	TIME	METHOD	PREPARED BY	GIVEN BY

WOUND IRRIGATION ☑ YES ☐ NO. TYPE(S):

0.9% Nacl

OTHER ORDERS	TIME	CARRIED OUT BY

PHYSICIAN'S SIG[redacted]

15. X-RAY IN[redacted]ING ROOM IF YES, SITE

YES ☐ [redacted]O ☑

16. LABORATORY SPECIMENS

SPECIMEN (S) YES ☐ NO ☑	NAME	NAME
FROZEN SECTION (FS) YES ☐ NO ☑	NAME	NAME
CULTURE (C) YES ☐ NO ☑	NAME	NAME
NAME	NAME	NAME
NAME	NAME	

17. TUBES, DRAINS/PACKING YES ☑ NO ☐

	1.	2.	3.	
TYPE/SIZE	(BTR Red Robinson	#8 LPC	Trach	Kerlix
SITE	Abd (Lt side)	neck		Abd

18. DRESSING/IMMOBILIZATION *(Specify)*

4x8, Kerlix

Tape

19. ADDITIONAL INFORMATION

Surgeons Dr. [redacted]
Dr. [redacted]

Anes: [redacted] (CRNA) / [redacted] (CRNA)

20. OPERATION(S) PERFORMED

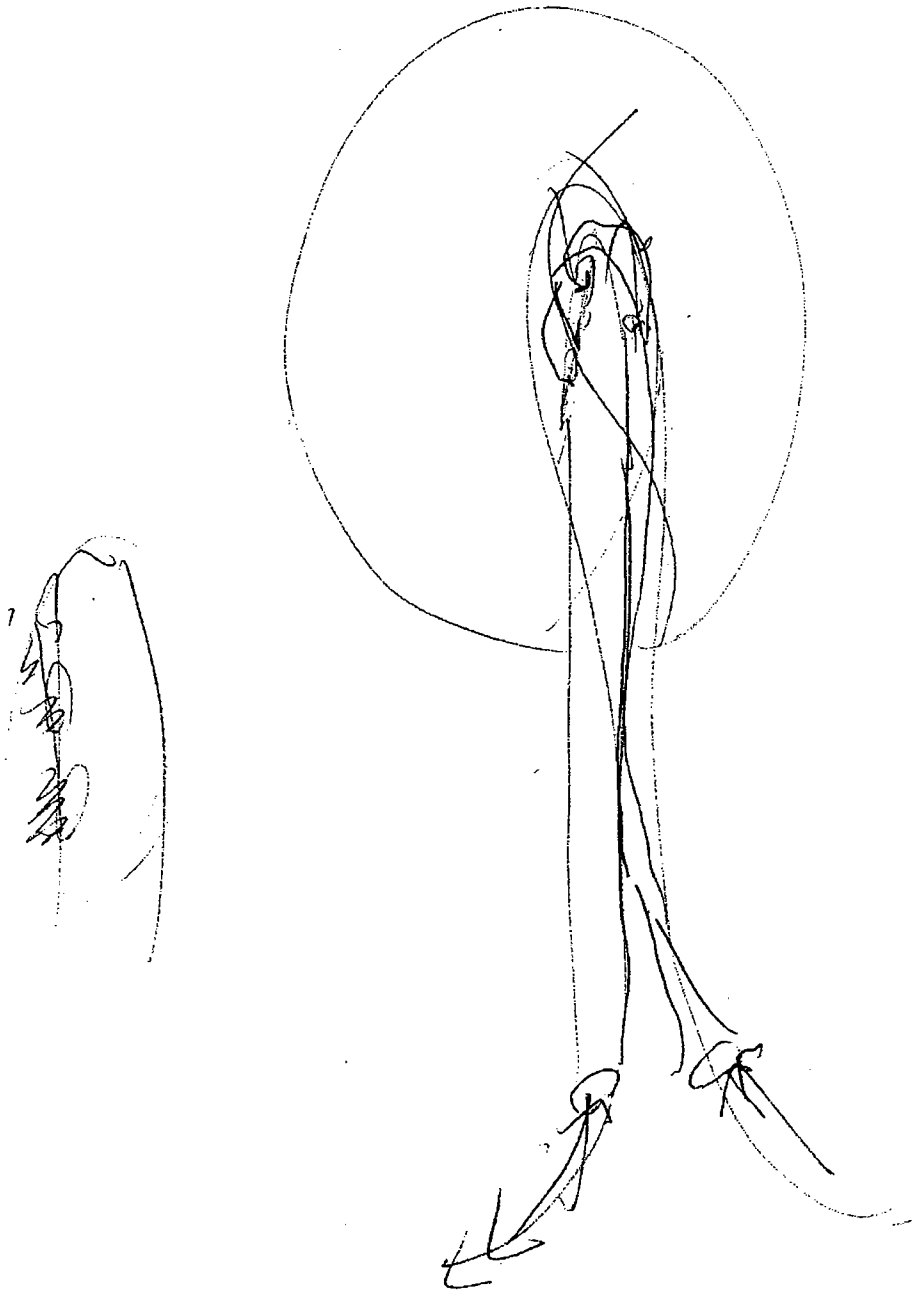
Exp Lap, Tracheostomy.

21. PATIENT TRANSFERRED TO	TIME	METHOD
ICU		Litter

22. REGIS[redacted]NURSE [redacted] PT/AN

REVER[redacted] OF DA [redacted] 5179-1, OCT 87 USAPA V1.01

MEDCOM - 9514



Pt [redacted] J-9

25cm @ lip
8.0 ETT

				PH	PCO2	PO2	BE	HCO3									
29may	1400	SIMV	12	800	60	5	35	1:2	8		–	96	98	124/84	8.0	MLT	
29may	1527	ABG	↑14	7.216	38.0	136	-12	15									
29may	1535				↑50												
29may	1620	ABG		7.212	36.1	162	-13	15									
29May	1800	SIMV	14	800	50	5	38	1:2	7		–	111	98	124/84	8	MLT	
29May	2000	SIMV	14	800	50	5	30	1:2	8		–	123	97	121/74	8	MLT	
29May	2200	SIMV	14	800	50	5	34	1:2	10		–	126	98	116/74	8	MLT	
30May	0000	SIMV	14	800	50	5	27	1:2	6		–	128	98	106/68	8	MLT	
30May	0200	SIMV	14	800	50	5	27	1:2	9		–	129	98	101/69	8	MLT	
30May	0400	SIMV	14	800	50	5	29	1:2	10		–	128	98	111/74	8	MLT	
30May	0559	SIMV	14	800	50	5	27	1:2	10		–	128	98	118/64	8	MLT	
30May	0800	SIMV	14	800	50	5	36	1:2	5		–	134	98	116/71	8	MLT	
30May	1000	SIMV	14	800	50	5	26	1:2	0		–	137	97	117/71	8	MLT	
30May	1205	SIMV	14	800	50	5	33	1:2	0		–	141	99	100/64	8	MLT	
30May	1358	SIMV	14	800	50	5	28	1:2	0		–	147	98	102/73	8	MLT	
30May	1602	SIMV	14	800	50	5	26	1:2	0		–	145	100	100/67	8	MLT	
30May	1820	SIMV	14	800	50	5	28	1:2	0		–	138	97	111/67	8	MLT	
30May	2000	SIMV	14	800	50	5	44	1:2	5		–	148	98	124/67	8	MLT	
30May	2200	SIMV	14	800	50	5	34	1:2	6		–	142	98	115/63	8	MLT	
31May	0000	SIMV	14	800	50	5	25	1:2	7		–	152	98	135/70	8	MLT	
31May	0200	SIMV	14	800	50	5	33	1:2	15		–	157	98	109/69	8	MLT	
31May	0400	SIMV	14	800	50	5	35	1:2	18		–	158	99	117/68	8	MLT	
31May	0600	SIMV	14	800	50	5	28	1:2	12		–	144	98	95/50	8	MLT	
31May	0750	SIMV	14	800	50	5	33	1:2	20		–	133	98		8	MLT	
31May	930	PC	went to OR									112		137/66	8	MLT	
31May	1400	AC	14	800	50	0	32	1:2	—		–	114	97	127/68	8	—	
31May	1600	AC	14	800	50	0	4?	1:	4		–	147	97	139/66	8	MLT	
31May	1800	AC	14	800	50	0	31	1:2	0		–	125	98	119/61	8	MLT	
31May	2000	AC	14	800	50	0	31	1:2	0		–	134	95	99/53	8	MLT	
31May	2200	AC	14	800	50	0	30	1:2	0		–	129	94	107/60	8	MLT	
1Jun	0000	AC	14	800	50	↑ 0	30	1:2	0		–	114	93	130/76	8	MLT	
1Jun	0200	AC	14	800	50	5	32	1:2	0		–	121	98	110/59	8	MLT	
1Jun	0400	AC	14	800	50	5	33	1:2	0		–	122	98	103/61	8	MLT	
1Jun	0612	AC	14	800	50	5	31	1:2	0		–	129	96	115/60	8	MLT	

[redacted]

b6-2

MEDCOM - 9516

Pt # [redacted] 66-4

25cm@lip
4.0 ETT

66-2

DATE	TIME	MODE	RATE	VOLUME	FIO2	PEEP	I:E	INSPIRATION	EXPIRATION	PLATEAU	RR						
1Jun	0252	A/C	14	800	50	5	33	1:2	0	—	128	98	131/64	4		MCT	[redacted]
1Jun	1026	AC	14	800	50	5	3.8	1:2	5	—	183	97	160/69	8		MCT	
1Jun	1000	PE	Placed on T-Piece														
1Jun	1430	Pt extubated placed on 50% venti mask 10cm															

MEDCOM - 9517

[redacted]

NURSING SERVICE PERSONNEL TIME SCHEDULE

For use of this form, see AR 40-407; the proponent agency is the Office of The Surgeon General.

DATES (Inclusive) OF PERIOD COVERED: 2 JUN 03

TITLE	LAST NAME	DUTY	SUN.	MON.	TUE.	WED.	THURS.	FRI.	SAT.
			DUTY TIME/CLASS TIME, OR OFF-DUTY STATUS						
1st unit	[redacted] W0018 03 000754	A	[illegible]	[illegible]	[illegible]	[illegible]	T		
0900	" "		132	14/91	38	99%	99°		
0905	" "		133	158/8	33	94%			
0910	" "		132	156/93	40	93%			
0915	" "		128	127/74	45	99%	O_2 tank replaced		
0930	" "		125	121/75	25	99%	3 mg of MSO4 given		
0945	" "		125	133/81	27	99%			
1000	" "		124	134/79	22	99%	blood transfusion completed		
						Temp - 98.5			

PRBC infusing

2 June 03 @ 0900 infusion of 1 unit of PRBC started vitals obtained above. pt typed + screened a long & a crossmatch, & RXN noted @ this time. [redacted]

2 June 03 @ 1010 transfusion completed @ this time vitals obtained, & RXN noted. blood bag and 518 taken to Lab, will continue to monitor. & post CBC lab ordered. [redacted]

b6-2 all

SIGNATURE OF HEAD NURSE

WARD

INSTRUCTIONS

List professional personnel first and then nonprofessional.

In column under "title" enter title, e.g., Maj., Capt., Lt., Sgt., Pvt., Mr., Mrs., Miss.

Entries for "Duty" and for "Off-Duty Status" will be symbolized as follows:

"Duty" symbols

- HN - Head nurse
- ASST. HN - Asst. head nurse
- GEN. DUTY - General duty
- CL. T - Clinical technician
- WM - Ward master

"Off-Duty Status" symbols

- DO - Day Off
- LV - Leave
- SK - Sick leave
- HT - Holiday time

DA FORM 3872, JUN 72 REPLACES DA FORM 8-93, 1 JAN 54, WHICH WILL BE USED. USAPPC V1.00

[redacted] b6-4

511-119

NSN 7540-00-634-4124

MEDICAL RECORD

VITAL SIGNS RECORD

HOSPITAL DAY

POST- DAY

MONTH-YEAR June 6 DAY

19 2003 HOUR

1130 1146 0000 0020 0035 0100

PULSE (O) — TEMP. F (•)

105°, 104°, 103°, 102°, 101°, 100°, 99°, 98.6°, 98°, 97°, 96°, 95°

180, 170, 160, 150, 140, 130, 120, 110, 100, 90, 80, 70, 60, 50, 40

TEMP. C: 40.6°, 40.0°, 39.4°, 38.9°, 38.3°, 37.8°, 37.2°, 37.0°, 36.7°, 36.1°, 35.6°, 35.0°

(Centigrade Equivalents, for Reference only)

RESPIRATION RECORD

	1130	1146	0000	0020	0035	0100
BLOOD PRESSURE BP	95/61	100/62	101/62	102/61	110/61	
P	98	92	94	92	91	
R	19	16	17	14	14	

HEIGHT: WEIGHT →

Record special data only when so ordered

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; ID No. (SSN or other); hospital or medical facility)*

REGISTER NO.

WARD NO.

VITAL SIGNS RECORDS

Medical Record

STANDARD FORM 511 (REV. 7-95)
Prescribed by GSA/ICMR, FIRMR (41 CFR) 201-9.202-1

66-4 [redacted] 7 ETT

[redacted] 24@ Lip

RT Vent Flow Sheet

			PH	PCO2	PO2	HCO3	BE	SO2								
3Jun	1800	SIMV	16	750	40	5	34	1:2	17	—	134	100	118/71	7	MLT	
4Jun	2000	SIMV	16	750	40	5	37	1:2	18	—	138	96	106/65	7	MLT	
4Jun	2200	SIMV	16	750	40	5	34	1:2	15	—	128	98	90/69	7	MLT	
5Jun	0000	SIMV	16	750	40	5	34	1:2	10	—	133	98	124/71	7	MLT	
5Jun	0200	SIMV	16	750	40	5	38	1:2	8	—	126	98	112/72	7	MLT	
5Jun	0400	SIMV	↓14	750	40	5	31	1:2	4	—	109	99	106/60	7	MLT	
5Jun	0700	SIMV	14	750	40	5	27	1:2	20	—	128	96	125/37	7	—	
5Jun	1000	SIMV	14	750	40	5	36	1:2	16	—	130	96	117/77	7	MLT	
5Jun	1203	SIMV	14	750	40	5	34	1:2	20	—	131	97	104/72	7	MLT	
5Jun	1352	SIMV	14	750	40	5	35	1:2	14	—	125	97	93/63	7	MLT	
5Jun	1617	SIMV	14	750	40	5	35	1:2	8	—	119	95	97/60	7	MLT	
6Jun	0650	SIMV	14	750	50	5	36	1:2	11	—	117	97	102/68	7	MLT	
Jun	0805	SIMV	14	750	50	5	33	1:2	13	—	117	98	106/7	7	MLT	
Jun	1005	SIMV	14	750	+45	5	27	1:2	12	—	111	98	107/64	7	MLT	
6Jun	1210	SIMV	14	750	+40	5	35	1:2	12	—	107	98	101/58	7	MLT	
6Jun	1405	SIMV	14	750	40	5	34	1:2	6	—	100	100	126/64	7	MLT	
6Jun	1600	SIMV	14	750	70	5	43	1:2	14		130	97		7	MLT	
6Jun	1615	SIMV	14	750	(60N)	5	38	1:2	22	—	132	98	—	7	—	
6Jun	1633				(+50)											
6Jun	1815	SIMV	14	750	50	5	32	1:2	14	—	119	97	97/66	7	MLT	
6Jun	2030	SIMV	14	750	50	5	32	1:2	14	—	106	96	91/58	7	MLT	
6Jun	2200	SIMV	14	750	50	5	34	1:2	16	—	98	99	89/67	7	MLT	
7Jun	0000	SIMV	14	750	50	5	34	1:2	8	—	98	98	91/59	7	MLT	
7Jun	0200	SIMV	14	750	↓40	5	36	1:2	8	—	91	100	109/60	7	MLT	
7Jun	0400	SIMV	14	750	40	5	34	1:2	3	—	99	98	110/65	7	MLT	
7Jun	0619	SIMV	14	750	40	5	23	1:2	1	—	92	99	122/62	7	MLT	
7Jun	0808	SIMV	14	750	40	5	30	1:2	8	—	96	98	104/63	7	MLT	
7Jun	1011	SIMV	14	750	40	5	30	1:2	8	—	92	98	115/57	7	MLT	
7Jun	1111	ABG	7.430	40.5	110	27	3	98								
7Jun	1208	SIMV	14	750	40	5	32	1:2	7	—	99	97	132/63	7	MLT	
7Jun	1419	SIMV	14	750	40	5	40	1:2	1	—	102	97	132/68	7	MLT	
7Jun	1629	SIMV	14	750	90	5	37	1:2	8	—	111	99	128/67	7	MLT	
7Jun	2000	SIMV	↓12	↑850	↓50	5	35	1:2	0	—	100	99	105/63	7	MLT	
7Jun	2200	SIMV	12	850	50	5	46	1:2	8	—	102	100	86/57	7	MLT	

66-2

[redacted]

MEDCOM - 9520

[redacted] 66-4

Size 7 ETT
22cm @ lip

4 June	715	SIMV	20	750	100	5	41	1:2	28	—	160	99	88/53	8	MLT	[redacted] 662
4 Jun	900	SIMV	16	750	60	5	32	1:2	7	—	154	99	110/67	7	MLT	
4 June	1200	SIMV	16	750	60	5	33	1:2	9	—	140	95	112/70	7	MLT	
4 June	1212	SIMV	16	750	60	5	30	1:2	0	—	123	98	108/64	7	MLT	
4 Jun	1415	SIMV	16	750	50 V	5	32	1:2	0	—	132	98	92/64	7	MLT	
4 Jun	1558	SIMV	16	750	50	5	37	1:2	14	—	134	96	102/74	7	MLT	
5 JUN																

[redacted] 66-2

5 Jun 03

MEDCOM - 9521

[redacted] Transfusion on RBC's

NURSING SERVICE PERSONNEL TIME SCHEDULE

For use of this form, see AR 40-407; the proponent agency is the Office of The Surgeon General.

DATES (Inclusive) OF PERIOD COVERED: 10 Jun 03

TITLE	LAST NAME	DUTY	SUN.	MON.	TUE.	WED.	THURS.	FRI.	SAT.
1st RBC			HR	BP	SPO2	RR	T		
1300 1st	4823864	RBC's	91	113/65	100	10	99.3		
1305	" "	" "	87	110/64	100	10			
1310	" "	" "	88	112/63	99	10	99.5		
1315	" "	" "	88	112/64	99	10			
1320	" "	" "	87	112/63	99	10	99.2		
1325	" "	" "	88	110/66	99	10			
1330	" "	" "	90	110/62	99	10	99.4		
1345	" "	" "	87	109/65	99	10			
1400	" "	" "	91	107/64	99	10	99.4		
1415	" "	" "	88	108/66	98	10			
1430	" "	" "	88	109/64	98	10	99.7	1st - completed	
1435									
2nd unit [redacted] 1445	" 1261041	" "	88	109/65	98	10	99.8	- Started 2nd	
1440	" "	" "	90	107/64	98	10			
1445	" "	" "	89	109/64	98	10	100.0		
1450	" "	" "	91	106/63	98	10	100.1		
1505	" "	" "	91	101/59	96	10	100.2		
1520	" "	" "	91	101/61	98	10	100.3		
1535	" "	" "	91	103/62	98	10			
1550	" "	" "	90	103/61	98	10	100.3		
1605	" "	" "	81	112/72	98	10	100.2		
1638	" "	" "	88	110/65	98	10	100.3		
~~1705~~									

SIGNATURE OF HEAD NURSE | WARD

INSTRUCTIONS

List professional personnel first and then nonprofessional.

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"Duty" symbols

- HN - Head nurse
- ASST. HN - Asst. head nurse
- GEN. DUTY - General duty
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- WM - Ward master

"Off-Duty Status" symbols

- DO - Day Off
- LV - Leave
- SK - Sick leave
- HT - Holiday time

DA FORM 3872, JUN 72 REPLACES DA FORM 8-93, 1 JAN 54, WHICH WILL BE USED. USAPPC V1.00

[redacted]

66-4 [redacted] 7ETT

24@ 1½p

VENT FLOW SHEET

DATE	TIME	MODE	RATE	VOLUME	FIO2	PEEP	PIP	I/E TIME	Spont RATE	PLATEAU	HR	SO2	BP	ET	CUFF	INITIAL
			pH	pCO_2	pO_2	HCO_3	BE	SaO_2								
8Jun	0000	SIMV	12	850	50	5	49	1:2	0	—	102	100	89/59	7	MLT	[redacted]
8Jun	0200	SIMV	12	850	50	5	36	1:2	0	—	103	100	91/56	7	MLT	[redacted]
8Jun	0400	SIMV	12	850	50	5	35	1:2	0	—	102		112/49	7	MLT	[redacted]
8JUN	0600	SIMV	12	850	50	5	38	1:2	0	—	104	98	95/60	7	MLT	[redacted]
8Jun	0800	SIMV	12	850	50	5	38	1:2	0	—	113	—	146/90	7	MLT	[redacted]
8Jun	1030	SIMV	12	850	60	5	32	1:2	1	—	105	97	94/5[illegible]	7	MLT	[redacted]
8Jun	1151	SIMV	12	850	60	5	25	1:2	3	—	112	100	90/46	7	MLT	[redacted]
8Jun	1356	SIMV	12	850	55	5	33	1:2	0	—	107	100	108/[illegible]	7	MLT	[redacted]
					[redacted]											
ABG		—	7.351	38.7	63	21	-4	91								[redacted]
8Jun	1500	SIMV	12	850	60	5	37	1:2	0	—	141	99	—	7	MLT	[redacted]
8Jun	1551	SIMV	12	850	60	5	34	1:2.6			101	96	83/4[illegible]	7	MLT	[redacted]
8Jun	1800	SIMV	12	850	60	5	34	1:2.1	0	—	102	100	127/67	7	MLT	[redacted]
8Jun	2000	SIMV	12	850	60	5	35	1:2.1	0	—	100	94	116/63	7	MLT	[redacted]
8Jun	2200	SIMV	12	850	60	5	33	1:2.1	0	—	97	100	118/62	7	MLT	[redacted]
9Jun	0000	SIMV	12	850	60	5	33	1:2.1	0	—	121	100	122/60	7	MLT	[redacted]
9Jun	0200	SIMV	12	850	60	5	34	1:2.1	0	—	90	100	117/60	7	MLT	[redacted]
9Jun	0400	SIMV	12	850	60	5	33	1:2.1	0	—	92	94	119/58	7	MLT	[redacted]
9Jun	0600	SIMV	14	850	60	5	31	1:1.7	0	—	98	96	106/61	7	MLT	[redacted]
9Jun	0736	ABG	7.533	35.1	73	30	7	+								[redacted]
9Jun	0825	SIMV	12	850	70	5	35	1:1.7	0	—	99	100	116/65	7	MLT	[redacted]
9Jun	0957	SIMV	12	850	70	5	35	1:2.1	0	—	104	99	105/64	7	MLT	[redacted]
9Jun	1240	SIMV	10	850	60	10	34	1:2.8	2	—	98	94	94/60	7	MLT	[redacted]
9Jun	1400	SIMV	10	850	60	10	31	1:2.8		—	112	94	132/[illegible]	7	MLT	[redacted]
9Jun	1602	SIMV	10	850	60	10	40	1:2.8	20	—	123	97	109/71	7	MLT	[redacted]
9Jun	1800	SIMV	10	850	60	10	29	1:2	7	—	119	97	104/60	7	MLT	[redacted]

66-2

MEDCOM - 9523

[redacted] — 66-4

RT Vent Flow Sheet

[redacted] 7.0 ETT
24@1:p

5Jun	1800	SIMV	14	750	65	5	35	1:2.1	11	—	129	98	84/58	7.0	MLT	[redacted]
5Jun	2000	SIMV	14	750	65	5	38	1:2.1	0	—	126	100	114/67	7.0	MLT	
5Jun	2200	SIMV	14	750	65	5	35	1:2.1	22	—	133	94	104/63	7.0	MLT	
6Jun	0000	SIMV	14	750	50	5	35	1:2.1	13	—	140	95	109/62	7.0	MLT	
6Jun	0200	SIMV	14	750	50	5	34	1:2.1	8	—	116	98	97/65	7.0	MLT	
6Jun	0400	SIMV	14	750	50	5	25	1:2.1	6	—	117	98	91/64	7.0	MLT	
6Jun																
12Jun03	0800	SIMV	15	700	60	10	37	1:2	8	—	89	100%	141/76	7.0	MLT	
12Jun03	0950	SIMV	15	700	60	10	36	1:2	8	—	101	100	149/79	7.0	MLT	
12Jun03	1152	SIMV	15	700	60	10	37	1:2	8	—	110	100	140/73	7.0	MLT	
12Jun	1411	SIMV	15	700	60	10	36	1:2	8	—	111	100	130/71	7.0	MLT	
12Jun	1600	SIMV	15	700	60	10	36	1:2	8	—	129	99	122/74	7.0	MLT	
12Jun	1815	SIMV	15	700	60	10	39	1:2	0	—	128	100	107/62	7	MLT	
12Jun	2000	SIMV	15	700	60	10	38	1:2	0	—	120	100	111/67	7	MLT	
12Jun	2200	SIMV	15	700	60	10	28	1:2	0	—	117	100	94/47	7	MLT	
13Jun	0000	SIMV	15	700	60	10	40	1:2	0	—	121	100	100/54	7	MLT	
13Jun	0200	SIMV	15	700	60	10	29	1:2	0	—	119	100	101/54	7	MLT	
13Jun	0400	SIMV	15	700	60	10	50	1:2	0	—	117	100	121/65	7	MLT	
13Jun	0604	SIMV	15	700	60	10	44	1:2	15	—	105	100	105/58	7	MLT	
13Jun	0742	SIMV	15	700	100	10	46	1:2	8	—	129	100	106/61	7	MLT	
13Jun	0955	SIMV	15	700	70	10	43	1:2	8	—	138	100	107/57	7	MLT	
13Jun	1356	SIMV	15	700	80	10	45	1:2	6	—	117	100	91/51	7	MLT	[redacted]

66-2

2109m03/x

MEDCOM - 9524

[redacted] -66-4- Pt [redacted]

TETT 26cm @ 1

28TH COMBAT SUPPORT HOSPITAL VENTILATOR FLOW SHEET

Size 8 Shiley

DATE	TIME	MODE	RATE	VOLUME	FI02	PEEP	PIP	PT RATE	HR	SO2	BP	Ph	Pco2	Po2	BE	HCO3	SaO2	REMARKS
13Jun	1600	SIMV	15	650	70	10	40	0	124	99	97/50							[redacted]
13Jun	1800	SIMV	15	700	60	10	36	0	111	100	97/67							
13Jun	2000	SIMV	15	700	60	10	40	0	109	100	104/61							
13Jun	2200	SIMV	15	700	60	10	36	0	110	97	106/61							
14Jun	0000	SIMV	15	700	60	10	40	0	90		120/71							
14Jun	0200	SIMV	15	700	60	10	37	0	92	98	117/65							
14Jun	0400	SIMV	15	700	60	10	37	0	97	98	114/65							
14Jun	0607	SIMV	15	700	60	10	38	0	97	98	104/60							
14Jun	0753	SIMV	15	700	60	10	35	0	94	100	111/68							[redacted]
14Jun	0954	SIMV	15	700	60	10	35	0	95	99	102/61							
14Jun	1156	SIMV	15	700	60	10	39	0	97	99	108/63							
14Jun	1400	Pt taken to O.R.																
14Jun	1600	Pt IN OR																Pt Did not get 1600 Tx
14Jun	1700	SIMV	15	700	100	10	39	~~25~~ 3	115	95	114/67							[redacted]
14Jun	1830	SIMV	15	700	90	10	33	0	128	97	109/62							
14Jun	2000	SIMV	15	700	90	10	38	0	121	96	109/62							
14Jun	2020			800		8												
14Jun	2200	SIMV	15	800		8	40	0	123	94	104/53	7.43	41.5	61	4	28	92	
15Jun	0000	SIMV	15	800	90	8	36	10	118	97	92/70							
15Jun	0200	SIMV	15	800	90	8	38	3	105	98	113/57							
15Jun	0400	SIMV	15	800	90	8	38	15	107	98	129/69							
15Jun	0600	SIMV	15	800	80 (↓)	12 (↑)	34	19	111	99	124/64							MD changing sett
15Jun	0800	SIMV	15	700 (↓)	80	12	42	20	105	100	105/70							MD changing sett
15Jun	0830	SIMV	18 (↑)	700	80	12	41	18	110	99	115/67							VENT RR changed
15Jun	1002	SIMV	18	700	70 (↓)	12	35	0	104	100	112/62							
15Jun	1329	SIMV	18	700	70	12	40	0	110	99	100/57	7.379	40.7	76	-1	24	95	[redacted]
15Jun	1400	SIMV	18	700	75 (↑)	12	40	0	120	94	112/63							↑ O2 75%
15Jun	1644	SIMV	18	700	90	12	37	0	104	97	100/57							
15Jun	1815	SIMV	18	700	90	12	44	4	121	96	104/64							[redacted]
15Jun	2000	SIMV	18	700	↓80	12	50	0	109	98	94/57							
15Jun	2200	SIMV	18	700	80	12	38	2	117	97	111/63							
16Jun	0000	SIMV	18	700	70	12	40	18	104	97	99/48							
16Jun	0200	SIMV	18	700	70	12	46	14	103	96	89/44							
16Jun	0400	SIMV	18	700	70	12	54	6	83	96	104/50							

MEDCOM - 9525

66-2↑

Pt [redacted] 66-4
Size 8 Shiley

28TH COMBAT SUPPORT HOSPITAL VENTILATOR FLOW SHEET

DATE	TIME	MODE	RATE	VOLUME	FI02	PEEP	PIP	PT RATE	HR	SO2	BP	Ph	Pco2	Po2	BE	HCO3	SaO2	REMARKS	INT
18Jun	1227	SIMV	24	750	100	14	47	Ø	118	85	86/5								[redacted]
18Jun	1425	SIMV	25	760	100	14	45	Ø	117	84	83/47							Per Doctor	[redacted]
18Jun	1620	SIMV	25	760	100	14	45	Ø	110	81	75/49								[redacted]
18Jun	1800	SIMV	25	760	100	14	47	0	118	88	97/54							ERR	[redacted]
18Jun	2000	SIMV	25	760	100	14	49	0	107	84	44/28								[redacted]
18Jun	2200	SIMV	25	760	100	14	59	0	109	84	97/57								[redacted]
19Jun	0000	SIMV	25	760	100	14	55	0	102	87	105/57								
19Jun	0200	SIMV	25	760	100	14	51	0	101	88	109/67								
19Jun	0400	SIMV	25	760	100	14	56	0	90	71	61/40								
19Jun	0626	SIMV	25	760	100	14	56	Ø	91	70	67/43								
19Jun	0808	SIMV	25	760	100	14	57	Ø	90	72	66/44								
19Jun	0920	Pt	taken	off	vent			case		D/C									[redacted]

66-2

MEDCOM - 9526

RR 20
FiO2 100%

102.2
EPW [redacted]
0813

64

7.325
51.1
60
27
1
98

7.398
38
42.7
83
26
1
96

7.398
42.6
83

98.5

7.534
34.1
98
29
6
98

FCU Bed 7

LABORATORY RESULT FORM

(Subject to Privacy Act of 1974)

STATUS	DATE	SSN
	16 May 1325	

T)			Chemistry (Piccolo Analyzer)			Hematology		
		RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
		5 mmol/L	ALT		10-47 U/L	WBC	9.1	4.8-10.8 x 10^3
		mol/L	AST		11-38 U/L	RBC	4.47	4.7-6.1 x 10^9
		nol/L	GGT		5-56 U/L	Hgb	11.7	14-18 g/dl (M) 12-16 g/dl (F)
			ALB		3.3-5 5 g/dl	Hct	38.3	42-52% (M) 37-47% (F)
		(art) en)	ALP		26-84 U/L	MCV	85.7	80-94 fl (M) 81-99 fl (F)
		rt)	Amylase		14-97 U/L	Plt	25 verified	130-500 x 10^3 verified
		))	Ca		8-10.3 mg/dl	Lymph%	24.4	20.5-51.1%
H			Chol		<200 mg/dl	Retic		0.5-1 5% (adult)
sO			Creat		0.6-1.2 mg/dl	PT		9.8-13.6 secs
BEe			BUN		7-22 mg/dl	APTT		21-34 secs
AGap			GLU		73-118 mg/dl	D dimer		<20 ug/ml
Ca			bili		0.21.6 mg/dl	FDP		<10 ug/ml
BUN					6.4-8.1 g/dl	Segs		Mono
GLU					2.2-6.6 mg/dl (F) 3.6-8.0 mg/dl (M)	Bands		Eos
Creat					128-145 mmol/L	Lymph		Baso
Hct					3.3-4.7 mmol/L	Atyp		Imm
Hgb					98-108 mmol/L	RBC Morph		
					18-33 mmol/L	Other		
ABO/Rh					39-380 u/L	Spun Crit		42-52% (M) 37-47% (F)
Unit			**Urinalysis**			Man WBC		4.8-10 8 x 10^3
			TEST	RESULT	REF. RANGE	Manual Plt		130-500 x 10^3 verified
			Gluc		Negative	**Microbiology**		
			Bili		Negative	Source		
			Ketone		Negative	Gram Stain		
Misc. Chemistry			SG		N/A	Culture		
CKMB			Blood		Negative	KOH/WP		
Troponin			pH		N/A	O&P		
DOA			Protein		Negative	Occ Bld		Malaria
Alcohol			Urob		0 2-1.0	Other		
Microscopic Urinalysis			Nitrite		Negative			
			HCG		Negative			

☺ "SHADOW" PJR

MEDCOM - 9528

ICU #1 Bed 2 Chemistry Only

Ward/Section: 0185	REQUESTING PHYSICIAN:			CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)
LAST, FIRST, MI. 66-4 [redacted]		DATE 1325	TIME	SSN/PSEUDO SSN:

(i-STAT)			[illegible] Chemistry			(Piccolo) Metabolic Panel		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
Na		138-146 mmol/L	ALB	3.5	3.5-5.5 g/dl	GLU		73-118 mg/dl
K		3.5-4.9 mmol/L	ALP	120	26-84 u/l	BUN		7-22 mg/dl
Cl		98-109 mmol/L	ALT	23	10-47 u/l	CA^{++}		8.0-10.3 mg/dl
pH		7.31-7.45	AMY	70	14-97 u/l	CRE		0.6-1.2 mg/dl
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)	AST	38	11-38 u/l	NA^+		128-145 mmol/l
PO2		80-105 mmHg (art) N/A (ven)	TBIL	1.0	0.2-1.6 mg/dl	K^+		3.3-4.7 mmol/l
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN	11	7-22 mg/dl	CL^-		98-108 mmol/l
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)	CA^{++}	8.5	8.0-10.3mg/dl	tCO_2		18-33 mmol/l
sO2		95-98%	CHOL	105	100-200 mg/dl	(Piccolo) Liver Panel Plus		
BEecf		(-2) – (+3) mmol/L	CRE	1.1	0.6-1.2 mg/dl	TEST	RESULT	REF. RANGE
AnGap		10-20 mmol/L	GLU	117	73-118 mg/dl	ALB		3.3-5.5 g/dl
Ca		1.12-1.32 mmol/L	TP	~~6.4~~	~~6.4~~-8.1 g/dl	ALP		26-84 u/l
BUN		8-26 mg/dl	[illegible]			ALT		10-47 u/l
GLU		70-105 mg/dl	TEST	RESULT	REF. RANGE	AMY		14-97 u/l
Creat		0.7-1.5 mg/dl	GLU		73-118 mg/dl	AST		11-38 u/l
Hct		38-51% PCV	BUN		7-22 mg/dl	TBIL		0.2-1.6 mg/dl
Hgb		12-17 g/dl	CRE		0.6-1.2 mg/dl	GGT		5-65 u/l
[illegible] Chemistry			CK		39-380 u/l (M) 30-190 u/l (F)	TP		6.4-8.1 g/dl
TEST	RESULT	REF. RANGE	NA^+		128-145 mmol/l	(Piccolo) Electrolyte		
Troponin-I			K^+		3.3-4.7 mmol/l	TEST	RESULT	REF. RANGE
Drug of Abuse			CL^-		98-108 mmol/l	NA^+	139	128-145 mmol/l
			tCO_2		18-33 mmol/l	K^+	3.8	3.3-4.7 mmol/l
						CL^-	108	98-108 mmol/l
						tCO_2	25	18-33 mmol/l

REMARKS:

66-2

REPORTED BY: [redacted]	DATE: 16 May 03	LAB ID NO.: 023

Chemistry Only

Ward/Section: 66-4 | REQUESTING PHYSICIAN: | **CHEMISTRY RESULT FORM** (Subject to the Privacy Act of 1974)

LAST, FIRST, MI. [redacted] | DATE 5-17-03 | TIME 08:30 | SSN/PSEUDO SSN:

UNICOR Federal Prison Industries, Inc.

NSN 7540-00-181-8344 (913) 682-8700, ext. 465 PREVIOUS EDITION USABLE

TEST(S) | SPECIMEN TAKEN DATE 5-17 TIME 1130 A.M. P.M. | REQUESTED | RESULTS

REMARKS | REQUESTING PHYSICIAN'S SIGNATURE | Enter in above space | PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE | REPORTED | TECH | MD | DATE 5-17

Many Gram Negative Rods seen

Many Gram Positive ~~negative~~ cocci in pairs + chains seen.

Many Gram Negative Diplococci [redacted]

66-2

Sputum Gram Stain

GIS HCC #1

MISC: URGENCY ☐ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT | PATIENT STATUS ☐ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM | SPECIMEN SOURCE (Specify) | LAB ID NO. | SPECIMEN/LAB RPT. NO

MISCELLANEOUS STANDARD FORM 557 (Rev. 3-77) Prescribed by GSA/ICMR FIRMR (41 CFR) 201-45.505 557-107

PATIENT'S MED. RECORD

tCO_2

Ser# 40746

1-STAT G3+

Pt: 0185

Pt Name:

TCO2_____25 mmol/L

At 37C

pH_____7.461

PCO2_____34.0 mmHg

PO2_____102 mmHg

HCO3_____24 mmol/L

BEecf_____0 mmol/L

SO2*_____98 %

*calculated

At Patient Temp

pH_____7.437

PCO2_____36.4 mmHg

PO2_____112 mmHg

Patient Temp: 101.4F

Fi O2_____: .50

Sample Type_: ART

17MAY03 10:15

Oper: 354057

Physician:_____

Ser# 40746

Fio2 40% 0740

66-4

	100	
tCO_2	25	18-33 mmol/l

Chemistry Metabolic Panel	REF. RANGE
	73-118 mg/dl
	7-22 mg/dl
	8.0-10.3 mg/dl
	0.6-1.2 mg/dl
	128-145 mmol/l
	3.3-4.7 mmol/l
	98-108 mmol/l
	18-33 mmol/l

Chemistry Panel Plus	REF. RANGE
	3.3-5.5 g/dl
	26-84 u/l
	10-47 u/l
	14-97 u/l
	11-38 u/l
	0.2-1.6 mg/dl
	5-65 u/l
	6.4-8.1 g/dl

Hematology	REF. RANGE
	128-145 mmol/l
	3.3-4.7 mmol/l
	98-108 mmol/l
	18-33 mmol/l

1-STAT G3+

Pt: [redacted]

Pt Name:

pH_____7.438

PCO2_____35.8 mmHg

PO2_____69 mmHg

HCO3_____24 mmol/L

BEecf_____0 mmol/L

SO2*_____94 %

*Calculated

Sample Type_:

17MAY03 07:42

Oper: [redacted] 66-2

Physician:_____

UNICOR Federal Prison Industries, Inc.

NSN 7540-00-181-8344 (913) 682-8700, ext. 465

PREVIOUS EDITION USABLE

TEST(S)

SPECIMEN TAKEN

DATE 8-17 TIME 1130 A.M. P.M.

REQUESTED

RESULTS

REMARKS

Enter in above space PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REQUESTING PHYSICIAN'S SIGNATURE

[redacted]

ICU #1

66-4

CSF Gram Stain

No Organisms Seen

REPORTED [redacted] 66-2

TECH DATE 8-17

MISC

URGENCY ☐ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT

PATIENT STATUS ☐ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM

SPECIMEN SOURCE (Specify)

LAB ID NO. [redacted]

SPECIMEN/LAB RPT. NO

MISCELLANEOUS 557-107

STANDARD FORM 557 (Rev. 3-77)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-45-505

PATIENT'S MED. RECORD

UNICOR Federal Prison Industries, Inc.

NSN 7540-00-181-8344 (913) 682-8700, ext. 465

PREVIOUS EDITION USABLE

TEST(S)

SPECIMEN TAKEN

DATE 8-17 TIME 1130 A.M. P.M.

REQUESTED

RESULTS

REMARKS

Enter in above space PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REQUESTING PHYSICIAN'S SIGNATURE

[redacted]

ICU #1

66-4

CSF Gram Stain

No Organisms Seen

REPORTED [redacted] 66-2

TECH DATE 8-17

MISC

URGENCY ☐ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT

PATIENT STATUS ☐ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM

SPECIMEN SOURCE (Specify)

LAB ID NO. [redacted]

SPECIMEN/LAB RPT. NO

MISCELLANEOUS 557-107

STANDARD FORM 557 (Rev. 3-77)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-45-505

PATIENT'S MED. RECORD

3C

66-4

LABORATORY RESULT FORM
(Subject to Privacy Act of 1974)

LAST, FIRST, MI	STATUS	DATE	SSN
[redacted] ICU #1		5-17-03	0830

Chemistry (i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO_2		35-45 mmHg (art) 41-51 mmHg (ven)
PO_2		80-105 mmHg (art) N/A (ven)
TCO_2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO_3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO_2		95-98%
BEecf		(-2) – (+3) mmol/L
AGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Blood Bank

ABO/Rh		IAT	

Unit	Type	Crossmatch

Misc. Chemistry

CKMB		
Troponin		
DOA		
Alcohol		

Microscopic Urinalysis

Chemistry (Piccolo Analyzer)

TEST	RESULT	REF. RANGE
ALT		10-47 U/L
AST		11-38 U/L
GGT		5-56 U/L
ALB		3.3-5.5 g/dl
ALP		26-84 U/L
Amylase		14-97 U/L
Ca		8-10.3 mg/dl
Chol		<200 mg/dl
Creat		0.6-1.2 mg/dl
BUN		7-22 mg/dl
GLU		73-118 mg/dl
Tbili		0.21.6 mg/dl
TP		6.4-8.1 g/dl
UA		2.2-6.6 mg/dl (F) 3.6-8.0 mg/dl (M)
Na^+		128-145 mmol/L
K^+		3.3-4.7 mmol/L
Cl^-		98-108 mmol/L
$^+CO_2$		18-33 mmol/L
CK		39-380 u/L

Urinalysis

TEST	RESULT	REF. RANGE
Gluc		Negative
Bili		Negative
Ketone		Negative
SG		N/A
Blood		Negative
pH		N/A
Protein		Negative
Urob		0.2-1.0
Nitrite		Negative
HCG		Negative

Hematology

TEST	RESULT	REF. RANGE
WBC	6.9	4.8-10.8 x 10^3
RBC	4.30	4.7-6.1 x 10^9
Hgb	11.5	14-18 g/dl (M) 12-16 g/dl (F)
Hct	37.1	42-52% (M) 37-47% (F)
MCV	86.3	80-94 fl (M) 81-99 fl (F)
Plt	223	130-500 x 10^3 verified
Lymph%	5.9	20.5-51.1%
Retic		0.5-1.5% (adult)
PT		9.8-13.6 secs
APTT		21-34 secs
D dimer		<20 ug/ml
FDP		<10 ug/ml
Segs		Mono
Bands		Eos
Lymph		Baso
Atyp		Imm
RBC Morph		
Other		
Spun Crit		42-52% (M) 37-47% (F)
Man WBC		4.8-10.8 x 10^3
Manual Plt		130-500 x 10^3 verified

Microbiology

Source			
Gram Stain			
Culture			
KOH/WP			
O&P			
Occ Bld		Malaria	
Other			

☺ -SHADOW- PJR

MEDCOM - 9532

Ward/Section: OR	REQUESTING PHYSICIAN: [redacted] 66-2	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)

LAST, FIRST, MI. 66-4 [redacted]	DATE 5/29	TIME 12/15	SSN/PSEUDO SSN: [redacted] 66-4

(i-STAT)

TEST	RESULT	REF. RANGE
Na	145	138-146 mmol/L
K	3.5	3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH	7.195	7.31-7.45
PCO2	46.9	35-45 mmHg (art) 41-51 mmHg (ven)
PO2	256	80-105 mmHg (art) N/A (ven)
TCO2	26	23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3	19	22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2	100	95-98%
BEecf	-10	(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct	32	38-51% PCV
Hgb	11	12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK		39-380 u/l (M) 30-190 u/l (F)
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l [redacted]

REMARKS: 66-2

REPORTED BY: [redacted]	DATE: 29 mnz	LAB ID NO.:

EMT

b6-2

REQUESTING PHYSICIAN: [redacted]

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

[redacted] b6-4

DATE: 29MAY03 TIME:

SSN/PSEUDO SSN: [redacted] b6-4

	REF. RANGE	TEST	RESULT	REF. RANGE
141	135-146 mmol/L	ALB	3.4	3.5-5.5 g/dl
3.2	[illegible] mmol/L	ALP	58	26-84 u/l
106	[illegible] mmol/L	ALT	165	10-47 u/l
7.280	[illegible]	AMY	34	14-77 u/l
44.3	35-45 mmHg (art) 41-51 mmHg (ven)	AST	149	[illegible]
	80-105 mmHg (art) [illegible] (ven)	TBIL	0.6	0.2-1.6 mg/dl
	24-27 mmol/L (art) [illegible] mmol/L (ven)	BUN	9	7-22 mg/dl
21	[illegible] mmol/L (art) [illegible] mmol/L (ven)	CA++	7.8	8.9-10.3mg/dl
	[illegible]	CHOL	92	100-200 mg/dl
-6	[illegible] mmol/L	CRE	0.7	0.6-1.2 mg/dl
17	10-30 mmol/L	GLU	236	73-118 mg/dl
	[illegible] 12-1.52 mmol/L	TP	6.4	6.4-8.1 g/dl
11	[illegible]-26 mg/dl			
240	[illegible]-105 mg/dl			
	[illegible] mg/dl			
44	[illegible]			
15	12-17 g/dl			

TEST	RESULT	REF. RANGE

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK		35-380 u/l (M) 30-190 u/l (F)
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		[illegible] mmol/l
tCO_2		[illegible] mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA++		[illegible] mg/dl
CRE		0.6-1.2 mg/dl
NA+		[illegible] mmol/l
K+		[illegible] mmol/l
CL-		98-106 mmol/l
tCO_2		[illegible] mmol/l

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-77 u/l
AST		[illegible]
TBIL		[illegible] mg/dl
GGT		[illegible]
TP		6.4-8.1 g/dl

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		[illegible] mmol/l
CL-		98-106 mmol/l
tCO_2		[illegible] mmol/l

b6-2

[redacted]

DATE: 29MAY03

LAB ID NO.: [illegible]

b6-2

Ward/Section: EMT

QUESTING PHYSICIAN: [redacted]

LABORATORY RESULT FORM

Subject to the Privacy Act of 1974

b6-4

NAME, FIRST, MI: [redacted]

DATE: TIME: SYPSEUDO SSN:

TEST	RESULT	REFERENCE RANGE								
WBC	6.3	4.8-10.8 x 10				N/A		RBR		Negative
RBC	5.02	4.7-6.1 x 10		Ang		N/A		Mono		Negative
Hgb	13.9	14-18 g/dl (M) 12-16 g/dl (F)		Glu	2000	Negative				
	43.1	42-52% (M) 37-47% (F)		Bili	neg	Negative		Source		
	85.9	80-94 fl (M) 81-99 fl (F)		Ket	neg	Negative		Gram Stain		
Plt	376	130-500 x 10 verified		SG	1.030	N/A		Occ Bld		Negative
Lymph %	15.6	20.5-51.1%		Bld	trace	Negative		H pylori		Negative
[redacted]				[redacted]		N/A		Micro Parasites		
Segs		Mono		Prot	30	Negative		Malaria		
Bands		Eos		Urob	0.2-1.0			O & P		
Lymph		Baso		Nit		Negative		Other		
Atyp		Imm		Leuk		Negative		[redacted]		
RBC Morph				HCG		Negative				
Spun Hematocrit		42-52% (M) 37-47% (F)		[redacted]						
Sed Rate				Cell Count				MAY USE 519 BYPASS 518 WITH LAYERS UNIT REQUESTED		
Other				Discright		Negative		ABO/Rh		

[redacted]

TEST	RESULT	REFERENCE RANGE					CROSSMATCH
PT	11.7	9.8-13.6 secs					
PTT	24.9	21-34 secs					
D-Dimer		<20 ug/ml					
FDP		<10 ug/ml					

REMARKS:

REPORTED: [redacted] DATE: LAB ID NO:

b6-2

Ward/Section: CSC	REQUESTING PHYSICIAN: [redacted] b6-2	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)	
LAST, FIRST, MI: [redacted] b6-4	DATE: 5/29/03	TIME: 1246	SSN/PSEUDO SSN: [redacted] b6-4

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH	7.176	7.31-7.45
PCO2	48.1	35-45 mmHg (art) 41-51 mmHg (ven)
PO2	229	80-105 mmHg (art) N/A (ven)
TCO2	19	23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3	18	22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2	100	95-98%
BEecf	-11	(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metabolic 8

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK		39-380 u/l (M) 30-190 u/l (F)
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: b6-2 [redacted]	DATE: 29 May	LAB ID NO.:

QUESTING PHYSICIAN

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

[redacted] 66-4

DATE	TIME	SSN/PSEUDO SSN
30 May	~~1145~~ 1200	

(i-STAT)

TEST	RESULT	REF. RANGE
		138-146 mmol/L
		3.5-4.9 mmol/L

RR14
FIO2 50%

i STAT 001

Pt: 206

Pt Name:_____

TCO2_____25 mmol/L

At 370

pH_____7.460

PCO2_____38.0 mmHg

PO2_____97 mmHg

HCO3_____24 mmol/L

BEecf_____0 mmol/L

sO2I_____97 %

*calculated

At Patient Temp

pH_____7.444

PCO2_____35.6 mmHg

PO2_____97 mmHg

Patient Temp: 101.4F

FIO2_____: 50

Sample Type_: ART

30MAY00 11:25

Oper: 7112

Physician:_____

Ser# 40760

Ver: JAN00400R
CLEN A01

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Markers

TEST	RESULT	REF. RANGE
GLU	139	73-118 mg/dl
BUN	15	7-22 mg/dl
CRE	1.0	0.6-1.2 mg/dl
CK	2963	39-380 u/l (M) 30-190 u/l (F)
NA^+	133	128-145 mmol/l
K^+	4.1	3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2	23	18-33 mmol/l

Specimen had a clot [redacted]

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		[illegible]
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB	2.0	3.3-5.5 g/dl
ALP	43	26-84 u/l
ALT	173	10-47 u/l
AMY	221	14-97 u/l
AST	165	11-38 u/l
TBIL	4.7	0.2-1.6 mg/dl
GGT	64	5-65 u/l
TP	3.9	6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

[redacted] 66-2

DATE:	LAB ID NO.:
30 MAY 99	

"YM STY 662 ...

ICU 1

QUESTING P[redacted] De[redacted]

CHEMISTRY RESULT FO

(Subject to the Privacy Act of 1

NAME: LAST, FIRST, MI: #[redacted] 66-4

DATE	TIME	SSN/PSEUDO SSN:
30 MAY	0730	

(i-STAT)

TEST	RESULT	REF. RANGE
		138-146 mmol/L
		3.5-4.9 mmol/L
		98-109 mmol/L
		7.31-7.45
		35-45 mmHg (art) 41-51 mmHg (ven)
		86-105 mmHg (art) PO2A (ven)
		23-27 mmol/L (art) 24-29 mmol/L (ven)
		22-26 mmol/L (art) 23-28 mmol/L (ven)
		95-98%
		(-2) – (+3) mmol/L
		10-20 mmol/L
		1.12-1.32 mmol/L
		5-26 mg/dl
		73-105 mg/dl
		0.7-1.5 mg/dl
		38-51% PCV
		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE

(Piccolo) Chemistry

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-[illegible]
BUN		7-22 mg/dl
CA++		8.0-10.3mg/dl
CRE		0.6-1.2 mg/dl
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel (Pic

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU	178	73-118 mg/dl
BUN	14	7-22 mg/dl
CRE	0.8	0.6-1.2 mg/dl
CK	2643	39-380 u/l (M) 30-190 u/l (F)
NA+	129	128-145 mmol/l
K+	4.8	3.3-4.7 mmol/l
CL-	107	98-108 mmol/l
tCO_2	21	18-33 mmol/l

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: 66-2[redacted]

DATE: 30 May 03

LAB ID NO.:

Ward/Section:	REQ... ...TING PHYSICIAN:	...ORATORY RESULT FORM (Subject to the Privacy Act of 1974)

LAST, FIRST, MI	DATE	TIME	SSN/PSEUDO SSN:
H[redacted] 66-Y	30 May	0730	

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	11.5	4.8-10.8 x 10^3
RBC	3.97	4.7-6.1 x 10^9
Hgb	10.7	14-18 g/dl (M) 12-16 g/dl (F)
Hct	34.0	42-52% (M) 37-47% (F)
MCV	87.5	80-94 fl (M) 81-99 fl (F)
Plt	233	130-500 x 10^3 verified
Lymph %	10.9	20.5-51.1%

(Hematology) Manual Differential

Segs		Mono	
Bands		Eos	
Lymph		Baso	
Atyp		Imm	
RBC Morph			

Spun Hematocrit		42-52% (M) 37-47% (F)
Sed Rate		
Other		

Coagulation Studies

TEST	RESULT	REF. RANGE
PT		9.8-13.6 secs
APTT		21-34 secs
D dimer		<20 ug/ml
FDP		<10 ug/ml

(Urinalysis)

TEST	RESULT	REF. RANGE
Color	Amber	N/A
App	Cloudy	N/A
Glu	Neg	Negative
Bili	Large	~~Negative~~ POS
Ket	MOD	Negative
SG	1.030	N/A
Bld	Large	Negative
pH	5.0	N/A
Prot	trace	Negative
Urob	Neg	0.2-1.0
Nit	Pos	Negative
Leuk	—	Negative
HCG		Negative

CSF

Cell Count		
Directigen		Negative

Blood Bank Unit Crossmatch
(MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

Misc Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source	
Gram Stain	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
O & P	
Other	

Microscopic Urinalysis

3-5 RBC
3+ BAC
3+ amorphous

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

REMARKS:

REPORTED BY: 66-2 [redacted] **DATE:** 30 May 08 **LAB ID NO.:**

CHEMISTRY UPN

Ward/Section: ICU #1 | REQUESTING PHYSICIAN: [redacted] 66-2

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

LAST, FIRST, MI	DATE	TIME	SSN/PSEUDO SSN
EPW [redacted] 66-4	5/30	2345	[redacted] 66-4

(i-STAT)

TEST	RESULT	REF. RANGE
		138-146 mmol/L
		3.5-4.9 mmol/L
		98-109 mmol/L
		7.31-7.45
		35-45 mmHg (art) 37-51 mmHg (ven)
		80-105 mmHg (art) N/A (ven)
		23-27 mmol/L (art) 24-29 mmol/L (ven)
		22-26 mmol/L (art) 23-28 mmol/L (ven)
		95-98%
		22/+(+3) mmol/L
		10-20 mmol/L
		1.12-1.32 mmol/L
		8-26 mg/dl
		70-105 mg/dl
		0.7-1.5 mg/dl
		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Memorial

TEST	RESULT	REF. RANGE
GLU	137	73-118 mg/dl
BUN	16	7-22 mg/dl
CRE	1.1	0.6-1.2 mg/dl
CK	2634	39-380 u/l (M) 30-190 u/l (F)
NA^+	140	128-145 mmol/l
K^+	4.2	3.3-4.7 mmol/l
CL^-	109	98-108 mmol/l
tCO_2	22	18-33 mmol/l

REMARKS:

REPORTED BY: 66-2 [redacted] | DATE: 31 MAY 03 | LAB ID NO.:

CHEMISTRY UNIT

Location: ICU #1

REQUESTING PHYSICIAN: Dr [redacted] 66-2

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

LAST FIRST MI: [redacted] 66-4

DATE: 31 May

TIME: 0625

SSN/PSEUDO SSN:

(i-STAT)

TEST	RESULT	REF. RANGE
		138-146 mmol/L
		3.8-4.9 mmol/L
		96-106 mmol/L
		[illegible]
		38-45 mmHg (art) [illegible]-51 mmHg (ven)
		86-105 mmHg (art) N/A (ven)
		23-27 mmol/L (art) 24-29 mmol/L (ven)
		22-26 mmol/L (art) 23-28 mmol/L (ven)
		95-98%
		(-2) - (+3) mmol/L
		16-20 mmol/L
		1.12-1.32 mmol/L
		8-20 mg/dl
		70-105 mg/dl
		0.7-1.3 mg/dl
		35-51% PCV
		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		[illegible] mg/dl
NA^{+}		138-145 mmol/l
K^{+}		3.5-4.7 mmol/l
CL^{-}		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.2 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Metabolic

TEST	RESULT	REF. RANGE
GLU	133	73-118 mg/dl
BUN	14	7-22 mg/dl
CRE	1.3	0.6-1.2 mg/dl
CK	[redacted] 3193	39-380 u/l (M) 30-190 u/l (F)
NA^{+} 66-2	124	128-145 mmol/l
K^{+}	3.8	3.3-4.7 mmol/l
CL^{-}	107	98-108 mmol/l
tCO_2	24	18-33 mmol/l

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^{+}		128-145 mmol/l
K^{+}		3.3-4.7 mmol/l
CL^{-}		98-108 mmol/l
tCO_2		18-33 mmol/l

REPORTED BY: [redacted] 66-2

DATE: 30 MAY 03

LAB ID NO.:

CHEMISTRY UNIT

ICU 1

REQUESTING PHYSICIAN: [redacted] 66-2

LAST, FIRST, MI: # [redacted] 66-4

DATE: 5/31

TIME: 0900

SSN/PSEUDO SSN: [redacted] 66-4

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

(GSTAT)

TEST	RESULT	REF. RANGE
		138-146 mmol/L
		2.3-4.9 mmol/L
		96-106 mmol/L
		21-25
		35-45 mmHg (art) 35-52 mmHg (ven)
		80-105 mmHg (art) N/A (ven)
		23-27 mmol/L (art) 24-29 mmol/L (ven)
		22-26 mmol/L (art) 23-28 mmol/L (ven)
		95-98%
		(-2) – (+3) mmol/L
		10-20 mmol/L
		1.18-1.32 mmol/L
		8-26 mg/dl
		76-105 mg/dl
		0.7-1.5 mg/dl
		33-51% PCV
		12-17 g/dl

Misc Chemistry

TEST	RESULT	REF. RANGE

(Piccolo) Chemistry

TEST	RESULT	REF. RANGE
ALB	1.7	3.5-5.5 g/dl
ALP	47	26-84 u/l
ALT	138	10-47 u/l
AMY	171	14-97 u/l
AST	148	11-38 u/l
TBIL	4.1	0.2-1.6 mg/dl
BUN	15	7-22 mg/dl
CA^{++}	7.6	8.0-10.3mg/dl
CHOL	81	100-200 mg/dl
CRE	1.2	0.6-1.2 mg/dl
GLU	140	73-118 mg/dl
TP	4.0	6.4-8.1 g/dl

(Piccolo) Chemistry

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK		39-380 u/l (M) 30-190 u/l (F)
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		[illegible]
BUN		[illegible]
CA^{++}		[illegible]
CRE		[illegible]
NA^+		[illegible]
K^+		[illegible]
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-64 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: 66-2 [redacted]

DATE: 31 MAY 13

LAB ID NO.:

Ward/Section: ICU 1	REQ[redacted]ING PHYSICIAN: 66-2	...ATORY RESULT FORM (Subject to the Privacy Act of 1974)
LAST, FIRST, MI. [redacted] 66-4	DATE 5/31 / TIME 0400	SSN/PSEUDO SSN: [redacted] 66-4

(Hematology) CBC			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
WBC	13.5	4.8-10.8 x 10³	Color		N/A	RPR		Negative
RBC	3.44	4.7-6.1 x10⁶ (M)	App		N/A	**Microbiology**		
Hgb	9.4	14-18 g/dL(M) 12-16 g/dL(F)	Glu		Negative	Source		
Hct	30.3	42-52% (M) 37-47% (F)	Bili		Negative	Gram Stain		
MCV	88.0	80-94 fl (M) 81-99 fl (F)	Ket		Negative	O & P		
Plt	212	130-500 x10³ verified	SG		N/A	Occ Bld		Negative
Lymph %	8.9	20.5-51.1%	Bld		Negative	H. pylori		Negative
(Hematology) Manual Differential			pH		N/A	Micro Parasites		
Segs		Mono	Prot		Negative	Malaria		
Bands		Eos	Urob		0.2-1.0	Other		
Lymph		Baso	Nit		Negative	**Microscopic Urinalysis**		
Atyp		Imm	Leuk		Negative			
RBC Morph			HCG		Negative			
Spun Hematocrit		42-52% (M) 37-47% (F)	**CSF**			**Blood Bank**		
Sed Rate			Cell Count			**MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED**		
Other			Directigen		Negative	ABO/Rh		

Coagulation Studies			Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)		
TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATCH
PT		9.8-13.6 secs			
APTT		21-34 secs			
D dimer		<20 ug/ml			
FDP		<10 ug/ml			

REMARKS:

REPORTED BY: 66-2 [redacted]	**DATE:** 31 May 03	**LAB ID NO.:**

Chemistry Only

Ward/Section: ICU#1	REQUESTING PHYSICIAN: [redacted] 66-2	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)
LAST, FIRST, MI: 66-4 [redacted]	DATE: 6/4/03 TIME: 0500	SSN/PSEUDO SSN: [redacted] 66-4

[redacted]

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

[redacted]

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

[redacted]

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN *		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE *		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
GLU	92	73-118 mg/dl
BUN	12	7-22 mg/dl
CRE	0.8	0.6-1.2 mg/dl
CK	2013	39-380 u/l (M) 30-190 u/l (F)
NA^+	132	128-145 mmol/l
K^+	3.7	3.3-4.7 mmol/l
CL^-	109	98-108 mmol/l
tCO_2	24	18-33 mmol/l

[redacted]

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

[redacted]

TEST	RESULT	REF. RANGE
ALB	1.7	3.3-5.5 g/dl
ALP	50	26-84 u/l
ALT	104	10-47 u/l
AMY	117	14-97 u/l
AST	104	11-38 u/l
TBIL	3.4	0.2-1.6 mg/dl
GGT	35	5-65 u/l
TP	4.4	6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: [redacted] 66-2 **DATE:** **LAB ID NO.:**

MEDCOM - 9544

Ward/Section	ESTING PHYSICIAN	LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)
ICU 1	[redacted] 66-2	

LAST, FIRST, MI	DATE	TIME	SSN/PSEUDO SSN
[redacted] 66-4	6/1/03	0500	[redacted] 66-4

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	11.9	4.8-10.8 x 10³
RBC	3.13	4.7-6.1 x10⁹ (M)
Hgb	8.6	14-18 g/dL (M) 12-16 g/dL (F)
Hct	27.2	42-52 % (M) 37-47% (F)
MCV	86.8	80-94 fl (M) 81-99 fl (F)
Plt	233	130-500 x10³ verified
Lymph %	12.0	20.5-51.1%

(Hematology) Manual Differential

Segs		Mono	
Bands		Eos	
Lymph		Baso	
Atyp		Imm	
RBC Morph			
Spun Hematocrit		42-52% (M) 37-47% (F)	
Sed Rate			
Other			

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Glu		Negative
Bili		Negative
Ket		Negative
SG		N/A
Bld		Negative
pH		N/A
Prot		Negative
Urob		0.2-1.0
Nit		Negative
Leuk		Negative
HCG		Negative

CSF

Cell Count		
Directigen		Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative

Microbiology

Source	
Gram Stain	
O & P	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
Other	

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Coagulation Studies

TEST	RESULT	REF. RANGE
PT		9.8-13.6 secs
APTT		21-34 secs
D dimer		<20 ug/ml
FDP		<10 ug/ml

Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

REMARKS:

REPORTED BY:	DATE:	LAB ID NO.:
[redacted]	01 Jun 03	

66-2

LAST COPY DO NOT TAKE MAKE COPY

Ward/Section: Icu#1	REQUESTING PHYSICIAN: [redacted] 66-2	LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)
LAST, FIRST, MI: 9/W # [redacted] 66-4	DATE: 2 June / TIME: 0730	SSN/PSEUDO SSN:

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	2.5	4.8-10.8 x 10^3
RBC	2.78	4.7-6.1 x 10^6
Hgb	7.6	14-18 g/dl (M) 12-16 g/dl (F)
Hct	24.1	42-52% (M) 37-47% (F)
MCV	86.7	80-94 fl (M) 81-99 fl (F)
Plt	224	130-500 x 10^3 verified
Lymph %	19.7	20.5-51.1%

(Hematology) Manual Differential

Segs		Mono	
Bands		Eos	
Lymph		Baso	
Atyp		Imm	
RBC Morph			
Spun Hematocrit		42-52% (M) 37-47% (F)	
Sed Rate			
Other			

Coagulation Studies

TEST	RESULT	REF. RANGE
PT		9.8-13.6 secs
APTT		21-34 secs
D dimer		<20 ug/ml
FDP		<10 ug/ml

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Glu		Negative
Bili		Negative
Ket		Negative
SG		N/A
Bld		Negative
pH		N/A
Prot		Negative
Urob		0.2-1.0
Nit		Negative
Leuk		Negative
HCG		Negative

CSF

Cell Count		
Directigen		Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source	
Gram Stain	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
O & P	
Other	

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

(MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

REMARKS:

REPORTED BY: [redacted] 66-2	DATE: 2 June 03	LAB ID NO.:

Chem Strip Only

Ward/Section: ICU 1

REQUESTING PHYSICIAN:

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

PATIENT NAME: EPW [redacted] 66-4

DATE: | TIME: | SSN/PSEUDO SSN:

(I-STAT)

TEST	RESULT	REF. RANGE
Na+	139	138-146 mmol/l
K+	3.0	3.6-5.2 mmol/l
Cl-	103	96-109 mmol/l
iCA		1.01-1.35
pCO2		30-45 mmHg (art) 41-51 mmHg (ven)
pO2		30-105 mmHg (art) N/A (ven)
HCO3		23-27 mmol/l (art) 24-29 mmol/l (ven)
TCO2		23-28 mmol/l (art) 24-30 mmol/l (ven)
sO2		95-97%
BUN		6-20 mmol/l
Glucose		3.9-6.1 mmol/l
Hct	14	36-46 mg/dl
Hgb	81	70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct	24	38-51% PCV
Hgb	8	12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA		8.0-10.3mg/dl
CHOL		150-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK No		39-380 u/l (M) 30-190 u/l (F)
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
Cl-		98-106 mmol/l
HCO_3		18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA		7.6-10.3 mg/dl
CRE		[illegible]
NA+		[illegible]
K+		3.3-4.7 mmol/l
CL-		98-106 mmol/l
HCO_3		[illegible]

[redacted]

TEST	RESULT	REF. RANGE
ALB	1.8	3.5-5.5 g/dl
ALP	49	26-84 u/l
ALT	86	10-47 u/l
AMY	151	14-97 u/l
AST	123	11-38 u/l
TBIL	4.6	0.2-1.6 mg/dl
GGT	31	5-65 u/l
TP	4.7	6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-106 mmol/l
HCO_3		[illegible]

REMARKS:

REPORTED BY: 66-2 [redacted]

DATE: 2 June 03

LAB ID NO.:

QUESTING PHYSICIAN: [redacted] b6-2

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

DATE	TIME	SSN/PSEUDO SSN
3 June	4AM	

REF. RANGE
138-146 mmol/L
3.5-4.9 mmol/L
98-109 mmol/L
7.31-7.45
35-45 mmHg (art) 41-51 mmHg (ven)
80-105 mmHg (art) N/A (ven)
23-27 mmol/L (art) 24-29 mmol/L (ven)
22-26 mmol/L (art) 23-28 mmol/L (ven)
95-98%
(-2) – (+3) mmol/L
10-20 mmol/L
1.12-1.32 mmol/L
8-26 mg/dl
70-105 mg/dl
0.7-1.5 mg/dl
38-51% PCV
12-17 g/dl

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB	-	3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BU[illegible]		[illegible]
CA[illegible]		
[illegible]	[redacted]	b6-4

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK		39-380 u/l (M) 30-190 u/l (F)
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO_2		18-33 mmol/l

Misc. Chemistry

TEST	RESULT	REF. RANGE
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
HCT		38-51% PCV
Hgb		12-17 g/dl
Dopamine		
Drug of Abuse		

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY:	DATE:	LAB ID NO.:
b6-2 [redacted]	3JUN03	

ICU #1 b6-4

[redacted] b6-2

3 June 03 0740

(Hematology) CBC | Urinalysis | Misc. Serology

3.6
3.24

8.8

28.2

86.9

258

21.4

(Hematology) Manual Differential

Microbiology

Microscopic Urinalysis

CSF | Blood Culture

MUST SUBMIT SF 518

Coagulation Studies | Blood Bank Unit Crossmatch
(MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

[redacted] b6-2

3, Jun 03

Pa Stat Only

ICU 1

REQUESTING PHYSICIAN

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

[redacted] 66-4

DATE	TIME	SSN/PSEUDO SSN

(i-STAT)

TEST	RESULT	REF. RANGE
		136-146 mmol/L
		[illegible]
		98-108 mmol/L
		[illegible]
		[illegible]
		[illegible]
		[illegible]
		23-27 mmol/L (art) [illegible] mmol/L (ven)
		23-26 mmol/L (art) [illegible] mmol/L (ven)
		95-98%
		(-2) – (+2) mmol/L
		10-20 mmol/L
		[illegible] mmol/L
		8-26 mg/dl
		70-105 mg/dl
		0.7-1.5 mg/dl
		36-51% PCV
		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
[illegible]		[illegible]
ALT		10-47 U/l
[illegible]		[illegible]
[illegible]		[illegible]
TBIL		0.3-1.0 mg/dl
BUN		7-22 mg/dl
[illegible]		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
[illegible]		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	122	73-118 mg/dl
BUN	13	7-22 mg/dl
CRE	1.1	0.6-1.2 mg/dl
CK	968	39-380 u/l (M) 30-190 u/l (F)
NA+	138	128-145 mmol/l
K+	3.2	3.3-4.7 mmol/l
CL-	103	98-108 mmol/l
CO_2	25	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		[illegible] mg/dl
CA++		8.4-10.[illegible] mg/dl
CRE		0.6-1.2 mg/dl
NA		[illegible]
K		[illegible] mmol/l
CL		[illegible] mmol/l
iCO_2		[illegible] mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		[illegible] U/l
ALT		[illegible]
AMY		14-97 U/l
AST		[illegible]
TBIL		0.2-1.0 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		[illegible] mmol/l
CL-		[illegible] mmol/l
iCO_2		[illegible] mmol/l

REMARKS:

66-2

REPORTED BY: [redacted]

DATE:

LAB ID NO.:

Chg Stg Dn

ICU / b6-2 [redacted]

REQUESTING PHYSICIAN

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

[redacted] b6-4

DATE	TIME	SSN/PSEUDO SSN
3 Jun	4 AM	

(i-STAT)

TEST	RESULT	REF. RANGE
Na		136-146 mmol/L
K		3.5-4.6 mmol/L
Cl		98-108 mmol/L
[illegible]		7.31-7.45
pCO2		35-45 mmHg (art) 41-51 mmHg (ven)
pO2		80-105 mmHg (art) [illegible] (ven)
HCO3		20-27 mmol/L (art) 23-28 mmol/L (ven)
[illegible]		22-26 mmol/L (art) 23-28 mmol/L (ven)
[illegible]		95-98%
[illegible]		1-2 [illegible] mmol/L
Glucose		10-20 mmol/L
[illegible]		1.13-1.32 mmol/L
[illegible]		8-26 mg/dl
[illegible]		70-105 mg/dl
[illegible]		0.7-1.5 mg/dl
[illegible]		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
[illegible]		
[illegible]		
[illegible]		

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		25-84 u/l
ALT		10-77 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA		8.6-10.3 mg/dl
CHOL		166-200 mg/dl
CRP		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	114	73-118 mg/dl
BUN	14	7-22 mg/dl
CRE	0.8	0.6-1.2 mg/dl
CK	2073	39-380 u/l (M) 30-190 u/l (F)
NA+	141	128-145 mmol/l
K+	3.3	3.5-4.7 mmol/l
CL-	103	98-108 mmol/l
tCO2	24	18-35 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA		8.6-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA+		136-146 mmol/l
K+		3.5-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-35 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		25-84 u/l
ALT		10-77 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.5-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-35 mmol/l

REMARKS:

b6-2

PHYSICIAN'S NAME: [redacted]

DATE: 3 Jun 03

LAB ID NO.:

Ward/Section: ICU 1 | REQUESTING PHYSICIAN: | [redacted]

LAST, FIRST, MI: CPW # [redacted] b6-4 | DATE: 4June03 | TIME: 0730 | SSN/PSEUDO SSN:

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

(Riccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3 mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Riccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN	14	7-22 mg/dl
CRE	1.0	0.6-1.2 mg/dl
CK	765	39-380 u/l (M) 30-190 u/l (F)
NA+	139	128-145 mmol/L
K+	2.9	3.3-4.7 mmol/L
CL-	101	98-108 mmol/L
HCO_3^-	22	18-33 mmol/L

0740 RR 14 FIO2 50%

i STAT 001

Pt: [redacted] b6-4

Pt Name:_____

TCO2_____21 mmol/L

At 070

pH_____7.399

PCO2_____32.9 mmHg

PO2_____80 mmHg

HCO3_____20 mmol/L

BEecf_____-5 mmol/L

sO2:_____97 %

Xcalculated

At Patient Temp

pH_____7.364

PCO2_____34.9 mmHg

PO2_____94 mmHg

Patient Temp: 100.4F

FIO2_____: 50

Sample Type_: ART

06MAY03 07:54

Oper: [redacted] b6-2

Physician:_____

Ser# 40760

Ver: JAM08450
CLCW A01

REMARKS:

REPORTED BY: | DATE: 4June 0730 | LAB ID NO.

UA:

1201

[redacted] 66-4

[redacted] 66-2

LABORATORY RESULT FORM
(Subject to the Privacy Act of 1974)

DATE	TIME	SSN/PSEUDO SSN:
04 Jun 09	2030	

Hematology (CBC)

		REF. RANGE
WBC	7.9	4.8-10.8 x 10^3
RBC	3.38	4.7-6.1 x 10^6
Hgb	9.4	14-18 g/dl (M) 12-16 g/dl (F)
Hct	29.2	42-52% (M) 37-47% (F)
MCV	86.3	80-94 fl (M) 81-99 fl (F)
Plt.	371	130-360 x 10^3 verified
Lymphocyte	16.5	20.5-51.1%

Manual Differential

Mono	

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
A		
G		
B		
K		
S		
B		
P	53	
P		
U	7.5	7.35-7.45
	41.2	35-45
N	108	80-100
	32	18-26
I		
	99	82-100

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source		
Gram Stain		
Occ Bld		Negative
H. pylori		Negative
Micro Parasites		
Malaria		
O & P		
Other		

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Unit Crossmatch (FOR EVERY UNIT OF BLOOD REQUESTED)

TYPE	CROSSMATCH

Coagulation Studies

		REF. RANGE
[illegible]		9.8-13.6 secs
[illegible]		[illegible] secs
[illegible]		[illegible] ug/ml
[illegible]		[illegible] ug/ml

66-2 [redacted] DATE: 4 Jun 09 LAB ID NO.:

ICU #1
ZPW # [redacted] 66-4

4JUN03 0420

(Hematology) CBC

8.1
3.50
9.6
30.6
87.5
369
20.1

(Hematology) Manual Differential

Coagulation Studies

11.4
23.9

Urinalysis

1527 Snow Rate 12

i-STAT G3+ FIO2 60% VT 800 RR 5

#: [redacted] 66-4

Pt Name:_____

TCO2_____17 mmol/L

At 37C

pH_____7.216

PCO2_____38.0 mmHg

PO2_____[illegible] mmHg

HCO3 _____15 mmol/L

BE(b) _____-12 mmol/L

SO2*_____ %

*Calc

FIO2_____

Sample Type_

29MAY03 1527

[redacted] 66-2

Physician:_____

Ser# 40763

Ver: JAM5045A
CLSW A91

Misc. Serology

TEST	RESULT

Microbiology

Source

Microscopic Urinalysis

Blood Bank

TEST SUBMITTED

Crossmatch
EVERY UNIT OF BLOOD
TED)

[redacted] 66-2

4JUN03

MEDCOM - 9555

ICU I

[redacted] 66-2

[redacted] 66-4

LABORATORY RESULT FORM
(Subject to the Privacy Act of 1974)

DATE	TIME	SSN/PSEUDO SSN:
5 Jun 03	3 AM	

(Hematology) CBC		Urinalysis			Misc. Serology	
RESULT	REF. RANGE	TEST	RESULT	REF. RANGE		
9.2	4.8-10.8 x 10³			RR 16		FIO2 1000
3.10	4.7-6.1 x 10⁶			FIO2 50%		Non Rebreather
8.6	14-16 g/dl (M) 12-16 g/dl (F)					
26.8	42-52% (M) 37-47% (F)					
86.3	80-94 fl (M) 81-99 fl (F)					
337	130-500 x 10³ verified					
12.0	20.5-31.1%					

Manual Differential		
Mono	7.435	381
Eos	34.4	40.6
Baso	120	79
Imm	23	24
	4	1
	99	98

	42-52% (M) 37-47% (F)	

Coagulation Studies						
RESULT	REF. RANGE					
	9.8-15.6 secs					
	21-34 secs					
	<20 ug/ml					
	<10 ug/ml					

[redacted] REQUESTED)	
TYPE	CROSSMATCH

66-2 [redacted]	DATE: 5 Jun 03	LAB ID NO.:

Pt: [redacted] 2000 hrs

Pt Name: # [redacted] b6-4

Na_____140 mmol/L

K_____4.5 mmol/L

TCO2_____17 mmol/L

iCa_____1.15 mmol/L

Hct_____35 %PCV

Hbx_____12 g/dL

Xvia Hct

At 37C

PH_____7.208

PCO2_____34.9 mmHg

PO2_____159 mmHg

HCO3_____16 mmol/L

BEecf_____-10 mmol/L

SO2%_____99 %

Xcalculated

At Patient Temp

PH_____7.293

PCO2_____33.5 mmHg

PO2_____159 mmHg

Patient Temp: 36.0C

FIO2_____: 50

Sample Type_: ART

20MAY03 20:34

Oper: [redacted] b6-2

Physician:_____

Ser# 40763

Ver: JAM00450
OLEW A01

[redacted] 1615 29 MAY03

FIO2 50% Rate 19 V 800

Pt: [redacted] 66-2

Pt Name:_____

TCO2_____16 mmol/L

At 37C

PH_____7.212

PCO2_____36.1 mmHg

PO2_____162 mmHg

HCO3_____15 mmol/L

BEecf_____-13 mmol/L

SO2%_____99

Xcalc

PH_____7.232

PCO2_____33.9 mmHg

PO2_____161 mmHg

Patient Temp: 36.0C

FIO2_____: 50

Sample Type_: ART

20MAY03 16:20
1620

Oper: [redacted]

Physician: [redacted] b6-2

Ser# 4076[illegible]

Ver: JAM00450
OLEW A01

66-2

66-1

66-4

Ward/Section	REQUESTING PHYSICIAN	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)	
LAST NAME	DATE	TIME	SSN/PSEUDO SSN
[redacted]	[redacted]	[redacted]	[redacted]

TEST	RESULT	REF RANGE	TEST	RESULT	REF RANGE
Na	140 mmol/l	135-145 mmol/l	ALB		3.5-5.5 g/dl
K	4 mmol/l	3.5-5.1 mmol/l	ALP		26-84 u/l
Cl	105 mmol/l	98-108 mmol/l	ALT		10-47 u/l
pH		7.35-7.45	AMY		21-97 u/l
PCO2	35-45 mmHg (art) 41-51 mmHg (ven)	35-45 mmHg	AST		11-38 u/l
PO2	80-105 mmHg (art) 35-45 mmHg (ven)	80-105 mmHg	TBIL		0.2-1.6 mg/dl
TCO2	27 mmol/l (art) 29-29 mmol/l (ven)	24-29 mmol/l	BUN		7-22 mg/dl
HCO3	24 mmol/l (art) 23-28 mmol/l (ven)	22-28 mmol/l	CA		8.0-10.3 mg/dl
sO2	95-98%	95-98%	CHOL		100-200 mg/dl
BEecf	0.1 (-3.1) mmol/l	-2 to +2 mmol/l	CRE		0.6-1.2 mg/dl
AnGap	10-14 mmol/l	8-16 mmol/l	GLU		73-118 mg/dl
Ca	9.2 mg/dl	8.5-10.5 mg/dl	TP		6.4-8.1 g/dl
BUN	14 mg/dl	7-22 mg/dl			
GLU	98 mg/dl	73-118 mg/dl			
Creat	1.0 mg/dl	0.6-1.2 mg/dl			
Hct	45% PCV	35-45%			
Hgb	15.3 g/dl	12-16 g/dl			
[redacted]					
Troponin I					
Drug of Abuse					

TEST	RESULT	REF RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		21-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl
[redacted]		

TEST	RESULT	REF RANGE
NA		128-145 mmol/l
K		3.3-4.7 mmol/l
CL		98-108 mmol/l
CO2		18-33 mmol/l

REMARKS

REPORTED BY	DATE	LAB ID NO.
[redacted]	5	

66

Ward/Section: ICU #1

REQUESTING PHYSICIAN: [redacted] 66-2

LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)

LAST, FIRST, MI: [redacted] 66-4

DATE: 6 June

TIME: 0400

SSN/PSEUDO SSN: [redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
WBC	14.5	4.8-10.8 x 10³	Color		N/A	RPR		Negative
RBC	2.92	4.7-6.1 x 10⁶	App					
Hgb	8.0	14-18 g/dl (M) 12-16 g/dl (F)	Glu					
Hct	25.5	42-52% (M) 37-47% (F)	Bili					
MCV	87.4	80-94 fl (M) 81-99 fl (F)	Ket					
Plt	315	130-500 x 10³ verified	SG					
Lymph %	8.8							

Segs		M	
Bands		Eo	
Lymph		Ba	
Atyp		Im	
RBC Morph			
Spun Hematocrit			
Sed Rate			
Other			

TEST	RESULT
PT	
APTT	
D dimer	
FDP	

REMARKS:

REPORTED BY:

[redacted] 66-4

[redacted] 66-2

LAB ID NO.:

NSN 7540-00-181-8358 — UNICOR FEDERAL PRISON INDUSTRIES INC. LEAVENWORTH, KS. — PREVIOUS EDITION USABLE

TEST(S)

SPECIMEN TAKEN: DATE 6 Jun — TIME 0400 (A.M.)

RESULTS	REQUESTED	(X)
169	GLUCOSE	
29	UREA N.	
1.9	CREATININE	
	URIC ACID	
133	SODIUM	
3.5	POTASSIUM	
102	CHLORIDE	
27	CO_2	
	PHOSPHATE	
	CALCIUM	
	TOTAL PROTEIN	
	ALBUMIN	
	GLOBULIN	
	ALKALINE PHOSPHATASE	
	ACID PHOSPHATASE	
	SGOT	
	LDH	
3626	CPK	
	BILIRUBIN (TOTAL)	
	BILIRUBIN (DIRECT)	
	CHOLESTEROL	
	TRIGLYCERIDES	
	AMYLASE	
	LIPASE	
	PROFILE (Specify)	

Enter in above space

REMARKS: [redacted] CB Methyte 8, CK

REQUESTING PHYSICIAN'S SIGNATURE: 66-2

PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REPORTED BY: [redacted]

MD

TECH

DATE: 6 June 05

LAB. ID. NO.

#[redacted] ICU #1 66-4

CHEM I

URGENCY: ☒ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT

PATIENT STATUS: ☐ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM

SPECIMEN SOURCE: ☐ BLOOD ☐ OTHER (Specify)

SPECIMEN/LAB. RPT. NO.

CHEMISTRY I — STANDARD FORM 546 (Rev. 6-77) — 546-107

PRESCRIBED BY GSA ICMR FIRMR (41 CFR) 201-45.505

PATIENT'S MED. RECORD

b6-2

UNICOR FEDERAL PRISON INDUSTRIES INC.

NSN 7540-00-181-8358 LEAVENWORTH KS. PREVIOUS EDITION USABLE

Ward/Section: ICU #1 | REQUESTING PHYSICIAN: [redacted]

b6-4

LAST, FIRST, MI: [redacted] | DATE

TEST	RESULT	REF. RANGE	TEST	RESULT
WBC	15.8	4.8-10.8 x 10³	Color	
RBC	2.70	4.7-6.1 x 10⁶	App	
Hgb	7.4	14-18 g/dl (M) 12-16 g/dl (F)	Glu	
Hct	23.7	42-52% (M) 37-47% (F)	Bili	
MCV	87.9	80-94 fl (M) 81-99 fl (F)	Ket	
Plt	316	130-500 x 10³ verified	SG	
Lymph %	16.6	20.5-51.1%	Bld	
			pH	
Segs		Mono	Prot	
Bands		Eos	Urob	
Lymph		Baso	Nit	
Atyp		Imm	Leuk	
RBC Morph			HCG	
Spun Hematocrit		42-52% (M) 37-47% (F)		
Sed Rate			Cell Count	
Other			Directigen	Negative

EVERY UNIT REQUESTED

ABO/Rh

TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATCH
PT		9.8-13.6 secs			
APTT		21-34 secs			
D dimer		<20 ug/ml			
FDP		<10 ug/ml			

REMARKS:

REPORTED BY: [redacted] | DATE: 6 June 03 | LAB ID NO.

b6-2 2030

MEDCOM - 9560

Enter in above space

PATIENT IDENTIFICATION

REQUESTING PHYSICIAN'S SIGNATURE: [redacted]

TREATING FACILITY—WARD NO.—DATE

REPORTED BY

MD DATE

TECH 6/6

REMARKS: Methyte 8, Trepanin [redacted]

b6-2 CK-MB Troponin I Myoglob.

TEST(S)		
SPECIMEN TAKEN		
DATE 6 June	TIME 2030	A.M. (P.M.)
RESULTS	REQUESTED	(X)
121	GLUCOSE	X
38	UREA N.	X
2.2	CREATININE	
	URIC ACID	
137	SODIUM	X
3.5	POTASSIUM	X
106	CHLORIDE	X
25	CO_2	X
	PHOSPHATE	
	CALCIUM	
	TOTAL PROTEIN	
	ALBUMIN	
	GLOBULIN	
	ALKALINE PHOSPHATASE	
	ACID PHOSPHATASE	
	SGOT	
	LDH	
>5000	CPK	X
	BILIRUBIN (TOTAL)	
	BILIRUBIN (DIRECT)	
	CHOLESTEROL	
	TRIGLYCERIDES	
	AMYLASE	
	LIPASE	
	PROFILE (Specify)	

CHEMISTRY I 546-107

STANDARD FORM 546 (Rev. 8-77)

PRESCRIBED BY GSA ICMR

FIRMR (41 CFR) 201-45.505

CHEM I

URGENCY: ☐ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT

PATIENT STATUS: ☐ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM

SPECIMEN SOURCE: ☐ BLOOD ☐ OTHER (Specify)

LAB. ID. NO.

SPECIMEN/LAB. REF. NO.

PATIENT'S MED. RECORD

b6-4

Ward/Section: ICU#1

REQUESTING PHYSICIAN:

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

LAST-FIRST-M: [redacted] 66-4

DATE: 7 June TIME: 0400

SSN/PSEUDO SSN: [redacted] 66-4

[redacted]

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

[redacted]

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3 mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
GLU	125	73-118 mg/dl
BUN	41	7-22 mg/dl
CRE	2.1	0.6-1.2 mg/dl
CK	20000	39-380 u/l (M) 30-190 u/l (F)
NA+	137	128-145 mmol/l
K+	3.3	3.3-4.7 mmol/l
CL	105	98-108 mmol/l
tCO2	24	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO2		18-33 mmol/l

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO2		18-33 mmol/l

REMARKS:

REPORTED BY: 66-2 [redacted]

DATE: 7 June 0400

LAB ID NO.:

Metlyte 8

MEDCOM - 9561

Ward/ ICU #1 | REQUESTING PHYSICIAN: [redacted] 66-2 | LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)

[redacted] 66-4 | DATE 7 Jun | TIME 0400 | SSN/PSEUDO SSN: # [redacted] 66-4

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	15.1 ~~12.8~~	4.8-10.8 x 10^3
RBC	3.43 ~~4.11~~	4.7-6.1 x 10^6
Hgb	9.2 ~~9.2~~	14-18 g/dl (M) 12-16 g/dl (F)
Hct	29.5 ~~30.2~~	42-52% (M) 37-47% (F)
MCV	86.0 ~~73.4~~	80-94 fl (M) 81-99 fl (F)
Plt	276 ~~451~~ ~~22.1~~	130-500 x 10^3 verified
Lymph	7.3 ~~9.8~~	20.5-51.1%

Manual Differential

Mono		
Eos		
Baso		
Imm		

		42-52% (M) 37-47% (F)

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Chem		Negative
Cell Count		
Directigen		Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source		
Gram Stain		
Occ Bld		Negative
H. pylori		Negative
Micro Parasites		
Malaria		
O & P		
Other		

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Coagulation Studies

TEST	REF. RANGE
PT	9.8-13.6 secs
PTT	21-34 secs
Bleeding Time	<20 ug/ml
FDP	<10 ug/ml
DIC	
PTPO	

Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

66-2 [redacted] | DATE: 7 June 0400 | LAB ID NO.:

CBC

Ward/Section: ICU #1

ESTING PHYSICIAN:

66-4

LAST, FIRST, MI: [redacted]

DATE: 7 Jun

TIME: 0400

(I-STAT)			(Piccolo) Chemistry-12			(P
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST
Na		138-146 mmol/L	ALB		3.5-5.5 g/dl	GLU
K		3.5-4.9 mmol/L	ALP		26-84 u/l	BUN
Cl		98-109 mmol/L	ALT		10-47 u/l	CA
pH	7.385	7.31-7.45	AMY		14-97 u/l	CRE
PCO2	43.7	35-45 mmHg (art) 41-51 mmHg (ven)	AST		11-38 u/l	NA
PO2	65	80-105 mmHg (art) N/A (ven)	TBIL		0.2-1.6 mg/dl	K
TCO2	27	23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN		7-22 mg/dl	CL
HCO3	26	22-26 mmol/L (art) 23-28 mmol/L (ven)	CA		8.0-10.3mg/dl	tCO_2
sO2	92%	95-98%	CHOL		100-200 mg/dl	(P
BEecf	1	(-2) – (+3) mmol/L	CRE		0.6-1.2 mg/dl	TEST
AnGap		10-20 mmol/L	GLU		73-118 mg/dl	ALB
Ca		1.12-1.32 mmol/L	TP		6.4-8.1 g/dl	ALP
BUN		8-26 mg/dl	(Piccolo) Metlyte 8			ALT
GLU		70-105 mg/dl	TEST	RESULT	REF. RANGE	AMY
Creat		0.7-1.5 mg/dl	GLU		73-118 mg/dl	AST
Hct		38-51% PCV	BUN		7-22 mg/dl	TBIL
Hgb		12-17 g/dl	CRE		0.6-1.2 mg/dl	GGT
Misc. Chemistry			CK		39-380 u/l (M) 30-190 u/l (F)	TP
TEST	RESULT	REF. RANGE	NA		128-145 mmol/l	(Piccolo) Hepato
Troponin I			K		3.3-4.7 mmol/l	TEST
Drug of Abuse			CL		98-108 mmol/l	NA
			tCO_2		18-33 mmol/l	K
						CL
						tCO_2

REMARKS:

REPORTED BY:

DATE: 7 Jun 03 0400

LAB ID NO.:

ABG

I STAT 001

PH 000206 [redacted] 66-4

PO Name: [redacted]

TCO2_____27 mmol/L

PH 070

PH_____7.385

PCO2_____40.7 mmHg

PO2_____65 mmHg

HCO3_____26 mmol/L

BEecf_____1 mmol/L

sO2%_____92 %

%calculated

Sample Type_1

07JUN03 04:00

Oper: [redacted] 66-2

Physician:_____

Oper# 40760

Ver: JAM0840R
CLEW 001

b6-2

b6-4

Ward/Section		REF NO		LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)
LAST FIRST M			TIME	SEX/SEP DOB SSN

[redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
WBC	13.2	4.8-10.8 x 10³	Color	Yellow	N/A	RPR		Negative
RBC	3.97	4.7-6.1 x 10⁶	App	Cld	N/A	Mono		Negative
Hgb	9.1	14-18 g/dl (M) 12-16 g/dl (F)	Glu	Neg	Negative	[redacted]		
Hct	29.6	42-52% (M) 37-47% (F)	Bili	Neg	Negative	Source		
MCV	85.1	80-94 fl (M) 81-99 fl (F)	Ket	Neg	Negative	Gram Stain		
Plt	312	130-500 x 10³ verified	SG	1.015	N/A	Occ Bld		Negative
Lymph%	18.4%	20.5-51.1%	Bld	1+ Sm	Negative	H. pylori		Negative
[redacted]			pH	5.0	N/A	Micro Parasites		
Segs		Mono	Prot	Tr	Negative 55A 1+	Malaria		
Bands		Eos	Urob	Neg	0.2-1.0	O & P		
Lymph		Baso	Nit	Neg	Negative	Other		
Atyp		Imm	Leuk	N/A	Negative	[redacted]		
RBC Morph			HCG		Negative	3-10 RBC 1-2 WBC		
Spun Hematocrit		42-52% (M) 37-47% (F)	[redacted]					
Sed Rate			Cell Count			MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED		
Other			Directigen		Negative	ABO/Rh		

[redacted]

TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATCH
PT	11.4	9.8-13.6 secs			
APTT	25.9	21-34 secs			
D dimer		<20 ug/ml			
FDP		<10 ug/ml			

REMARKS:

REPORTED BY: [redacted] DATE: [illegible] LAB ID NO.

b6-2

66-2

ectic

i STAT 80: FIO 408
PR 14

Pt: [redacted] 66-4

Pt Name: _____

TCO2_____20 mmol/L

At 37C

pH_____7.430

PCO2_____40.5 mmHg

PO2_____110 mmHg

HCO3_____27 mmol/L

BEecf_____3 mmol/L

sO2%_____98 %

%calculated

At Patient Temp

pH_____7.431

PCO2_____40.4 mmHg

PO2_____110 mmHg

Patient Temp: 98.6F

FiO2_____: 40

Sample Type: ART

07JUN03 11:11

Oper: [redacted] 66-2

Phone: [illegible]

Ser# 40760

Ver: JAM0040A
OLEW A01

REQUESTING PHYSICIAN: Dr. [redacted]

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

DATE	TIME	SSN/PSEUDO SSN:
7 June	1130	

ANGE	TEST	RESULT	REF. RANGE
mmol/L	ALB		3.5-5.5 g/dl
mol/L	ALP		26-84 u/l
mol/L	ALT		10-47 u/l
	AMY		14-97 u/l
Hg (art) g (ven)	AST		11-38 u/l
Hg (art)	TBIL		0.2-1.6 mg/dl
/L (art) /L (ven)	BUN		7-22 mg/dl
/L (art) /L (ven)	CA++		8.0-10.3mg/dl
	CHOL		100-200 mg/dl
	CRE		0.6-1.2 mg/dl
l/L	GLU		73-118 mg/dl
mmol/L	TP		6.4-8.1 g/dl

/dl	TEST	RESULT	REF. RANGE
/dl	GLU	118	73-118 mg/dl
V	BUN	41	7-22 mg/dl
	CRE	2.4	0.6-1.2 mg/dl
	CK	75000	39-380 u/l (M) 30-190 u/l (F)
NGE	NA+	140	128-145 mmol/l
	K+	3.1	3.3-4.7 mmol/l
	CL-	106	98-108 mmol/l
	tCO2	25	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-33 mmol/l

TEST	RESULT	REF. RANGE
ALB	1.3	3.3-5.5 g/dl
ALP	63	26-84 u/l
ALT	62	10-47 u/l
AMY	340	14-97 u/l
AST	193	11-38 u/l
TBIL	4.1	0.2-1.6 mg/dl
GGT	27	5-65 u/l
TP	4.9	6.4-8.1 g/dl

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-33 mmol/l

Drug of Abuse		

REMARKS:

REPORTED BY:	DATE:	LAB ID NO.:
66-2 [redacted]	7 June 03	

Ward/Section: OR	REQUESTING PHYSICIAN: Dr [redacted] 66-2	LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)

LAST, FIRST, MI	DATE	TIME	SSN/PSEUDO SSN
EPW # [redacted] 66-4	7 Jun 03	1825	[redacted] 66-4

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	13.4	4.8-10.8 X10³
RBC	3.99	4.7-6.1 X10⁹
Hgb	10.3	14-18 g/dL M 12-16 g/dL F
Hct	34.1	42-52% M 37-47% F
MCV	85.3	80-94 fl M 81 37-47% F
Plt	403	130-500 X10³ verified
Lymph %	8.1	20.5-51.1 %

(Hematology) Manual Differential

Segs		Mono	
Bands		Eos	
Lymph		Baso	
Atyp		Imm	
RBC Morph			
Spun Hematocrit		42-52% (M) 37-47% (F)	
Sed Rate			
Other			

Coagulation Studies

TEST	RESULT	REF. RANGE
PT		9.8-13.6 secs
APTT		21-34 secs
D dimer		<20 ug/ml
FDP		<10 ug/ml

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
A		
G		
B		
K		
S		
E		
P		
I		

i-STAT G8+

Pt: [redacted] 1829 66-4

Pt: [redacted]

TCO2_____20 mmol/L

Hct 57C

pH_____7.448

PCO2_____39.3 mmHg

PO2_____110 mmHg

HCO3_____27 mmol/L

BEecf_____3 mmol/L

sO2*_____98 %

*calculated

Sample Type:

07JUN03 18:29

Oper: 7216

Physician: _____

Ser# 42011

Ver: JRP5845A
RLK A91

_____

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative

Microbiology

Source		
Gram Stain		
O & P		
Occ Bld		Negative
H. pylori		Negative
Micro Parasites		
Malaria		
Other		

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Unit Crossmatch **
(WITH EVERY UNIT OF BLOOD REQUESTED)

TYPE	CROSSMATCH

drawn by 1829 7 Jun
Ames

REMARKS:

REPORTED BY: 66-2 [redacted]	DATE: 7 JUN 03	LAB ID NO.:

Ward Section	ESTING PHYSICIAN:	[redacted]
OR	Dr [redacted] 66-2	

LAST, FIRST, MI	DATE	TIME	SSN/PSEUDO SSN
EPW # [redacted] 66-4	7 Jun 03	1825	0 [redacted] 66-4

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) - (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	125	73-118 mg/dl
BUN	40	7-22 mg/dl
CRE	2.2	0.6-1.2 mg/dl
CK	>5000	39-380 u/l (M) 30-190 u/l (F)
NA^+	136	128-145 mmol/l
K^+	3.2	3.3-4.7 mmol/l
CL^-	105	98-108 mmol/l
tCO_2	25	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

1829 7 Jun 03 Ames

REPORTED BY:	DATE:	LAB ID NO.:
66-2 [redacted]	7 Jun 03	

66-4

LABORATORY RESULT FORM

(Subject to Privacy Act of 1974)

LAST, FIRST, MI	STATUS	DATE	SSN
EPW [redacted]		7 June 03	[redacted]

Chemistry (i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH	7.409	7.31-7.41
PCO_2	41.9	35-45 mmHg (art) 41-51 mmHg (ven)
PO_2	69	80-105 mmHg (art) N/A (ven)
TCO_2	28	23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO_3	26	22-26 mmol/L (art) 23-28 mmol/L (ven)
sO_2	94	95-98%
BEecf	2	(-2) - (+2) mmol/L
AGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% (F/V)
Hgb		12-17 g/dl

Blood Bank

ABO/Rh		IAT	

Unit	Type	Crossmatch

Misc. Chemistry

CKMB		
Troponin		
DOA		
Alcohol		

Microscopic Urinalysis

Chemistry (Piccolo Analyzer)

TEST	RESULT	REF. RANGE
ALT		10-47 U/L
		11-38 U/L

```
----------
1 STAT 001

Pt: 000206
Pt name:__________

TCO2________28 mmol/L

At 070
pH_______7.409
PCO2______41.9 mmHg
PO2_________69 mmHg
HCO3________26 mmol/L
BEecf________2 mmol/L
sO2%________94 %
  %calculated

Sample Type_:

  07JUN03      21:00

Oper: 410021

Physician:__________

Ser# 43760

Ver: JAN00420
     SLEW 001

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```

SG		N/A
Blood		Negative
pH		N/A
Protein		Negative
Urob		Negative
Nitrite		Negative
LEC		Negative

Hematology

TEST	RESULT	REF. RANGE
WBC		4.8-10.8 x 10^3
RBC		4.7-6.1 x 10^6
Hgb		14-16 g/dl (M) 12-16 g/dl (F)
Hct		42-52% (M) 37-47% (F)
MCV		80-94 fl (M) 81-99 fl (F)
Plt		130-500 x 10^3 verified
Lymph%		25-33%
Retic		0.8-1.8% (adult)
PT		9.8-13.6 secs
APTT		21-34 secs
D dimer		<20 ug/ml
FDP		<10 ug/ml
Segs		Mono
Bands		Eos
Lymph		Baso
Atyp		Imm
RBC Morph		
Other		
Spun Crit		42-52% (M) 37-47% (F)
Man WBC		4.8-10.8 x 10^3
Manual Plt		130-500 x 10^3 verified

Microbiology

Source		
Gram Stain		
Culture		
KOH/WP		
O&P		
Occ Bld		Malaria
Other		

☺ "SMILE" FOR

UNICOR Federal Prison Industries, Inc.

NSN 7540-00-181-8344 (913) 682-8[redacted]0, ext. 465

[redacted]OUS EDITION USABLE

TEST(S)
SPECIMEN TAKEN
DATE 8 Ene TIME 0400 A.M. P.M.
REQUESTED

RESULTS

Glu - 133
BUA - 42
Na - 143
K - 3.0
Cl - 106
CO2 - 29
Hgb - 10
Hct - 30

Enter in above space PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REQUESTING PHYSICIAN'S SIGNATURE [redacted]

REPORTED BY 66-2 MD [redacted]

TECH DATE 8 Ene

MISC
URGENCY ☑ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT
PATIENT STATUS ☑ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM
SPECIMEN SOURCE (Specify)
LAB ID NO.
SPECIMEN/LAB RPT. NO

PATIENT'S MED. RECORD

MISCELLANEOUS 557-107
STANDARD FORM 557 (Rev. 3-77)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-45.505

[redacted] 66-4 EPW ICU #1

LABORATORY
(Subject to
STATUS DATE 8 Ene
Piccolo Analyzer)

STAT	REF. RANGE	TEST
	10-47 U/L	WBC
	11-38 U/L	RBC
	5-56 U/L	Hgb
	3.8-5.5 g/dl	Hct
	[illegible] U/L	MCV
	14-97 U/L	Plt
	8-10.3 mg/dl	Lymp
	[illegible] mg/dl	Retic
	0.6-1.2 mg/dl	PT
	7-22 mg/dl	APTT
	73-118 mg/dl	D dim
	0.21-6 mg/dl	FDP
	6.4-8.1 g/dl	Segs
	2.2-6.6 mg/dl (F) [illegible] mg/dl (M)	Bands
	128-145 mmol/L	Lymp
	3.5-4.7 mmol/L	Atyp
	98-108 mmol/L	RBC A
	18-33 mmol/L	Other
	39-380 u/L	Spun Crit

Unit Type Crossmatch

US EDITION USABLE

66-4 # [redacted] EPW ICU #1

MISC
URGENCY ☑ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT
PATIENT STATUS ☑ BED ☐ AMB ☐ OUTPATIENT ☐ NP ☐ DOM
SPECIMEN SOURCE (Specify)
SPECIMEN/LAB RPT. NO
LAB ID NO.
PATIENT'S MED. RECORD

Enter in above space PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REQUESTING PHYSICIAN'S SIGNATURE [redacted]

REPORTED BY 66-2 MD [redacted]

TECH DATE 8 Ene

REMARKS CBC

TEST(S)
SPECIMEN TAKEN
DATE 8 Ene TIME 0400 A.M. P.M.
REQUESTED

RESULTS

WBC - 11.0
RBC - 3.87
Hb - 10.2
Hct - 32.5
MCV - 84.0
MCH - 26.4
MCHC - 31.4
Plt - 370
Mb - 8.7

CK
Tro
DO
Alc

UNICOR Federal Prison Industries, Inc. (913) 682-8704, ext. 465

NSN 7540-00-181-8344

MISCELLANEOUS 557-107
STANDARD FORM 557 (Rev. 3-77)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-45.505

MEDCOM - 9569

ICU-1 b6-2

[redacted] b6-4

8 Jun 03 0930

Army/Sec... [redacted]

LAST, FIRST, M... [redacted]

...ORATORY RESULT FORM
(Subject to the Privacy Act of 1974)

...IME ...SPECIMEN ...

...Hematology			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
WBC	13.3	4.3-10.8 x 10³	Color		N/A	RPR		Negative
RBC	3.90	4.2-5.4	SG		N/A	Mono		Negative
Hgb	10.2	[illegible]	Glu		Negative	Microbiology		
Hct	32.9	[illegible]	[illegible]		Negative	Source		
MCV	84.4	[illegible]	K		Negative	Gram Stain		
Plt	436	[illegible]	PO		N/A	Culture Bld		
Lymph %	10.8%	[illegible]	Bld		Negative	H. pylori		Negative
...(Hematology) Manual Differential			pH		N/A	Micro Parasites		
Segs		Mono	Prot		Negative	Malaria		
Bands		[illegible]	[illegible]		[illegible]	O & P		
Lymph		[illegible]	[illegible]		Negative	Other		
[illegible]		[illegible]	[illegible]		Negative	Microscopic Urinalysis		
[illegible]		[illegible]	[illegible]		Negative			
Blast		[illegible]	CSF			Blood Bank		
Promyelocyte								
Myelocyte			Cell Count			MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED		
Other			Directigen		Negative	ABO/Rh		

...Cytogenetic Studies			Blood Bank Unit Log (...)			
			MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED			
TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATCH	
[illegible]		[illegible]				
[illegible]						
[illegible]						
[illegible]						

REMARKS:

b6-2

[redacted]

...ED BY: ... DATE: 8 June 03 LAB ID NO.:

ICU 7 [redacted] 66-2

Ward/Section: [redacted] | REF: [redacted]

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

LAST, FIRST: [redacted] | DATE: [redacted] | TIME: [redacted] 0915 | SSN/PSEUDO SSN:

66-4

TEST	RESULT	REF. RANGE
Na	133	133-146 mmol/L
K	4.0	3.5-4.9 mmol/L
Cl	103	98-109 mmol/L
pH	7.314	7.31-7.45
PCO2	51.5	35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2	33	23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3	31	22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf	7	(-2) – (+3) mmol/L
AnGap	8	10-20 mmol/L
Ca	6.9	1.12-1.32 mmol/L
BUN	35	8-26 mg/dl
GLU	136	70-105 mg/dl
Creat	2.0	0.7-1.5 mg/dl
Hct	34	38-51% PCV
Hgb	12	12-17 g/dl

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

TEST	RESULT	REF. RANGE
ALB	1.3	3.5-5.5 g/dl
ALP	61	26-84 u/l
ALT	63	10-47 u/l
AMY	367	14-97 u/l
AST	170	11-38 u/l
TBIL	3.9	0.2-1.6 mg/dl
BUN	35	7-22 mg/dl
CA^{++}	6.9	8.0-10.3 mg/dl
CHOL	150	100-200 mg/dl
CRE	2.0	0.6-1.2 mg/dl
GLU	136	73-118 mg/dl
TP	5.0	6.4-8.1 g/dl

TEST	RESULT	REF. RANGE
GLU	136	73-118 mg/dl
BUN	35	7-22 mg/dl
CRE	2.0	0.6-1.2 mg/dl
CK	3289	39-380 u/l (M) 30-190 u/l (F)
NA^+	133	128-145 mmol/l
K^+	4.0	3.3-4.7 mmol/l
CL	103	98-108 mmol/l
tCO_2	23	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO_2		18-33 mmol/l

TEST	RESULT	REF. RANGE
ALB	1.3	3.3-5.5 g/dl
ALP	61	26-84 u/l
ALT	63	10-47 u/l
AMY	367	14-97 u/l
AST	170	11-38 u/l
TBIL	3.9	0.2-1.6 mg/dl
GGT	35	5-65 u/l
TP	5.0	6.4-8.1 g/dl

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: 66-2 [redacted] | DATE: 8 Jun 03 | LAB ID NO.:

Ward/Section: ICU7 | R. ESTING PHYSICIAN: [redacted] 66-2 | LABORATORY RESULT FO (Subject to the Privacy Act of 19

LAST, FIRST, MI. | DATE 09JUNE03 | TIME 0340 | SSN/PSEUDO SSN: [redacted]

Hematology/CBC

TEST	RESULT	REF. RANGE
WBC	13.6	4.8-10.8 x 10^3
RBC	3.68	4.7-6.1 x 10^9
Hgb	9.7	14-18 g/dl (M) 12-16 g/dl (F)
Hct	31.3	42-52% (M) 37-47% (F)
MCV	84.9	80-94 fl (M) 81-99 fl (F)
Plt	479	130-500 x 10^3 verified
Lymph %	16.8	20.5-51.1%

Hematology/Manual Differential

Segs | Mono

BDecf_____ mmol/L
sO2%_____99 %
xcalculated

At Patient Temp
pH_____7.477
PCO2_____37.9 mmHg
PO2_____102 mmHg

Patient Temp: 99.5F
FIO2_____: 60
Sample Type_: ART

09JUN03 12:50

Oper: [redacted] 66-2

Physician:_____

Ser# 40763
Ver: JAM0045A
SLCW A01

Urinalysis

1 STAT 001

Pt: [redacted] 66-4

Pt Name:_____

TCO2_____29 mmol/L

At 37C
pH_____7.404
PCO2_____37.1 mmHg
PO2_____100 mmHg
HCO3_____28 mmol/L
BDecf_____4 mmol/L
sO2%_____99 %
xcalculated

At Patient Temp
pH_____7.477
PCO2_____37.9 mmHg
PO2_____102 mmHg

Patient Temp: 99.5F
FIO2_____: 60
Sample Type_: ART

09JUN03 12:50

Oper: [redacted] 66-2

Physician:_____

Ser# 40763
Ver: JAM0045A
SLCW A01

Micro Sero

Page 16 of 70

1 STAT 10:

Pt: [redacted] 66-4

Pt Name:_____

TCO2_____[illegible] mmol/L

At 37C
pH_____7.500
PCO2_____[illegible] mmHg
PO2_____[illegible] mmHg
HCO3_____[illegible] mmol/L
BDecf_____7 mmol/L
sO2%_____96 %
xcalculated

Patient Temp
pH_____7.525
PCO2_____35.9 mmHg
PO2_____[illegible] mmHg

Patient Temp: 99.5F
FIO2_____: 60
Sample Type_: ART

09JUN03 07:06

Oper: [redacted] 66-2

Physician:_____

Ser# 40763
Ver: JAM0045A
SLCW A01

REPORTED BY: 66-2 [redacted] | DATE: 9Jun03 | LAB ID NO.:

UNICOR FEDERAL PRISON INDUSTRIES INC.

NSN 7540-00-181-87 LEAVENWORTH, KS PREVIOUS EDITION USABLE

TEST(S)		
SPECIMEN TAKEN		
DATE 9/JUN03	TIME 0745	A.M. / P.M.
RESULTS	REQUESTED	(X)
124	GLUCOSE	X
	UREA N.	
2.0	CREATININE	X
	URIC ACID	
145	SODIUM	X
2.6	POTASSIUM	X
106	CHLORIDE	X
30	CO_2	X
	PHOSPHATE	X
	CALCIUM	X
	TOTAL PROTEIN	X
	ALBUMIN	X
	GLOBULIN	X
	ALKALINE PHOSPHATASE	X
	ACID PHOSPHATASE	X
	SGOT	X
	LDH	X
	CPK	X
	BILIRUBIN (TOTAL)	
	BILIRUBIN (DIRECT)	
	CHOLESTEROL	
	TRIGLYCERIDES	
	AMYLASE	
	LIPASE	
	PROFILE (Specify)	

REMARKS

Enter in above space REQUESTING PHYSICIAN'S SIGNATURE [redacted]

PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REPORTED BY [redacted] DATE 9/JUN03

[redacted]

66-4

66-2

CHEM 1

URGENCY: ☐ ROUTINE ☐ TODAY ☐ PRE-OP ☐ STAT

PATIENT STATUS: ☐ BED ☐ AMB ☐ OUTPATIENT ☐ DOM ☐ NP

SPECIMEN SOURCE: ☒ BLOOD ☐ OTHER (Specify)

SPECIMEN/LAB. RPT. NO.

LAB. ID. NO.

PATIENT'S MED. RECORD

CHEMISTRY 1
STANDARD FORM 546 (Rev 8-77)
PRESCRIBED BY GSA ICMR
FIRMR (41 CFR) 201-45.505

546-107

09June@450

1 STAT 101

Pt: [redacted] 66-4

Pt Name: [redacted]

TCO2_____31 mmol/L

Pt STD

pH_____7.515 7.515

pCO2_____36.5 mmHg 36.5

pO2_____63 mmHg 63

HCO3_____29 mmol/L 29

BEecf_____7 mmol/L 7

sO2I_____94 % 94

%calculated

Sample Type_:

09JUN03 04:46

Oper: [redacted] 66-2

Physician:_____

Ser# 40763

Ver: JAM0040A
CLEW 801

MEDCOM - 9573

b6-2

Ward/Section: KW 1	REQUESTING PHYSICIAN: [redacted]	CHEMISTRY RESULT FO (Subject to the Privacy Act of 19

LAST, FIRST, MI: FPW	DATE: 9 June 03	TIME: 0340	SSN/PSEUDO SSN: [redacted] b6-4

[redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RA
Na	142	138-146 mmol/L	ALB	1.2	3.5-5.5 g/dl	GLU		73-118 mg
K	2.8	3.5-4.9 mmol/L	ALP	71	26-84 u/l	BUN		7-22 mg/d
Cl	106	98-109 mmol/L	ALT	49	10-47 u/l	CA++		8.0-10.3 m
pH	7.512	7.31-7.45	AMY	316	14-97 u/l	CRE		0.6-1.2 mg
PCO2	41.7	35-45 mmHg (art) 41-51 mmHg (ven)	AST	100	11-38 u/l	NA+		128-145 m
PO2		80-105 mmHg (art) N/A (ven)	TBIL	4.4	0.2-1.6 mg/dl	K+		3.3-4.7 mm
TCO2	35	23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN	33	7-22 mg/dl	CL-		98-108 mm
HCO3	33	22-26 mmol/L (art) 23-28 mmol/L (ven)	CA++	7.5	8.0-10.3mg/dl	tCO2		18-33 m
sO2	7	95-98%	CHOL	151	100-200 mg/dl	[redacted]		
BEecf	10	(-2) – (+3) mmol/L	CRE	2.2	0.6-1.2 mg/dl	TEST	RESULT	REF. RA
AnGap	5	10-20 mmol/L	GLU	132	73-118 mg/dl	A		
Ca		1.12-1.32 mmol/L	TP	5.2	6.4-8.1 g/dl	A		
BUN	35	8-26 mg/dl	[redacted]			A		
GLU	127	70-105 mg/dl	TEST	RESULT	REF. RANGE	A		
Creat		0.7-1.5 mg/dl	GLU		73-118 mg/dl	A		
Hct	27	38-51% PCV	BUN		7-22 mg/dl	T		
Hgb	9	12-17 g/dl	CRE		0.6-1.2 mg/dl	C		
[redacted]			CK		39-380 u/l (M) 30-190 u/l (F)	T		
TEST	RESULT	REF. RANGE	NA+		128-145 mmol/l	[redacted]		
Troponin-I			K+		3.3-4.7 mmol/l			
Drug of Abuse			CL-		98-108 mmol/l	T		
			tCO2		18-33 mmol/l			

09 June 03
1 STAT 001 @0400
Pt: 000006
Pt Name: [redacted] b6-4
TCO2 39 mmol/L
At 070
pH 7.400 7.483
PCO2 39.1 mmHg 39.1
PO2 54 mmHg 54
HCO3 29 mmol/L 29
BEecf 6 mmol/L 6
sO2% 90 % 90%
%calculated
Sample Type:
09JUN03 00:00
Oper: [redacted] b6-2
Physician:
Ser# 40760
Ver: JAM0040A
CLEW A01

REMARKS:
Chem 8, LFT's

REPORTED BY:	DATE:	LAB ID NO.:
b6-2 [redacted]	9 Jun 03	

Temp 101.

10 Jun 03
20530

ICU #1

#2 [redacted]

(Hematology)

	Na	141	
	K	2.5	
	Cl	107	
12.4	CO2	34	
2.91	BUN	27	
28	Gluc	107	
24.4	Hct	21	Hgb 7
83.8			
565.			
13.5			

pH	7.487
PCO2	45.0
PO2	151
BEcf	11
HCO3	34
TCO2	35
sO2%	99

[redacted]

66-4

(Hematology) Manual Differential

Microscopic Urinalysis

CSF	Blood Bank

Coagulation Studies	Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

66-2

[redacted] 10 Jun 03

66-2

Ward/Section: ICU-A | REQUESTING PHYSICIAN: [redacted] | **CHEMISTRY RESULT F(**
(Subject to the Privacy Act of 1

LAST, FIRST [redacted] 66-4 | DATE: 1 [illegible] 3 [illegible] | TIME: [illegible] | SSN/PSEUDO SSN:

[redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. R
Na	145	138-146 mmol/L	ALB	1.2	3.5-5.5 g/dl	GLU		73-118 mg
K	2.9	3.5-4.9 mmol/L	ALP	62	26-84 u/l	BUN		[illegible]
Cl	106	98-109 mmol/L	ALT	53	10-47 u/l			
pH	7.536	7.31-7.45	AMY	242	14-97 u/l			
PCO2	37.0	35-45 mmHg (art) 41-51 mmHg (ven)	AST	27	11-38 u/l			
PO2		80-105 mmHg (art) N/A (ven)	TBIL	3.9	0.2-1.6 mg/dl			
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN	30	7-22 mg/dl			
HCO3	31	22-26 mmol/L (art) 23-28 mmol/L (ven)	CA++	7.4	8.0-10.3mg/dl			
sO2		95-98%	CHOL	141	100-200 mg/dl			
BEecf	8	(-2) – (+3) mmol/L	CRE	2.3	0.6-1.2 mg/dl			
AnGap	9	10-20 mmol/L	GLU	110	73-118 mg/dl			
Ca		1.12-1.32 mmol/L	TP	4.9	6.4-8.1 g/dl			
BUN	30	8-26 mg/dl	[redacted]					
GLU		70-105 mg/dl	TEST	RESULT	REF. RANGE			
Creat		0.7-1.5 mg/dl	GLU		73-118 mg/dl			
Hct	23	38-51% PCV	BUN		7-22 mg/dl			
Hgb	8	12-17 g/dl	CRE		0.6-1.2 mg/dl			
[redacted]			CK		39-380 u/l (M) 30-190 u/l (F)			
TEST	RESULT	REF. RANGE	NA+		128-145 mmol/l			
Troponin-I			K+		3.3-4.7 mmol/l			
Drug of Abuse			CL-		98-108 mmol/l			
			tCO_2		18-33 mmol/l			

REMARKS: 1+ Hemolysis
1+ Icteric

REPORTED BY: [redacted] 66-2 | DATE: 10 June 03 | LAB ID N(

---

1 STAT 001

Pt: [redacted] 66-4

Pt Name: [redacted]

TCO2_____25 mmol/L

At 37C

pH_____7.400

PCO2_____36.2 mmHg

_____91 mmHg

HCO_____24 mmol/L

BEecf_____0 mmol/L

SO2%_____97 %

*calculated

At Patient Temp

pH_____7.426

PCO2_____36.9 mmHg

PO2_____94 mmHg

Patient Temp: 99.4F

FIO2_____: 45

Sample Type_: ART

10JUN03 14:21

Oper [redacted] 66-2

Physician:_____

Ser# 40760

Ver: JAN0645A
CLEW A01

66-2

Ward/Section:	TESTING PHYSICIAN:	LABORATORY RESULT FO (Subject to the Privacy Act of 19
LAST, F[redacted] 66-4	[redacted] DATE 10/11/03 TIME 1630	SSN/PSEUDO SSN:

[redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. R
WBC	15.7	4.8-10.8 x 10^3	Color		N/A	RPR		Negative
RBC	3.54	4.7-6.1 x 10^9	App		N/A	Mono		Negative
Hgb	9.3	14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative	[redacted]		
Hct	30.5	42-52% (M) 37-47% (F)	Bili		Negative	Source		
MCV	86.2	80-94 fl (M) 81-99 fl (F)	Ket		Negative	Gram Stain		
Plt	639	130-500 x 10^3 verified	SG		N/A	Occ Bld		Negat
Lymph %	13.6	20.5-51.1%	Bld		Negative	H. pylori		Negat
[redacted]			pH		N/A	Micro Parasites		
Segs		Mono	Prot		Negative	Malaria		
Bands		Eos	Urob		0.2-1.0	O & P		
Lymph		Baso	Nit		Negative	Other		
Atyp		Imm	Leuk		Negative	[redacted]		
RBC Morph			HCG		Negative			
Spun Hematocrit		42-52% (M) 37-47% (F)	[redacted]			[redacted]		
Sed Rate			Cell Count			MUST SUBMIT SF[redacted]B WI EVERY UNIT REQ[redacted]ESTE		
Other			Directigen		Negative	ABO/Rh		

[redacted]

TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATC
PT		9.8-13.6 secs			
APTT		21-34 secs			
D dimer		<20 ug/ml			
FDP		<10 ug/ml			

REMARKS:

REPORTED BY: [redacted] 66-2	DATE: 10 June 03	LAB ID NO.:

66-4

[redacted]

LABORATORY RESULT FORM

(Subject to Privacy Act of 1974)

LAST, FIRST, MI	STATUS	DATE	SSN
DOU-7		10 Jun 03	

Chemistry (i-STAT)

TEST	RESULT	REF RANGE
Na	144	138-146 mmol/L
K	3.5	3.5-4.9 mmol/L
Cl	108	98-109 mmol/L
pH	7.523	7.31-7.[illegible]
PCO_2	39.4	[illegible] 41-51 mmHg (venous)
PO_2		80-105 mmHg (arterial) N/A (venous)
TCO_2	34	23-27 mmol/L (arterial) 24-29 mmol/L (venous)
HCO_3	32	22-26 mmol/L (arterial) 23-28 mmol/L (venous)
sO_2		95-98%
BEecf		(-2) – (+3) mmol/L
AGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51%
Hgb		12-17 g/dl

Blood Bank

ABO/Rh	IAT

Unit	Type	Crossmatch

Misc. Chemistry

CKMB	
Troponin	
DOA	
Alcohol	

Microscopic Urinalysis

Chemistry (Piccolo Analyzer)

TEST	RESULT	REF RANGE
ALT	33	10-47 U/L
AST	17	11-38 U/L
GGT		5-56 U/L
ALB	3.2	3.3-4.5 g/dl
[illegible]	74	[illegible] U/L
Amylase	192	14-97 U/L
Ca	7.3	8-10.5 mg/dl
Chol	156	<200 mg/dl
Creat	2.1	0.6-1.2 mg/dl
BUN	29	7-22 mg/dl
GLU	120	73-118 mg/dl
Tbili	3.3	0.21.6 mg/dl
TP	5.3	6.4-8.1 g/dl
UA		2.2-6.6 mg/dl (F) 3.6-8.0 mg/dl (M)
Na		135-145 mmol/L
K		3.3-4.7 mmol/L
Cl		98-108 mmol/L
CO_2		18-33 mmol/L
CK		39-[illegible] u/L

Urinalysis

TEST	RESULT	REF RANGE
Glucose		Negative
Bilirubin		Negative
Ketone		Negative
SG		N/A
Blood		Negative
pH		N/A
Protein		Negative
Urobilinogen		0.2-1.0
Nitrite		Negative
HCG		Negative

Hematology

TEST	RESULT	REF RANGE
WBC		4.8-10.8 x 10^3
RBC		4.7-6.1 x 10^6
Hgb		14-18 g/dl (m) 12-16 g/dl (f)
Hct		37-52%
MCV		[illegible]
Plt		130-[illegible] Verified
Lymph%		20-5[illegible]
Retic		[illegible]
PT		[illegible]
APTT		31-54 sec
D dimer		<20 ug/ml
FDP		<10 ug/ml
Segs		Manual
Bands		Flag
Lymph		Blood
Atyp		Interp
RBC Morph		
Other		
Spun Crit		[illegible]
Man WBC		[illegible]
Manual Plt		[illegible] Verified

Microbiology

Source	
Gram Stain	
Culture	
KOH/WP	
Gram	
Occ Bld	Malaria
Other	

---

1 STAT 00:

Pt: [redacted] b6-4

Pt NAME:_____

TCO2_____04 mmol/L

At 37C

pH_____7.060

PCO2_____06.7 mmHg

PO2_____00 mmHg

HCO3____ __02 mol/L

BEecf___?___7 mmol/L

SO2%_____02 %

*calculated

At Patient Temp

pH_____7.044

PCO2_____60.1 mmHg

PO2_____04 mmHg

Patient Temp: 101.0F

FIO2_____: 100

Sample Type_: ART

11JUN00 20:05

Oper: [redacted] b6-2

Physician:_____

Ser# 40760

Ver: JAN0040A
CLCW A01

66-2

ICU I #

REQUESTING [redacted]

LABORATORY RESULT
(Subject to the Privacy Act o

ST, FIRST, MI: [redacted] #

6mo/03

TIME: 0400

SSN/PSEUDO SSN: # [redacted]

Hematology			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF
	18.3	4.8-10.8 x 10³	Color		N/A	DDD		Neg
	3.74	4.7-6.1 x 10⁶	App		N/A			Neg
	10.1	14-18 g/dl (M) 12-16 g/dl (F)	Glu		N/A			
	32.3	42-52% (M) 37-47% (F)	Bil					
	86.1	80-94 fl (M) 81-99 fl (F)	Ket					
	749	150-500 x 10³ verified	SG					
Sample %	4.7	30.5-51.1%	BR					

Hematology Manual

cgs		Mono
		Eos
		Baso
		Imm

Coagulation Sta

TEST	RESULT	REF.
		0.8-13
		21-37
		30-40
		70-120

REMARKS:

REPORTED BY:

1 STAT GO:

66-4

Pt: [redacted]

Pt Name:_____

TCO2_____27 mmol/L

At 37C

pH_____7.397

PCO2_____42.1 mmHg

PO2_____86 mmHg

HCO3_____26 mmol/L

BEcf_____1 mmol/L

sO2%_____99 %

%calculated

At Patient Temp

pH_____7.400

PCO2_____41.0 mmHg

PO2_____85 mmHg

Patient Temp: 98.6F

FIO2_____: 98

Sample Type_: ART

15JUN03 15:06

Oper: [redacted]

Physician:_____

Ser# 40760

Ver: JAM0045A

1 STAT GO

[redacted]

Pt Name:_____

TCO2_____25 mmol/L

At 37C

pH_____7.379

PCO2_____40.7 mmHg

PO2_____76 mmHg

HCO3_____24 mmol/L

BEcf_____1 mmol/L

sO2%_____90 %

%calculated

At Patient Temp

pH_____7.381

PCO2_____40.4 mmHg

PO2_____75 mmHg

Patient Temp: 98.6F

FIO2_____: 98

Sample Type_: ART

15JUN03 12:29

Oper: [redacted]

Physician:_____

Ser# 40760 [redacted] 1598

Ver: JAM0045A
CLEW A01

66-2

ABID NO:

SF 518
REQUES

CROSSM

66-2

ICU [redacted]

LABORATORY RESULT FORM
(Subject to Privacy Act of 1974)

LAST, FIRST, MI. # [redacted] 66-4 | STATUS 11JUN03 | DATE 0400 | SSN # [redacted] 66-4

Chemistry (i-STAT)

TEST	RESULT	REF. RANGE
Na	146	138-146 mmol/L
K	3.1	3.5-4.9 mmol/L
Cl	106	98-109 mmol/L
pH	7.465	7.31-7.45
PCO_2	43.3	[illegible]
PO_2		80-105 mmHg (adult) 80-108 mmHg (child)
TCO_2	32	23-27 mmol/L (adult) 24-29 mmol/L (child)
HCO_3	31	22-26 mmol/L (adult) 23-28 mmol/L (child)
sO_2		95-98%
BEecf	7	[illegible] mmol/L
AGap	12	10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN	32	8-26 mg/dl
GLU	126	70-105 mg/dl
Creat		[illegible]
Hct	29	[illegible]
Hgb	10	12-17 g/dl

Chemistry (Piccolo Analyzer)

TEST	RESULT	REF. RANGE
ALT	42	10-47 U/L
AST	81	11-38 U/L
GGT	58	5-36 U/L
Alb	1.5	3.5-5.5 g/dl
ALP	68	[illegible]
Amylase	222	14-85 U/L
Ca		8-10.3 mg/dl
Chol		<200 mg/dl
Creat		0.6-1.2 mg/dl
BUN		7-22 mg/dl
GLU		75-118 mg/dl
Tbili	4.7	0.21.6 mg/dl
TP	5.6	6.4-8.1 g/dl
[illegible]		[illegible] mg/dl (F) [illegible] mg/dl (M)
[illegible]		[illegible] mmol/L
Cl		98-108 mmol/L
CO_2		18-33 mmol/L
CK		39-380 u/L

Hematology

TEST	RESULT	REF. RANGE
WBC		[illegible]
RBC		
Hgb		
Hct		
MC		
Plt		
Lymp		
Retic		
PT		
APT		
D di		
FDP		
Segs		
Band		
Lym		
Aty		
RBC		
Od		
Sp		
Mi		
Ma		
Se		
Gr		
Culture		
KOH/WP		
O&P		
Occ Bld		
Other		

Blood Bank

ABO/Rh		IAT	

Unit	Type	Crossmatch

Urinalysis

TEST	RESULT	REF. RANGE
Glucose		Negative
Bilirubin		Negative
Ketones		Negative
SG		N/A
Blood		Negative
pH		N/A
Protein		Negative
Urob		0.2-1.0
Nitrite		Negative
LE		Negative

Misc. Chemistry

CKMB	
Troponin	
DOA	
Alcohol	

Microscopic Urinalysis

i STAT 001

Pt: [redacted]

Pt Name: [redacted]

TCO2 _____ 34 mmol/L

At 370

pH _____ 7.465

PCO2 _____ 43.6 mmHg

PO2 _____ 90 mmHg

HCO3 _____ 30 mmol/L

BEecf _____ 10 mmol/L

SOCX _____ 98 %

%calculated

Sample Type_:

11JUN03 00:46

Oper: [redacted] 66-2

Physician: _____

Ser# 40760

Ver: JAN0404A
CLEW A01

Ward/Section: ICU	REQUESTING PHYSICIAN: 66-4	LABORATORY RESULT FO (Subject to the Privacy Act of 19
LAST, FIRST, MI: # [redacted]	DATE: 11 Jun 03 / TIME: 0400	SSN/PSEUDO SSN: # [redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. R
WBC	15.4	4.8-10.8 x 10^3	Color		N/A	RPR		Negativ
RBC	3.76	4.7-6.1 x 10^9	App		N/A	Mono		Negativ
Hgb	10.0	14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative			
Hct	32.1	42-52% (M) 37-47% (F)	Bili		Negative	Source		
MCV	85.5	80-94 fl (M) 81-99 fl (F)	Ket		Negative	Gram Stain		
Plt	708	130-500 x 10^3 verified	SG		N/A	Occ Bld		Negi
Lymph %	14.2	20.5-51.1%	Bld		Negative	H. pylori		Negat
			pH		N/A	Micro Parasites		
Segs		Mono	Prot		Negative	Malaria		
Bands		Eos	Urob		0.2-1.0	O & P		
Lymph		Baso	Nit		Negative	Other		
Atyp		Imm	Leuk		Negative			
RBC Morph			HCG		Negative			
Spun Hematocrit		42-52% (M) 37-47% (F)						
Sed Rate			Cell Count			MUST SUBMIT SF 518 WI EVERY UNIT REQUESTE		
Other			Directigen		Negative	ABO/Rh		

TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATC
PT		9.8-13.6 secs			
APTT		21-34 secs			
D dimer		<20 ug/ml			
FDP		<10 ug/ml			

REMARKS:

REPORTED BY: [redacted] 66-2	DATE:	LAB ID NO.:

Ward/Section: ICU I	REQUESTING PHYSICIAN: Dr. [redacted] 66-2	CHEMISTRY RESULTS (Subject to the Privacy Act 1197	
LAST, FIRST, MI: EPW [redacted] 66-4 ICU I	DATE: 6/11/03	TIME: 1039	SSN/PSEUDO SSN:

[redacted]

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
Na	143	138-146 mmol/L	ALB		3.5-5.5 g/dl	GLU		73-11[illegible] mg/[illegible]
K		3.5-4.9 mmol/L	ALP		26-84 u/l	BUN		7-22[illegible] g/dl
Cl		98-109 mmol/L	ALT		10-47 u/l	CA++		8.0-1[illegible] mg/[illegible]
pH		7.31-7.45	AMY		14-97 u/l	CRE		[illegible] mg/[illegible]
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)	AST		11-38 u/l	[illegible]		[illegible] mm[illegible]
PO2		80-105 mmHg (art) N/A (ven)	TBIL		0.2-1.6 mg[illegible]			[illegible] mol[illegible]
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN		7-22 mg/d[illegible]			[illegible] mmol[illegible]
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)	CA++		8.0-10.3mg[illegible]			[illegible] mol[illegible]
sO2		95-98%	CHOL		100-200 mg/[illegible]			
BEecf		(-2) – (+3) mmol/L	CRE		0.6-1.2 mg/[illegible]			[illegible]
AnGap		10-20 mmol/L	GLU		73-118 mg/[illegible]			[illegible] dl
Ca	1.10	1.12-1.32 mmol/L	TP		6.4-8.1 g/dl			
BUN		8-26 mg/dl	[redacted]					
GLU		70-105 mg/dl	TEST	RESULT	REF. RANGE			
Creat		0.7-1.5 mg/dl	GLU	134	73-118 mg/dl			
Hct		38-51% PCV	BUN	27	7-22 mg/dl			
Hgb		12-17 g/dl	CRE	1.8	0.6-1.2 mg/dl			
[redacted]			CK		39-380 u/l (M) 30-190 u/l (F)			
TEST	RESULT	REF. RANGE	NA+		128-145 mmol			
Troponin-I			K+	3.6	3.3-4.7 mmol/l			
Drug of Abuse			CL-	107	98-108 mmol/l			
			tCO2	27	18-33 mmol/l			

1 STAT GO! 66-4

Pt: [redacted]

Pt Name: [redacted]

TCO2_____29 mmol/L

At 37C

pH_____7.425

PCO2_____42.6 mmHg

PO2_____77 mmHg

HCO3_____28 mmol/L

BEecf_____4 mmol/L

sO2%_____95 %

(calculated

At Patient Temp

pH_____7.400

PCO2_____44.0 mmHg

PO2_____80 mmHg

Patient Temp: 100.7F

FIO2_____: 50

Sample Type_: ART

11JUN03 10:01

Oper: [redacted]

Physician:

Ser# 407

Ver: JAW
CLEW

REMARKS:

REPORTED BY: [redacted] 66-2	DATE: 11 June 03	LAB ID NO.:

ction: ICU #1 | REQUESTING PHYSICIAN: [redacted] 66-2 | CHEMISTRY RESULT FO
(Subject to the Privacy Act of 19

FIRST, MI. # [redacted] 66-2 | [redacted] 6/11/03 | TIME 0400 | SSN/PSEUDO SSN # [redacted]

RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
	138-146 mmol/L	ALB	1.6	3.5-5.5 g/dl	GLU		73-118 mg
	3.5-4.9 mmol/L	ALP	89	26-84 u/l	BUN		7-22 mg/dl
	98-109 mmol/L	ALT	40	10-47 u/l	CA++		
	7.31-7.45	AMY	202	14-97 u/l	CRE		
	35-45 mmHg (art) 41-51 mmHg (ven)	AST	68	11-48 u/l	NA		
	80-105 mmHg (art) N/A (ven)	TBIL	5.3	0.2-1.6 mg/dl	K		
	23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN	28	7-22 mg/dl	CL		
	22-26 mmol/L (art) 23-28 mmol/L (ven)	CA++	8.1	8.0-10.3mg/dl	tCO		
	95-98%	CHOL	154	100-200 mg/dl	[redacted]		
	(-2) – (+3) mmol/L	CRE	1.8	0.6-1.2 mg/dl	TE		
	10-20 mmol/L	GLU	128	73-118 mg/dl	AL		
	1.12-1.32 mmol/L	TP	5.7	6.4-8.1 g/dl	AL		
	8-26 mg/dl	[redacted]			AL		
	70-105 mg/dl	TEST	RESULT	REF. RANGE	AM		
	0.7-1.5 mg/dl	GLU	122	73-118 mg/dl	AS		
	38-51% PCV	BUN	27	7-22 mg/dl	TI		
	12-17 g/dl	CRE	1.7	0.6-1.2 mg/dl	G		
[redacted]		CK	273	39-380 u/l (M) 30-190 u/l (F)	T		
RESULT	REF. RANGE	NA+	136	128-145 mmol/l	[redacted]		
		K+	3.6	3.3-4.7 mmol/l			
		CL-	103	98-108 mmol/l			
		tCO_2	27	18-33 mmol/l			

ARKS:

1 STAT 00:

Pt: [redacted] 66-4

Pt Name: [redacted]

TOO2_____20 mmol/L

At 370

PH_____7.472

PCO2_____30.7 mmHg

PO2_____72 mmHg

HCO3_____20 mmol/L

BEecf_____0 mmol/L

SO2%_____95 %

%calculated

At Patient T mp

PH_____7.441

PCO2_____42.0 mmHg

PO2_____80 mmHg

Patient Temp: 102.0F

FIO2_____: 60

Sample Type_:

Field_____: 1

10JUN03 10:26

Oper: [redacted] 66-2

Physician:

Ser# 40760

Ver: JAMC0420A
01CM A01

ICU #1	REQUESTING Dr [redacted]	b6-2	LABORATORY RESULT (Subject to the Privacy Act of
LAST, FIRST, MI. # [redacted] b6-4		6/13/03	TIME 0400	SSN/PSEUDO SSN: # [redacted] b6-4

Hematology/CBC

TEST	RESULT	REF. RANGE
[illegible]	17.1	4.8-10.8 x 10³
[illegible]	3.33	4.7-6.1 x 10⁶
[illegible]	8.9	14-18 g/dl (M) 12-16 g/dl (F)
[illegible]	28.9	42-52% (M) 37-47% (F)
[illegible]	86.7	80-94 fl (M) 81-99 fl (F)
[illegible]	641	130-500 x 10 verified
[illegible]	6.2	20.5-51.1%

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Gln		Negative
Bili		Negative
Ket		Negative
SG		
Bld		
pH		
Prot		
Urob		
Nit		
Leuk		
HCG		

Misc Serology

TEST	RESULT	REF.
RPR		Neg.
Mono		Neg

Microbiology

Source	
Gram	

Manual Differential

[illegible]egs		Mono	
[illegible]ates		Eos	
[illegible]ymph		Baso	
[illegible]		Imm	
[illegible]BC [illegible]orph			
[illegible]		42-52% (M) 37-47% (F)	
[illegible]ed Rate			
[illegible]ther			

Cell Count

Directigen

Coagulation Studies

TEST	RESULT	REF. RANGE
[illegible]		9.8-13.6 secs
[illegible]PTT		25-31 secs
[illegible]		[illegible] ug/ml
[illegible]		[illegible] ug/ml

UNIT

```
TCO2_________33 mmol/L

At 37C
pH_______7.500
PCO2______40.0 mmHg
PO2_________80 mmHg
HCO3________31 mmol/L
BExcf________0 mmol/L
SO2%________97 %
  %calculated

At Patient Temp
pH_______7.400
PCO2______42.7 mmHg
PO2_________91 mmHg

Patient Temp: 101.0F
FIO2________: 60
Sample Type_:
Field1______: 1

  10JUN03     03:29

Oper: [redacted]

Physician:_____

Ser# 40763

Ver: JAMS045A
     CLCH A01
```

Microscopic Urinal

Blood Ba

SUBMIT SF 518
UNIT REQUES

Match
UNHSQ

CROSSM

REMARKS:

REPORTED BY: [redacted] b6-2 | DATE: 13 Jun 03 | LAB ID NO:

66-2

ection: ICU #1 | REQUESTING PHYSICIAN: Dr [redacted] | CHEMISTRY RESULT FO
(Subject to the Privacy Act of 19

FIRST, MI: # [redacted] 66-4 | DA[redacted] 4/13/03 | TIME 0400 | SSN/PSEUDO SSN: [redacted] 66-4

RESULT	REF. RANGE
	138-146 mmol/L
	3.5-4.9 mmol/L
	98-109 mmol/L
	7.31-7.45
	35-45 mmHg (art) 41-51 mmHg (ven)
	80-105 mmHg (art) N/A (ven)
	23-27 mmol/L (art) 24-29 mmol/L (ven)
	22-26 mmol/L (art) 23-28 mmol/L (ven)
	95-98%
	(-2) – (+3) mmol/L
	10-20 mmol/L
	1.12-1.32 mmol/L
	8-26 mg/dl
	70-105 mg/dl
	0.7-1.5 mg/dl
	38-51% PCV
	12-17 g/dl

T	RESULT	REF. RANGE
in-l		
of		

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

TEST	RESULT	REF. RANGE
GLU	142	73-118 mg/dl
BUN	26	7-22 mg/dl
CRE	1.9	0.6-1.2 mg/dl
CK	135	39-380 u/l (M) 30-190 u/l (F)
NA+	132	128-145 mmol/l
K+	3.3	3.3-4.7 mmol/l
CL-	105	98-108 mmol/l
tCO2	28	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg
BUN		7-22 mg/dl
CA++		8.0-10.3 mg
CRE		0.6-1.2 mg
NA+		128-145 m
K+		3.3-4.7 mmo
CL-		98-108 mm
tCO2		18-33 mmol

TEST	RESULT	REF. RANGE
ALB	1.4	3.3-5.5 g/dl
ALP	71	26-84 u/l
ALT	33	10-47 u/l
AMY	175	14-97 u/l
AST	76	11-38 u/l
TBIL	6.3	0.2-1.6 mg
GGT	71	5-65 u/l
TP	5.2	6.4-8.1 g/dl

TEST	RESULT	REF. RANGE
NA+		128-145 mm
K+		3.3-4.7 mm
CL-		98-108 mm
tCO2		18-33 mmol

ARKS:

[redacted] 06-2 13 Jun 03

d/Section: ICU#1	REQUESTING PHYSICIAN: DR [redacted] b6-2	LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)	
ST, FIRST, MI: EPW # [redacted] b6-4	DATE: 14JUN03	TIME: 0400	SSN/PSEUDO SSN:

(Hematology) CBC

EST	RESULT	REF. RANGE
WBC	19.4	4.8-10.8 x 10^3
RBC	3.25	4.7-6.1 x 10^6
Hgb	8.7	14-18 g/dl (M) 12-16 g/dl (F)
Hct	28.2	42-52% (M) 37-47% (F)
mCV	86.8	80-94 fl (M) 81-99 fl (F)
plt	348	130-500 x 10^3 verified
Lymph %	5.6	20.5-51.1%

Hematology) Manual Differential

gs		Mono	
nds		Eos	
mph		Baso	
p		Imm	
C rph			
m matocrit		42-52% (M) 37-47% (F)	
Rate			
ner			

Coagulation Studies

EST	RESULT	REF. RANGE
		9.8-13.6 secs
TT		21-34 secs
limer		<20 ug/ml
P		<10 ug/ml

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Glu		Negative
Bili		Negative
Ket		Negative
SG		N/A
Bld		Negative
pH		N/A
Prot		Negative
Urob		0.2-1.0
Nit		Negative
Leuk		Negative
HCG		Negative

CSF

Cell Count		
Directigen		Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source	
Gram Stain	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
O & P	
Other	

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Blood Bank Unit Crossmatch
(MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

MARKS:

b6-2 [redacted] CK 5Jun03

Ward/Section: ICU #1	REQUESTING PHYSICIAN: Dr [redacted] b6-2	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)
LAST, FIRST, MI: EPW # [redacted] b6-4	DATE: 14 JUN 03 / TIME: 0400	SSN/PSEUDO SSN:

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		Negative
Drug of Abuse		Negative
		Negative
		Negative
		Negative

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	139	73-118 mg/dl
BUN	35	7-22 mg/dl
CRE	2.9	0.6-1.2 mg/dl
CK	82	39-380 u/l (M) 30-190 u/l (F)
NA^+	136	128-145 mmol/l
K^+	3.5	3.3-4.7 mmol/l
CL^-	104	98-108 mmol/l
tCO_2	25	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB	1.0	3.3-5.5 g/dl
ALP	91	26-84 u/l
ALT	41	10-47 u/l
AMY	226	14-97 u/l
AST	113	11-38 u/l
TBIL	7.0	0.2-1.6 mg/dl
GGT	53	5-65 u/l
TP	4.9	6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY:	DATE:	LAB ID NO.:
[redacted] b6-2		

14 Jun 03

ϕ6-2

ection. ICU | REQUESTING PHYSICIAN: [redacted] | CHEMISTRY RESULT FO
(Subject to the Privacy Act of 19

FIRST, MI: ϕ6-4EPW [redacted] DATE 9/14/02 TIME 1714 SSN/PSEUDO SSN: [redacted] ϕ6-4

	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RA
		138-146 mmol/L	ALB		3.5-5.5 g/dl	GLU		73-118 mg
		3.5-4.9 mmol/L	ALP		26-84 u/l	BUN		7-22 mg/dl
		98-109 mmol/L	ALT		10-47 u/l	CA++		8.0-10.3 mg
		7.31-7.45	AMY		14-97 u/l	CRE		0.6-1.2 mg
		35-45 mmHg (art) 41-51 mmHg (ven)	AST		11-38 u/l	NA+		128-145 m
		80-105 mmHg (art) N/A (ven)	TBIL		0.2-1.6 mg/dl	K+		3.3-4.7 mmo
		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN		7-22 mg/dl	CL-		98-108 mm
		22-26 mmol/L (art) 23-28 mmol/L (ven)	CA++		8.0-10.3mg/dl	tCO_2		18-33 mmo
		95-98%	CHOL		100-200 mg/dl	[redacted]		
		(-2) – (+3) mmol/L	CRE		0.6-1.2 mg/dl	TEST	RESULT	REF. RA
		10-20 mmol/L	GLU		73-118 mg/dl	ALB		3.3-5.5 g/dl
		1.12-1.32 mmol/L	TP		6.4-8.1 g/dl	ALP		26-84 u/l
		8-26 mg/dl	[redacted]			ALT		10-47 u/l
		70-105 mg/dl	TEST	RESULT	REF. RANGE	AMY		14-97 u/l
		0.7-1.5 mg/dl	GLU	114	73-118 mg/dl	AST		11-38 u/l
		38-51% PCV	BUN	38	7-22 mg/dl	TBIL		0.2-1.6 mg
		12-17 g/dl	CRE	3.2	0.6-1.2 mg/dl	GGT		5-65 u/l
[redacted]			CK	70	39-380 u/l (M) 30-190 u/l (F)	TP		6.4-8.1 g/dl
T	RESULT	REF. RANGE	NA^+	129	128-145 mmol/l	[redacted]		
in-l			K^+	3.8	3.3-4.7 mmol/l	TEST	RESULT	REF. RA
of			CL^-	103	98-108 mmol/l	NA+		128-145 m
			tCO_2	24	18-33 mmol/l	K+		3.3-4.7 mm
						CL-		98-108 mm
						tCO_2		18-33 mmol

ARKS:

ϕ6-2 [redacted] 14ano3

rd/Section: ICU I	REQUESTING PHYSICIAN: [redacted] 66-2	LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)		
ST, FIRST, MI: EPW [redacted] 66-4	DATE: 9/14/02	TIME: 1741	SSN/PSEUDO SSN: [redacted] 66-4	

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	19.7	4.8-10.8 x 10^3
RBC	3.12	4.7-6.1 x 10^9
Hgb	8.0	14-18 g/dl (M) 12-16 g/dl (F)
Hct	26.9	42-52% (M) 37-47% (F)
MCV	86.1	80-94 fl (M) 81-99 fl (F)
PLT 276	~~256~~	130-500 x 10^3 verified
LY	nph % 8.2	20.5-51.1%

Hematology) Manual Differential

gs		Mono	
nds		Eos	
nph		Baso	
p		Imm	
C rph			
m matocrit		42-52% (M) 37-47% (F)	
Rate			
ner			

Coagulation Studies

EST	RESULT	REF. RANGE
		9.8-13.6 secs
TT		21-34 secs
limer		<20 ug/ml
P		<10 ug/ml

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Glu		Negative
Bili		Negative
Ket		Negative
SG		N/A
Bld		Negative
pH		N/A
Prot		Negative
Urob		0.2-1.0
Nit		Negative
Leuk		Negative
HCG		Negative

CSF

Cell Count		
Directigen		Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source	
Gram Stain	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
O & P	
Other	

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

MARKS:

[redacted] 66-2

14 June R

MEDCOM - 9590

ection: ICU #1 | REQUESTING PHYSICIAN: [redacted] 66-2 | CHEMISTRY RESULT FO (Subject to the Privacy Act of 19

FIRST, MI: EPW # [redacted] 66-4 | DATE 4/14/03 | TIME 2127 | SSN/PSEUDO SSN: [redacted] 66-4

T	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RA
		138-146 mmol/L	ALB		3.5-5.5 g/dl	GLU		73-118 mg
		3.5-4.9 mmol/L	ALP		26-84 u/l	BUN		7-22 mg/dl
		98-109 mmol/L	ALT		10-47 u/l	CA^{++}		8.0-10.3 mg
		7.31-7.45	AMY		14-97 u/l	CRE		0.6-1.2 mg
		35-45 mmHg (art) 41-51 mmHg (ven)	AST		11-38 u/l	NA		128-145 m
		80-105 mmHg (art) N/A (ven)	TBIL		0.2-1.6 mg/dl	K^+		3.3-4.7 mmo
		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN		7-22 mg/dl	CL^-		98-108 mm
		22-26 mmol/L (art) 23-28 mmol/L (ven)	CA^{++}		8.0-10.3mg/dl	tCO_2		18-33 mmo
		95-98%	CHOL		100-200 mg/dl			
		(-2) – (+3) mmol/L	CRE		0.6-1.2 mg/dl	TEST	RESULT	REF. RA
		10-20 mmol/L	GLU		73-118 mg/dl	ALB		3.3-5.5 g/dl
		1.12-1.32 mmol/L	TP		6.4-8.1 g/dl	ALP		26-84 u/l
		8-26 mg/dl				ALT		10-47 u/l
		70-105 mg/dl	TEST	RESULT	REF. RANGE	AMY		14-97 u/l
		0.7-1.5 mg/dl	GLU	143	73-118 mg/dl	AST		11-38 u/l
		38-51% PCV	BUN	40	7-22 mg/dl	TBIL		0.2-1.6 mg
		12-17 g/dl	CRE	3.3	0.6-1.2 mg/dl	GGT		5-55 u/l
			CK	77	39-380 u/l (M) 30-190 u/l (F)	TP		6.4-8.1 g/dl
T	RESULT	REF. RANGE	NA^+	134	128-145 mmol/l			
in-l			K^+	4.1	3.3-4.7 mmol/l	TEST	RESULT	REF. RA
ol			CL^-	104	98-108 mmol/l	NA^+		128-145 m
			tCO_2	23	18-33 mmol/l	K^+		3.3-4.7 mm
						CL^-		98-108 mm
						tCO_2		18-33 mmo

ARKS:

Patient Section: ICU #1	REQUESTING PHYSICIAN: [redacted] 66-2	LABORATORY RESULT (Subject to the Privacy Act of	
LAST, FIRST, MI: EPW [redacted] 66-4	DATE: 6/15/03	TIME: 0400	SSN/PSEUDO SSN: [redacted] 66-4

Hematology			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF
[illegible]	15.7	4.8-10.8 x 10^3	Color		N/A	RPR		Neg
[illegible]	3.03	4.7-6.1 x 10^6	App		N/A	Mono		Neg
[illegible]	8.3	14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative	Microbiology		
[illegible]	26.0	42-52% (M) 37-47% (F)	Bili		Negative	Source		
[illegible]	85.6	80-94 fl (M) 81-99 fl (F)	Ket		Negative	Gram Stain		—
	243	130-500 x 10^3 verified	Sp Gr		N/A	Occ Bld		
[illegible]	6.7	20.5-51.1%	Bld		Negative	H. pylori		
Differential			pH		N/A	Micro Parasite		
cgs		Mono	Prot		Negative	Malaria		—
[illegible]		Eos	Urob		N/A	[illegible]		—
[illegible]		Baso	Nit		Negative	Other		—
[illegible]		Imm	Leuk		Negative	Microscopic Urinalysis		
[illegible]			HCG		Negative			
[illegible]		42-52% (M) 37-47% (F)	CSF			Blood Bank		
[illegible]			Cell Count			MUST SUBMIT SF 518 EVERY UNIT REQUES		
Other			Directigen		Negative	ABO/Rh		

Coagulation Studies			Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED)		
TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSM
[illegible]		9.8-13.6 secs			
[illegible]		[illegible]			—
[illegible]		[illegible]			—
[illegible]		[illegible]			—

REMARKS:

REPORTED BY: [redacted] 66-2 | DATE: 15 Jun 03 | LAB ID NO:

MEDCOM - 9592

66-2

Ward/Section	REQUESTING PHYSICIAN	CHEMISTRY RESULTS FOR (Subject to the Privacy Act 1974)
ICU #1	Dr [redacted]	

LAST, FIRST, MI		DATE	TIME	SSN/PSEUDO SSN
EPW # [redacted]	66-4	6/15/03	0203	[redacted] 66-4

[redacted]

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

[redacted]

TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
GLU	146	~~73-118 mg/dl~~
BUN	39	7-22 mg/dl
CRE	3.7	0.6-1.2 mg/dl
CK	62	39-380 u/l (M) 30-190 u/l (F)
NA+	139	128-145 mmol/l
K+	3.9	3.3-4.7 mmol/l
CL-	102	98-108 mmol/l
tCO_2	23	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-1[illegible] mg/dl
BUN		7-22 [illegible]/dl
CA++		8.0-1[illegible] mg/dl
CRE		0.6-1[illegible] mg/dl
NA+		128-[illegible] mmol
K+		3.3-4[illegible] mmol/l
CL-		98-1[illegible] mmol/l
tCO_2		18-3[illegible] mmol/l

[redacted]

TEST	RESULT	REF. RANGE
ALB		3.3-5[illegible] g/dl
ALP		26-8[illegible]
ALT		10-4[illegible]
AMY		14-9[illegible]
AST		11-3[illegible]
TBIL		0.2-[illegible] mg/dl
GGT		5-65 [illegible]
TP		6.4-8[illegible] g/dl

[redacted]

TEST	RESULT	REF. RANGE
NA+		128-[illegible] mmol
K-		3.3-4[illegible] mmol/l
CL-		98-1[illegible] mmol/l
tCO_2		18-3[illegible] mmol/l

REMARKS:

REPORTED BY:	DATE:	LAB ID NO.:
66-2 [redacted]	15 Jun 03	

Ward/Section: ICU #1	REQUESTING PHYSICIAN: Dr [redacted] 66-2	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)		
LAST, FIRST, MI: EPW # [redacted] 66-4	DATE: 4/15/03	TIME: 0400	SSN/PSEUDO SSN: [redacted] 66-4	

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		Negative
Drug of Abuse		Negative
		Negative
		Negative
		Negative

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	145	73-118 mg/dl
BUN	43	7-22 mg/dl
CRE	3.7	0.6-1.2 mg/dl
CK	66	39-380 u/l (M) 30-190 u/l (F)
NA^+	139	128-145 mmol/l
K^+	3.9	3.3-4.7 mmol/l
CL^-	102	98-108 mmol/l
tCO_2	25	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB	1.1	3.3-5.5 g/dl
ALP	74	26-84 u/l
ALT	32	10-47 u/l
AMY	164	14-97 u/l
AST	27	11-38 u/l
TBIL	75	0.2-1.6 mg/dl
GGT	27	5-65 u/l
TP	4.1	6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: [redacted] 66-2	DATE:	LAB ID NO.:

'd/Section: ICU #1	REQUESTING PHYSICIAN: [redacted] b6-2	LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)		
ST, FIRST, MI. EPW # [redacted] b6-4		DATE 6/16/03	TIME 0400	SSN/PSEUDO SSN: [redacted] b6-4

(Hematology) CBC

EST	RESULT	REF. RANGE
WBC	11.7	4.8-10.8 x 10^3
RBC	2.80	4.7-6.1 x 10^6
Hgb	7.4	14-18 g/dl (M) 12-16 g/dl (F)
Hct	23.9	42-52% (M) 37-47% (F)
MCV	85.1	80-94 fl (M) 81-99 fl (F)
Plt	140	130-500 x 10^3 verified
Lymph %	10.4	20.5-51.1%

Hematology) Manual Differential

s		Mono	
ds		Eos	
mph		Baso	
p		Imm	
C rph			
m natocrit		42-52% (M) 37-47% (F)	
Rate			
er			

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Glu		Negative
Bili		Negative
Ket		Negative
SG		N/A
Bld		Negative
pH		N/A
Prot		Negative
Urob		0.2-1.0
Nit		Negative
Leuk		Negative
HCG		Negative

CSF

Cell Count	
Directigen	Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source	
Gram Stain	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
O & P	
Other	

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Coagulation Studies

EST	RESULT	REF. RANGE
		9.8-13.6 secs
TT		21-34 secs
limer		<20 ug/ml
P		<10 ug/ml

Blood Bank Unit Crossmatch (MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

MARKS:

b6-2 [redacted] 16 Jun 03

Repeat

PICCOLO
16/06/03
REFERENCE RANGE
PATIENT #: [redacted]
GENERAL CHEMISTRY
DISC LOT #:
OPER #: 605 DR
SERIAL #: 000(

ALT	16	10-47
AST	29	11-38
GGT	11	5-65
BUN	22	7-22
CRE	2.5*	0.6-1.2
GLU	58*	73-118

INST QC: OK CHEM
HEM 1+, LIP 0, IC

PICCOLO
16/06/03 09:58
REFERENCE RANGE MALE
PATIENT #: [redacted]
GENERAL CHEMISTRY 6 66-4
DISC LOT #: 7025AA1
OPER #: 605 DR #: 000
SERIAL #: 0000100684

ALT	29	10-47	U/L
AST	57*	11-38	U/L
GGT	23	5-65	U/L
BUN	48*	7-22	MG/DL
CRE	ICI	0.6-1.2	MG/DL
GLU	115	73-118	MG/DL

INST QC: OK CHEM QC: OK
HEM 1+, LIP 0, ICT 2+

1:1 dilute

[redacted] 66-2 [redacted]

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

DATE	TIME	SSN/PSEUDO SSN:
16 Jun 03	0800	

mistry 12

	REF. RANGE
	3.5-5.5 g/dl
	26-84 u/l
	10-47 u/l
	14-97 u/l
	11-38 u/l
	0.2-1.6 mg/dl
	7-22 mg/dl
	8.0-10.3mg/dl
	100-200 mg dl
	0.6-1.2 mg/dl
	73-118 mg/dl
	6.4-8.1 g/dl

Metlyte 8

T	REF. RANGE
	73-118 mg/dl
	7-22 mg/dl

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

Hgb		dl	CRE		0.6-1.2 mg/dl
Misc. Chemistry			CK		39-380 u/l (M) 30-190 u/l (F)
TEST	RESULT	REF. RANGE	NA^+		128-145 mmol/l
Troponin-I		Negative	K^+		3.3-4.7 mmol/l
Drug of Abuse		Negative	CL^-		98-108 mmol/l
		Negative	tCO_2		18-33 mmol/l
		Negative			
		Negative			

REMARKS:

Sample was icteric, interfering w/ testing and unable to analyze for CREAT.

REPORTED BY:	DATE:	LAB ID NO.:
[redacted] 66-2	16 June 2003	

b6-2

Ward/Section: ICU-7	REQUESTING PHYSICIAN: [redacted]	CHEMISTRY RESULT FORM (Subject to the Privacy Act of 1974)
LAST [redacted] b6-4	DATE 16 Aug 03 / TIME 0900	SSN/PSEUDO SSN:

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		Negative
Drug of Abuse		Negative
		Negative
		Negative
		Negative

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN	53	7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE	–	0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	112	73-118 mg/dl
BUN	51	7-22 mg/dl
CRE	ECT	0.6-1.2 mg/dl
CK	151	39-380 u/l (M) 30-190 u/l (F)
NA^+	139	128-145 mmol/l
K^+	4.3	3.3-4.7 mmol/l
CL^-	100	98-108 mmol/l
tCO_2	23	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
GGT		5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

REPORTED BY: [redacted] b6-2	DATE: 16 Aug 03	LAB ID NO.:

Ward/Section: ICU #1	REQUESTING PHYSICIAN: [redacted] b6-2	**CHEMISTRY RESULT FORM** (Subject to the Privacy Act of 1974)		
LAST, FIRST, MI: EPW # [redacted] b6-4	DATE: 6/16/03	TIME: 0400	SSN/PSEUDO SSN: [redacted] b6-4	

(i-STAT)

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl

Misc. Chemistry

TEST	RESULT	REF. RANGE
Troponin-I		Negative
Drug of Abuse		Negative
		Negative
		Negative
		Negative

(Piccolo) Chemistry 12

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

(Piccolo) Metlyte 8

TEST	RESULT	REF. RANGE
GLU	118	73-118 mg/dl
BUN	49	7-22 mg/dl
CRE	—	0.6-1.2 mg/dl
CK	155	39-380 u/l (M) 30-190 u/l (F)
NA^+	137	128-145 mmol/l
K^+	4.5	3.3-4.7 mmol/l
CL^-	102	98-108 mmol/l
tCO_2	24	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB	1.0	3.3-5.5 g/dl
ALP	72	26-84 u/l
ALT	28	10-47 u/l
AMY	131	14-97 u/l
AST	55	11-38 u/l
TBIL	8.5	0.2-1.6 mg/dl
GGT	20	5-65 u/l
TP	4.2	6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL^-		98-108 mmol/l
tCO_2		18-33 mmol/l

REMARKS:

Hemolyzed specimen, cre will not result. [redacted]

REPORTED BY:	DATE:	LAB ID NO.:
b6-2 [redacted]	16 Jun 03	

Ward/Section: ICU

LAST, FIRST, MI. Erw [redacted] 66-4

66-2

CHEMISTRY RESULT FORM

(Subject to the Privacy Act of 1974)

TIME 0400

SSN/PSEUDO SSN: [redacted] 66-4

0330

SULT | R | ANGE

i STAT 03:

Pt: 000206

Pt Name:_____

TCO2_____21 mmol/L

At 070

pH_____7.220

PCO2_____47.0 mmHg

PO2_____99 mmHg

HCO3_____20 mmol/L

BEecf_____ 0 mmol/L

SO2%_____62 %

%calculated

Sample Type_:

19JUN03 03:29

Oper: 410021

Physician:_____

Ser# 40746

Ver: JAMS045A
CLEW A91

Pt Name:_____

Demo 99.

TCO2_____20 mmol/L

Pt [redacted]

pH_____7.302

PCO2_____38.4 mmHg

PO2_____49 mmHg

HCO3_____19 mmol/L

BEecf_____-7 mmol/L

SO2*_____80 %

*calculated

Sample Type_:

18JUN03 17:29

Oper: [redacted] 66-2

Physician:_____

Ser# 40763

Ver: JAMS045A
CLEW A91

TEST	RESULT	REF. RANGE
GLU	118	73-118 mg/dl
BUN	55	7-22 mg/dl
CRE	~~1.6~~ 5.6 after 1:1 dilution	0.6-1.2 mg/dl
CK	133	39-380 u/l (M) 30-190 u/l (F)
NA+	135	128-145 mmol/l
K+	4.2	3.3-4.7 mmol/l
CL-	97	98-108 mmol/l
tCO2	21	18-33 mmol/l

(Piccolo) Metabolic Panel

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-33 mmol/l

(Piccolo) Liver Panel Plus

TEST	RESULT	REF. RANGE
ALB		3.3-5.5 g/dl
ALP	89	26-84 u/l
ALT	23	10-47 u/l
AMY	126	14-97 u/l
AST	52	11-38 u/l
TBIL	9.7	0.2-1.6 mg/dl
GGT	21	5-65 u/l
TP		6.4-8.1 g/dl

(Piccolo) Electrolyte

TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-33 mmol/l

Drug of Abuse		Negative
		Negative
		Negative
		Negative

REMARKS:

REPORTED BY:

DATE: 19Jun03

LAB ID NO.:

d/Section: ICU

REQ[illegible]TING PHYSICIAN: [redacted] 66-2

LABORATORY RESULT FORM
(Subject to the Privacy Act of 1974)

ST, FIRST, MI. EP[redacted] — 66-4

DATE 17JUN03 | TIME 0400 | SSN/PSEUDO SSN: [redacted]

(Hematology) CBC

TEST	RESULT	REF. RANGE
WBC	9.2	4.8-10.8 x 10^3
RBC	2.70	4.7-6.1 x 10^6
Hgb	7.2	14-18 g/dl (M) 12-16 g/dl (F)
Hct	22.9	42-52% (M) 37-47% (F)
MCV	84.8	80-94 fl (M) 81-99 fl (F)
Plt	93	130-500 x 10^3 verified
Lymph %	12.2	20.5-51.1%

Hematology) Manual Differential

gs		Mono	
nds		Eos	
mph		Baso	
p		Imm	
C rph			

m matocrit		42-52% (M) 37-47% (F)
Rate		
ner	platelets decreased	

Coagulation Studies

EST	RESULT	REF. RANGE
		9.8-13.6 secs
TT		21-34 secs
limer		<20 ug/ml
P		<10 ug/ml

Urinalysis

TEST	RESULT	REF. RANGE
Color		N/A
App		N/A
Glu		Negative
Bili		Negative
Ket		Negative
SG		N/A
Bld		Negative
pH		N/A
Prot		Negative
Urob		0.2-1.0
Nit		Negative
Leuk		Negative
HCG		Negative

CSF

Cell Count		
Directigen		Negative

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

Source	
Gram Stain	
Occ Bld	Negative
H. pylori	Negative
Micro Parasites	
Malaria	
O & P	
Other	

Microscopic Urinalysis

Blood Bank

MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED

ABO/Rh	

Blood Bank Unit Crossmatch
(MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED)

UNIT	TYPE	CROSSMATCH

EMARKS:

66-2 [redacted] 17 Jun 03

ion: ICU #1 | REQUESTING PHYSICIAN: Dr [redacted] b6-2

CHEMISTRY RESULT FORM
(Subject to the Privacy Act of 1974)

RST/MI: EPW # [redacted] b6-2 | DATE: 9/18/03 | TIME: 0400 | SSN/PSEUDO SSN: [redacted]

[redacted]

RESULT	REF. RANGE
	138-146 mmol/L
	3.5-4.9 mmol/L
	98-109 mmol/L
	7.31-7.45
	35-45 mmHg (art) 41-51 mmHg (ven)
	80-105 mmHg (art) N/A (ven)
	23-27 mmol/L (art) 24-29 mmol/L (ven)
	22-26 mmol/L (art) 23-28 mmol/L (ven)
	95-98%
	(-2) – (+3) mmol/L
	10-20 mmol/L
	1.12-1.32 mmol/L
	8-26 mg/dl
	70-105 mg/dl
	0.7-1.5 mg/dl
	38-51% PCV
	12-17 g/dl

[redacted]

RESULT	REF. RANGE

TEST	RESULT	REF. RANGE
ALB	~~4~~	3.5-5.5 g/dl
ALP	~~93~~	26-84 u/l
ALT	~~20~~	10-47 u/l
AMY	~~118~~	14-97 u/l
AST	~~42~~	11-38 u/l
TBIL	~~9.6~~	0.2-1.6 mg/dl
BUN	~~17~~	7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
GLU	84	73-118 mg/dl
BUN	63	7-22 mg/dl
CRE	ICT	0.6-1.2 mg/dl
CK	108	39-380 u/l (M) 30-190 u/l (F)
NA^+	134	128-145 mmol/l
K^+	4.6	3.3-4.7 mmol/l
CL	99	98-108 mmol/l
tCO_2	23	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA^{++}		8.0-10.3mg/dl
CRE		0.6-1.2 mg/dl
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO_2		18-33 mmol/l

[redacted]

TEST	RESULT	REF. RANGE
ALB	—	3.3-5.5 g/dl
ALP	93	26-84 u/l
ALT	20	10-47 u/l
AMY	118	14-97 u/l
AST	42	11-38 u/l
TBIL	9.6	0.2-1.6 mg/dl
GGT	17	8-65 u/l
TP	—	6.4-8.1 g/dl

[redacted]

TEST	RESULT	REF. RANGE
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO_2		18-33 mmol/l

RKS:

Specimen ~~at~~ sample 2+ Icterix, unable to obtain results for TP, ALB, CRE.

RTED BY: b6-2 [redacted] | DATE: 18 Tamar | LAB ID NO.:

d/Section: ICU # 1 | REQUESTING PHYSICIAN: Dr [redacted] b6-2 | **LABORATORY RESULT FORM** (Subject to the Privacy Act of 1974)

ST, FIRST, MI: EPW # [redacted] b6-4 | TE: 6/18/03 | TIME: 0400 | SSN/PSEUDO SSN: [redacted] b6-4

(Hematology) CBC

EST	RESULT	REF. RANGE
BC	8.5	4.8-10.8 x 10^3
C	2.69	4.7-6.1 x 10^9
b	7.2	14-18 g/dl (M) 12-16 g/dl (F)
	22.5	42-52% (M) 37-47% (F)
V	83.3	80-94 fl (M) 81-99 fl (F)
	97	130-500 x 10^3 verified
mph %	11.5	20.5-51.1%

Hematology) Manual Differential

gs		Mono	
nds		Eos	
mph		Baso	
p		Imm	
C rph			
m natocrit		42-52% (M) 37-47% (F)	
Rate			
ner			

Coagulation Studies

EST	RESULT	REF. RANGE
		9.8-13.6 secs
TT		21-34 secs
limer		<20 ug/ml
P		<10 ug/ml

Urinalysis

TEST	RESULT	REF RANGE
Col		
App		
Glu		
Bili		
Ket		
SG		
Bld		
pH		
Prot		
Urob		
Nit		
Leuk		
HCG		
Cell Count		
Directi		

[redacted]

i STAT GS:

Pt: [redacted] b6-4

Pt Name:_____

TCO2_____26 mmol/L

At 37C

pH_____7.397

PCO2_____46.0 mmHg

PO2_____99 mmHg

HCO3_____25 mmol/L

BEecf_____ 1 mmol/L

sO2%_____98 %

%calculated

At Patient Temp

pH_____7.388

PCO2_____46.4 mmHg

PO2_____99 mmHg

Patient Temp: 38.4C

FIO2_____: 28

Sample Type_: ART

16JUN03 14:40

Oper: [redacted] b6-2

Physician:_____

Ser# 40760

Ver: JAN0040A
CLCW A01

Misc. Serology

TEST	RESULT	REF. RANGE
RPR		Negative
Mono		Negative

Microbiology

ource	
ram	
ain	
cc Bl	
pylo	
iero	
rasi	
alar	
& F	
her	
US	
E	
O	
rc	
V	
I	

i STAT GS:

Pt: [redacted]

Pt Name:_____

TCO2_____26 mmol/L

At 37C

pH_____7.388

PCO2_____41.2 mmHg

PO2_____78 mmHg

HCO3_____24 mmol/L

BEecf_____ 1 mmol/L

sO2%_____98 %

%calculated

At Patient Temp

pH_____7.384

PCO2_____40.7 mmHg

PO2_____80 mmHg

Patient Temp: 38.1C

FIO2_____: 28

Sample Type_: ART

16JUN03 16:01

Oper: [redacted]

Physician:_____

Ser# 40760

Ver: JAN0040A
CLCW A01

EMARKS:

b6-2 [redacted] 18Jun03

Ward/Section: ICUI	REQUESTING PHYSICIAN: [redacted] 66-2	CHEMISTRY RESULTS (Subject to the Privacy Act of 19
[redacted] MI 66-4	DATE: 1/14/03 TIME: 0541	SSN/PSEUDO SSN:

[redacted]

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)
PO2		80-105 mmHg (art) N/A (ven)
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
Ca		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl
[redacted]		
TEST	RESULT	REF. RANGE
Troponin-I		
Drug of Abuse		

TEST	RESULT	REF. RANGE
ALB	—	3.5-5.5 g/dl
ALP	92	26-84 u/l
ALT	16	10-47 u/l
AMY	134	14-97 u/l
AST	34	11-38 u/l
TBIL	9.6	0.2-1.6 mg/dl
BUN	65	7-22 mg/dl
CA^{++}	7.5	8.0-10.3mg/dl
CHOL	154	100-200 mg/dl
CRE	ICT	0.6-1.2 mg/dl
GLU	81	73-118 mg/dl
TP	—	6.4-8.1 g/dl
[redacted]		
TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CRE		0.6-1.2 mg/dl
CK		39-380 u/l (M) 30-190 u/l (F)
NA^+		128-145 mmol/l
K^+		3.3-4.7 mmol/l
CL		98-108 mmol/l
tCO_2		18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-1[illegible] mg
BUN		7-22 [illegible]g/dl
CA^{++}		8.0-1[illegible] m
CRE		0.6-1[illegible] mg
NA^+		128-[illegible]5 m
K^+		3.3-4[illegible] mmo
CL		98-10[illegible] mm
tCO_2		18-3[illegible] mmo
[redacted]		
TEST	RESULT	REF. RANGE
ALB		3.3-5[illegible] g/dl
ALP		26-8[illegible]
ALT		10-4[illegible]
AMY		14-9[illegible]
AST		11-3[illegible]
TBIL		0.2-[illegible] mg
GGT		5-65[illegible]
TP		6.4-[illegible] g/dl
[redacted]		
TEST	RESULT	REF. RANGE
NA^+		128-[illegible]5 m
K^+		3.3-4[illegible] mm
CL		98-1[illegible] mm
tCO_2		18-3[illegible] mm

REMARKS:

REPORTED BY: 66-2 [redacted]	DATE: 1/14/03	LAB ID NO.:

b6-2

b6-4

Ward/Section	REQUESTING PHYSICIAN [redacted]		LABORATORY RESULT FORM (Subject to the Privacy Act of 1974)
LAST, FIRST [redacted]	DATE	TIME	SSN/PSEUDO SSN

[redacted]

TEST	RESULT	REF RANGE	TEST	RESULT	REF RANGE	TEST	RESULT	REF RANGE
WBC	8.8	4.8-10.8 x 10³	Color		N/A	RPR		Negative
RBC	2.74	4.7-6.1 x 10⁶	App		N/A	Mono		Negative
Hgb	7.3	14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative	[redacted]		
Hct	22.9	42-52% (M) 37-47% (F)	Bili		Negative	Source		
MCV	83.6	80-94 fl (M) 81-99 fl (F)	Ket		Negative	Gram Stain		
Plt	84	130-300 x 10³ verified	SG		N/A	Occ Bld		Negative
Lymph %	[redacted]	20.5-45.1%	Bld		Negative	H. pylori		Negative
[redacted]			pH		N/A	Micro Barcodes		
Segs		Mono	Prot		Negative	Malaria		
Bands		Eos	Urob		.02-1.0	O & P		
Lymph		Baso	Nit		Negative	Other		
Atyp		Imm	Leuk		Negative	[redacted]		
RBC Morph			HCG		Urine			
Spun Hematocrit		42-52% (M) 37-47% (F)	[redacted]					
Sed Rate			Cell Count			MUST SUBMIT SF 518 WITH EVERY UNIT REQUESTED		
Other			Direct Rem		Negative	ABO/Rh		

[redacted]

TEST	RESULT	REF RANGE	UNIT	TYPE	CROSSMATCH
PT		9.8-13.6 secs			
APTT		21-34 secs			
D dimer		<20 µg/ml			
FDP		<10 µg/ml			

REMARKS: Hb Blue Top Sent Hx

REPORTED BY	DATE	LT. BADNO
[redacted]	[redacted]	

b6-2

Ward/Section: ICU 1

REQUESTING PHYSICIAN: [redacted] b6-2

CHEMISTRY RESULT FO
(Subject to the Privacy Act of 197

AST, FIRST, MI: [redacted] b6-2

DATE: 19 June

TIME: 0300

SSN/PSEUDO SSN: [redacted]

TEST	RESULT	REF. RANGE
Na		138-146 mmol/L
K		3.5-4.9 mmol/L
Cl		98-109 mmol/L
pH		7.31-7.45
pCO2		35-45 mmHg (art) 41-51 mmHg (ven)
pO2		80-105 mmHg (art) N/A (ven)
tCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)
sO2		95-98%
BEecf		(-2) – (+3) mmol/L
AnGap		10-20 mmol/L
iCa		1.12-1.32 mmol/L
BUN		8-26 mg/dl
GLU		70-105 mg/dl
Creat		0.7-1.5 mg/dl
Hct		38-51% PCV
Hgb		12-17 g/dl
[redacted]		
TEST	RESULT	REF. RANGE
Troponin-I		
Mg or Phose		

TEST	RESULT	REF. RANGE
ALB		3.5-5.5 g/dl
ALP		26-84 u/l
ALT		10-47 u/l
AMY		14-97 u/l
AST		11-38 u/l
TBIL		0.2-1.6 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3mg/dl
CHOL		100-200 mg/dl
CRE		0.6-1.2 mg/dl
GLU		73-118 mg/dl
TP		6.4-8.1 g/dl
[redacted]		
TEST	RESULT	REF. RANGE
GLU	115	73-118 mg/dl
BUN	70	7-22 mg/dl
CRE	1CT	0.6-1.2 mg/dl
CK	124	39-380 u/l (M) 30-190 u/l (F)
NA+	118	128-145 mmol/l
K+	5.5	3.3-4.7 mmol/l
CL-	98	98-108 mmol/l
tCO2	21	18-33 mmol/l

TEST	RESULT	REF. RANGE
GLU		73-118 mg/dl
BUN		7-22 mg/dl
CA++		8.0-10.3 mg/dl
CRE		0.6-1.2 mg/dl
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-33 mmol/l
[redacted]		
TEST	RESULT	REF. RANGE
ALB	—	3.3-5.5 g/dl
ALP	123	26-84 u/l
ALT	23	10-47 u/l
AMY	147	14-97 u/l
AST	55	11-38 u/l
TBIL	10.6	0.2-1.6 mg/dl
GGT	25	5-65 u/l
TP	—	6.4-8.1 g/dl
[redacted]		
TEST	RESULT	REF. RANGE
NA+		128-145 mmol/l
K+		3.3-4.7 mmol/l
CL-		98-108 mmol/l
tCO2		18-33 mmol/l

REMARKS:

b6-2 [redacted]

ICU1 [redacted] 66-2 LFT

[redacted] 66-4 19Jun 0300 [redacted]

Hematology (OPC)			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF.
WBC	16.6	4.8-10.8 x 10³	Color		N/A	RPR		Negat
RBC	2.55	4.7-6.1 x 10⁶	App		N/A	Mono		Negat
Hgb	6.8	14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative	Microbiology		
Hct	21.5	42-52% (M) 37-47% (F)	Bili		Negative	Source		
MCV	84.1	80-94 fl (M) 81-99 fl (F)	Ket		Negative	Gram Stain		
Plt	103	130-500 x 10³ verified	SG		N/A	Occ Bld		No
Lymph %	13.7	20.5-51.1%	Bld		Negative	H. pylori		No
Manual Differential			pH		N/A	Micro Parasites		
Segs		Mono	Prot		Negative	Malaria		
Bands		Eos	Urob		[illegible]	Fecal P		
Lymph		Baso	Nit		Negative	Other		
Atyp		Iorm	Leuk		Negative	Microscopic Urinal		
RBC Morph			HCG		Negative			
Spun Hematocrit		42-52% (M) 37-47% (F)	CSF			Blood Bank		
			Cell Count			MUST SUBMIT SF 518 W EVERY UNIT REQUEST		
Other			Directigen		Negative	ABO/Rh		

Coagulation Studies			Blood Bank Unit Crossmatch MUST SUBMIT SF 518 WITH EVERY UNIT OF BLOOD REQUESTED		
TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMA
PT		9.8-12.9 secs			
PTT		24-35 secs			
Fibrinogen		200-400			
Other		[illegible]			

COMMENTS: 66-2

REPORTED BY: [redacted] DATE: LAB ID NO.:

ANESTHESIA PLAN OF CARE PREPROCEDURAL ASSESSMENT (Sedation/Anesthesia)

Age 51 DAYS MOS YRS Sex (X) MALE ( ) FEMALE

PROPOSED PROCEDURE: Ex Lap
SURGICAL SERVICE:
NPO SINCE:

VO 1700 yesterday

ASA Physical State 1 2 3 4 5 E
WT: ____ KG/LB HT: ____ IN.
ALLERGIES:

HABITS:
TOBACCO:
ETOH:
DRUGS:

CURRENT MEDICATIONS:
( ) = ordered as premed

( )
( )
( )
( )
( )
( )

PREMEDICATIONS:
None Yes (@ ____ Hrs) /CC
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO

LABORATORY STUDIES:

HB/HCT: ____ / ____
U/A:
OTHER:

Shot while stealing weapon, from US.

PREOPERATIVE
PAST MEDICAL HISTORY/SYSTEMS REVIEW

Cardiovascular:			
Hypertension	N	Y	
Angina	N	Y	
MI	N	Y	
CVA	N	Y	
Other	N	Y	
Pulmonary System:			
Asthma	N	Y	
Bronchitis/URI	N	Y	
COPD	N	Y	
Other	N	Y	
Renal System:			
Acute/Chronic RF	N	Y	
Gastrointestinal:			
Hepatitis	N	Y	
Hiatal Hernia	N	Y	
PUD/GERD	N	Y	
Endocrine System:			
Diabetes	N	Y	
Steriods	N	Y	
Thyroid	N	Y	
Neurological:			
Seizures	N	Y	
Neuropathy	N	Y	
Other	N	Y	
Gynecological :			
Pregnancy	N	Y	
Other Significant Hx:			
	N	Y	
	N	Y	
Familial HX	N	Y	

Unknown

GSW epigastric/(L) shoulder

ASSESSMENT
PAST SURGICAL/ANESTHETIC

PHYSICAL EXAMINATION
BP ___ HR ___ R ___ T ___
Pain Scale 0-10
HEENT - Teeth
Trachea
TMJ/Neck
Oropharnyx
Nares
Unstable
to assess
CHEST: S+A B
CARDIAC: R RR
EXTREMITIES:
IV Access: (L) ankle wb / R neck B.
Ulnar Filling:
BACK: NA
OTHER:

NPO Since

ANESTHETIC PLAN: { } LOCAL { } MAC { } Regional (Specify): ____ (X) General: Mask Intubation

INFORMED CONSENT/COUNSELING STATEMENT: Plans, alternatives and risks of anesthesia including death have been explained to and discussed with the patient/legal guardian.

The patient/legal [redacted] and agrees. Questions answered.
Signed: [redacted] Date: ~~0930~~ 29 May Time: 0930 Hrs

b6-2

POST-ANESTHESIA EVALUATION AND NOTE (NON ASU)
{ } NO APPARENT ANESTHETIC COMPLICATIONS { } OTHER

Signature: ____ Date: ____ Time: ____ Hrs

Identification: (Ward) ____ ICU-1

b6-4 BPW [redacted]

SEDATION KEY:

1. **MINIMAL** (Anxiolysis) Patient responds normally to verbal commands
2. **MODERATE** (conscious sedation) Patient responds purposefully to verbal commands alone or accompanied by light tactile stimulation. Airway assistance is not necessary.
3. **DEEP SEDATION/ANALGESIA.** Patient responds purposefully following repeated or painful stimulation. Airway assistance may be necessary.
4. **ANESTHESIA.** Patient does not respond to painful stimulation.

ANESTHESIA PLAN OF CARE PREPROCEDURAL ASSESSMENT (Sedation/Anesthesia)

Age 51 DAYS MOS YRS Sex (✓) MALE ( ) FEMALE

ASA Physical State 1 2 3 4 5 E
WT: 90 KG/LB HT: ____ IN.
ALLERGIES: unknown

PROPOSED PROCEDURE: I+D (L) shoulder + subscapular/p
SURGICAL SERVICE: ORTHO
NPO SINCE: NPO - since admission

HABITS:
TOBACCO: unknown
ETOH: ____
DRUGS: ____

CURRENT MEDICATIONS:
( ) = ordered as premed

( ) Dopamine gtt 3mcg/kg/min
( ) Propofol 15mcg/kg/min
( ) ____
( ) ____
( ) ____
( ) ____

PREMEDICATIONS:
None Yes (@ ____ Hrs) /CC
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO

LABORATORY STUDIES:
HB/HCT: 30.3/9.4
U/A: ____
OTHER: ____

124 | 107 | 14 < 133
3.8 | 24 | 1.3
PT 21.2

PREOPERATIVE
PAST MEDICAL HISTORY/SYSTEMS REVIEW

Cardiovascular:
- Hypertension N Y
- Angina N Y
- MI N Y
- CVA N Y
- Other N Y

Pulmonary System:
- Asthma N Y
- Bronchitis/URI N Y
- COPD N Y
- Other N Y

Renal System:
- Acute/Chronic RF N Y

Gastrointestinal:
- Hepatitis N Y
- Hiatal Hernia N Y
- PUD/GERD N Y

Endocrine System:
- Diabetes N Y
- Steriods N Y
- Thyroid N Y

Neurological:
- Seizures N Y
- Neuropathy N Y
- Other N Y

Gynecological :
- Pregnancy N Y NA

Other Significant Hx:
- N Y
- N Y

Familial HX N Y unknown

Currently hypotensive unknown

Ventilated

CVO 0.5mg/kg/hr
Renal Dopa

ASSESSMENT
PAST SURGICAL/ANESTHETIC
S/P Exlap (R) hemicolectomy
Cholecystectomy
partial hepatectomy

PHYSICAL EXAMINATION
BP 92/27 HR 129 R 16 T 99.2 @0600
Pain Scale 0-10 ____
HEENT - Teeth intact
Trachea midline
TMJ/Neck ____
Oropharnyx 8.0 ETT 25cm
Nares ____
CHEST: Course (R) =
CARDIAC: RRR (-) S T
EXTREMITIES: ____
IV Access: ____
Ulnar Filling: ____
BACK: ____
OTHER: ____

Sal
JO
FI

NPO Since ____

OSW to (L) clavicle exit wound (R) scapula; OSW to sternum exit wound (R) pelvis

ANESTHETIC PLAN: { } LOCAL { } MAC { } Regional (Specify): ____ { } General: Mask Intubation

INFORMED CONSENT/COUNSELING STATEMENT: Plans, alternatives and risks of anesthesia including death have been explained to and discussed with the patient/legal guardian.

The patient/legal guardian seems to understand and agrees. Questions answered.
Signed: [redacted] CRNA Date: 5-31-03 Time: 0915 Hrs

66-2

POST-ANESTHESIA EVALUATION AND [redacted] (NON ASU)
{ } NO APPARENT ANESTHETIC COMPLICATIONS { } OTHER

Signed: ____ Date: ____ Time: ____ Hrs

Patient Identification: (Ward) ____

EPN # [redacted]

66-4

SEDATION KEY:
1. **MINIMAL** (Anxiolysis) Patient responds normally to verbal commands
2. **MODERATE** (conscious sedation) Patient responds purposefully to verbal commands alone or accompanied by light tactile stimulation. Airway assistance is not necessary.
3. **DEEP SEDATION/ANALGESIA.** Patient responds purposefully following repeated or painful stimulation. Airway assistance may be necessary.
4. **ANESTHESIA.** Patient does not respond to painful stimulation.

ANESTHESIA PLAN OF CARE PREPROCEDURAL ASSESSMENT (Sedation/Anesthesia)

Age 51 **DAYS MOS YRS** **Sex ( ) MALE ( ) FEMALE**

ASA Physical State 1 2 3 4 5 E
WT: 90 KG/LB HT: ____ IN.
ALLERGIES: Unknown

PROPOSED PROCEDURE: Exp lap
SURGICAL SERVICE: GS
NPO SINCE: Since ADM

HABITS:
TOBACCO: ____
ETOH: ____
DRUGS: ____

CURRENT MEDICATIONS:
( ) = ordered as premed

( ) Zantac
( ) Zosyn
( ) Enoxaparin
( ) Levophed prn pressor
( ) Dopamine
( ) ____

PREMEDICATIONS:
None Yes (@ ____ Hrs) /CC
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO

LABORATORY STUDIES:
HB/HCT: 9 / 29
U/A: ____
OTHER: ABG

1130 312 Pt 7.43/40
13.2 WBC 40/27
3.4 RBC
140/106/41 108
3.1/25/2.4

PREOPERATIVE
PAST MEDICAL HISTORY/SYSTEMS REVIEW

Cardiovascular:			
Hypertension	N	Y	
Angina	N	Y	
MI	N	Y	
CVA	N	Y	
Other	N	Y	
Pulmonary System:			
Asthma	N	Y	
Bronchitis/URI	N	Y	
COPD	N	Y	
Other	N	Y	on ventilator c̄ ↓ SaO2 70 c̄ suctioning TV 750 (SIMV) RR 12 FiO2 40 PEEP 5
Renal System:			
Acute/Chronic RF	N	Y	Renal Dysfx
Gastrointestinal:			
Hepatitis	N	Y	
Hiatal Hernia	N	Y	
PUD/GERD	N	Y	
Endocrine System:			
Diabetes	N	Y	
Steriods	N	Y	
Thyroid	N	Y	
Neurological:			
Seizures	N	Y	
Neuropathy	N	Y	
Other	N	Y	
Gynecological :			
Pregnancy	N	Y	
Other Significant Hx:			
	N	Y	
	N	Y	
Familial HX	N	Y	

ASSESSMENT
PAST SURGICAL/ANESTHETIC

PHYSICAL EXAMINATION Sat 94% on 4 L
BP 121/84 HR 118 R 24 T 99
Pain Scale 0-10 ____
HEENT - Teeth ____
Trachea ____
TMJ/Neck ____
Oropharnyx ____
Nares ____
CHEST: ____
CARDIAC: ____
EXTREMITIES: ____
IV Access: ____
Ulnar Filling: ____
BACK: ____
OTHER: ____

NPO Since ____

ANESTHETIC PLAN: { } LOCAL { } MAC { } Regional (Specify): ____ { } General: Mask Intubation

INFORMED CONSENT/COUNSELING STATEMENT: Plans, alternatives and risks of anesthesia including death have been explained to and discussed with the patient/legal guardian.

The patient/legal guardian seems to understand and agrees. Questions answered.
Signed: ____ Date: ____ Time: ____ Hrs

POST-ANESTHESIA EVALUATION AND NOTE (NON ASU)
{ } NO APPARENT ANESTHETIC COMPLICATIONS { } OTHER

Signed: ____ Date: ____ Time: ____ Hrs

SEDATION KEY:

1. **MINIMAL** (Anxiolysis) Patient responds normally to verbal commands
2. **MODERATE** (conscious sedation) Patient responds purposefully to verbal commands alone or accompanied by light tactile stimulation. Airway assistance is not necessary.
3. **DEEP SEDATION/ANALGESIA.** Patient responds purposefully following repeated or painful stimulation. Airway assistance may be necessary.
4. **ANESTHESIA.** Patient does not respond to painful stimulation.

Patient Identification: (Ward) ____

EPW [redacted] 66-2

ANESTHESIA PLAN OF CARE PREPROCEDURAL ASSESSMENT (Sedation/Anesthesia)

Age 50 DAYS MOS YRS Sex ( ) MALE ( ) FEMALE

ASA Physical State 1 2 3 4 5 E
WT: 100 KG LB HT: ____ IN.
ALLERGIES: NKA

PROPOSED PROCEDURE: Exp Lap, Trach, Feeding Tube
SURGICAL SERVICE: ____
NPO SINCE: ____

HABITS:
TOBACCO: ____
ETOH: ____
DRUGS: ____

CURRENT MEDICATIONS:
( ) = ordered as premed

( ) Dopamine Vancomycin
( ) Fent drip Albuterol/Ipratr
( ) Zosyn
( ) Zantac
( ) Hep SQ
( ) versed drip
vecuronium drip

PREMEDICATIONS:
None Yes (@ ____ Hrs) /CC
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO
____ . ____ mg IV IM PO

LABORATORY STUDIES:

HB/HCT: ____ / ____
U/A: ____
OTHER: ____

6/14
(19) 8.7 / 348 / 28.2

Alb - 1.0, LFTs ↑
139 / 136 / 104 / 35
3.5 / 25 / 2.9

7.47/30/72/20/5/95%

PREOPERATIVE
PAST MEDICAL HISTORY/SYSTEMS REVIEW

Cardiovascular:			
Hypertension	N	Y	s/p gunshot wound
Angina	N	Y	to Med → (R)
MI	N	Y	colectomy
CVA	N	Y	
Other	N	Y	Developed Resp distress
Pulmonary System:			+ A F-b on POD #3
Asthma	N	Y	Gas Nevertheless
Bronchitis/URI	N	Y	
COPD	N	Y	POD #5 → Trach, Wound
Other	N	Y	ex
Renal System:			
Acute/Chronic RF	N	Y	Hx oliguria & PVCs
Gastrointestinal:			
Hepatitis	N	Y	
Hiatal Hernia	N	Y	
PUD/GERD	N	Y	
Endocrine System:			
Diabetes	N	Y	
Steriods	N	Y	
Thyroid	N	Y	
Neurological:			
Seizures	N	Y	
Neuropathy	N	Y	
Other	N	Y	
Gynecological :			
Pregnancy	N	Y	
Other Significant Hx:			
	N	Y	
	N	Y	
Familial HX	N	Y	

ASSESSMENT
PAST SURGICAL/ANESTHETIC
(1) Exp Lap June 5
(2) Wound Exploration

PHYSICAL EXAMINATION
BP 141/60 HR 103 R ____ T ____
Pain Scale 0-10 ____
HEENT - Teeth ____
Trachea OETT
TMJ/Neck NL
Oropharnyx 7.0
Nares 26cm @ lip
CHEST: ____
CARDIAC: S.S
EXTREMITIES: ____
IV Access: (R) Subclavian 3 lines
Ulnar Filling: ____
BACK: ____
OTHER: ____
vent 700/15/PSG 10/60%

NPO Since ____

ANESTHETIC PLAN: { } LOCAL { } MAC { } Regional (Specify): ____ { } General: Mask Intubation

INFORMED CONSENT/COUNSELING STATEMENT: Plans, alternatives and risks of anesthesia including death have been explained to and discussed with the patient/legal guardian.

The patient/legal guardian seems to understand and agrees. Questions answered.
Signed: ____ Date: ____ Time: ____ Hrs

POST-ANESTHESIA EVALUATION AND NOTE (NON ASU)
{ } NO APPARENT ANESTHETIC COMPLICATIONS { } OTHER

Signed: ____ Date: ____ Time: ____ Hrs

Patient Identification: (Ward) ____

SEDATION KEY:

1. **MINIMAL** (Anxiolysis) Patient responds normally to verbal commands
2. **MODERATE** (conscious sedation) Patient responds purposefully to verbal commands alone or accompanied by light tactile stimulation. Airway assistance is not necessary.
3. **DEEP SEDATION/ANALGESIA.** Patient responds purposefully following repeated or painful stimulation. Airway assistance may be necessary.
4. **ANESTHESIA.** Patient does not respond to painful stimulation.

Pt [redacted] 66-4

(+CW1)

MEDICAL RECORD - ANESTHESIA

For use of this form, see AR 40-66; the proponent agency is u. SG

ANESTHETIC AGENTS AND DRUGS — CONTINUOUS/REPEATED DRUGS SPECIFY UNITS - MG/MCG/ML, "I" = CONSTANT INFUSION

DRUG	(Units)												
STP	(mg)	450			50								
Midaz	(mg)	2.5											
Sux	(mg)	120											
Fentanyl	(mcg)				50 /	100/100			50			50	
MgSO4 (from BR)	(mg)	3											
Rocuronium	(mg)		50				25				10		
VOLAT AGENT Forane	% del	2.0	2.0	2.0	1.5	2.25	2.25	1.25	.5	1.25	1.25	.75	
	% e.t.												
AIR	L/Min												
N2O	L/Min												
O2	L/Min	10	2	2	2	2	2	2	2	2	2	2	

SINGLE DOSE DRUGS-MARK ON GRID WITH NUMBERS & ENTER IN REMARKS

TOTALS	TOTAL EBL
500	800
215	
	TOTAL URINE
500/0	900

FLUIDS - SUMMARY
CRYSTALLOID- 6000 LR
COLLOID- 1000 - Hespan
BLOOD- Ø

FLUIDS

LINE site (R) Arm	☐ Warmed		1000		2000			3000			3500
(R) Arm	☐ Warmed		500 X	hespan	1000	X		800			800
	☐ Warmed										
	☐ Warmed										

LOSSES: EST BLOOD LOSS
URINE - 400 — 570 — 700

PHYS STATUS 1 2 3 4 5 (E)

BODY WEIGHT- 90 (KG) LB

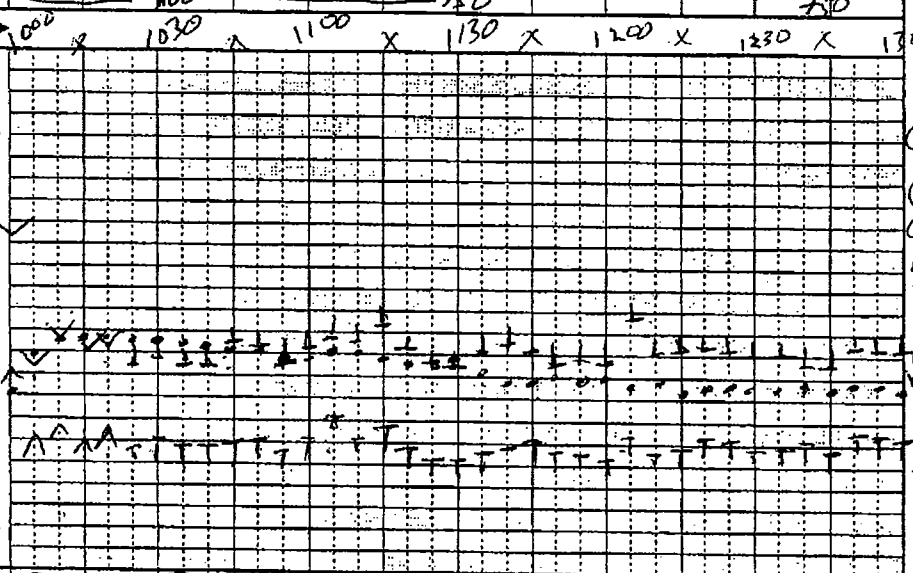
HEMATOCRIT:

INITIAL DATA: BP- 155/92 HR- 81

EQUIP CHECK OK?- (Y) N

PATIENT OK for PROCEDURE? TIME- 1115

SYMBOLS: BP by cuff V ∧; Heart rate ●; Resp rate; BR (transduced); TOURNIQUET T—T; ANES- X-X; PROC-⊙-Ø



VENTIL

VT - ml	810	800	800	790	750	800	810	790	790	780	740	760
f - breaths/min	10	10	10	10	10	8	8	8	8	8	8	8
Peak inf pres / PEEP	—	18	19	19	19	19	19	18	18	19	19	19
MODE - S(pon), A(ssist), C(on)	C/S	C	C	C	C	C	C	C	C	C	C	C

MONITORS/ACCESSORIES

X BP/Auto Cuff	X ET CO2 (torr)	(Ø)	30	30	29	29	30	30	29	31	32	31	34
BP/oth	X FIO2 (Frac or %)	1.0	1.0	1.0	1.0	1.0	.72	1.0	1.0	1.0	1.0	1.0	1.0
X ART line	X SpO2 (%)	100	100	100	100	100	100	100	100	100	100	100	100
X Steth- PC/ES	X ECG	ST	ST	ST	ST	ST	SR	SR	SR	SR	SR	SR	SR
X Gas analyzer	X TEMP-site Skin	(Esophag)		98		98	98	98	97	97	97	97	97
	N-M Block (T/4)	0/4	4/4	0/4		1/4	2/4		0/4	0/4	2/4	3/4	4/4
Warming blkt													
Conv warmer													

Mark with letters & symbols, explain under REMARKS — EVENTS (A) (B) (C) (D) (E) Position

REMARKS — Code drugs with numbers, events with letters

(A) PT in EMT. ID NPO vd/ chart reviewed. IV 18g (L) antecub (B) ET
(C) PT to OR, monitors placed.
(D) I.V.: RSIE cricoid pressure
(E) A-line placed
(F) (R) 16g IV placed antecub.
1105 Induction 3g IV Met, ondansetron 500 IV begun
1115 [redacted] CRNA break
66-2
1215 ABG 7.195/46.9/25.5/20, BE-10 HCT 32
1246 7.176/45.1/225/19/15 BE-11 Amp Bicarb given/↑TV

RECOVERY AT: PACU (ICU) ____ (Spec)
OTHER Stable/2V
CONDITION: on O2
RESP: Vent SpO2- 100
BP- 144/96 HR- 92

ANESTHESIA/PROCEDURE TIMES

ANES	Start	Room	En
	0940	0955	1400
PROC	Ready	Begin	En
	1005	1021	1345

PROCEDURES and CPT Codes: I & D Debridement L shoulder wound. Ex Lap (R) hemicolectomy / partial hepatectomy / chole

PATIENT IDENTIFICATION: Typed or written entries: Name, Grade/Rate, Medical facility

EPW # [redacted] 66-4

ANESTHETIC TECHNIQUES: Describe block technique under Remarks
Miller #2 / 8.0 ETT / Grade I view
Resp / Dental / DLX1 / VC x1, tube passed through clear cords 5 ddl

AIRWAY MANAGEMENT: Intubation route, blade, technique, comments
(+) = BBS; (+) ETCO2 >30x3; eyes taped; tube taped @ teeth @ 25cm; pressure points pad & padded

SURGEONS: [redacted]

ANESTHETISTS: [redacted] M.D. MC

PROCEDURE LOCATION: OR #1

DATE: 29 May 03

66-2

MEDICAL RECORD — ANESTHESIA

ANESTHETIC AGENTS AND DRUGS	DOSE	Units	
Fentanyl		mcg	100
Rocuronium		mg	5
		( )	
		( )	
		( )	
		( )	
VOLAT AGENT	Forane	% del	1.0
		% e.t.	
	AIR	L/Min	
	N2O	L/Min	
	O2	L/Min	2 2 10 10

CONTINUOUS / REPEATED DRUGS SPECIFY UNITS – MG / MCG / ML. – I"=CONSTANT INFUSION

SINGLE DOSE DRUGS – MARK ON GRID WITH NUMBERS & ENTER IN REMARKS

FLUIDS		
LINE site (L) arm	☐ Warmed	3000
(R) arm	☐ Warmed	850
	☐ Warmed	
	☐ Warmed	

LOSSES		
	EST BLOOD LOSS	
	URINE –	750

TOTALS	
	TOTAL FLUID
	TOTAL URINE

FLUIDS – SUMMARY

CRYSTALLOID–

COLLOID–

BLOOD–

REMARKS –

Code drugs with numbers, events with letters

(A) (L) shoulder bupivacaine

Dr [redacted]

66-2

PHYS STATUS: 1 2 3 4 5 E

BODY WEIGHT: KG / LB

HEMATOCRIT:

INITIAL DATA: BP – HR –

COMP CHECK: OK?– Y N

PATIENT BROWSER: OK for PROCEDURE? TIME–

TIME → 1100 X 1330 X

SYMBOLS:

BP by cuff ∨ ∧

Heart rate ●

Resp rate

BP (transduced)

TOURNIQUET T – ✗

ANES– X-X

PROC–⊙–Ø

220 200 180 160 140 120 100 80 60 40 20

VT – ml	580 580 400 450
f – breaths/min	12 12 14 14
Peak inf pres / PEEP	19 19 — —
MODE– S(pon), A(ssist), C(on)	C C S C
BP/Auto Cuff	
BP / oth	
ART line	
Steth- PC/ES	
Gas analyzer	
Warming blkt	
Conv warmer	

ET CO2 (torr)	29 28 38 45
FIO2 (Frac or %)	1.0 1.0 1.0 .60
SpO2 (%)	100 100 100 100
ECG	SR SR SR SR
TEMP- site	97 97 97 X
N-M Block (T/4)	4/4 4/4

Mark with letters & symbols, explain under REMARKS

EVENTS

Position →

RECOVERY AT

PACU ICU _____ (Specify)

OTHER _____

CONDITION:

RESP– SpO2–

BP– HR–

See previous page

ANESTHESIA & PROCEDURE TIME

	Start	Room	End
ANES			
PROC	Ready	Begin	End

PROCEDURES and CPT Codes

See previous page

ANESTHETIC TECHNIQUES: Describe block technique under Remarks

AIRWAY MANAGEMENT: [redacted] ...ode, blade, technique, comments

previous page

PATIENT IDENTIFICATION– Typed or written entries: Name, Grade/Rate, Medical facility

EPW # [redacted] 66-4

SURGEONS:

ANESTHETISTS: [redacted] M.D.

66-2 [redacted] IC, M

PROCEDURE LOCATION OR #1

DATE 29 May 03

PAGE 2 OF

CSW - EPW

Consulted Dr. [redacted] (anesthesia) b6-2

Unknown allergies

MEDICAL RECORD — ANESTHESIA

DRUG	(Units)															TOTALS
Midazolam	(mg)	5														5
Fentanyl	mcg	250														250
Cisatracurium		10		10				10						20		60
Ancef	mg						5	5	5					5		20
Propofol	(mg)	40	10											30		80

CONTINUOUS / REPEATED DRUGS SPECIFY UNITS – MG / MCG / ML, "I" = CONSTANT INFUSION

ISOLAT AGENT	1.50	% del	0.6	0.6	1.0	0.7	1.0	1.0	1.0	1.3	1.5	1.2	1.1	0.6	1.0	X
		% e.t.														
AIR		L/Min														
N2O		L/Min														
O2		L/Min	2	2	2	2	2	2	2	2	2	2	2	2	2	2

SINGLE DOSE DRUGS – MARK ON GRID WITH NUMBERS & ENTER IN REMARKS: P P

LINE site	18 (R) 17	☐ Warmed	LR #2	400	500	525	550
14G (L) EJ		☐ Warmed	LR #1	800	1000	1100	1300
Dopamine gtt		☐ Warmed	3 mcg/kg/min				
		☐ Warmed					

LOSSES		
EST BLOOD LOSS		Ø
URINE –		100

FLUIDS – SUMMARY: CRYSTALLOID – LR = 2000 cc; COLLOID – Ø; BLOOD – Ø

REMARKS – Code drugs with numbers or letters

1. Pre-op assessment
2. transported monitors + BVV.
3. Room, mon, O_2, (R) radial A-line x 3 attempts
4. (L) EJ 14G-PIV
5. Lidocaine 1% 1:200K Epi into surgical site
6. Re-cert O_2 sensor
7. Infusing slow IVF
8. transferred to Center, BVV & monitors
9. Report to Ri

Vent settings 14 800 mL TV FiO2 50%

PHYS STATUS: 1 2 (3) 4 5 E

BODY WEIGHT: 90 (KG) LB

HEMATOCRIT: 30.3

INITIAL DATA: BP – 92/77; HR – 129

COMP CHECK: OK? – (Y) N

PATIENT RECHECK: OK for PROCEDURE? [redacted] b6-2; TIME – 0930

TIME → 0945 1000 30 1100 30 1200 30

SYMBOLS: BP by cuff ∨ ∧; Heart rate ●; Resp rate; BP (transduced); TOURNIQUET T – ✗; ANES – X-X; PROC – ⊙ – Ø

	VT – ml	—	790	800	790	890	820	860	880	850	840	890	890
	f – breaths/min	—	10	8	8	7	8	8	9	9	9	8	8
	Peak inf pres / PEEP	—	29	29	29	28	29	29	29	29	29	28	28
	MODE – S(pon), A(ssist), C(on)	S	C	C	C	C	C	C	C	C	C	C	C
BP/Auto Cuff	ET CO2 (torr)	40	35	36	36	36	34	34	36	32	31	31	32
BP / oth	FIO2 (Frac or %)	0.70	0.70	0.54	.53	0.54	0.53	.53	.68	.69	.69	0.69	0.69
ART line	SpO2 (%)	98	98	100	100	100	100	100	100	100	100	100	100
Steth- PC/ES	ECG	ST						ST	ST	ST	ST	ST	ST
Gas analyzer	TEMP- site	Available											
	N-M Block (T/4)	0/4 – 4/4						4/4	4/4		4/4		4/4
Warming blkt	Blankets		X1										
Conv warmer													

Mark with letters & symbols, explain under REMARKS

EVENTS: (1) (2) (3) (4) (5) (6) (7)

Position: OR, Gr

RECOVERY AT: 1250; PACU / ICU 1; OTHER; CONDITION: Stable; RESP – 14; SpO2 – 98; BP – 149/99; HR – 114

	Start	Room
ANES	0930	0950
PROC	Ready	Begin
	1040	1055

PROCEDURES and CPT Codes: (1) shoulder debridement c subscap r/p

ANESTHETIC TECHNIQUES: Describe block technique under Remarks: GETA

AIRWAY MANAGEMENT: Intubation route, blade, technique, comments: 8.0 ETT 23cm @ lip in place from ICU

PATIENT IDENTIFICATION – Typed or written entries: Name, Grade/Rank, Medical facility: EPW # [redacted] ICU1 b6-4

SURGEONS: [redacted]

ANESTHESIOLOGIST: [redacted] b6-2 CRNA

PROCEDURE LOCATION: 7

DATE: 31 May 03

PAGE 1 of 1

WAMC OP 376 REVISED 1 Jan 99

MEDCOM - 9613

[redacted] CPT CRNA

MEDICAL RECORD — ANESTHESIA

ANESTHETIC AGENTS AND DRUGS		
CONTINUOUS / REPEATED DRUGS SPECIFY UNITS – MG / MCG / ML, "I"=CONSTANT INFUSION		
Fentanyl	(u)	32 2 3
Norcuron	(mg)	32 5
(FERRED)	(g) (3)	
Nitroprusside	(mcg)	
Ephedrine	(mg)	5 10
VOLAT AGENT Forane	% del	4.4 1.0 – .6 – .5 X
	% e.t.	
AIR	L/Min	
N2O	L/Min	
O2	L/Min	10 2 2 – 2 – 2 – 2 –
SINGLE DOSE DRUGS – MARK ON GRID WITH NUMBERS & ENTER IN REMARKS		

TOTALS	
1800	10mg
TOTAL EBL	min
TOTAL URINE	75

FLUIDS		
LINE site LR	☐ Warmed	700 – 800
	☐ Warmed	
	☐ Warmed	
	☐ Warmed	
LOSSES	EST. BLOOD LOSS	
1150	URINE –	75

FLUID – SUMMARY	
CRYSTALLOID–	800
COLLOID–	0
BLOOD–	0

REMARKS– Code drugs with numbers, events with letters

1826 7.44 | 110 / 39 | 27
WBC 13.1
RBC 9.9
Hb/Hct 10.3/34.1
PLT 403

136 | 105 | 40
3.2 | 25 | 2.2 (2)

PHYS STATUS: 1 2 3 4 5 E

BODY WEIGHT: 100 KG LB

HEMATOCRIT: 9/29

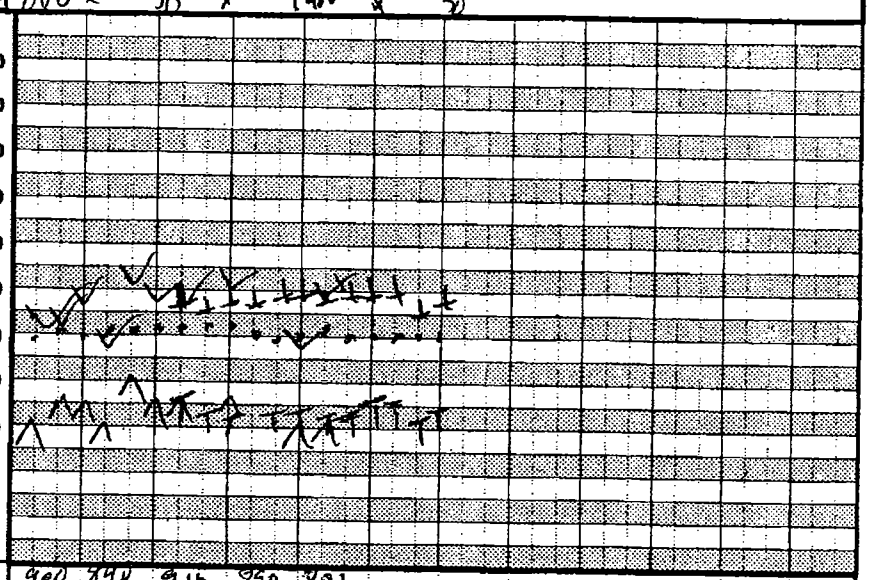
INITIAL DATA: BP– 121, 84 HR– 118

SOUP CHECK: OK?– Y N

PATIENT RECORDS: OK for PROCEDURE? Y TIME– 1730

SYMBOLS: BP by cuff ∨ ∧; Heart rate ●; Resp rate; BP (transduced); TOURNIQUET T – ✓; ANES– X-X; PROC– ⊙ – Ø

TIME → 8 9 10 11 12 1 2



VT – ml	900	840	910	850	800
f – breaths/min	10	9	8	8	8
Peak inf pres / PEEP	35	35	33	32	31
MODE– S(pon), A(ssist), C(on)	C	C	C	C	C
ET CO2 (torr)		31	29	31	31
FIO2 (Frac or %)	.67	.67	.65	.69	.72
SpO2 (%)	98	98	99	100	100
ECG	ST	ST	ST	ST	ST
TEMP- site SKIN			99		
N-M Block (T/4)	4/4	0/4	3/4	0/4	4/4

MONITORS / ACCESSORIES: BP/Auto Cuff; BP / oth; ART line; Steth- PC/ES; Gas analyzer; Warming blkt; Conv warmer

Mark with letters & symbols, explain under REMARKS — EVENTS Position → C

RECOVERY AT	ICU #1
PACU / ICU / OTHER	ICU (Specify)
CONDITION:	97 Sed
RESP– 101	SpO2–
BP– 98/57	HR– 14

ANESTHESIA TIMES	Start	Room	End
ANES	1730	1805	1930
PROC	Ready	Begin	End
	0810	1820	1910

PROCEDURES and CPT Codes: Exp lap

ANESTHETIC TECHNIQUES: Describe block technique under Remarks — 1810

ETT 25cm @ tube holder.

AIRWAY MANAGEMENT: Intubation route, blade, technique, comments: Smooth Inhal Induction via ETT

PATIENT IDENTIFICATION – Typed or written entries: Name, Grade/Rate, Medical facility

EPW # [redacted] b6-4 ICU

SURGEONS: [redacted] b6-2

ANES: [redacted] MAJ CRNA

PROCEDURE LOCATION: OR #1

DATE: 7 Jun 03

PAGE 1 OF 1

MEDICAL RECORD – ANESTHESIA

WAMC OP REVISED 1 Ja 9

MEDCOM - 9614

*U.S. GPO: 2002-729-180/40137

MEDICAL RECORD — ANESTHESIA

ANESTHETIC AGENTS AND DRUGS

CONTINUOUS / REPEATED DRUGS SPECIFY UNITS – MG / MCG / ML, "I"=CONSTANT INFUSION

DRUG	(Units)	
Zemuron	(mg)	30
	( )	662
	( )	
	( )	200/200 [redacted] 100 100 100 100
Neosyn	(mcg)	
	( )	

VOLAT AGENT		
FORANE	% del / % e.t.	0.6 0.6 .5 .5 .5 .6 .4 .4 .4 X
AIR	L/Min	
N2O	L/Min	
O2	L/Min	8 2 2 2 ~ 2 ~ 2 ~ 2 ~ 2 ~ 2 ~ 2 ~ 8

SINGLE DOSE DRUGS – MARK ON GRID WITH NUMBERS & ENTER IN REMARKS: 1630 – trach #8

FLUIDS

LINE site		
R SC 3L	☐ Warmed	LR → LR2 Albu / Hespan, NS #3 (300 NS)
	☐ Warmed	
	☐ Warmed	
	☐ Warmed	

LOSSES EST BLOOD LOSS / URINE –

TOTALS

TOTAL FLUID: 100

TOTAL URINE: 15 Jn

FLUIDS – SUMMARY

CRYSTALLOID – 2300

COLLOID – 500

BLOOD – Ø

PHYS STATUS: 1 2 (3) 4 5 E

BODY WEIGHT: 100 (KG) LB

HEMATOCRIT:

INITIAL DATA: BP – 152/53; HR – 100

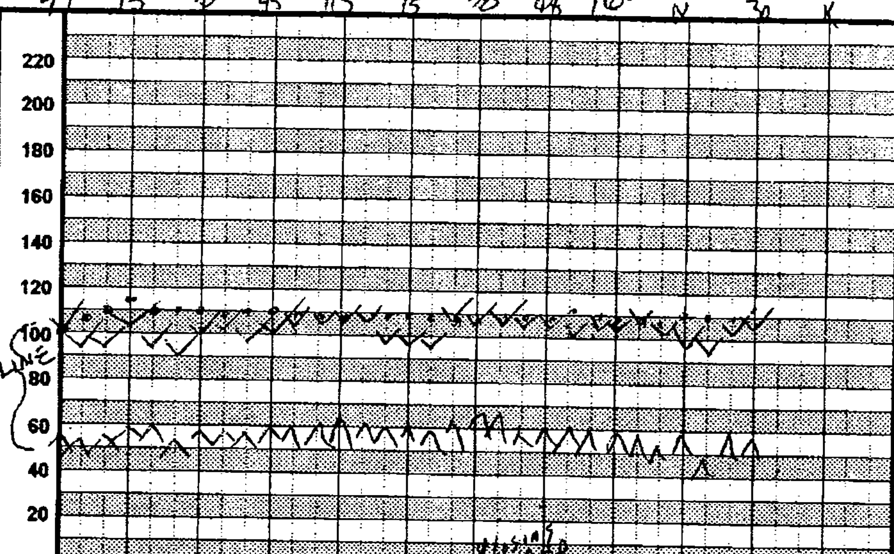
EQUIP CHECK: (OK?) Y N

PATIENT RECHECK: OK for PROCEDURE? TIME – 1400

TIME → 1400 15 30 45 1500 15 30 45 1600 15 30 X

SYMBOLS: BP by cuff ∨ ∧; Heart rate ●; Resp rate; BP (transduced); TOURNIQUET T – ✗; ANES – X-X; PROC ⊙ – Ø

A-LINE



REMARKS — Code drugs with numbers, events with letters

1350 DC'D IV MEDS Dopamine Versed Morphine
From Ventilator To Ambu
Trans monitors → OR #1
1405 OR #1 monitors ↑
A Ambu → Vent'R
Lifted → OR Table
Pulm toilet x 4 c̄ 5cc NS + multiple puffs Albuter
1455 A NGT confirmed Surg
1505 Bunion relieves
PAP 40 SvO2 98/67 (?)
occ. aberrant beats surgeon aware

VENTILATION

VT – ml	870	690	650	680	750	750	730	740	800	850
f – breaths/min	12	16	14	14	12	12	14	13	13	13
Peak insp pres / PEEP	50	49/44	42	39	40/10	39/10	43/10	43/10	43/10	40/10
MODE – S(pon), A(ssist), C(on)	C	C	C	C	C	C	C	C	C	C

MONITORS / ACCESSORIES: ✓ BP/Auto Cuff; BP / oth; ART line; ✓ Steth – PC/ES; Gas analyzer; Warming blkt; Conv warmer

ET CO2 (torr)	33	32/30	32	32	34	34	32	31	30	30
FIO2 (Frac or %)	.84	.84	.84	.84	.85	.84	.85	.85	.85	.85
SpO2 (%)	90	78/92 98	98	97	98	98	97	99	99	94
ECG	ST	ST	ST	ST	ST	ST	ST	ST	ST	ST
TEMP – site	IVA CABLE									
N-M Block (T/4)										

Mark with letters & symbols, explain under REMARKS — EVENTS / Position → (supine) slight

RECOVERY AT 1653

PACU ICU #1 (Specify) OTHER

CONDITION: 96?

RESP – 15 SpO2 – 95%

BP – 132/73 HR – 117

ANESTHESIA / PROCEDURE TIME

	Start	Room	End
ANES	1350	1405	1700

	Ready	Begin	End
PROC	1420	1426	1635

PROCEDURES and CPT Codes: Ex Lap, Feeding tube, Trach

ANESTHETIC TECHNIQUES: Describe block technique under Remarks — GETA

AIRWAY MANAGEMENT: Intubation route, blade, technique, comments — ARRIVED INTUB'D 66-2

SURGEONS: [redacted]

ANES: [redacted] MAJ, Cre

PATIENT IDENTIFICATION – Typed or written entries: Name, Grade/Rate, Medical facility

[redacted] 66-4

Recover ICU #1

PROCEDURE LOCATION: OR #1

DATE: 14 Jun 03

PAGE 1 OF

MEDICAL RECORD – ANESTHESIA

WAMC OP 376 REVISED 1 Jan 99

MEDCOM - 9615

*U.S. GPO: 2002-729-180/40137

66-2 all

518-123 NSN 7540-00-634-4158

MEDICAL RECORD

BLOOD OR BLOOD COMPONENT TRANSFUSION

SECTION I – REQUISITION

COMPONENT REQUESTED *(Check one)*

- [x] RED BLOOD CELLS
- [ ] FRESH FROZEN PLASMA
- [ ] PLATELETS *(Pool of _____ units)*
- [ ] CRYOPRECIPITATE *(Pool of _____ units)*
- [ ] Rh IMMUNE GLOBULIN
- [ ] OTHER *(Specify)* _____

VOLUME REQUESTED *(If applicable)* 1 unit ML

REMARKS:

TYPE OF REQUEST *(Check ONLY if Red Blood Cell Products are requested.)*

- [x] TYPE AND SCREEN
- [x] CROSSMATCH

DATE REQUESTED: 2 June

DATE AND HOUR REQUIRED: ASAP

KNOWN ANTIBODY FORMATION/TRANSFUSION REACTION *(Specify)*

IF PATIENT IS FEMALE, IS THERE HISTORY OF:

RhIG TREATMENT? DATE GIVEN: _____

HEMOLYTIC DISEASE OF NEWBORN? _____

REQUESTING PHYSICIAN *(Print)*: Dr [redacted]

DIAGNOSIS OR OPERATIVE PROCEDURE: GSW

I have collected a blood specimen on the below named patient, verified the name and ID No. of the patient and verified the specimen tube label to be correct.

SIGNATURE OF VERIFIER: [redacted]

DATE VERIFIED: 2 June 2003

TIME VERIFIED: 0740

SECTION II – PRE-TRANSFUSION TESTING

W [redacted] 7

TRANSFUSION NO.

PATIENT NO.

TEST INTERPRETATION

ANTIBODY SCREEN	CROSSMATCH
N/A	Comp

[ ] CROSSMATCH NOT REQUIRED FOR THE COMPONENT REQUESTED

PREVIOUS RECORD CHECK: [ ] RECORD [x] NO RECORD

SIGNATURE OF PERSON PERFORMING TEST: [redacted]

DONOR	RECIPIENT
ABO O	ABO O
Rh Pos	Rh Pos

REMARKS: Exp date! 03 June 03

SECTION III – RECORD OF TRANSFUSION

PRE-TRANSFUSION DATA

INSPECTED AND ISSUED BY (Signature): [redacted]

AT *(Hour)* 0856 ON *(Date)* 2 June 03

IDENTIFICATION

I have examined the Blood Component container label and this form and I find all information identifying the container with the intended recipient matches item by item. The recipient is the same person named on this Blood Component Transfusion Form and on the patient identification tag.

1st VERIFIER: [redacted]

2nd VERIFIER: [redacted] Ozan Cô

TEMP. [redacted] PULSE 132 BP 161/91

DATE OF TRANSFUSION: 2 June

TIME STARTED: 0900

POST-TRANSFUSION DATA

AMOUNT GIVEN: 1 unit ML

TIME/DATE COMPLETED/INTERRUPTED: 2 June @ 1000

REACTION: [x] NONE [ ] SUSPECTED

TEMPERATURE	PULSE	BLOOD PRESSURE
98.5	124	134/79

If reaction is suspected—IMMEDIATELY:

1. Discontinue transfusion, treat shock if present, keep intravenous line open.
2. Notify Physician and Transfusion Service.
3. Follow Transfusion Reaction Procedures.
4. Do NOT discard unit. Return Blood Bag, Filter Set, and I.V. Solutions to the Blood Bank.

DESCRIPTION OF REACTION

[ ] URTICARIA [ ] CHILL [ ] FEVER [ ] PAIN

[ ] OTHER *(Specify)*

OTHER DIFFICULTIES *(Equipment, clots, etc.)*

[x] NO [ ] YES *(Specify)*

SIGNATURE OF PERSON: [redacted]

PATIENT IDENTIFICATION—USE EMBOSSER (For typed or written entries give: Name—Last, first, middle; grade; rank; rate; hospital or medical facility)

male

WARD: ICU #1

EPW # [redacted]

66-4

BLOOD OR BLOOD COMPONENT TRANSFUSION

Medical Record

STANDARD FORM 518 (REV. 9-92)
Prescribed by GSA/ICMR, FIRMR (41 CFR) 201-9.202-1

MEDCOM - 9616

Unit #2
CBC 20 p 2nd unit

518-124

NSN 7540-00-634-4159

MEDICAL RECORD

BLOOD OR BLOOD COMPONENT TRANSFUSION

SECTION I – REQUISITION

COMPONENT REQUESTED *(Check one)*

- [x] RED BLOOD CELLS
- [ ] FRESH FROZEN PLASMA
- [ ] PLATELETS *(Pool of _____ units)*
- [ ] CRYOPRECIPITATE *(Pool of _____ units)*
- [ ] Rh IMMUNE GLOBULIN
- [ ] OTHER *(Specify)* _____

VOLUME REQUESTED *(If applicable)* 1 UNIT ML

REMARKS:

TYPE OF REQUEST *(Check ONLY if Red Blood Cell Products are requested.)* 66-2

- [ ] TYPE AND SCREEN -
- [x] CROSSMATCH

DATE REQUESTED 6 JUNE 03

DATE AND HOUR REQUIRED 7 JUNE 0360100

KNOWN ANTIBODY FORMATION/TRANSFUSION REACTION *(Specify)*

IF PATIENT IS FEMALE, IS THERE HISTORY OF:

RhIG TREATMENT? DATE GIVEN: _____

HEMOLYTIC DISEASE OF NEWBORN? _____

REQUESTING PHYSICIAN *(Print)* Dr. [redacted]

DIAGNOSIS OR OPERATIVE PROCEDURE S/P exp, Lap (R) hemicolectomy

I have collected a blood specimen on the below named patient, verified the name and ID No. of the patient and verified the specimen tube label to be correct.

SIGNATURE OF VERIFIER [redacted]

DATE VERIFIED 6 June 2003

TIME VERIFIED 2240

SECTION II – PRE-TRANSFUSION TESTING

[redacted]

TRANSFUSION NO. 2

PATIENT NO. 66-4 [redacted]

DONOR		RECIPIENT	
ABO	O	ABO	O
Rh	Pos	Rh	Pos

TEST INTERPRETATION

ANTIBODY SCREEN	CROSSMATCH
N/A	COMPAT

- [ ] CROSSMATCH NOT REQUIRED FOR THE COMPONENT REQUESTED

PREVIOUS RECORD CHECK:

- [x] RECORD
- [ ] NO RECORD

SIGNATURE OF PERSON PERFORMING TEST [redacted]

DATE 6 Jun 03

REMARKS:

Exp. Date: 10 Jun 03

SECTION III – RECORD OF TRANSFUSION

PRE-TRANSFUSION DATA

INSPECTED AND ISSUED [redacted]

AT *(Hour)* 0015 ON *(Date)* 7 Jun 03

IDENTIFICATION

I have examined the Blood Component container label and this form and I find all information identifying the container with the intended recipient matches item by item. The recipient is the same person named on this Blood Component Transfusion Form and on the patient identification tag.

1st VERIFIER *(Signature)* [redacted] SPC

2 [redacted] MAJ AN

PRE-TRANSFUSION

TEMP. 97.6 PULSE [redacted] BP 102/62

DATE OF TRANSFUSION 7 June 03 TIME STARTED 0020

POST-TRANSFUSION DATA

AMOUNT GIVEN 565 ML

TIME/DATE COMPLETED/INTERRUPTED 7 June 03

REACTION

- [x] NONE
- [ ] SUSPECTED

TEMPERATURE	PULSE	BLOOD PRESSURE
97.6	92	102/67

If reaction is suspected—IMMEDIATELY:

1. Discontinue transfusion, treat shock if present, keep intravenous line open.
2. Notify Physician and Transfusion Service.
3. Follow Transfusion Reaction Procedures.
4. Do NOT discard unit. Return Blood Bag, Filter Set, and I.V. solutions to the Blood Bank.

DESCRIPTION OF REACTION

- [ ] URTICARIA
- [ ] CHILL
- [ ] FEVER
- [ ] PAIN
- [ ] OTHER *(Specify)*

OTHER DIFFICULTIES *(Equipment, clots, etc.)*

- [x] NO
- [ ] YES *(Specify)*

SIGNATURE OF PERSON NOTING ABOVE [redacted]

PATIENT IDENTIFICATION—USE EMBOSSER (For typed or written entries give: Name—Last, first, middle; grade; rank; rate; hospital or medical facility)

SEX male

WARD ICU 1

[redacted] 66-4 ICU #1

BLOOD OR BLOOD COMPONENT TRANSFUSION

Medical Record

STANDARD FORM 518 (REV. 9-92)
Prescribed by GSA/ICMR, FIRMR (41 CFR) 201-9.202-1

MEDCOM - 9617

Medical Record Copy

518-123 NSN 7540-00-634-4158

MEDICAL RECORD

BLOOD OR BLOOD COMPONENT TRANSFUSION

SECTION I – REQUISITION

COMPONENT REQUESTED *(Check one)*

- [x] RED BLOOD CELLS
- [ ] FRESH FROZEN PLASMA
- [ ] PLATELETS *(Pool of _____ units)*
- [ ] CRYOPRECIPITATE *(Pool of _____ units)*
- [ ] Rh IMMUNE GLOBULIN
- [ ] OTHER *(Specify)* _____

VOLUME REQUESTED *(If applicable)* 1 UNIT ML

REMARKS:

TYPE OF REQUEST *(Check ONLY if Red Blood Cell Products are requested.)*

- [ ] TYPE AND SCREEN
- [x] CROSSMATCH

DATE REQUESTED 6 June 2003

DATE AND HOUR REQUIRED 2300

KNOWN ANTIBODY FORMATION/TRANSFUSION REACTION *(Specify)*

IF PATIENT IS FEMALE, IS THERE HISTORY OF:

RhIG TREATMENT? DATE GIVEN: _____

HEMOLYTIC DISEASE OF NEWBORN? _____

REQUESTING PHYSICIAN *(Print)* PR [redacted]

DIAGNOSIS OR OPERATIVE PROCEDURE S/P Exp Lap, (R) Hemicolect

I have collected a blood specimen on the below named patient, verified the name and ID No. of the patient and verified the specimen tube label to be correct. 66-2

SIGNATURE OF VERIFIER [redacted]

DATE VERIFIED 6 June 2003

TIME VERIFIED 2240

SECTION II – PRE-TRANSFUSION TESTING

[redacted]

TRANSFUSION NO. 1

PATIENT NO. 66-4

[redacted]

RECIPIENT

ABO O

Rh Pos

ABO O

Rh Pos

TEST INTERPRETATION

ANTIBODY SCREEN	CROSSMATCH
N/A	COMPAT

- [ ] CROSSMATCH NOT REQUIRED FOR THE COMPONENT REQUESTED

DATE 6 Jun 03

REMARKS:

Exp. Date: 10 JUN 03

PREVIOUS RECORD CHECK:

- [x] RECORD
- [ ] NO RECORD

SIGNATURE [redacted]

SECTION III – RECORD OF TRANSFUSION

PRE-TRANSFUSION DATA

INSPECTED AND ISSUED BY *(Signature)* [redacted]

AT *(Hour)* 2320 ON *(Date)* 6 Jun 03

IDENTIFICATION

I have examined the Blood Component container label and this form and I find all information identifying the container with the intended recipient matches item by item. The recipient is the same person named on this Blood Component Transfusion Form and on the patient identification tag.

1st VERIFIER *(Signature)* [redacted] Spc.

2nd VERIFIER *(Signature)* [redacted]

PRE-TRANSFUSION

TEMP. 98.1 PULSE 98 BP 95/61

DATE OF TRANSFUSION 6 June 03

TIME STARTED 2330

POST-TRANSFUSION DATA

AMOUNT GIVEN 478 ML

TIME/DATE COMPLETED/INTERRUPTED 7 June 03 0010

REACTION

- [x] NONE
- [ ] SUSPECTED

TEMPERATURE	PULSE	BLOOD PRESSURE
97.9	93	100/62

If reaction is suspected—IMMEDIATELY:

1. Discontinue transfusion, treat shock if present, keep intravenous line open.
2. Notify Physician and Transfusion Service.
3. Follow Transfusion Reaction Procedures.
4. Do NOT discard unit. Return Blood Bag, Filter Set, and I.V. Solutions to the Blood Bank.

DESCRIPTION OF REACTION

- [ ] URTICARIA
- [ ] CHILL
- [ ] FEVER
- [ ] PAIN
- [ ] OTHER *(Specify)* 66-2

OTHER DIFFICULTIES *(Equipment, clots, etc.)*

- [x] NO
- [ ] YES *(Specify)*

SIGNATURE [redacted] NOTING ABOVE

PATIENT IDENTIFICATION—USE EMBOSSER (For typed or written entries give: Name—Last, first, middle; grade; rank; rate; hospital or medical facility)

SEX Male

WARD ICU #1

[redacted] EPW
ICU# 1 66-4

BLOOD OR BLOOD COMPONENT TRANSFUSION

Medical Record

STANDARD FORM 518 (REV. 9-92)
Prescribed by GSA/ICMR, FIRMR (41 CFR) 201-9.202-1

518-124 NSN 7540-00-634-4159

MEDICAL RECORD

BLOOD OR BLOOD COMPONENT TRANSFUSION

SECTION I – REQUISITION

COMPONENT REQUESTED *(Check one)*

- [x] RED BLOOD CELLS
- [ ] FRESH FROZEN PLASMA
- [ ] PLATELETS *(Pool of _____ units)*
- [ ] CRYOPRECIPITATE *(Pool of _____ units)*
- [ ] Rh IMMUNE GLOBULIN
- [ ] OTHER *(Specify)* _____

VOLUME REQUESTED *(If applicable)* _____ ML

REMARKS:

TYPE OF REQUEST *(Check ONLY if Red Blood Cell Product [redacted])*

- [redacted]
- [ ] TYPE AND SCREEN
- [x] CROSSMATCH

66-2

DATE REQUESTED 10 June 03

DATE AND HOUR REQUIRED ASAP

KNOWN ANTIBODY FORMATION/TRANSFUSION REACTION *(Specify)*

IF PATIENT IS FEMALE, IS THERE HISTORY OF:

RhIG TREATMENT? DATE GIVEN: _____

HEMOLYTIC DISEASE OF NEWBORN? _____

REQUESTING PHYSICIAN *(Print)* [redacted]

DIAGNOSIS OR CONDITION S/P Exp Lap

I have collected a blood specimen on the below named patient, verified the name and ID No. of the patient and verified the specimen tube label to be correct.

SIGNATURE OF VERIFIER [redacted]

DATE VERIFIED 10 June 03

TIME VERIFIED 1100

SECTION II – PRE-TRANSFUSION TESTING

UNIT NO. [redacted]

TRANSFUSION NO. 66-4

PATIENT NO. [redacted]

DONOR ABO O Rh POS

RECIPIENT ABO O Rh POS

TEST INTERPRETATION

ANTIBODY SCREEN

CROSSMATCH Comp [redacted]

PREVIOUS RECORD CHECK:

- [x] RECORD
- [ ] NO RECORD

[redacted] PERFORMING TEST

- [ ] CROSSMATCH NOT REQUIRED FOR THE COMPONENT REQUESTED

DATE 10 June 03

REMARKS: EXP 10 Jun 03

SECTION III – RECORD OF TRANSFUSION

PRE-TRANSFUSION DATA

INSPECTED AND ISSUED BY [redacted]

AT *(Hour)* 1451 ON *(Date)* 10 June 03

IDENTIFICATION

I have examined the Blood Component container label and this form and I find all information identifying the container with the intended recipient matches item by item. The recipient is the same person named on this Blood Component Transfusion Form and on the patient identification [redacted]

66-2

1st VERIFIER *(Signature)* [redacted] 1LT AN

2nd VERIFIER [redacted]

PRE-TRANSFUSION [redacted]

TEMP. 99.7 PULSE 89 BP 105/64

DATE OF TRANSFUSION 10 June 03

TIME STARTED 1435

POST-TRANSFUSION DATA

AMOUNT GIVEN 350 ML

TIME/DATE COMPLETED/INTERRUPTED 10 June 03 1630

REACTION

- [x] NONE
- [ ] SUSPECTED

TEMPERATURE	PULSE	BLOOD PRESSURE
100.3	88	106/63

If reaction is suspected—IMMEDIATELY:

1. Discontinue transfusion, treat shock if present, keep intravenous line open.
2. Notify Physician and Transfusion Service.
3. Follow Transfusion Reaction Procedures.
4. Do NOT discard unit. Return Blood Bag, Filter Set, and I.V. solutions to the Blood Bank.

DESCRIPTION OF REACTION

- [ ] URTICARIA
- [ ] CHILL
- [ ] FEVER
- [ ] PAIN
- [ ] OTHER *(Specify)*

OTHER DIFFICULTIES *(Equipment, clots, etc.)*

- [x] NO
- [ ] YES *(Specify)*

SIGNATURE OF [redacted] ABOVE [redacted] 1LT AN

PATIENT IDENTIFICATION—USE EMBOSSER (For typed or written entries give: Name—Last, [redacted] rate; hospital or medical facility)

SEX M

WARD 7W-7

[redacted] 66-4

Lilly 10 June 03

BLOOD OR BLOOD COMPONENT TRANSFUSION

Medical Record

STANDARD FORM 518 (REV. 9-92)
Prescribed by GSA/ICMR, FIRMR (41 CFR) 201-9.202-1

MEDCOM - 9619

Medical Record Copy

518-124 NSN 7540-00-634-4159

MEDICAL RECORD

BLOOD OR BLOOD COMPONENT TRANSFUSION

SECTION I – REQUISITION

COMPONENT REQUESTED *(Check one)*

- [x] RED BLOOD CELLS
- [ ] FRESH FROZEN PLASMA
- [ ] PLATELETS *(Pool of _____ units)*
- [ ] CRYOPRECIPITATE *(Pool of _____ units)*
- [ ] Rh IMMUNE GLOBULIN
- [ ] OTHER *(Specify)* _____

VOLUME REQUESTED *(If applicable)* _____ ML

REMARKS:

TYPE OF REQUEST *(Check ONLY if Red Blood Cell Products are requested.)*

[redacted]

- [x] TYPE AND SCREEN
- [x] CROSSMATCH

DATE REQUESTED 10 Jun 03

DATE AND HOUR REQUIRED ASAP

KNOWN ANTIBODY FORMATION/TRANSFUSION REACTION *(Specify)* 66-2

IF PATIENT IS FEMALE, IS THERE HISTORY OF:

RhIG TREATMENT? DATE GIVEN: _____

HEMOLYTIC DISEASE OF NEWBORN? _____

REQUESTING PHYSICIAN *(Print)* [redacted]

DIAGNOSIS OR OPERATION [redacted] S/P exp lap

I have collected a blood specimen from the below named patient, verified the name and ID No. of the patient and verified the specimen tube label to be correct.

[redacted]

DATE VERIFIED 10 Jun 03

TIME VERIFIED 1100

SECTION II – PRE-TRANSFUSION TESTING

UNIT NO. [redacted]

TRANSFUSION NO. 66-4

PATIENT NO. [redacted]

TEST INTERPRETATION

ANTIBODY SCREEN

CROSSMATCH Comp

PREVIOUS RECORD CHECK:

- [x] RECORD
- [ ] NO RECORD

SIGNATURE OF PERSON [redacted] TEST

[redacted]

DONOR

ABO O

Rh POS

RECIPIENT

ABO O

Rh POS

- [ ] CROSSMATCH NOT REQUIRED FOR THE COMPONENT REQUESTED

DATE 10 June 03

REMARKS: EXP 10 Jun 03

SECTION III – RECORD OF TRANSFUSION

PRE-TRANSFUSION DATA

INSPECTED AND ISSUED [redacted]

AT *(Hour)* 1256 ON *(Date)* 10 June 03

IDENTIFICATION

I have examined the Blood Component container label and this form and I find all information identifying the container with the intended recipient matches item by item. The recipient is the same person named on this Blood Component Transfusion Form and on the patient identification tag.

1st VERIFIER *(Signature)* [redacted]

2nd [redacted]

PRE-TRANSFUSION

TEMP. 99.3 PULSE 91 BP 113/65

DATE OF TRANSFUSION 10 Jun 03 TIME STARTED 1300

POST-TRANSFUSION DATA

AMOUNT GIVEN 350 ML

TIME/DATE COMPLETED/INTERRUPTED 10 June 03 1430

REACTION

- [x] NONE
- [ ] SUSPECTED

TEMPERATURE 99.7 PULSE 88 BLOOD PRESSURE 105/64

If reaction is suspected—IMMEDIATELY:

1. Discontinue transfusion, treat shock if present, keep intravenous line open.
2. Notify Physician and Transfusion Service.
3. Follow Transfusion Reaction Procedures.
4. Do NOT discard unit. Return Blood Bag, Filter Set, and I.V. solutions to the Blood Bank.

DESCRIPTION OF REACTION

- [ ] URTICARIA
- [ ] CHILL
- [ ] FEVER
- [ ] PAIN
- [ ] OTHER *(Specify)*

OTHER DIFFICULTIES *(Equipment, clots, etc.)*

- [x] NO
- [ ] YES *(Specify)*

SIGNATURE OF PERSON [redacted] ABOVE

[redacted]

PATIENT IDENTIFICATION—USE EMBOSSER (For typed or written entries give: Name—Last [redacted] rate; hospital or medical facility)

WARD ICU #1

[redacted] 66-4

ICU-7 10 Jun 03

BLOOD OR BLOOD COMPONENT TRANSFUSION

Medical Record

STANDARD FORM 518 (REV. 9-92)
Prescribed by GSA/ICMR, FIRMR (41 CFR) 201-9.202-1

MEDCOM - 9620

Medical Record Copy

ICU #1

NSN 7540-01-165-7294 519-301

RADIOLOGIC CONSULTATION REQUEST/REPORT

(Radiology/Nuclear Medicine/Ultrasound/Computed Tomography Examinations)

EXAMINATION(S) REQUESTED	AGE	SEX	SSN (Sponsor)	WARD/CLINIC	REGISTER NO.
CXR			[redacted] 66-4	ICU #1	
	FILM NO.				PREGNANT ☐ YES ☐ NO
	REQUESTED BY (Print)		[redacted]		TELEPHONE/PAGE NO.
66-2	SIGNAT		[redacted]		DATE REQUESTED 30 MAY 03

SPECIFIC REASON(S) FOR REQUEST *(Complaints and findings)*

Pt intubated, verify tube placement

DATE OF EXAMINATION *(Month, day, year)*	DATE OF REPORT *(Month, day, year)*	DATE OF TRANSCRIPTION *(Month, day, year)*
30 May 03		

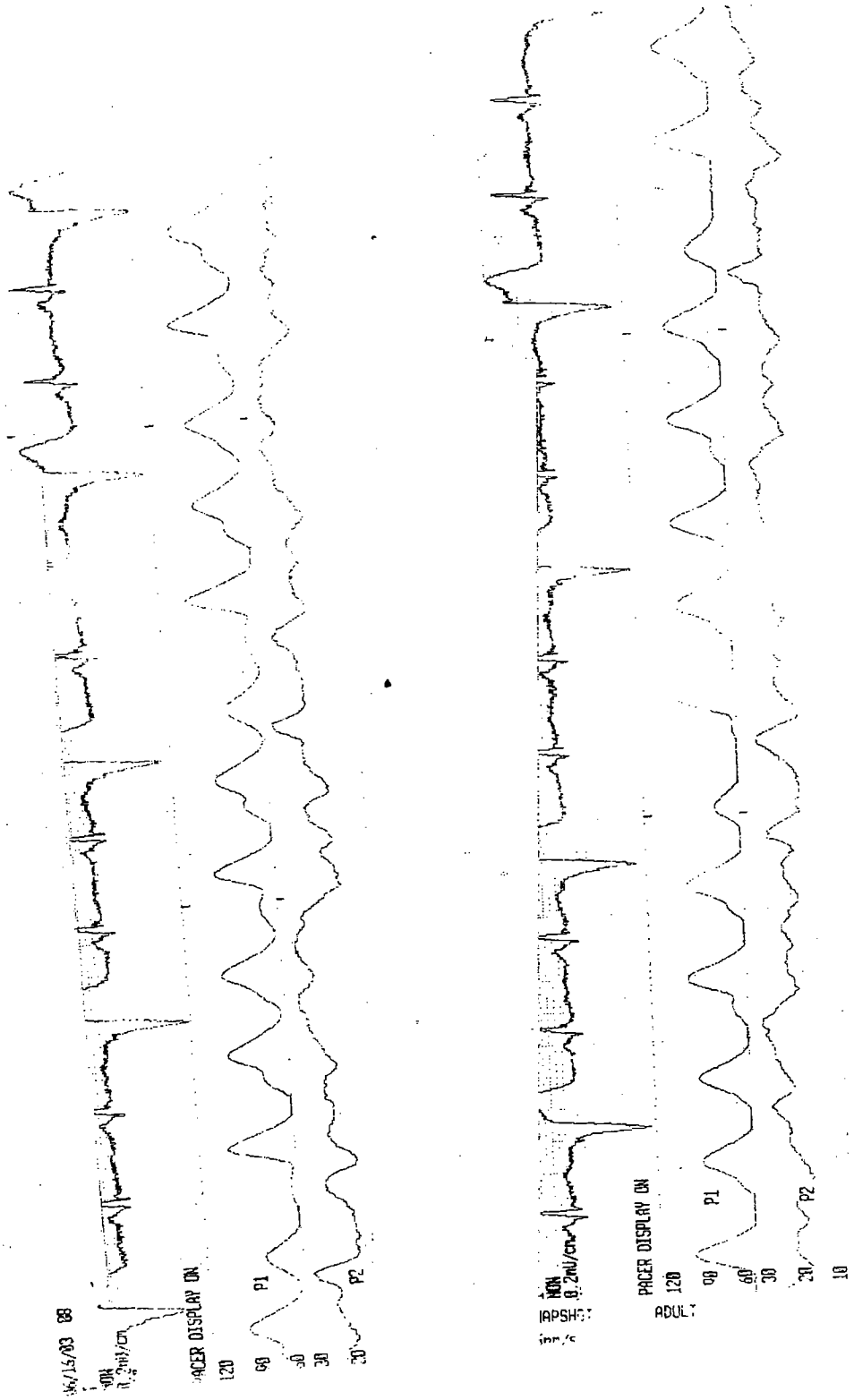
RADIOLOGIC REPORT

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name — last, first, middle, Medical Facility)*	LOCATION OF MEDICAL RECORDS
EPN # [redacted] 66-4	LOCATION OF RADIOLOGIC FACILITY
	SIGNATURE

MEDCOM - 9621 LTATION RT

1 — MEDICAL RECORD

STANDARD FORM 519-B (8-83)
Prescribed by GSA/ICMR
FPMR (41 CFR) 101-11.806-8


PACER DISPLAY ON
120
90
60
30
P1
P2
PACER DISPLAY ON
120
90
60
30
P1
P2
ADULT
10

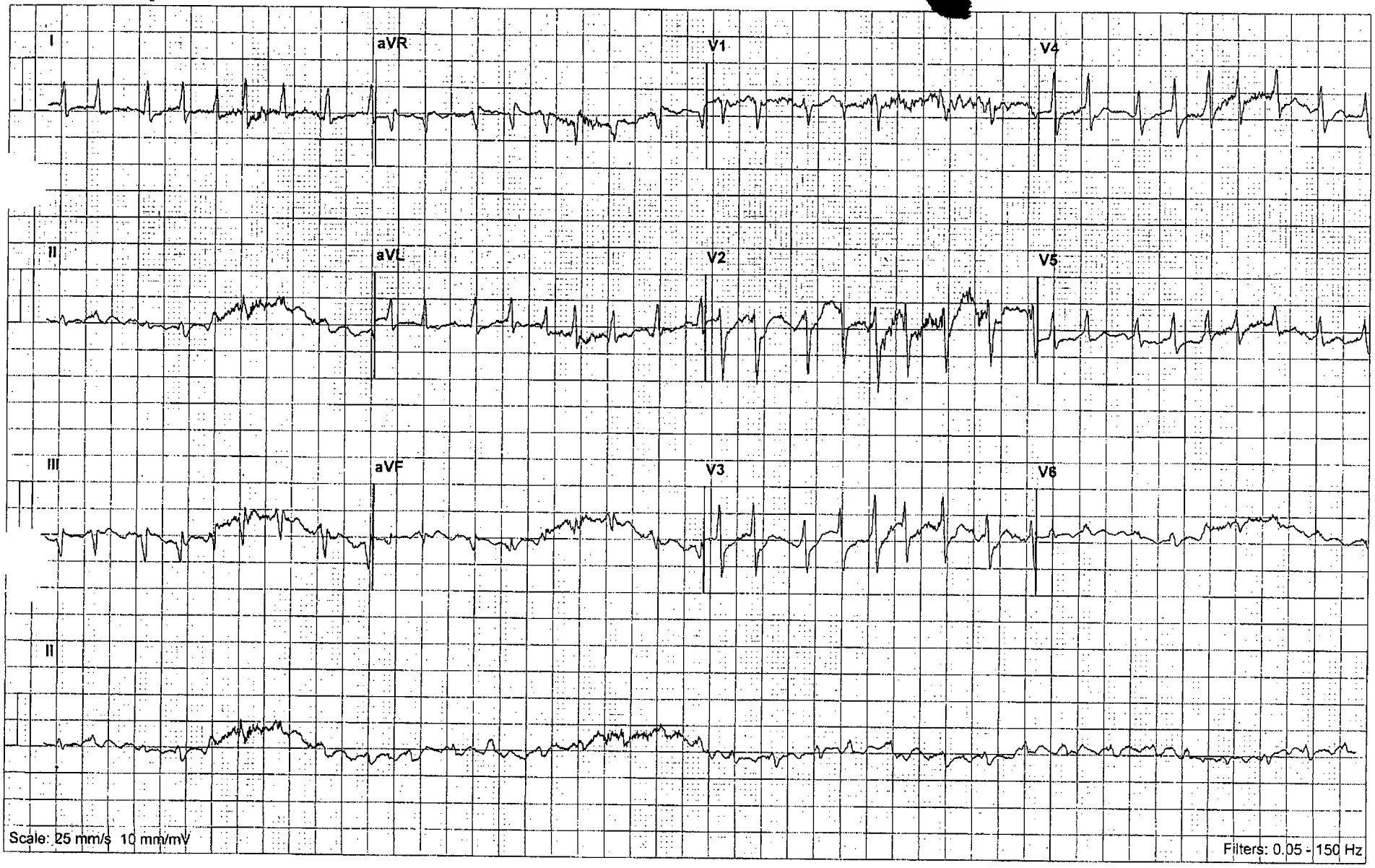
3x4 Simultaneous Report

Atrial fibrillation c̄ RVR

Name: QW EPW 66-4
Number: [redacted]
Sex: Male
Date of Birth: 7/19/1979 (23 years)
Height/Weight: 63in / 176lb

[redacted] 66-2

Recorded: 6/4/2003 ~~11:15:08 PM~~ 0715 Am
Device: CL 131128



MEDCOM - 9623

Confirmed by:

3x4 Simultaneous Report

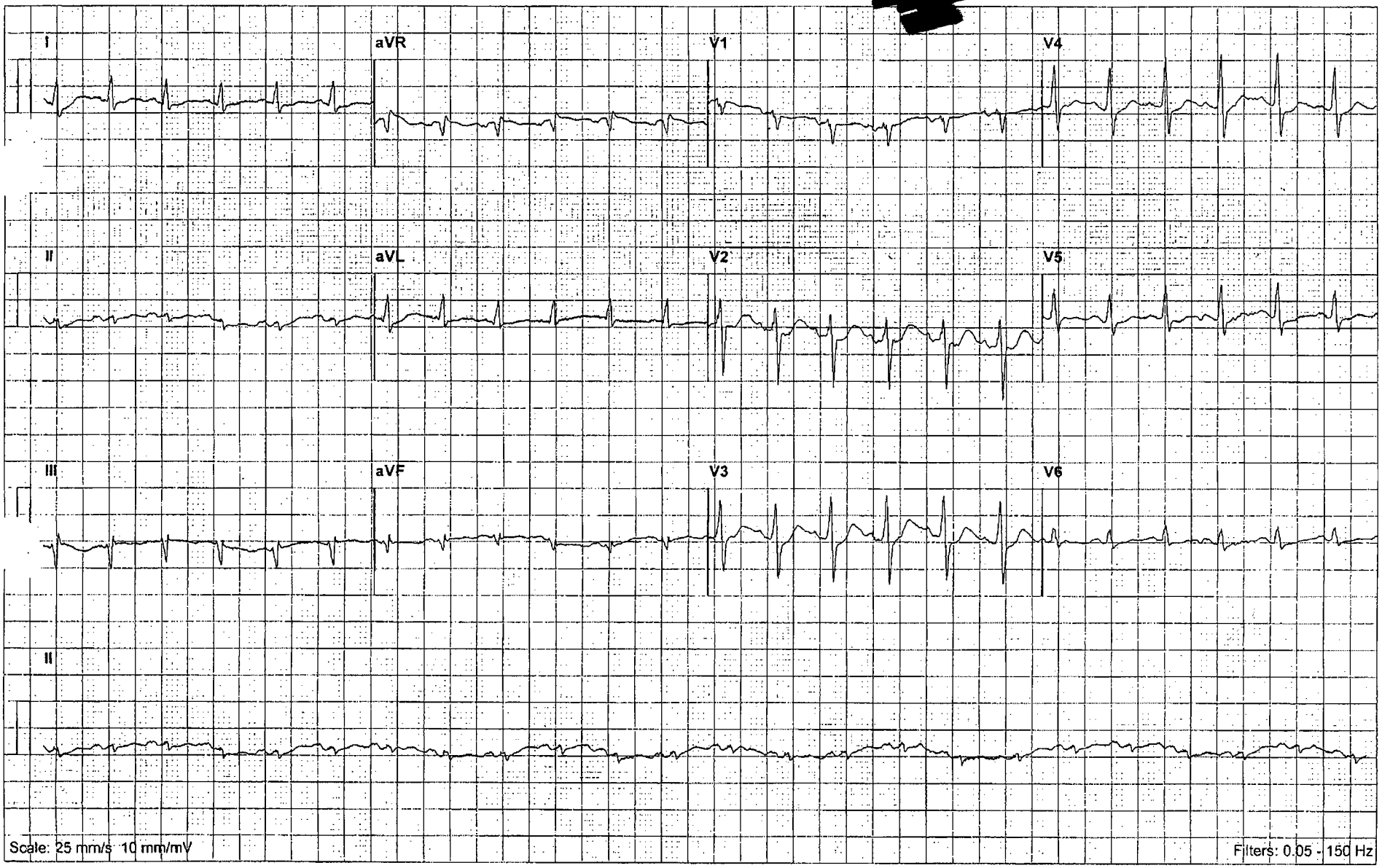
Post Cardiovert ECG

Name: QW EPW
Number: [redacted] 66-4
Sex: Male
Date of Birth: 7/19/1979 (23 years)
Height/Weight: 63in / 176lb

Sinus tach
Twave ⌂'s

[redacted] 66-2

Recorded: 6/4/2003 11:32:09 PM
Device: CL 131128



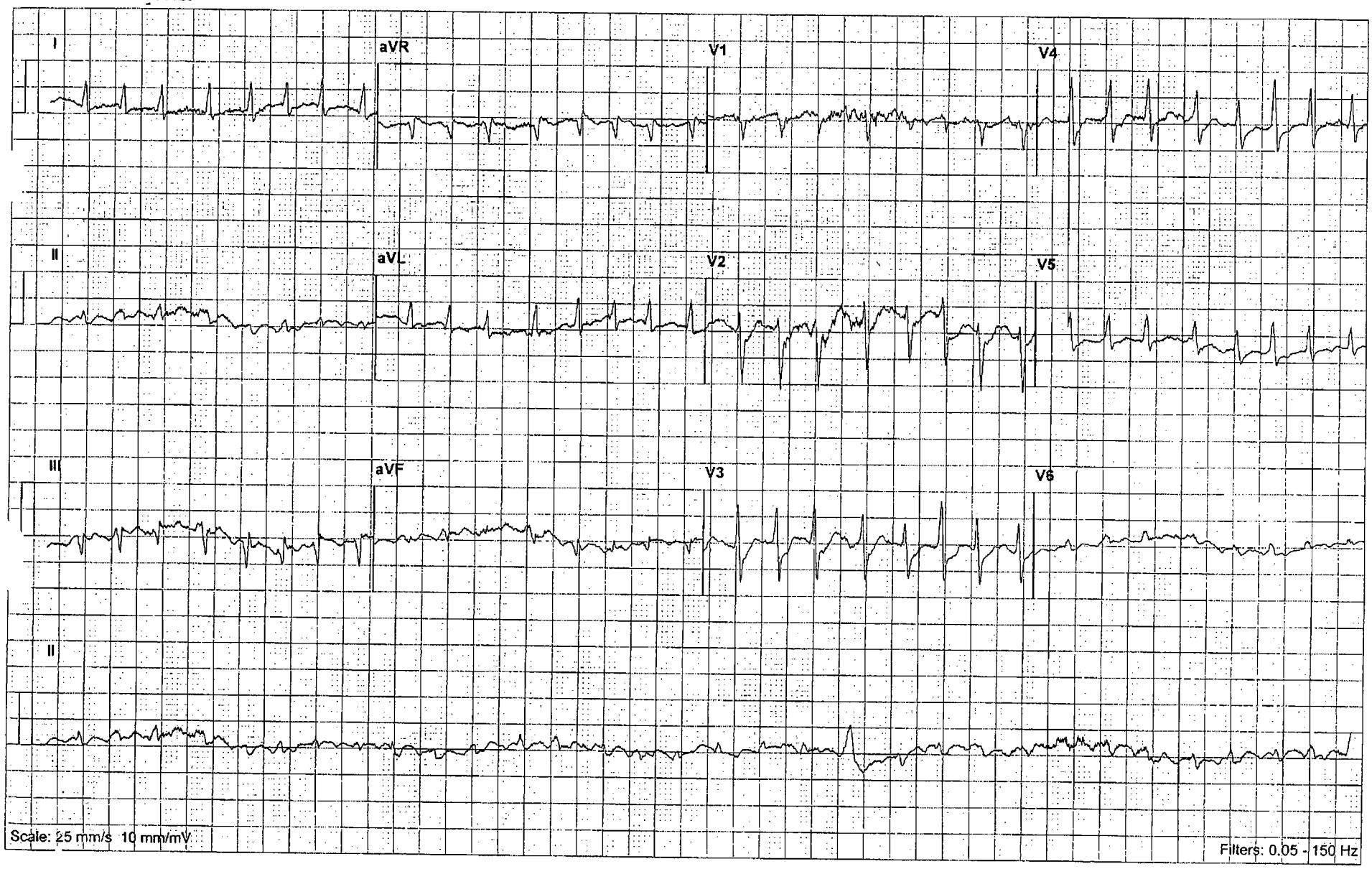
MEDCOM - 9624

Confirmed by:

3x4 Simultaneous Report

Name: QW EPW
Number: [redacted] 06-4
Sex: Male
Date of Birth: 7/19/1979 (23 years)
Height/Weight: 63in / 176lb

Recorded: 6/4/2003 11:16:32 PM
Device: CL 131128



MEDCOM - 9625

Confirmed by:

#[redacted] 66-4 4 Jun 03

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOS						GANIZATION *(Sign each entry)*
			96	88 / 51			
	08:50	[illegible]	97	81 / 44			
	08:48	[illegible]	97	89 / 48			
	08:46	[illegible]	96	92 / 47			
	08:44	[illegible]	97	97 / 51			
	08:42	[illegible]	96	87 / 46			
	08:40	[illegible]	96	92 / 50			
	08:38	[illegible]	96	79 / 44			
	08:36	[illegible]	95	80 / 44			
	08:34	[illegible]	96	[illegible] / 43			
	08:32	[illegible]	96	75 / 43			
	08:30	[illegible]	96	73 / 42			
	08:28	[illegible]	96	77 / 45			
	08:26	[illegible]	95	81 / 44			
	08:24	[illegible]	95	84 / 43			
	08:22	[illegible]	96	98 / 63			
	08:20	[illegible]	96	83 / 51			
	08:18	[illegible]	99	86 / 51			
	08:16	[illegible]	100	87 / 53			
	08:14	[illegible]	100	86 / 55			
	08:12	[illegible]	100	105 / 67			
	08:10	[illegible]	100	95 / 58			
	08:08	[illegible]	100	105 / 66			
	08:06	[illegible]	100	94 / 57			
	08:04	[illegible]	100	[illegible] / [illegible]			
	08:02	[illegible]	100	87 / 53			
	08:00	[illegible]	100	91 / 59			
	07:58	[illegible]	100	[illegible] / [illegible]			
	07:56	[illegible]	99	84 / 51			
	07:54	[illegible]	99	85 / 53			
	07:52	[illegible]	99	88 / 53			
	07:50	[illegible]	99	93 / 53			
	07:48	[illegible]	99	106 / 63			
	07:46	[illegible]	100	91 / 59			
	07:44	[illegible]	92	101 / 70			
	07:42	[illegible]	99	98 / 66			
	07:40	[illegible]	99	98 / 64			
	07:38	[illegible]	99	100 / 62			
	07:36	[illegible]	98	105 / 66			
	07:34	[illegible]	99	92 / 51			
	07:32	[illegible]	100	103 / 57			
	07:30	[illegible]	100	96 / 51			
	07:28	[illegible]	100	84 / 48			
	07:26	[illegible]	99	86 / 54			
	07:24	[illegible]	100	86 / 55			
	07:22	[illegible]	100	105 / 60	86	35	
	07:20	[illegible]	100	130 / 63	85	23	
	07:18	[illegible]	99	113 / 63	93	38	
	07:16	[illegible]	99	133 / 67	91	36	
	07:14	[illegible]	99	138 / 71	96	34	

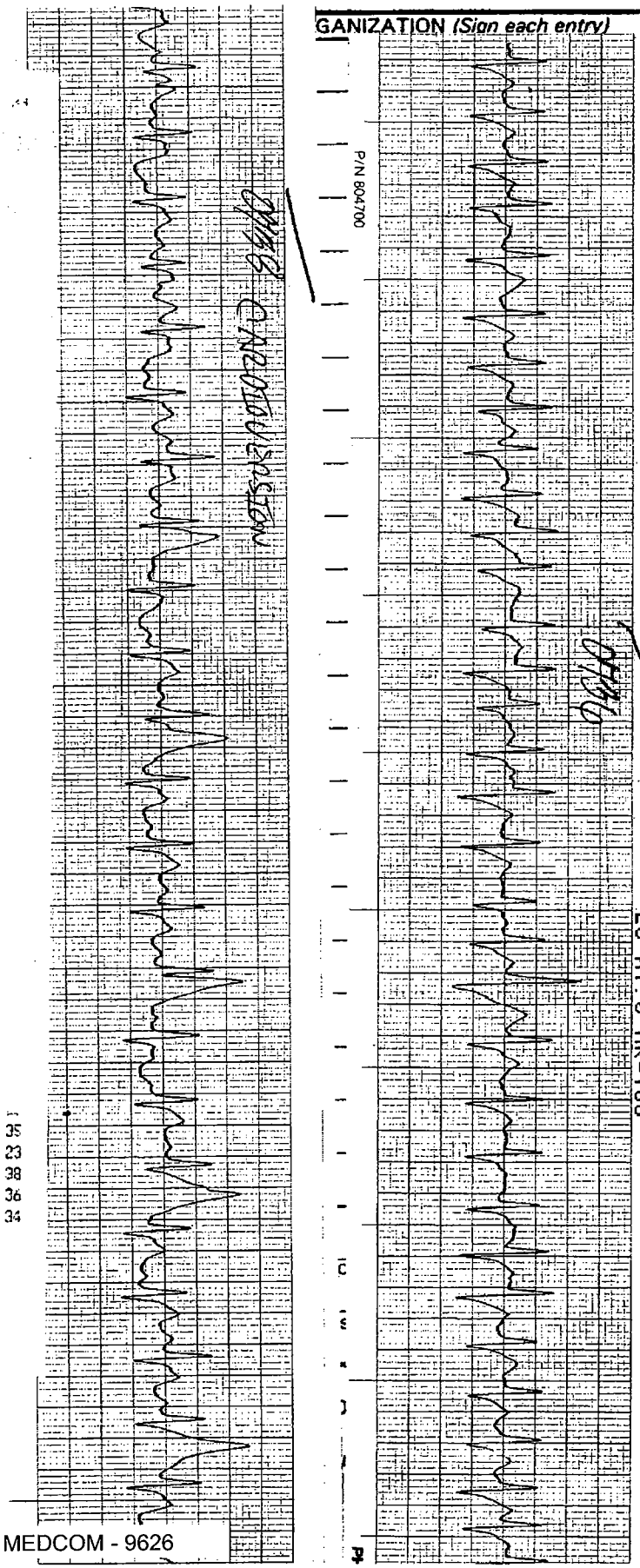
HOSPITAL OR MEDICAL FA

SPONSOR'S NAME

PATIENT'S IDENTIFICATION *(Prior Types Date of Birth; Ran...*

#[redacted] 66-4

4 Jun 03



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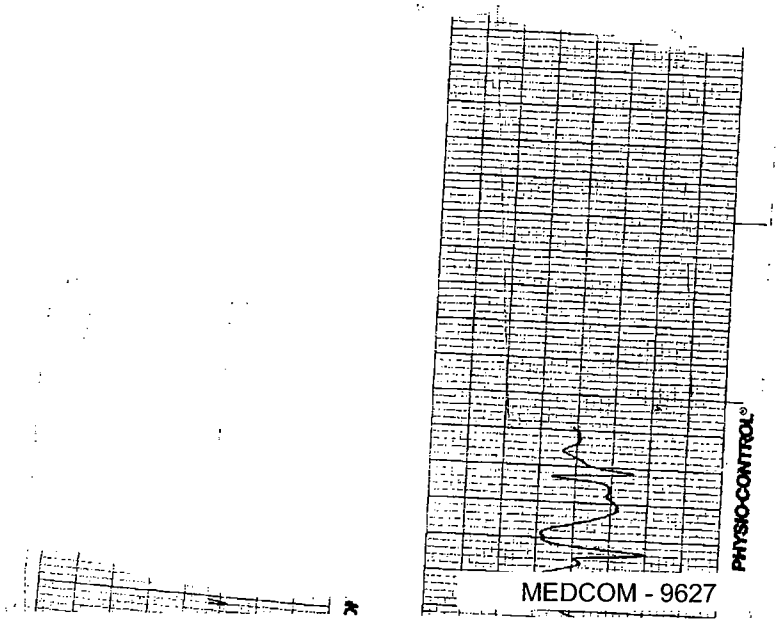

PHYSIO-CONTROL®
MEDCOM - 9627

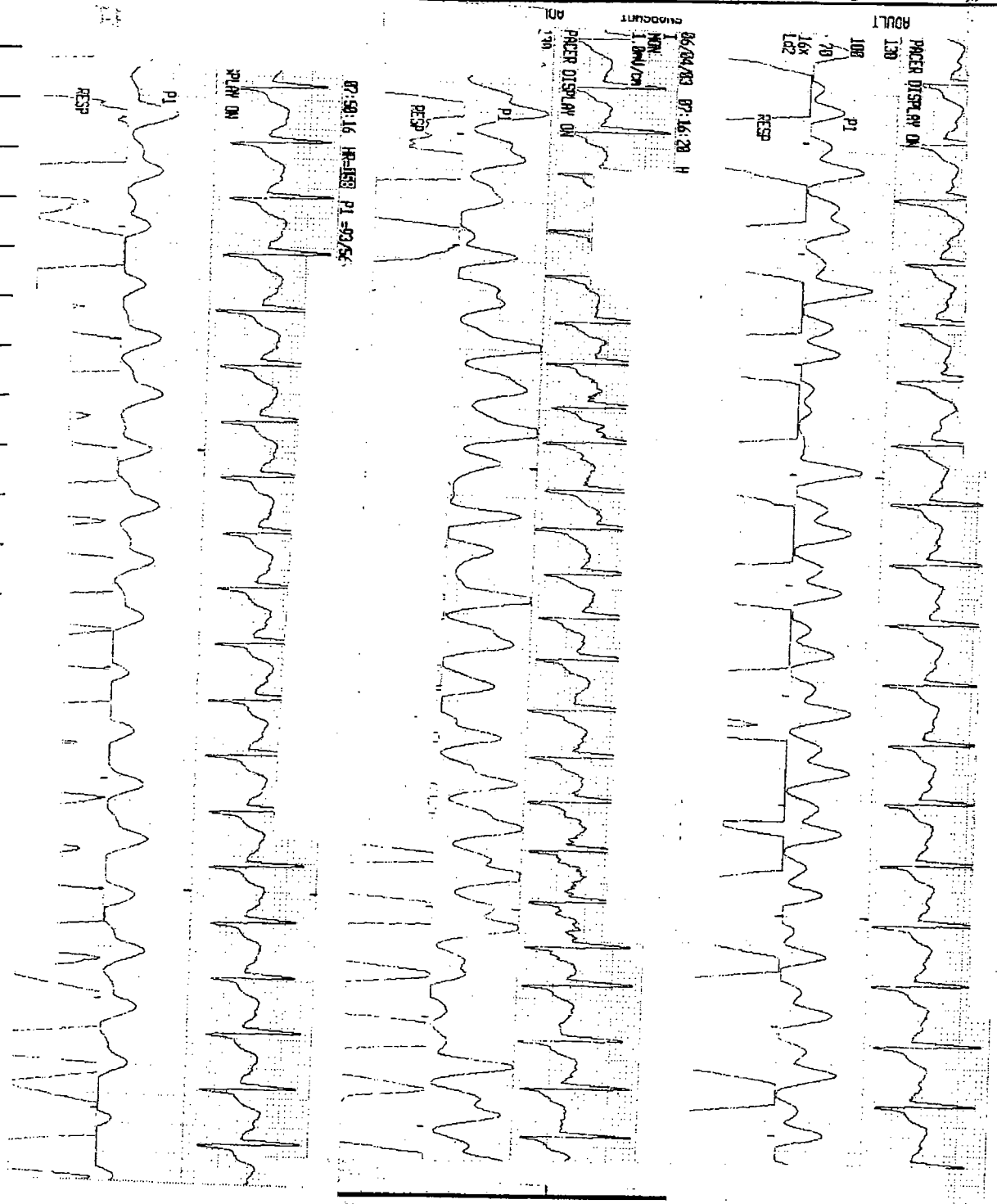
[redacted]

66-4all

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE | SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*



HOSPITAL OR

SPONSOR'S N

PATIENT'S ID

Name - last, first, middle; ID No or SSN; Sex;

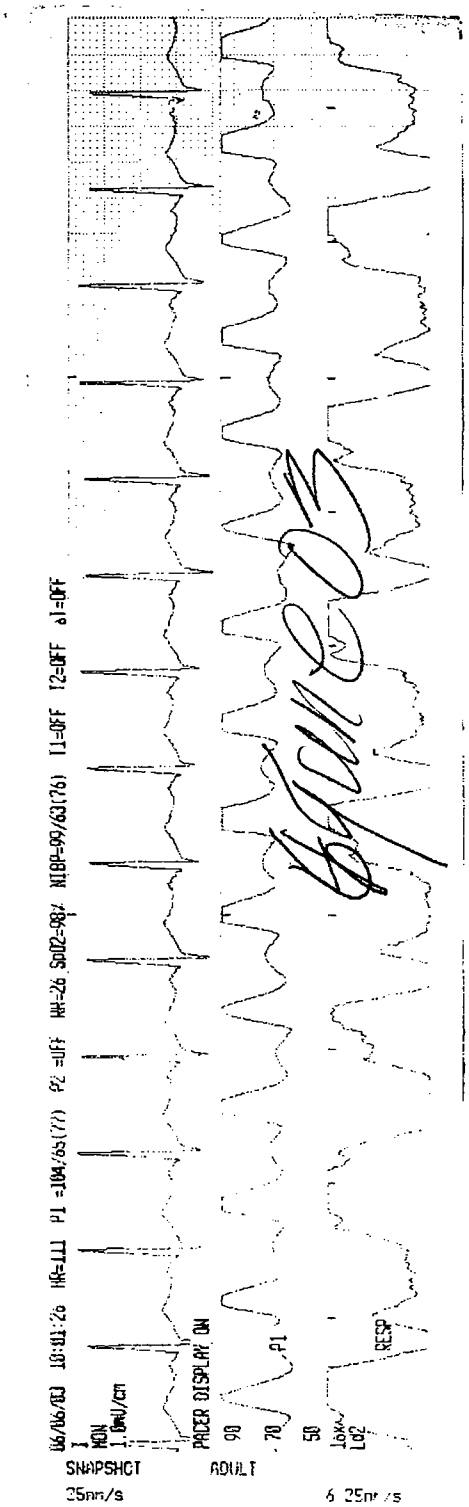
[redacted]

4/11/03

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record

STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1

MEDCOM - 9628



PROTOCOL

NIBP TREND 06/06/03

TIME HH:MM	HR/PR BPM	SpO2 %	SYS / DIA mmHg	MEAN	RR RPM
10:00	111	97	99 / 63	76	22
09:30	114	98	103 / 69	81	27
09:00	115	96	105 / 65	80	29
08:30	115	95	98 / 66	80	25
08:00	119	95	105 / 71	82	25
07:30	117	94	99 / 71	81	27
07:00	117	93	102 / 68	82	26
06:30	118	95	104 / 71	83	24
06:00	118	95	107 / 74	87	31
05:30	114	96	100 / 68	81	28
05:00	113	96	98 / 66	79	24
04:30	113	96	108 / 69	82	26
04:00	113	95	92 / 63	74	24
03:30	115	97	ERR: 2		19
03:00	117	96	98 / 62	76	14
02:30	119	94	92 / 68	73	19

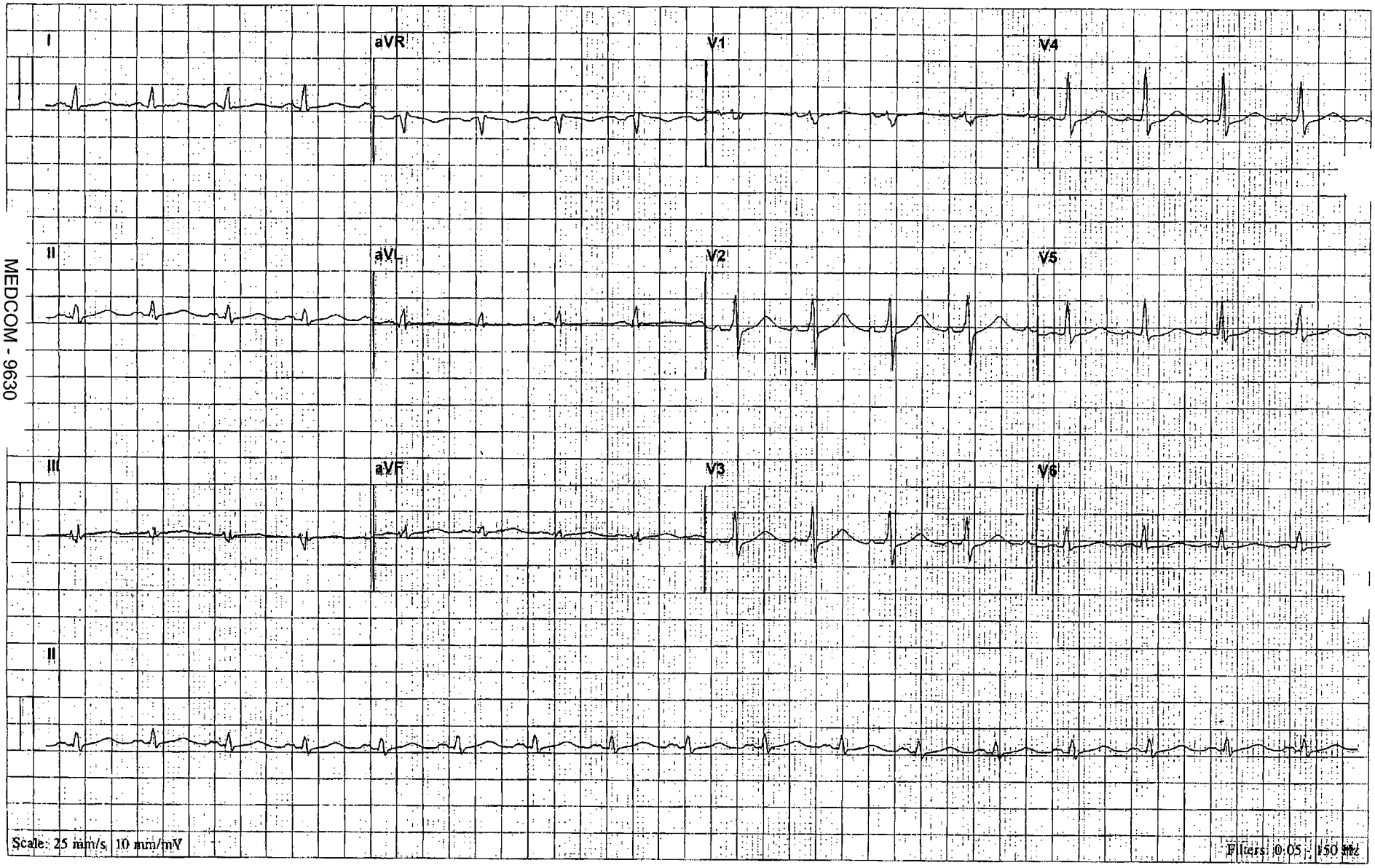
ADULT

PROTOCOL SYSTEMS, INC.

3x4 Simultaneous Report

Name: [redacted] b6-4
Number: mi
Sex: Male
Date of Birth: 6/26/1977 (25 years)
Height/Weight: 67in / 134lb

Recorded: 6/7/2003 6:12:58 AM
Device: CL 131128



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Confirmed by:

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICAT[redacted]

#[redacted] 66-4

DATE OF ORDER: 5/29 TIME OF ORDER: (1240) HOURS

LIST TIME ORDER NOTED AND SIGN

Dx: S/p Explor lap, Right Hemicolectomy, Cholecystectomy, partial hepatectomy.
Condition: Stable
Vitals q 1° x4, then q 2°
I/O
Foley to DD
NG to LIS

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

DATE OF ORDER: TIME OF ORDER: HOURS

Activity: Bed rest
Allergy: ?
Diet: NPO ✓
IV LR @ 125/hr ✓
MSO4 1-10 mg IV q 1° prn pain
Versed 2 mg/hr IV gtt. titrate to sedative effect.
Unasyn 3 gm IV q 8° ✓

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

DATE OF ORDER: TIME OF ORDER: HOURS

Gentamicin 450 mg IV q day ✓
(Please have Pharmacy adjust dose based on Cr clearance.)
Zantac 50 mg IV q 8° ✓
Tylenol ~~T~~ ~~PR~~ po ~~&~~ NG prn T>102
Δ dressing on Right buttock BID
Δ dressing on abdomen starting 5/3 prn

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

DATE OF ORDER: TIME OF ORDER: HOURS

Call T>102, P>120, U.O.<30/hr

[redacted]

NURSING UNIT | ROOM NO. | BED NO.

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 67, WHICH MAY BE USED [redacted] 66-2

MEDCOM - 9631

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION: EPW [redacted]

NURSING UNIT: ICU I | ROOM NO. | BED NO.

DATE OF ORDER: 5/29/03 | TIME OF ORDER: 0535 HOURS

Change vent Settings as follow: Fio2 ↓ to 50% ↑ rate to 12 VT 800 Peep 5. Repeat Abg 30 min. V.O. Dr [redacted] Noted [redacted] [redacted] NO DOA

LIST TIME ORDER NOTED AND SIGN: 66-2

PATIENT IDENTIFICATION: EPW [redacted]

NURSING UNIT: ICU I | ROOM NO. | BED NO.

DATE OF ORDER: 5/29/03 | TIME OF ORDER: 1700 HOURS

Give 1 amp of Na+ Bicarb IVP Y/now. V.O. Dr [redacted] / noted [redacted] [redacted] Noted [redacted] MRS/AN 2497

66-2

66-4

PATIENT IDENTIFICATION: EPW [redacted]

NURSING UNIT: ICU I | ROOM NO. | BED NO.

DATE OF ORDER: 1830 5/29/03 | TIME OF ORDER: HOURS

1. Start Propofol gtt for sedation. V.O. Dr [redacted]

66-2

PATIENT IDENTIFICATION: EPW [redacted]

NURSING UNIT: ICU I | ROOM NO. | BED NO.

DATE OF ORDER: | TIME OF ORDER: HOURS

1. Bolus LR 500 cc now
2. ↑ IVF LR @ 175/hr
3. CBC, lytes, Bun/Cr, now and q AM.
4. CPK q 8° X 4
5. Bicarb 1 amp XT [redacted]
6. UA

Noted [redacted] 30 MINUTES 0700

66-2

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 77, WHICH MAY BE USED [redacted]

Noted 30 Min

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION

[redacted]

NURSING UNIT | ROOM NO. | BED

DATE OF ORDER 5/30 | TIME OF ORDER 1930 | HOURS | LIST TIME ORDER NOTED AND SIGN

1. Bolus 500 cc LR.
2. 1/2 NS 175/hr.
3. Dopamine 3 µg/kg IV gtt.
4. Albumin Amt c labs.

[redacted]

PATIENT IDENTIFICATION

[redacted]

NURSING UNIT | ROOM NO. | BE

DATE OF ORDER | TIME OF ORDER | HOURS

30 MAY 03

START PROPOFOL DRIP

~~(FOR EFFECT NO TITRATE FOR ADEQUATE SEDATION)~~

[redacted]

66-2

66-4

LTC, MC ORTHOPEDIC SERVICE

PATIENT IDENTIFICATION

[redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE | TIME OF ORDER 1245 | HOURS

31 MAY 03

ADMIT C/D [redacted]

PX GSWS CHEST, L FOREARM, SHOULDER

COND SERIOUS

VS ICU MONITOR C I&Os

ACT BR, RESTRAIN PRN (EPIW)

NKDA

DO NOT EXTUBATE (2) AM

NPO

PATIENT IDENTIFICATION

[redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER | TIME OF ORDER | HOURS

LR @ 175cc/HR

RESUME PREVIOUS VENT SETTINGS

FOLEY TOMORROW

NG TO INTERMITTENT SUCTION

PROPOFOL DRIP - TITRATE TO EFFECT

MS 2MG IV Q15' PRN UP TO 20MG IN 4°

UNISYN 3GM IV Q8°

GENTAMICIN 480 MG [redacted]

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 77, WHICH MAY BE USED. [redacted]

MEDCOM - 9633

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION

EPW # [redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER | TIME OF ORDER ____ HOURS | LIST TIME ORDER NOTED AND SIGN

1. DC propofol
2. CXR Q Day while intubated [redacted]
- V/O by dr. [redacted] CPT AN
- 2W Repeat BUN/S

PATIENT IDENTIFICATION

EPW # [redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER | TIME OF ORDER ____ HOURS

1. ↓ IVF to LR @ 150/hr [redacted]
2. Liver panel now & Q AM [redacted]
3. CPK @ 1200 30 MAY 03 [redacted] CPT/AN
- V/O by Dr [redacted] CPT/AN

66-4

66-2

PATIENT IDENTIFICATION

EPW # [redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER | TIME OF ORDER ____ HOURS

1. Bolus 1 liter NS [redacted]

PATIENT IDENTIFICATION

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER 5/30/03 | TIME OF ORDER 1745 HOURS

1. Flush Foley
V.O. Dr [redacted] CPT AN

[redacted]

30 MAY 03
T&C 2 U PRBC
DC TO OR TOMORROW [redacted]
~~1700~~ 2400 [redacted]

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 77, WHICH [redacted] LTC, MC ORTHOPEDIC SERVICE

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION

[redacted]

DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
31 MAY 03	1245 HOURS	
ZANTAC 50mg IV Q8°		
SYNEMOL 650mg PO/PR Q4°		
IP TO PO/LB		
XR AP (L) SHOULDER 1421		
CBC, ABG, LYTES, BUN/Cr, CK		
AM		

NURSING UNIT | ROOM NO. 0020 | BED NO. [redacted]

PATIENT IDENTIFICATION

[redacted]

DATE OF ORDER [redacted] HOURS

[redacted]

LTC MC
ORTHOPEDIC SERVICE

66-4

66-2

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

[redacted]

DATE OF ORDER | TIME OF ORDER | HOURS

(1) Wean Propofol to off Sedulate
Nebulx
Done [redacted]

[redacted]

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

[redacted]

DATE OF ORDER | TIME OF ORDER [redacted]

(1) ↓ IVF to 150/hr
(2) 20 meq KCl IV run
(3) Mg SO4 ~~II~~ gms IV run
(4) PRBC 1 unit
(5) Lasix 20mg IV x 1 c̄ blood
(6) DC Dx: Liver laceration

[redacted]

NURSING UNIT | ROOM NO. | BED NO.

DA FORM 1 APR 79 4256 REPLACES ... MAY BE USED.

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
# [redacted] 66-4			3 June 03	1800 HOURS	
			(1) Haldol 5mg IVP x1 NOW		
			VO DR [redacted]		
NURSING UNIT	ROOM NO.	BED NO.	66-2		

PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	
# [redacted]			3 June 03	1900 HOURS	
			(1) Remove leg splints q2-3°		
			VO DR Dixon		
			SAT [redacted]		
NURSING UNIT	ROOM NO.	BED NO.			

PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	
			4 June 03	0730 HOURS	
			(1) Vancomycin 1G now 0745 done		
			(2) Vent: SIMV 20 TV 750 PEEP 5 FIO2 100% done		
			(3) KCl 40 mg in 100 cc NS over 3° done		
			(4) NS LR 500cc bolus done		
NURSING UNIT	ROOM NO.	BED NO.	[redacted]		

PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	
[redacted]			4 June 03	0800 HOURS	
			(1) d/c SIMV rate to 16		
			(2) wean FIO2 to keep sats >94		
			(3) decrease ATT @ 3mg/kg/hr		
			(4) vasopressor titrate to indicator		
			(5) pentamidine gtt titrate to indicator		
NURSING UNIT	ROOM NO.	BED NO.	[redacted]		

DA FORM 1 APR 79 4256 REPLACES EDITION OF [redacted]

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION	DATE OF ORDER	TIME OF ORDER HOURS	LIST TIME ORDER NOTED AND SIGN
[redacted] EPW	① Toradol 30 mg IV q 6°		
	② If no Toradol available Morphine 8.00 mg IV NG q 8°		
NURSING UNIT / ROOM NO. / BED NO.	[redacted]		
2 June			

PATIENT IDENTIFICATION	DATE OF ORDER	TIME OF ORDER HOURS	
66-4	① Chest and abd X-Ray		66-2
[redacted]	② Repeat CBC		
	③ NT Suction q 4°		
	④ PT to see for foot splint to prevent foot drop.		
NURSING UNIT / ROOM NO. / BED NO.	⑤ Ensure ⊕ or Jevity ↓ NG tube 60 cc boluses q 3°, ✓ residuals		
	93° Hold bolus for resid > 90 cc		
	⑥ Keep HOB @ 30°		
	3 Jun 03 1500		
NURSING UNIT / ROOM NO. / BED NO.	[redacted]		

PATIENT IDENTIFICATION	DATE OF ORDER	TIME OF ORDER HOURS	
	3		
NURSING UNIT / ROOM NO. / BED NO.			

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 77, WHICH MAY BE USED.

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION

#[redacted]

done 1130

1130

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER: 4 June 03 TIME OF ORDER: 1130 HOURS

Give 1 L NS plus 20 Lasix over 2 hours

Transfuse CUP now

MEDICAL @ 1000 hrs 5 plus

V.O. DR [redacted]

Noted @ 1330 [redacted]

LIST TIME ORDER NOTED AND SIGN

PATIENT IDENTIFICATION

66-4

#[redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER: 4 June 03 TIME OF ORDER: 1140 HOURS

Vent setting: SIMV, 16 rate, TV 750, FiO2 60%, PEEP 5 cm.

V.O. DR [redacted]

Noted 1400 [redacted]

66-2

PATIENT IDENTIFICATION

#[redacted]

NURSING UNIT | ROOM NO. | BED NO.

DATE OF ORDER: 4 June 03 TIME OF ORDER: 1630 HOURS

D/C Morphine

V.O. DR [redacted]

Noted [redacted]

PATIENT IDENTIFICATION

1700

NURSING UNIT | ROOM NO. | BED NO. 240

DATE OF ORDER: 4 June 03 TIME OF ORDER: 1630 HOURS

Dulcolax Suppository and Warm Soapsuds Enema

Keep HOB 55

V.O. DR [redacted]

[redacted]

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 60 WHICH MAY BE [redacted]

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION: [redacted]

DATE OF ORDER: 4 June 03 TIME OF ORDER: 1900 HOURS

LIST TIME ORDER NOTED AND SIGN

1) 500 cc NS Bolus for ↓ MAP AND HR 140. NOW

VO DR [redacted]

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION: [redacted]

DATE OF ORDER: 4 JUNE 03 TIME OF ORDER: 2136 HOURS

1) 500 cc NS Bolus NOW

VO DR [redacted]

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION: [redacted]

DATE OF ORDER: 5 June 03 TIME OF ORDER: 0345 HOURS

1) VO per Dr. [redacted] to turn vent settings ↓ 2 from 16-14 bpm. [redacted]

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

DATE OF ORDER: 5 June TIME OF ORDER: 0300 HOURS

1) 500 cc Bolus XT NOW

VO DR [redacted]

NURSING UNIT | ROOM NO. | BED NO.

[redacted]

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 77, WHICH [redacted]

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION

DATE OF ORDER | TIME OF ORDER ____ HOURS | LIST TIME ORDER NOTED AND SIGN

~~TF holiness to~~

(1) TF @ 60/hr, advance 20 cc q 4° to max rate goal of 100/hr

(2) ✓ Residuals q 4° hold TF for Resid >100 cc.

(3) Clean Dyna Keep MAP >65

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

DATE OF ORDER | TIME OF ORDER ____ HOURS

(4) Amylase, lipase stat

(5) Dulcolax suppose q AM until stool

Dow

[redacted]

NURSING UNIT | ROOM NO. | BED NO.

TCU 1

PATIENT IDENTIFICATION

[redacted]

DATE OF [redacted] | TIME OF ORDER 0250 HOURS

6 JUN 03

66-2

1) 500 cc Bolus I.V XT Now

66-4

VO Dr [redacted]

NURSING UNIT | ROOM NO. | BED NO.

PATIENT IDENTIFICATION

[redacted]

DATE OF ORDER | TIME OF ORDER 0400 HOURS

6 June 03

1) 500 CC Bolus IV X T Now

0556 June 6 [redacted]

VO. Dr [redacted]

NURSING UNIT | ROOM NO. | BED NO.

DA FORM 1 APR 79 4256 REPLACES EDITION OF 1 JUL 77, WHICH MAY BE USED.