

CASE 10

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

252 * Appendix I

Case 10

ALFRED STATE MEDICAL CENTER 100 MAIN ST. ALFRED, NY 14802 (607) 555-1234 HOSPITAL #: 000999				INPATIENT FACE SHEET			
PATIENT NAME AND ADDRESS PAULSON, Paula P. 49 Hillbottom Way Alfred, NY 14802				SEX F	RACE W	MARITAL STATUS M	PATIENT NO. Case 10
				DATE OF BIRTH 01-20-YYYY	MAIDEN NAME King	OCCUPATION Waitress	
ADMISSION DATE 04-26-YYYY	TIME 16:00	DISCHARGE DATE 05-01-YYYY	TIME 09:30	LENGTH OF STAY 05 DAYS	TELEPHONE NUMBER (607) 555-2836		
GUARANTOR NAME AND ADDRESS PAULSON, Patrick 49 Hillbottom Way Alfred, NY 14802				NEXT OF KIN NAME AND ADDRESS PAULSON, Patrick 49 Hillbottom Way Alfred, NY 14802			
GUARANTOR TELEPHONE NO. (607) 555-2836		RELATIONSHIP TO PATIENT Husband		NEXT OF KIN TELEPHONE NUMBER (607) 555-2836		RELATIONSHIP TO PATIENT Husband	
ADMITTING PHYSICIAN Thompson MD, Donald		SERVICE Medical		ADMIT TYPE 2		ROOM NUMBER/BED 0367/01	
ATTENDING PHYSICIAN Thompson MD, Donald		ATTENDING PHYSICIAN UPIN 100801		ADMITTING DIAGNOSIS Congestive Heart Failure			
PRIMARY INSURER BCBS		POLICY AND GROUP NUMBER 432763201 77690		SECONDARY INSURER Empire Plan		POLICY AND GROUP NUMBER 5739057512	
DIAGNOSES AND PROCEDURES				ICD-9-CM		ICD-10-CM/PCS	
PRINCIPAL DIAGNOSIS Acute Bronchitis				491.22		J20.8	
SECONDARY DIAGNOSES Chronic obstructive pulmonary disease Restrictive Lung Disease Congestive heart failure				496 518.89 428.0		J44.9 J98.4 I50.9	
PRINCIPAL PROCEDURE							
SECONDARY PROCEDURES							
TOTAL CHARGES: \$ 7,236.95							
ACTIVITY: ☐ Bedrest ☒ Light ☐ Usual ☐ Unlimited ☐ Other:							
DIET: ☐ Regular ☐ Low Cholesterol ☐ Low Salt ☐ ADA ☐ _____ Calorie							
FOLLOW-UP: ☒ Call for appointment ☒ Office appointment in 2 wks. Other:							
SPECIAL INSTRUCTIONS: Go to Pulmonary lab for blood test 1 hr before appt.							
Signature of Attending Physician: Donald Thompson, MD							

Copyright © 2016 Green/Bowie. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

PAULSON, Paula P Case 10 Dr. Thompson	Admission: 04-26-YYYY DOB: 01-20-YYYY ROOM: 0367	CONSENT TO ADMISSION
I, <u>Paula P. Paulson</u> hereby consent to admission to the Alfred State Medical Center (ASMC), and I further consent to such routine hospital care, diagnostic procedures, and medical treatment that the medical and professional staff of ASMC may deem necessary or advisable. I authorize the use of medical information obtained about me as specified above and the disclosure of such information to my referring physician(s). This form has been fully explained to me, and I understand its contents. I further understand that no guarantees have been made to me as to the results of treatments or examinations done at the ASMC.		
<u>Paula P. Paulson</u>	<u>April 26, 4444</u>	
Signature of Patient	Date	
Signature of Parent/Legal Guardian for Minor	Date	
Relationship to Minor		
<u>Andrea Wittenman</u>	<u>April 26, 4444</u>	
WITNESS: Alfred State Medical Center Staff Member	Date	
CONSENT TO RELEASE INFORMATION FOR REIMBURSEMENT PURPOSES In order to permit reimbursement, upon request, the Alfred State Medical Center (ASMC) may disclose such treatment information pertaining to my hospitalization to any corporation, organization, or agent thereof, which is, or may be liable under contract to the ASMC or to me, or to any of my family members or other person, for payment of all or part of the ASMC's charges for services rendered to me (e.g., the patient's health insurance carrier). I understand that the purpose of any release of information is to facilitate reimbursement for services rendered. In addition, in the event that my health insurance program includes utilization review of services provided during this admission, I authorize ASMC to release information as is necessary to permit the review. This authorization will expire once the reimbursement for services rendered is complete.		
<u>Paula P. Paulson</u>	<u>April 26, 4444</u>	
Signature of Patient	Date	
Signature of Parent/Legal Guardian for Minor	Date	
Relationship to Minor		
<u>Andrea Wittenman</u>	<u>April 26, 4444</u>	
WITNESS: Alfred State Medical Center Staff Member	Date	
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST., ALFRED, NY 14802 ■ (607) 555-1234		

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

254 • Appendix I

PAULSON, Paula P Case 10 Dr. Thompson	Admission 04-26-YYYY DOB 01-20-YYYY Room 0367	ADVANCE DIRECTIVE	
Your answers to the following questions will assist your Physician and the Hospital to respect your wishes regarding your medical care. This information will become a part of your medical record.			
	YES	NO	PATIENT'S INITIALS
1. Have you been provided with a copy of the information called "Patient Rights Regarding Health Care Decision?"	X		PP
2. Have you prepared a "Living Will?" If yes, please provide the Hospital with a copy for your medical record.		X	PP
3. Have you prepared a Durable Power of Attorney for Health Care? If yes, please provide the Hospital with a copy for your medical record.		X	PP
4. Have you provided this facility with an Advance Directive on a prior admission and is it still in effect? If yes, Admitting Office to contact Medical Records to obtain a copy for the medical record.		X	PP
5. Do you desire to execute a Living Will/Durable Power of Attorney? If yes, refer to in order: a. Physician b. Social Service c. Volunteer Service		X	PP
HOSPITAL STAFF DIRECTIONS: Check when each step is completed.			
1. ☒	Verify the above questions where answered and actions taken where required.		
2. ☒	If the "Patient Rights" information was provided to someone other than the patient, state reason: Name of Individual Receiving Information Relationship to Patient		
3. ☒	If information was provided in a language other than English, specify language and method.		
4. ☒	Verify patient was advised on how to obtain additional information on Advance Directives.		
5. ☒	Verify the Patient/Family Member/Legal Representative was asked to provide the Hospital with a copy of the Advance Directive which will be retained in the medical record. File this form in the medical record, and give a copy to the patient.		
Name of Patient (Name of Individual giving information if different from Patient) <u>Paula P. Paulson</u> <u>April 26, YYYY</u>			
Signature of Patient <u>Andrea W. Hoffman</u>		Date <u>April 26, YYYY</u>	
Signature of Hospital Representative		Date	
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST., ALFRED, NY 14802 ■ (607) 555-1234			

Copyright 2006 by Green Publishing. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 255

PAULSON, Paula P		Admission 04-26-YYYY	PROGRESS NOTES
Case#10		DOB 01-20-YYYY	
Dr Thompson		ROOM 0367	
Date	(Please skip one line between dates.)		
4-26	Chief Complaint: Shortness of breath.		
	Diagnosis: CHF		
	Plan of Treatment: See orders.		
04-26	Hk. nets Rx w/ 25 ml Proventil + N/SS to give Pt. tol rx well P 72 + RR 24		
1200	BS clear R/L w/ grrm spacer O off pt. pre + post at JAC		
	L Seraphin CPT		
04-26	Pt. gave us obsn = S.S. rhonchi + wheezes - pt. tol rx well dry N/PC		
1200	O on JAC pre + post rx		
	L Seraphin CPT		
04-27	Pt. is less short of breath today. Weight + 6 lbs. But still has a lot of rales at bases. Continue same treatment.		
	Donald Thompson, MD		
04-27	Hk. nets Rx w/ 25 ml Proventil + N/SS P 72 - RR 24 BS rales + exp wheezes L/NPC		
0715	SAT 90% on 3l - pt. tol rx well L Seraphin CPT		
04-27	Hk. nets Rx w/ 25 ml Proventil + N/SS P 72 - RR 24 BS rales + wheezes N/PC		
1140	O2 3l w/c pre + post Respirdyne done.		
	L Seraphin CPT		
04-27	Hk. nets Rx w/ 25 ml Proventil + N/SS P 72 - RR 20 BS ↓ d N/PC O2 on 3l pt. tol rx		
1520	Well w/ fine rales bases		
	L Seraphin CPT		
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST. ALFRED, NY 14801 ■ (607) 555-1234			

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

256 • Appendix I

PAULSON, Paula P		Admission 04-26-YYYY	PROGRESS NOTES
Case# 10		DOB 01-20-YYYY	
Dr Thompson		ROOM 0367	
Date	(Please skip one line between dates.)		
04-27	HxN 25mg Proventil & NSS BS ↓ ↓d L ↓d R rales ½ up bilat. LNPC; HR 80; R 20 O2 at NC		
Sign(s)	E. Blossom, CPT		
04-28	HxN rx w/ OS w/ Albuterol/nss BS ↓ w/ rales bilaterally rhases NPC at this time.		
0710	P 88 RR 20 stable O2 on 3l nc pre + post rx		
	L. Seraphin, CPT		
04-28	Pt. sleeping well with no orthopnea or PND. Rales diminished in bases.		
	Donald Thompson, MD		
04-28	HxN rx w/ OS w/ Albuterol/nss BS rales in bases bilaterally, NPC		
1100	O2 on 3l nc		
	L. Seraphin, CPT		
04-28	Rx as above. BS rales bilaterally in bases NPC O2 on 3l nc.		
1500	L. Seraphin, CPT		
04-28	HxN 25mg Proventil & NSS BS ↓d L ↓d R rales ½ up bilat. LNPC; HR 78; R 20 O2 3l nc pre & post.		
1900	E. Blossom, CPT		
04-29	HxN w/ 22.5mg Proventil & NSS rx given Pt. rales w/ P80 + R10		
0710	B.S. clear w/ few scattered rales PC w/ clear status O2 3l nc pre + post rx		
	L. Seraphin, CPT		
04-29	Pt. is steadily improving with breather, few rales at bases yet, will ↑ Act.		
	Home tomorrow if stable. Donald Thompson, MD		

ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST., ALFRED, NY 14802 ■ (607) 555-1234

Copyright 2016 by Green/Bowie. All rights reserved. May not be copied, scanned, or duplicated, in whole or in part. Widespread distribution is prohibited. This manual may be reproduced for personal or private use only. No part of this manual may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 257

Copyright © 2016 by Sage Publishing. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

258 ♦ Appendix I

Copyright 2015 Google LLC. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Use of electronic copies of this document may not be permitted for distribution outside the United States of America. It is authorized to reproduce this document for non-commercial use only, on the condition that the copyright notice and Google's trademark are prominently displayed on each page. All other rights reserved. Google and the Google logo are trademarks of Google Inc. All other marks contained herein are the property of their respective owners.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 259

PAULSON, Paula P	Admission 04-26-YYYY		
Case 10	DOB 01-20-YYYY	LABORATORY DATA	
Dr Thompson	ROOM 0367		
SPECIMEN COLLECTED:	04-27-YYYY	SPECIMEN RECEIVED:	04-27-YYYY
BLOOD PROFILE			
TEST	RESULT	FLAG	REFERENCE
HIV	**Neg**		
	End of Report		
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST, ALFRED, NY 14802 ■ (607) 555-1234			

Copyright 2006 by Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

260 * Appendix I

PAULSON, Paula P		Admission: 04-26-YYYY	
CaseID		DOB: 01-20-YYYY	
Dr Thompson		ROOM: 0367	
LABORATORY DATA			
SPECIMEN COLLECTED: 04-26-YYYY		SPECIMEN RECEIVED: 04-26-YYYY	
CBC & DIFF			
TEST	RESULT	FLAG	REFERENCE
WBC	7.4		4.5-11.0 thous/UL
RBC	5.02	**L**	5.2-5.4 mill/UL
HGB	15.0		11.7-16.1 g/dl
HCT	45.8		35.0-47.0 %
MCV	91.2		85-99 fL
MCHC	32.8	**L**	33-37
RDW	15.2	**H**	11.4-14.5
Platelets	165		130-400 thous/UL
MPV	8.4		7.4-10.4
LYMPH %	21.1		20.5-51.1
MONO %	7.8		1.7-9.3
GRAN %	71.1		42.2-75.2
LYMPH x 10 ³	1.6		1.2-3.4
MONO x 10 ³	.6	**H**	0.11-0.59
GRAN x 10 ³	5.3		1.4-6.5
EOS x 10 ³	< .7		0.0-0.7
BASO x 10 ³	< .2		0.0-0.2
ANISO	SLIGHT		
End of Report			
ALBION STATE MEDICAL CENTER ■ 100 MAIN ST, ALBION, NY 13602 ■ (607) 555-1234			

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 261

PAULSON, Paula P		Admission: 04-26-YYYY		LABORATORY DATA	
Case#0		DOB: 01-20-YYYY			
Dr Thompson		ROOM: 0367			
SPECIMEN COLLECTED:		04-26-YYYY		SPECIMEN RECEIVED: 04-26-YYYY	
URINALYSIS - DIPSTICK ONLY					
TEST	RESULT	FLAG	REFERENCE		
COLOR	YELLOW				
SP GRAVITY	1.020		≤ 1.030		
GLUCOSE	NEG		≤ 125 mg/dl		
BILIRUBIN	NEG		≤ 0.8 mg/dl		
KETONE	NEG		≤ 10 mg/dl		
BLOOD	NEG		0.06 mg/dl hgb		
PH	5.5		5-8.0		
PROTEIN	NEGATIVE		≤ 30 mg/dl		
UROBILINOGEN	NORMAL		≤ -1 mg/dl		
NITRITES	NEG		NEG		
LEUKOCYTE	NEG		≤ 15 WBC/hpf		
EPITH	10-15		/lpf		
W.B.C.	1-2		≤ 5/hpf		
R.B.C.	1-2		≤ 5/hpf		
BACT.	RARE		1+ (≤ 20/hpf)		
End of Report					
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST, ALFRED, NY 14802 ■ (607) 555-1234					

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

262 * Appendix I

PAULSON, Paula P		Admission 04-26-YYYY	
CaseID		DOB 01-20-YYYY	
Dr Thompson		ROOM 0367	
LABORATORY DATA			
SPECIMEN COLLECTED: 04-26-YYYY		SPECIMEN RECEIVED: 04-26-YYYY	
UNIT WORKUP PANEL			
TEST	RESULT	FLAG	REFERENCE
Sodium	145		136-147 MEQ/L
Potassium	5.1		3.7-5.1 MEQ/L
Chloride	101		98-108 MEQ/L
TOTAL CO2	38	**H**	24-32 MEQ/L
Urea Nitrogen	14		7-18 mg/dl
Creatine Kinase	43		21-215 U/L
Lactic Dehydrogenase	150		100-190 U/L
Alkaline Phosphatase	120		50-136 U/L
GLUCOSE	86		70-110 mg/dl
SGOT	24		15-37 U/L
Creatinine	0.9		0.6-1.0 mg/dl
Calcium	9.3		8.8-10.5 mg/dl
Phosphorus	4.3		2.5-4.9 mg/dl
Total Bilirubin	0.5		0.0-1.1 mg/dl
Total Protein	7.0		6.4-8.2 g/dl
Albumin	3.2	**L**	3.4-5.0 g/dl
Uric Acid	9.3	**H**	2.6-5.6 mg/dl
Cholesterol	157		≤ 200mg/dl
CKMB	1.5		0.0-6.0 ng/ml
End of Report			
ALBANY STATE MEDICAL CENTER ■ 100 MAIN ST. ALBANY, NY 12202 ■ (607) 555-1234			

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 263

PAULSON, Paula P	Admission 04-26-YYYY	
Case10	DOB 01-20-YYYY	LABORATORY DATA
Dr Thompson	ROOM 0367	
SPECIMEN COLLECTED:	04-27-YYYY	SPECIMEN RECEIVED: 04-27-YYYY
CARDIAC PROFILE		
TEST	RESULT	FLAG REFERENCE
Creatine Kinase	35	21-215 U/L
CKMB	0.7	0.0-6.0 ng/ml
End of Report		
ALFRED ST. M. MEDICAL CENTER ■ 100 MAIN ST., ALFRED, NY 14802 ■ (607) 555-1234		

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

264 * Appendix I

PAULSON, Paula P		Admission: 04-26-YYYY	
Case#0		DOB: 01-20-YYYY	
Dr. Thompson		ROOM: 0367	
SPECIMEN COLLECTED: 04-28-YYYY		SPECIMEN RECEIVED: 04-28-YYYY	
LABORATORY DATA			
TEST	RESULT	FLAG	REFERENCE
ELECTROLYTES PANEL			
Sodium	141		136-147 MEQ/L
Potassium	4.5		3.7-5.1 MEQ/L
Chloride	94	**L**	98-108 MEQ/L
Total CO ₂	35	**H**	24-32 MEQ/L
UREA NITROGEN	16		7-18 MG/DL
THYROID PANEL			
T4	5.2		4.9-10.7 UG/DL
TSH	1.28		0.38-6.15 UIU/ML
End of Report			
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST. ALFRED, NY 14802 ■ (607) 555-1234			

Copyright © 2014 by Green/Bowie. All rights reserved. May not be copied, scanned, or duplicated, in whole or in part. This publication may contain third party content that may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 265

PAULSON, Paula P.		Admission: 04-26-YYYY	
Case#0		DOB 01-20-YYYY	
Dr Thompson		ROOM 0367	
SPECIMEN COLLECTED: 04-30-YYYY		SPECIMEN RECEIVED: 04-30-YYYY	
LABORATORY DATA			
TEST	RESULT	FLAG	REFERENCE
ELECTROLYTES	PANEL		
Sodium	140		136-147 MEQ/L
Potassium	5.2	**H**	3.7-5.1 MEQ/L
Chloride	92	**L**	98-108 MEQ/L
Total CO ₂	34	**H**	24-32 MEQ/L
UREA NITROGEN	25	**H**	7-18 MG/DL
DIGOXIN	1.6		0.5-2.0 NG/ML
DIGOXIN NOTE	REF.INT-RX LEVEL AT PEAK TISSUE LEVEL > 8 HRS POST ORAL DOSE. OTHER FACTORS MAY AFFECT LEVEL AND ACTIVITY.		
	End of Report		
ALBANY STATE MEDICAL CENTER ■ 100 MAIN ST., ALBANY, NY 12242 ■ (607) 555-1234			

Copyright © 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

266 * Appendix I

PAULSON, Paula P.		Admission: 04-26-YYYY	RADIOMETRY
Case#10		DOB: 01-20-YYYY	
Dr. Thompson		Room: 0367	
SPECIMEN COLLECTED: 04-26-YYYY		SPECIMEN RECEIVED: 04-26-YYYY	
TEST	RESULT	REFERENCE	
BLOOD GAS VALUES			
pH	7.340		
pCO ₂	52.1	mmHg	
pO ₂	44.5	mmHg	
TEMPERATURE CORRECTED VALUES			
pH (98.6°)	7.340		
pCO ₂ (98.6°)	62.1	mmHg	
pO ₂ (98.6°)	44.5	mmHg	
ACID BASE STATUS			
HCO ₃ c	32.6	mmol/L	
ABEc	5.3	mmol/L	
BLOOD OXIMETRY VALUES			
tHb	14.5	g/dL	
O ₂ Hb	78.3	%	
COHb	1.0	%	
MetHb	0.7	%	
End of Report			
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST., ALFRED, NY 14802 ■ (607) 555-1234			

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 267

PAULSON, Paula P		Admission 04-26-YYYY	
Case 10		DOB 01-20-YYYY	
Dr Thompson		ROOM 0367	
SPECIMEN COLLECTED: 04-30-YYYY		SPECIMEN RECEIVED: 04-30-YYYY	
RADIOMETRY			
TEST	RESULT	REFERENCE	
BLOOD GAS VALUES			
pH	7.385		
pCO2	67.7		mmHg
pO2	40.3		mmHg
TEMPERATURE CORRECTED VALUES			
pH (98.6°)	7.385		
pCO2 (98.6°)	67.7		mmHg
pO2 (98.6°)	40.3		mmHg
ACID BASE STATUS			
HCO3c	39.6		mmol/L
ABEC	11.2		mmol/L
BLOOD OXIMETRY VALUES			
tHb	16.3		g/dL
O2Hb	74.8		%
COHb	0.7		%
MethHb	0.7		%
End of Report			
ALBANY STATE MEDICAL CENTER ■ 100 MAIN ST. ALBANY, NY 12242 ■ (518) 487-5445 ■ 1244			

Copyright 2016 by VitalSource, All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. VitalSource reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

268 • Appendix I

PAULSON, Paula P	Admission: 04-26-YYYY	RADIOLOGY REPORT
Case#0	DOB: 01-20-YYYY	
Dr. Thompson	ROOM: 0367	
Initial Diagnosis/History: CHF		
Date Requested: 04-26-YYYY		
Transport: ☒ Wheelchair ☐ Stretcher ☒ O ₂ ☐ IV ☐ IP ☒ OP ☐ ER ☐ PRE OP ☐ OR/RR ☐ Portable		
Technical Data: PA and left Lat CXR T2 ↑. TBA. Shortness of breath.		
CHEST: PA and lateral view show that the heart appears slightly enlarged compared to our study of 06-09-YYYY. The central pulmonary arteries are prominent and there is a tiny right pleural effusion. The left diaphragm is elevated with some overlying fibrosis but this is unchanged from previously.		
CONCLUSION: Findings compatible with mild congestive heart failure.		
DD: 04-26-YYYY	<i>Philip Rogers</i>	
DT: 04-26-YYYY	Philip Rogers, M.D., Radiologist	
ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST., ALFRED, NY 14802 ■ (607) 555-1234		

Copyright 2016 Cengage Learning. All Rights Reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

Case 10 • 269

PAULSON, Paula P	Admission 04-26-YYYY	NUCLEAR MEDICINE
Case 10	DOB 01-20-YYYY	
Dr Thompson	ROOM 0367	

Reason for Nuclear Scan: Ventilation Perfusion Scan. Determine the reason for poor oxygenation.

Date Requested: 04-30-YYYY

Transport: ☒ Wheelchair ☐ Stretcher ☒ O₂ ☐ IV

☒ IP ☐ OP ☐ ER ☐ PRE OP ☐ OR/RR ☐ Portable

VENTILATION PERFUSION LUNG SCAN: Following inhalation of technetium aerosol and intravenous injection as the MAA films were made of AP, PA and both lateral projections. The activity throughout both lungs is quite patchy which appears to be due to chronic lung disease or residual change from the patient's heart failure. I do not see any segmental perfusion defects or areas of mismatch to suggest an embolus.

CONCLUSION: No evidence of a pulmonary embolus.

DD: 04-30-YYYY

DT: 04-30-YYYY

Philip Rogers
Philip Rogers, M.D., Radiologist

ALFRED STATE MEDICAL CENTER ■ 100 MAIN ST, ALFRED, NY 14802 ■ (607) 555-1234

Copyright 2016 by Green, M. Rights Reserved. May not be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or by any information storage and retrieval system, without prior written permission from the publisher.

PRINTED BY: m.gizzi@my.online.bcl.edu. Printing is for personal, private use only. No part of this book may be reproduced or transmitted without publisher's prior permission. Violators will be prosecuted.

270 • Appendix I

PAULSON, Paula P	Admission 04-26-YYYY	RADIOLOGY REPORT
Case#0	DOB 01-20-YYYY	
Dr Thompson	ROOM 0367	
Initial Diagnosis/History: CHF.		
Date Requested: 04-30-YYYY		
Transport: ☒ Wheelchair ☐ Stretcher ☒ O ₂ ☐ IV ☒ IP ☐ OP ☐ ER ☐ PRE OP ☐ OR/RR ☐ Portable		
CHEST: PA and lateral views show that the interstitial markings are less prominent on today's film than they were in the previous study of 04-26. Other than this, there hasn't really been a significant change. There is no evidence of pneumonia and I certainly would not say that the patient has any congestive heart failure on the current study. There is abnormal elevation of the left diaphragm which is probably due to paralysis or eventration. The overall cardiac size has not increased.		
CONCLUSION: Probable resolution of the mild CHF since 04-26.		
DD: 04-30-YYYY		<i>Philip Rogers</i> Philip Rogers, M.D., Radiologist
DT: 04-30-YYYY		
ALPHEUS STATE MEDICAL CENTER ■ 100 MAIN ST., ALPHEUS, NY 14803 ■ (607) 955-1254		

Copyright 2006 by Elsevier. All rights reserved. May not be copied, scanned, or duplicated, in whole or in part. Due to electronic rights, some third party content may be suppressed from the eBook and/or eChapter(s). Editorial review has determined that any suppressed content does not materially affect the overall learning experience. Cengage Learning reserves the right to remove additional content at any time if subsequent rights restrictions require it.