



Subject Clinical Message Notification
From donotreply@ohit.sharear.net
To jvillines@ohit.sharear.net
Date 12/20/2018 09:54

Content

Summarization Of Episode

Created On: December 20, 2018

Patient:	PAUL SHARETEST1 82 ROCKY ROAD LANE SHAREVILLE, AR, 71001 tel:(555)555-0555	MRN: 593854
Birthdate:	January 1, 1965	Sex: Male
Guardian:		Next of Kin: PAUL NO OTHER 82 ROCKY ROAD LANE OZ, MO, 00000 tel:(555)555-6610
Race	WHITE	Ethnicity Not Hispanic or Latino
Language	ENGLISH (preferred)Unknown (preferred)English (preferred)eng (preferred)	

Table of Contents

- [Advance Directives](#)
- [Allergies and Adverse Reactions](#)
- [Encounters](#)
- [Medications](#)
- [Insurance Providers](#)
- [Problems, Conditions, and Diagnoses](#)
- [Surgeries/Procedures](#)
- [Results](#)
- [Vital Signs](#)

Advance Directives

Directive	Description	Verifier	Custodian	Status	Observation Description	Data Source(s)
N						Baxter Regional Medical Center
N						Baxter Regional Medical Center
N						Arkansas Methodist Medical Center (AMMC)
N						Arkansas Methodist Medical Center (AMMC)
N						Arkansas Methodist Medical Center (AMMC)
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N						Baxter Regional Medical Center
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N						Baxter Regional Medical Center

Allergies and Adverse Reactions

Type	Description	Substance	Reaction	Status	Data Source(s)
Drug allergy	DIPHENHYDRAMINE	DIPHENHYDRAMINE			Arkansas Methodist Medical Center (AMMC)
Miscellaneous allergy	No Known Drug Allergies	No Known Drug Allergies			Arkansas Methodist Medical Center (AMMC)
Drug allergy	Penicillins	Penicillins			John E Alexander Family Practice Center
Drug allergy	Codeine Phosphate	Codeine Phosphate			John E Alexander Family Practice Center

Type	Description	Substance	Reaction	Status	Data Source(s)
Drug allergy	METHADONE	METHADONE			Arkansas Methodist Medical Center (AMMC)
Drug allergy	KETOROLAC	KETOROLAC	Hives, Rash, Swelling, Itching MODERATE		Arkansas Methodist Medical Center (AMMC)
Drug allergy	IODINE	IODINE	SHELLFISH/FISH ALLERGY MODERATE		Arkansas Methodist Medical Center (AMMC)
Drug allergy	FISH OIL	FISH OIL			Arkansas Methodist Medical Center (AMMC)
Food allergy	FISH PROTEIN	FISH PROTEIN	Swelling MODERATE		Arkansas Methodist Medical Center (AMMC)
Drug allergy	LAMICTAL	LAMICTAL			Arkansas Methodist Medical Center (AMMC)
Drug allergy	RAZADYNE	RAZADYNE			Arkansas Methodist Medical Center (AMMC)
Drug allergy	SHELLFISH	SHELLFISH			Arkansas Methodist Medical Center (AMMC)

Encounters

Encounter	Providers	Location	Date	Indications	Data Source(s)
U			05/20/2016 07:18:00 PM CDT		North Arkansas Regional Medical Center
Outpatient	Attender: JOHN WILSON MD Consultant: C SHOTTS MD	ARKANSAS METH MED CENTER-080	05/20/2016 05:14:00 PM CDT	ABD PAIN	Arkansas Methodist Medical Center (AMMC)
ABD PAIN					
Outpatient	Attender: MD BAXTER ZZTESTPROVIDER MD Attender: JOHN WILSON MD	ARKANSAS METH MED CENTER-080	05/20/2016 04:10:00 PM CDT	CHEST PAIN	Arkansas Methodist Medical Center (AMMC)
CHEST PAIN					
Outpatient	Attender: TERESA GONZALEZ Nurse Practitioner	ARKANSAS METH MED CENTER	05/20/2016 03:44:00 PM CDT - 05/20/2016 03:44:00 PM CDT	Pain in left knee	Arkansas Methodist Medical Center (AMMC)
Pain in left knee					
Outpatient	Attender: MD BAXTER ZZTESTPROVIDER MD Attender: Johnathan Ledet	NOPTH-NDER	05/20/2016 01:29:35 PM CDT		North East Arkansas Baptist Clinics (NEABC)
InPatient		ED-ED	05/20/2016 12:00:00 AM CDT		University of Arkansas for Medical Sciences (UAMS)
Outpatient	Attender: MD BAXTER ZZTESTPROVIDER MD Attender: DR CHRISTINA GILLENWATER NP		05/16/2016 10:27:44 AM CDT - 05/16/2016 12:15:49 PM CDT		John E Alexander Family Practice Center
Outpatient	Attender: MD BAXTER ZZTESTPROVIDER MD Attender: LOUIS ELKINS Admitter: LOUIS ELKINS		05/16/2016 10:12:00 AM CDT - 05/16/2016 11:59:00 PM CDT	PREOP, AAA	Baxter Regional Medical Center
PREOP, AAA					
Inpatient	Attender: MD BAXTER ZZTESTPROVIDER MD Attender: MD JASON MCCONNELL MD Admitter: MD JASON MCCONNELL MD		05/12/2015 08:55:00 AM CDT - 05/15/2015 03:15:00 PM CDT	RIGHT KNEE DJD, PRE OP, ARTHRITIS, HTN	Baxter Regional Medical Center
RIGHT KNEE DJD, PRE OP, ARTHRITIS, HTN					

Medications

Medication	Brand Name	Start Date	Product Form	Dose	Route	Administrative Instructions	Pharmacy Instructions	Status	Indications	Reaction	Description	Data Source(s)
Mucinex D Maximum Strength												John E Alexander Family Practice Center
Piperacillin/Tazobactam												John E Alexander Family Practice Center
Testosterone Cypionate												John E Alexander Family Practice Center

Medication	Brand Name	Start Date	Product Form	Dose	Route	Administrative Instructions	Pharmacy Instructions	Status	Indications	Reaction	Description	Data Source(s)
Potassium Citrate												John E Alexander Family Practice Center
Xarelto												John E Alexander Family Practice Center
Vitamin C												John E Alexander Family Practice Center
Pentoxifylline ER												John E Alexander Family Practice Center
Gabapentin												John E Alexander Family Practice Center
Trazodone HCl												John E Alexander Family Practice Center
Baclofen												John E Alexander Family Practice Center
Vitamin D2												John E Alexander Family Practice Center
Voltaren												John E Alexander Family Practice Center
Midodrine HCl												John E Alexander Family Practice Center
Macrobid												John E Alexander Family Practice Center
Gas-X												John E Alexander Family Practice Center
Oxycodone/Acetaminophen												John E Alexander Family Practice Center
Amitiza												John E Alexander Family Practice Center
Tizanidine HCl												John E Alexander Family Practice Center
Prilosec OTC												John E Alexander Family Practice Center

Medication	Brand Name	Start Date	Product Form	Dose	Route	Administrative Instructions	Pharmacy Instructions	Status	Indications	Reaction	Description	Data Source(s)
Citalopram Hydrobromide												John E Alexander Family Practice Center

Insurance Providers

Payer name	Policy type / Coverage type	Policy ID	Covered party ID	Covered party's relationship to holder	Policy Holder	Plan Information
UNITED HEALTHCARE	100	525197336		SELF		525197336
UNITED HEALTHCARE	100	525197336		SELF		525197336
MEDICARE A AND B	100	123456789A		SELF		123456789A
MEDICARE A AND B A	A	123456789A		SELF		123456789A

Problems, Conditions, and Diagnoses

Code	Display Name	Description	Problem Type	Effective Dates	Data Source(s)
592.9	URINARY CALCULUS UNSPECIFIED	Unspecified urinary calculus	Diagnosis	04/07/2016 03:57:22 PM CDT	John E Alexander Family Practice Center
344.00	QUADRIPLEGIA UNSPECIFIED	Quadriplegia, NOS	Diagnosis	10/01/2015 02:53:19 PM CDT	John E Alexander Family Practice Center
Unspecified_osteoarthritis,_unspecified_site	Unspecified osteoarthritis, unspecified site	Unspecified osteoarthritis, unspecified site	Diagnosis		Baxter Regional Medical Center
LOC_OSTEOARTH_NOS-L/LEG	LOC OSTEOARTH NOS-L/LEG	LOC OSTEOARTH NOS-L/LEG	Diagnosis		Baxter Regional Medical Center
HYPERTENSION_NOS	HYPERTENSION NOS	HYPERTENSION NOS	Diagnosis		Baxter Regional Medical Center
Encounter_for_other_preprocedural_examination	Encounter for other preprocedural examination	Encounter for other preprocedural examination	Diagnosis		Baxter Regional Medical Center
Abdominal_aortic_aneurysm,_without_rupture	Abdominal aortic aneurysm, without rupture	Abdominal aortic aneurysm, without rupture	Diagnosis		Baxter Regional Medical Center
Pure_hypercholesterolemia	Pure hypercholesterolemia	Pure hypercholesterolemia	Diagnosis		Baxter Regional Medical Center
DMII_wo_cmp_nt_st_uncntr	DMII wo cmp nt st uncntr	DMII wo cmp nt st uncntr	Diagnosis		Baxter Regional Medical Center
ASTHMA_UNSPECIFIED,_UNSP	ASTHMA UNSPECIFIED, UNSP	ASTHMA UNSPECIFIED, UNSP	Diagnosis		Baxter Regional Medical Center
BACKACHE_NOS	BACKACHE NOS	BACKACHE NOS	Diagnosis		Baxter Regional Medical Center
OTHER_CHRONIC_PAIN	OTHER CHRONIC PAIN	OTHER CHRONIC PAIN	Diagnosis		Baxter Regional Medical Center
TOBACCO_USE_DISORDER	TOBACCO USE DISORDER	TOBACCO USE DISORDER	Diagnosis		Baxter Regional Medical Center
TEAR_MENISCUS_NEC-CURREN	TEAR MENISCUS NEC-CURREN	TEAR MENISCUS NEC-CURREN	Diagnosis		Baxter Regional Medical Center
ACCIDENT_NOS	ACCIDENT NOS	ACCIDENT NOS	Diagnosis		Baxter Regional Medical Center

Surgeries/Procedures

Procedure	Description	Date	Indications	Data Source(s)
TOTAL KNEE REPLACEMENT	TOTAL KNEE REPLACEMENT	05/12/2015 12:00:00 AM CDT		Baxter Regional Medical Center

Results

ID	Date	Data Source
F_20160520200339_	05/20/2016 08:03:00 PM CDT	University of Arkansas for Medical Sciences (UAMS)

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
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Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
SODIUM	140 mmol/L	135-145			University of Arkansas for Medical Sciences (UAMS)	
POTASSIUM	3.7 mmol/L	3.5-5.1			University of Arkansas for Medical Sciences (UAMS)	
CHLORIDE	112 mmol/L	98-107	Above high normal		University of Arkansas for Medical Sciences (UAMS)	
CO2	16 mmol/L	22-32	Below low normal		University of Arkansas for Medical Sciences (UAMS)	
BLOOD UREA NITROGEN	19 mg/dL	6-20			University of Arkansas for Medical Sciences (UAMS)	
CREATININE	0.8 mg/dL	0.4-1.0			University of Arkansas for Medical Sciences (UAMS)	
CALCIUM	9.3 mg/dL	8.6-10.2			University of Arkansas for Medical Sciences (UAMS)	
GLUCOSE RANDOM	108 mg/dL	70-110			University of Arkansas for Medical Sciences (UAMS)	
ANION GAP	12	3-11	Above high normal		University of Arkansas for Medical Sciences (UAMS)	
Anion Gap calculated as $Na - (Cl + HCO_3)$.						
EGFR	>59.0				University of Arkansas for Medical Sciences (UAMS)	
Estimated glomerular filtration rate (eGFR) values are calculated using the IDMS-traceable MDRD equation. (see NEJM 354:23 pp. 2473-83). Values of less than or equal to 59 mL/min/1.73m ² may be associated with chronic kidney disease.						

ID	Date	Data Source
F_20160520191800_773615	05/20/2016 07:17:00 PM CDT	North Arkansas Regional Medical Center

ID	Date	Data Source
NORTH ARKANSAS REGIONAL MEDICAL CENTER 620 N. MAIN HARRISON, AR 72601 EMERGENCY DEPARTMENT PHYSICIAN REPORT SHARETEST1,PAUL D.O.B.: 01/01/1965 SEX/AGE: M / ADMIT/REG DATE: 05/20/16 ACCOUNT #: V00092581276 MED REC #: M000247659 ATTENDING PHY: DUCK DONALD PRIMARY CARE PHY: REPORT STATUS: Signed		
NAME: General Chief		
<p>Complaint: Hyperglycemia Stated Complaint: ER PT Time Seen by MD: 18:33 Source: patient Exam Limitations: no limitations Mandated Screening: Emergent Vitals/Home medications Allergies Coded Allergies Type Severity Reaction Last Updated Verified No Known Drug Allergy 5/20/16 No History of Present Illness Initial Comments Patient is non-English speaking and history is obtained through a friend in the room. Evidently the patient has diabetic but has used oral medications up until about a month ago when he quit them. He's had abdominal cramping, weakness, headache, elevated blood sugar for the past couple of days. Timing/Duration: getting worse Severity: severe Travel History Have you travelled outside U.S: No Travel to Ebola affected area: No Past Medical History Medical History: : diabetes Social History Smoking Status: Never smoked Review of Systems Constitutional: weakness EENTM: no symptoms reported Respiratory: shortness of breath Cardiovascular: no symptoms reported Gastrointestinal: abdominal pain nausea Musculoskeletal: see HPI other Skin: no symptoms reported (muscle aches) All Other Systems: Reviewed and Negative Physical Exam General Constitutional Constitutional: alert moderate distress OTHER (ill-appearing smells of ketones) Reviewed Vital Signs: Yes Vital Signs Vital Signs Date Time Temp Pulse Resp B/P Pulse Ox O2 Delivery O2 Flow Rate FiO2 5/20/16 18:45 105 22 116/80 100 5/20/16 18:33 127/78 5/20/16 18:00 126 14 135/87 99 5/20/16 18:00 122 18 100 Room Air 5/20/16 17:54 97.4 122 18 121/78 100 Head Head: normal inspection ENT EENT: OTHER (dry oral mucosa) Eyes Eye: nml external inspection PERRLA Neck Neck: normal inspection Respiratory Respiratory: normal breath soundsNo accessory muscle use, OTHER (tachypnea,) Cardiovascular Cardiovascular: OTHER (tachycardia) Abdomen Gastrointestinal: No distension, tender (mild generalized) Integumentary Integumentary: color normal warm and dry Neuro/Psych Neuro/Psych: oriented x 3 cranial nerves 2-12 nml Results/Orders Results/Orders Laboratory Tests Test 5/20/16 18:30 5/20/16 18:45 5/20/16 18:51 Bedside Glucose 413mg/dL White Blood Count 37.710 3/uL Red Blood Count 4.9610 6/uL Hemoglobin 14.7g/dL Hematocrit 43.5% Mean Corpuscular Volume 87.7fL Mean Corpuscular Hemoglobin 29.7pg Mean Corpuscular Hemoglobin Concent 33.9g/dL Red Cell Distribution Width 13.4% Platelet Count 24710 3/uL Mean Platelet Volume 8.5fL Neutrophils (%) (Auto) 90.0% Lymphocytes (%) (Auto) 4.5% Monocytes (%) (Auto) 4.7% Eosinophils (%) (Auto) 0.0% Basophils (%) (Auto) 0.8% Neutrophils # (Auto) 33.910 3/uL Lymphocytes # (Auto) 1.710 3/uL Monocytes # (Auto) 1.810 3/uL Eosinophils # (Auto) 0.010 3/uL Basophils # (Auto) 0.310 3/uL Arterial Blood pH 7.16pH units Arterial Blood Partial Pressure CO2 11mm/Hg Arterial Blood Partial Pressure O2 123mm/Hg Arterial Blood HCO3 3.9mmol/L Arterial Blood Total CO2 4.2mmol/L Arterial Bld O2 Saturation (Calc) 98% Arterial Blood Base Excess -22.3mmol/L Oxygen Delivery Device RA Progress Medical Decision Assistance: Reviewed old record Re-evaluation: Unchanged COUNSELED: Patient, Family NOTES Patient is given bolus of normal saline IV 1 L. Given 10 units of IV regular insulin. Discussed with hospitalist for admission. Chest x-ray, urine, chemistry is pending however patient's blood sugars over 400 with a pH is 7.1 and a base deficit of -22 Departure Time of Disposition: 19:16 Discharge Order: Admit (Inpatient) Impression: Primary Impression: Diabetic ketoacidosis Qualified Code: E10.10 - Type 1 diabetes mellitus with ketoacidosis without coma Condition: Stable Critical Care Note Critical Care Time: 30-45 min Blubaugh,Richard DO May 20, 2016 19:17 RICHARD M BLUBAUGH DO DICTATED BY: RICHARD M BLUBAUGH DO ELECTRONICALLY SIGNED BY: Richard Blubaugh, DO SIGNED DATE/TIME: 05/20/16 1917 ELECTRONICALLY CO-SIGNED BY: CO-SIGNED DATE/TIME: OTHER DICTATED BY: cc:</p>		
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<p>620 N. MAIN HARRISON, AR 72601 EMERGENCY DEPARTMENT PHYSICIAN REPORT SHARETEST1,PAUL D.O.B.: 01/01/1965 SEX/AGE: M / ADMIT/REG DATE: 05/20/16 ACCOUNT #: V00092581276 MED REC #: M000247659 ATTENDING PHY: DUCK DONALD PRIMARY CARE PHY: REPORT STATUS: Signed</p>		
NAME: General Chief		
<p>Complaint: Hyperglycemia Stated Complaint: ER PT Time Seen by MD: 18:33 Source: patient Exam Limitations: no limitations Mandated Screening: Emergent Vitals/Home medications Allergies Coded Allergies Type Severity Reaction Last Updated Verified No Known Drug Allergy 5/20/16 No History of Present Illness Initial Comments Patient is non-English speaking and history is obtained through a friend in the room. Evidently the patient has diabetic but has used oral medications up until about a month ago when he quit them. He's had abdominal cramping, weakness, headache, elevated blood sugar for the past couple of days. Timing/Duration: getting worse Severity: severe Travel History Have you travelled outside U.S: No Travel to Ebola affected area: No Past Medical History Medical History: : diabetes Social History Smoking Status: Never smoked Review of Systems Constitutional: weakness EENTM: no symptoms reported Respiratory: shortness of breath Cardiovascular: no symptoms reported Gastrointestinal: abdominal pain nausea Musculoskeletal: see HPI other Skin: no symptoms reported (muscle aches) All Other Systems: Reviewed and Negative Physical Exam General Constitutional Constitutional: alert moderate distress OTHER (ill-appearing smells of ketones) Reviewed Vital Signs: Yes Vital Signs Vital Signs Date Time Temp Pulse Resp B/P Pulse Ox O2 Delivery O2 Flow Rate FiO2 5/20/16 18:45 105 22 116/80 100 5/20/16 18:33 127/78 5/20/16 18:00 126 14 135/87 99 5/20/16 18:00 122 18 100 Room Air 5/20/16 17:54 97.4 122 18 121/78 100 Head Head: normal inspection ENT EENT: OTHER (dry oral mucosa) Eyes Eye: nml external inspection PERRLA Neck Neck: normal inspection Respiratory Respiratory: normal breath soundsNo accessory muscle use, OTHER (tachypnea,) Cardiovascular Cardiovascular: OTHER (tachycardia) Abdomen Gastrointestinal: No distension, tender (mild generalized) Integumentary Integumentary: color normal warm and dry Neuro/Psych Neuro/Psych: oriented x 3 cranial nerves 2-12 nml Results/Orders Results/Orders Laboratory Tests Test 5/20/16 18:30 5/20/16 18:45 5/20/16 18:51 Bedside Glucose 413mg/dL White Blood Count 37.710 3/uL Red Blood Count 4.9610 6/uL Hemoglobin 14.7g/dL Hematocrit 43.5% Mean Corpuscular Volume 87.7fL Mean Corpuscular Hemoglobin 29.7pg Mean Corpuscular Hemoglobin Concent 33.9g/dL Red Cell Distribution Width 13.4% Platelet Count 24710 3/uL Mean Platelet Volume 8.5fL Neutrophils (%) (Auto) 90.0% Lymphocytes (%) (Auto) 4.5% Monocytes (%) (Auto) 4.7% Eosinophils (%) (Auto) 0.0% Basophils (%) (Auto) 0.8% Neutrophils # (Auto) 33.910 3/uL Lymphocytes # (Auto) 1.710 3/uL Monocytes # (Auto) 1.810 3/uL Eosinophils # (Auto) 0.010 3/uL Basophils # (Auto) 0.310 3/uL Arterial Blood pH 7.16pH units Arterial Blood Partial Pressure CO2 11mm/Hg Arterial Blood Partial Pressure O2 123mm/Hg Arterial Blood HCO3 3.9mmol/L Arterial Blood Total CO2 4.2mmol/L Arterial Bld O2 Saturation (Calc) 98% Arterial Blood Base Excess -22.3mmol/L Oxygen Delivery Device RA Progress Medical Decision Assistance: Reviewed old record Re-evaluation: Unchanged COUNSELED: Patient, Family NOTES Patient is given bolus of normal saline IV 1 L. Given 10 units of IV regular insulin. Discussed with hospitalist for admission. Chest x-ray, urine, chemistry is pending however patient's blood sugars over 400 with a pH is 7.1 and a base deficit of -22 Departure Time of Disposition: 19:16 Discharge Order: Admit (Inpatient) Impression: Primary Impression: Diabetic ketoacidosis Qualified Code: E10.10 - Type 1 diabetes mellitus with ketoacidosis without coma Condition: Stable Critical Care Note Critical Care Time: 30-45 min Blubaugh,Richard DO May 20, 2016 19:17 RICHARD M BLUBAUGH DO DICTATED BY: RICHARD M BLUBAUGH DO ELECTRONICALLY SIGNED BY: Richard Blubaugh, DO SIGNED DATE/TIME: 05/20/16 1917 ELECTRONICALLY CO-SIGNED BY: CO-SIGNED DATE/TIME: OTHER DICTATED BY: cc:</p>		

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
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ID	Date	Data Source
F_20160520191600_789752.001	05/20/2016 05:21:00 PM CDT	North Arkansas Regional Medical Center

ID	Date	Data Source
NORTH ARK REGIONAL MED CTR 620 N MAIN HARRISON, AR 72601 DIAGNOSTIC RADIOLOGY REPORT		
NAME: SHARETEST1, PAUL A VISIT		
DATE: 05/20/16 DOB: 01/01/1965 SEX / AGE: M / ORDERING PHY: POWELL, HEATHER MD PRIMARY CARE PHY: Powell, Heather MD MED REC #: M000091954 ACCOUNT #: V0009257791 PT TYPE: REG CLI REPORT STATUS: Signed		
DEXA SPINE BOTH FEMURS DEXA		
BONE MINERAL DENSITOMETRY: Dual femur and AP spine imaging was conducted to obtain T-scores that range from -2.9 to -0.6. IMPRESSION: 1. Osteoporosis. 2. High fracture risk. TRANSCRIBED BY: Portia Hutcheson TRANSCRIBED BY DATE/TIME: 05/20/16 1853 DICTATED BY: CHRIS BENNETT MD DICTATED DATE/TIME: 05/20/16 1721 ELECTRONICALLY SIGNED BY: Chris Bennett, MD SIGNED DATE/TIME: 05/20/16 1915 cc: Powell, Heather MD		

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
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ID	Date	Data Source
F_20160520190528_706548920160520	05/20/2016 07:05:00 PM CDT	Arkansas Methodist Medical Center (AMMC)

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
URINALYSIS W/REFLEX CULTURE					Arkansas Methodist Medical Center (AMMC)	
URINALYSIS TEST RESULT						
NORMAL						
Color	YELLOW	yellow to dark yellow			Arkansas Methodist Medical Center (AMMC)	
Appearance	SL CLOUDY	clear			Arkansas Methodist Medical Center (AMMC)	
Glucose	NEG	negative			Arkansas Methodist Medical Center (AMMC)	
Bilirubin	NEG	negative			Arkansas Methodist Medical Center (AMMC)	
Ictotest	N/A	negative			Arkansas Methodist Medical Center (AMMC)	
Ketone	NEG	negative			Arkansas Methodist Medical Center (AMMC)	
Sp Gravity	1.025	1.003-1.035			Arkansas Methodist Medical Center (AMMC)	
Blood	LARGE	negative			Arkansas Methodist Medical Center (AMMC)	
pH	7.5	5.0-8.0			Arkansas Methodist Medical Center (AMMC)	
Protein	TRACE	negative			Arkansas Methodist Medical Center (AMMC)	
Sulfosal	TRACE	negative			Arkansas Methodist Medical Center (AMMC)	
Urobilinogen	1.0	0.2 - 1.0 Ehrh Units			Arkansas Methodist Medical Center (AMMC)	
Nitrite	POS		Abnormal (applies to non-numeric results)		Arkansas Methodist Medical Center (AMMC)	
Leu	SMALL	negative			Arkansas Methodist Medical Center (AMMC)	
Microscopic:	INDICATED				Arkansas Methodist Medical Center (AMMC)	
WBC's	10 - 20	0 - 5 /hpf			Arkansas Methodist Medical Center (AMMC)	
RBCS	2-6	0 - 2 /hpf			Arkansas Methodist Medical Center (AMMC)	
Epi cells	10-20	0 - 3			Arkansas Methodist Medical Center (AMMC)	
BACTERIA	3+	none			Arkansas Methodist Medical Center (AMMC)	

ID	Date	Data Source
F_20160520191600_789915.001	05/20/2016 05:08:00 PM CDT	North Arkansas Regional Medical Center

ID	Date	Data Source
NORTH ARK REGIONAL MED CTR 620 N MAIN HARRISON, AR 72601 DIAGNOSTIC IMAGING REPORT		
NAME: SHARETEST1,PAUL A VISIT		
DATE: 05/20/16 DOB: SEX / AGE: / 38 ORDERING PHY: BERG, JOHN PA-C PRIMARY CARE PHY: DUCK DONALD MED REC #: M000146281 ACCOUNT #: V00092581264 PT TYPE: REG CLI REPORT STATUS: Signed		
ACUTE ABDOMEN SERIES ACUTE		
<p>ABDOMEN SERIES: Pertinent clinical indication is pain described as epigastric abdominal pain. The heart and mediastinum are normal. The lungs are clear. On the abdominal radiographs, the bowel gas pattern is within normal limits. No acute abnormality is identified. No free air is present. No abnormality mass or calcifications are clearly identified. IMPRESSION: No acute abnormality identified on acute abdomen series. **DIAGNOSTIC IMAGING CONTRAST INFORMATION** Radiation Protection: Collimation Are you Pregnant/Possibly Pregnant or Breastfeeding? No Age Specific: Adult Labs Verified: Meds Reconciled: Contrast Used: Dose/Unit of Measure: Injection Tech: Injection Time: Site Administered: Infiltrated: Infiltrate Response: Reaction: Human Holder: Nurse: Physician: Consent Signed Correct Position Correct Procedure Correct Patient Verified Allergies Verified? Hand Hygiene before Procedure Skin Prep: Barrier Precautions Used: Conscious Sedation: SEDATION USED: Sedation Admin Route: Dose 1 Amt/Unit of Measure: Site Administered: Sedation Reaction: Dose 2 Amt/Unit of Measure: Site Administered: Sedation Admin Route 2: SEDATION REACTION DOSE 2: TRANSCRIBED BY: Portia Hutcheson TRANSCRIBED BY DATE/TIME: 05/20/16 1837 DICTATED BY: CHRIS BENNETT MD DICTATED DATE/TIME: 05/20/16 1708 ELECTRONICALLY SIGNED BY: Chris Bennett, MD SIGNED DATE/TIME: 05/20/16 1915 cc:</p>		

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
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ID	Date	Data Source
F_20160520191804_706549120160520	05/20/2016 07:17:00 PM CDT	Arkansas Methodist Medical Center (AMMC)

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
Troponin I ES	0.02	0.01 - 0.03			Arkansas Methodist Medical Center (AMMC)	
<p>The National Academy of Clinical Biochemistry Standards of Laboratory Practices (NACB) and the International Federation of Clinical Chemistry (IFCC) recommend a minimum of three serial blood samples within 24 hours of admission. Serial sampling is recommended to detect the temporal rise and fall of cTnI levels characteristic of AMI. Revised: 4/9/2015</p>						

ID	Date	Data Source
F_20160520173925_351801920160520	05/20/2016 05:39:25 PM CDT	Arkansas Methodist Medical Center (AMMC)
<p>ARKANSAS METHODIST MEDICAL CENTER PARAGOULD, ARKANSAS RADIOLOGY REPORT Name: SHARETEST1 paul MR #: M116522 Pt. Type: O/P Patient #: 8095544 Xray #: Room #: Date of Birth: 01/01/1965 Age: Sex:M Ph #: Admit Date: 05/20/16 Discharge: 05/20/16 Order #: 18019 Admit Phys: GONZALEZ T 2nd Phys: Order Phys: GONZALEZ T Family Phys: Unsigned Transcriptions are Preliminary reports and do not represent Medical or legal documents. KNEE LT 3 VIEWS COMPLETE:05/20/16 15:48 JLL 18019 Reason for Procedure: PAIN IN LT KNEE- NO TRAUMA LEFT KNEE, 3 VIEWS (05/20/16): Pain in the left knee. No trauma. There is cortical erosion of the articulating surface. No meniscal calcification is seen. There is beaking of the intercondylar eminence of the tibia, bilateral compartment narrowing and patellofemoral compartment narrowing with degenerative change posterior patellar surface. OPINION: Degenerative changes patellofemoral compartment and lateral compartment. No fracture identified. Transcriptionist Initials: DS Transcription Date/Time: 05/20/16 16:03 Dictating Initials: JDC DT: Electronically Reviewed and Signed by: JON D. COLLIER, M.D. 05/20/16 17:37</p>		

Name	Value	Range	Interpretation Code	Description	Data Source(s)	Supporting Document(s)
Procedure						

Vital Signs

ID	Date	Data Source
120034357423	05/20/2016 07:56:17 PM CDT	North East Arkansas Baptist Clinics (NEABC)

Name	Value	Range	Interpretation Code	Description	Data Source(s)
WEIGHT	74.571 kg			74.571 kg	North East Arkansas Baptist Clinics (NEABC)
HEIGHT	157.5 cm			157.5 cm	North East Arkansas Baptist Clinics (NEABC)

ID	Date	Data Source
ZZZZZ088C9	05/16/2016 12:15:00 PM CDT	John E Alexander Family Practice Center

Name	Value	Range	Interpretation Code	Description	Data Source(s)
Oxygen Saturation	94 %			94 %	John E Alexander Family Practice Center
Respiration	17 bpm			17 bpm	John E Alexander Family Practice Center

Name	Value	Range	Interpretation Code	Description	Data Source(s)
Pulse	80 bpm			80 bpm	John E Alexander Family Practice Center
Blood Pressure - Systolic	90 mm Hg			90 mm Hg	John E Alexander Family Practice Center
Blood Pressure - Diastolic	70 mm Hg			70 mm Hg	John E Alexander Family Practice Center
Temperature	98.7 F			98.7 F	John E Alexander Family Practice Center

Electronically generated by: SHAREAR on December 20, 2018