

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Emergency Department

Infectious Diseases : None

Clinical Trial Participant -- MU : None

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST

*Electronically Signed By: Ligayo, Rizal EDRN**On: 01.10.2025 12:10 PST*

1/10/2025 11:28 PST

SERVICE DATE/TIME:

RESULT STATUS:

PERFORM INFORMATION:

SIGN INFORMATION:

Triage Note

1/10/2025 11:28 PST

Auth (Verified)

Jensen EDRN,Stephanie (1/10/2025 11:28 PST)

Jensen EDRN,Stephanie (1/10/2025 11:28 PST)

ED Triage Vitals Entered On: 1/10/2025 11:28 PST

Performed On: 1/10/2025 11:28 PST by Jensen EDRN, Stephanie

ED Vitals

Systolic Blood Pressure : 127 mmHg

Diastolic Blood Pressure : 70 mmHg

Peripheral Pulse Rate : 64 bpm

O2 Therapy : Room air

Peripheral Pulse Rate Method : Electronic

Peripheral Pulse Rate Location : Digit

Respiratory Rate : 16 br/min

SpO2 : 97 %

Temperature : 36.2 DegC (LOW)

Temperature Convert C to F : 97.2 DegF (LOW)

Temperature Method : Temporal Artery

Jensen EDRN, Stephanie - 1/10/2025 11:28 PST

*Electronically Signed By: Jensen, Stephanie EDRN**On: 01.10.2025 11:28 PST*

1/10/2025 11:27 PST

SERVICE DATE/TIME:

RESULT STATUS:

PERFORM INFORMATION:

SIGN INFORMATION:

Triage Note

1/10/2025 11:27 PST

Auth (Verified)

Jensen EDRN,Stephanie (1/10/2025 11:27 PST)

Jensen EDRN,Stephanie (1/10/2025 11:27 PST)

ED Triage Primary Pain Assessment Entered On: 1/10/2025 11:27 PST

Performed On: 1/10/2025 11:27 PST by Jensen EDRN, Stephanie

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Emergency Department

Primary Pain

Pain Assessment Tool Utilized : Numeric

Numeric Pain Scale : 7

Jensen EDRN, Stephanie - 1/10/2025 11:27 PST

Electronically Signed By: Jensen, Stephanie EDRN

On: 01.10.2025 11:27 PST

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Coding

DOCUMENT NAME:

Coding Summary

SERVICE DATE/TIME:

1/16/2025 00:00 PST

RESULT STATUS:

Auth (Verified)

PERFORM INFORMATION:

SIGN INFORMATION:

eCoding Summary_20250116.pdf

Please click on link to see image.

Attachment(s): 1/16/2025 00:00 PST eCoding Summary_20250116.pdf

SWHC-Freer, James-Enc #131017766-OPT-IED-1/10/2025 eCoding Summary - 1/16/2025 - 1 pg

Southwest Healthcare System
36485 Inland Valley Dr
Wildomar, CA 92595-9700

Outpatient Coding Summary

Account Number: 131017766						
Patient Name FREER, JAMES			Sex Male	Birth Date 10/04/1992	Age 32	MR Number 7605906
Admit Date 01/10/25 11:25 AM	Discharge Date 01/10/25 02:42 PM	LOS 1	Financial Class UNINSURED ADMIT		Disposition 01 AHR ROUTINE DISCHARGE	
Attending Physician 101261SWHS- VASQUEZ BORNMANN,LISA M			Coder Saul, Mervin		Patient Type OP-TRAUMA/ER	
ICD-10 Admit Diagnosis						
M5450 Low back pain, unspecified						
ICD-10 Diagnosis Reason for Visit						
M5450 Low back pain, unspecified						
ICD-10 Primary Diagnosis						
M5450 Low back pain, unspecified						
ICD-10 Secondary Diagnosis						
V4352XA Car driver injured in collision with other type car in traffic accident, initial encounter Y92411 Interstate highway as the place of occurrence of the external cause						
CPT Procedures and Modifiers				Provider		Date
72128 CT THORACIC SPINE W/O CONTRAST MATERIAL 72131 CT LUMBAR SPINE W/O CONTRAST MATERIAL 96372 ~POAREQ:0 99285 -25 EMERGENCY DEPARTMENT VISIT HIGH MDM; (-25 Signif E/M J1100 Dexamethosone sodium phos 1 mg J1885 Ketorolac tromethamine inj						01/10/25 01/10/25 01/10/25 01/10/25 01/10/25 01/10/25
APC	CPT	APC Text	APC Weight	APC Pct	APC Reimb	CMS Reimb
08005	72128	08005 CT and CTA without Contrast Composite	2.52	1.00	246.33	196.26
19937	72131	19937 Packaged service included in Composite APC rate	0.00	0.00	0.00	0.00
19936	96372	19936 Conditionally packaged service - item packaged into APC rate	0.00	0.00	0.00	0.00
05025	99285	05025 Level 5 Type A ED Visits	6.88	1.00	672.59	535.88
19900	J1100	19900 Incidental services packaged into APC rate	0.00	0.00	0.00	0.00
00764	J1885	00764 Ketorolac tromethamine inj	0.00	1.00	0.67	0.53
APC Total Reimbursement		APC Total Weight	Total CMS Reimbursement			
Bill Type 131	Claim Type	Claim Disposition	Condition Code Condition Code not assigned			

8049
Outpatient Coding Summary

MR number: 7605906
Admit date: 01/10/25 11:25 AM
Confidential

Account number: 131017766
Discharge date: 01/10/25 02:42 PM
Page 1 of 1

3M HRM APCFm_RFV_Port.doc 07/11/08

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: ketorolac (Toradol)

Order Date/Time: 1/10/2025 13:00 PST

Signed Date/Time: 1/10/2025 12:28 PST

Order Status: Completed

Department Status:
Completed

Catalog Type: Pharmacy

Activity Type: Pharmacy

End-state Date/Time: 1/10/2025 12:42 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 12:28 PST

Order Details: 60 mg = 2 mL, Vial, IntraMuscular, Once, First Dose: Routine, Start date: 1/10/25 1:00:00 PM PST, Stop date: 1/10/25 12:42:49 PM PST, 01/10/25 12:28:00 PST

Order Comment:

Action Type: Complete

Action Date/Time: 1/10/2025 12:42 PST

Action Personnel: Ligayo EDRN,Rizal Z

Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 60 mg = 2 mL, Vial, IntraMuscular, Once, First Dose: Routine, Start date: 01/10/25 13:00:00 PST, Stop date: 01/10/25 13:00:00 PST, 01/10/25 12:28:00 PST

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 1/10/2025 12:29 PST

Action Personnel: Vasquez bornmann PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 60 mg = 2 mL, Vial, IntraMuscular, Once, First Dose: Routine, Start date: 01/10/25 13:00:00 PST, Stop date: 01/10/25 13:00:00 PST, 01/10/25 12:28:00 PST

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 1/31/2025 01:17 PST

Pharmacist Verify: Electronically Signed, Naylor Pharmacist,Kelsey on 1/10/2025 12:30 PST

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders**Order: ED Reassessment**

Order Date/Time: 1/10/2025 11:28 PST

Signed Date/Time: 1/10/2025 11:28 PST

Order Status: Discontinued	Department Status: Discontinued	Catalog Type: Patient Care	Activity Type: Patient Care
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End-state Date/Time: 1/10/2025 18:04 PST

End-state Reason:

Ordering Physician: SYSTEM

Consulting Physician:

Entered By: SYSTEM on 1/10/2025 11:28 PST

Order Details: 1/10/25 11:28:56 AM PST, Routine

Order Comment: Order Placed by Discern Rule

Action Type: Discontinue	Action Date/Time: 1/10/2025 18:04 PST	Action Personnel: SYSTEM
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Responsible Provider/Electronically	Supervising Provider:	Communication Type:
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Signed by: SYSTEM

Order Details: 01/10/25 11:28:56 PST, Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order	Action Date/Time: 1/10/2025 11:28 PST	Action Personnel: SYSTEM
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Responsible Provider/Electronically	Supervising Provider:	Communication Type: Discern Expert
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Signed by: SYSTEM

Order Details: 01/10/25 11:28:56 PST, Routine

Review Information:

Doctor Cosign: Not Required

Order Comment: Order Placed by Discern Rule

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: ED Nursing Exam

Order Date/Time: 1/10/2025 11:28 PST

Signed Date/Time: 1/10/2025 11:28 PST

Order Status: Discontinued	Department Status: Discontinued	Catalog Type: Patient Care	Activity Type: Patient Care
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End-state Date/Time: 1/11/2025 16:03 PST

End-state Reason:

Ordering Physician: SYSTEM

Consulting Physician:

Entered By: SYSTEM on 1/10/2025 11:28 PST

Order Details: 1/10/25 11:28:55 AM PST, NOW, Once, Stop date 1/11/25 4:03:11 PM PST

Order Comment: Order Placed by Discern Rule

Action Type: Discontinue	Action Date/Time: 1/11/2025 16:03 PST	Action Personnel: SYSTEM
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Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: SYSTEM

Order Details: 01/10/25 11:28:55 PST, NOW, Once, Stop date 01/10/25 11:28:55 PST

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order	Action Date/Time: 1/10/2025 11:28 PST	Action Personnel: SYSTEM
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Responsible Provider/Electronically

Supervising Provider:

Communication Type: Discern Expert

Signed by: SYSTEM

Order Details: 01/10/25 11:28:55 PST, NOW, Once, Stop date 01/10/25 11:28:55 PST

Review Information:

Doctor Cosign: Not Required

Order Comment: Order Placed by Discern Rule

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders**Order: Discharge Request Task Order**

Order Date/Time: 1/10/2025 13:54 PST

Signed Date/Time: 1/10/2025 13:54 PST

Order Status: Discontinued

Department Status:

Discontinued

Catalog Type:

Admit/Transfer/Discharge

Activity Type:

Admit/Transfer/Discharge

End-state Date/Time: 1/11/2025 16:03 PST

End-state Reason:

Ordering Physician: SYSTEM

Consulting Physician:

Entered By: SYSTEM on 1/10/2025 13:54 PST

Order Details: 1/10/25 1:54:50 PM PST, Home Routine

Order Comment:

Action Type: Discontinue

Action Date/Time: 1/11/2025 16:03 PST

Action Personnel: SYSTEM

Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: SYSTEM

Order Details: 01/10/25 13:54:50 PST, Home Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 1/10/2025 13:54 PST

Action Personnel: SYSTEM

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Discern Expert

Signed by: SYSTEM

Order Details: 01/10/25 13:54:50 PST, Home Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: Discharge Request

Order Date/Time: 1/10/2025 13:54 PST

Signed Date/Time: 1/10/2025 13:54 PST

Order Status: Discontinued

Department Status:
Discontinued

Catalog Type:

Admit/Transfer/Discharge

Activity Type:

Admit/Transfer/Discharge

End-state Date/Time: 1/11/2025 16:03 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 13:54 PST

Order Details: 1/10/25 1:54:00 PM PST, Home Routine

Order Comment:

Action Type: Discontinue

Action Date/Time: 1/11/2025 16:03 PST

Action Personnel: SYSTEM

Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 01/10/25 13:54:00 PST, Home Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 1/10/2025 13:54 PST

Action Personnel: Vasquez bornmann
PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 01/10/25 13:54:00 PST, Home Routine

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 1/31/2025 01:17 PST

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: dexAMETHasone

Order Date/Time: 1/10/2025 13:00 PST

Signed Date/Time: 1/10/2025 12:28 PST

Order Status: Completed

Department Status:
Completed

Catalog Type: Pharmacy

Activity Type: Pharmacy

End-state Date/Time: 1/10/2025 12:42 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 12:28 PST

Order Details: 10 mg = 1 mL, Injection, IntraMuscular, Once, First Dose: Routine, Start date: 1/10/25 1:00:00 PM PST, Stop date: 1/10/25 12:42:49 PM PST, 01/10/25 12:28:00 PST

Order Comment:

Action Type: Complete

Action Date/Time: 1/10/2025 12:42 PST

Action Personnel: Ligayo EDRN,Rizal Z

Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 10 mg = 1 mL, Injection, IntraMuscular, Once, First Dose: Routine, Start date: 01/10/25 13:00:00 PST, Stop date: 01/10/25 13:00:00 PST

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Modify

Action Date/Time: 1/10/2025 12:30 PST

Action Personnel: Naylor Pharmacist, Kelsey

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 10 mg = 1 mL, Injection, IntraMuscular, Once, First Dose: Routine, Start date: 01/10/25 13:00:00 PST, Stop date: 01/10/25 13:00:00 PST

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 1/31/2025 01:17 PST

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 1/10/2025 12:29 PST

Action Personnel: Vasquez bornmann PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 10 mg = 2.5 mL, Vial, IntraMuscular, Once, First Dose: Routine, Start date: 01/10/25 13:00:00 PST, Stop date: 01/10/25 13:00:00 PST, 01/10/25 12:28:00 PST

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 1/31/2025 01:17 PST

Pharmacist Verify: Electronically Signed, Naylor Pharmacist,Kelsey on 1/10/2025 12:30 PST

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: CT Spine Thoracic w/o Contrast (CT T-Spine w/o Contrast)

Order Date/Time: 1/10/2025 12:28 PST

Signed Date/Time: 1/10/2025 12:28 PST

Order Status: Completed

Department Status:
Completed

Catalog Type: Radiology

Activity Type: Radiology

End-state Date/Time: 1/10/2025 13:34 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 12:28 PST

Order Details: 1/10/25 12:28:00 PM PST, Stat, Injury, Back, Transport Mode: Stretcher

Order Comment:

Action Type: Complete

Action Date/Time: 1/10/2025 13:34 PST

Action Personnel: Burk MD,Brandon A.

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 1/10/2025 13:18 PST

Action Personnel: Hossainzada CT
Tech,Mohammad

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 1/10/2025 13:08 PST

Action Personnel: Williams RAD TECH,
Timothy

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 1/10/2025 12:29 PST

Action Personnel: Vasquez bornmann
PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 1/31/2025 01:17 PST

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: CT Spine Lumbar w/o Contrast (CT L-Spine w/o Contrast)

Order Date/Time: 1/10/2025 12:28 PST

Signed Date/Time: 1/10/2025 12:28 PST

Order Status: Completed	Department Status: Completed	Catalog Type: Radiology	Activity Type: Radiology
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End-state Date/Time: 1/10/2025 13:33 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 12:28 PST

Order Details: 1/10/25 12:28:00 PM PST, Stat, Injury, Back, Transport Mode: Stretcher

Order Comment:

Action Type: Complete	Action Date/Time: 1/10/2025 13:33 PST	Action Personnel: Toensing MD, Christopher C
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Responsible Provider/Electronically Signed by: Vasquez bornmann PA,Lisa M	Supervising Provider:	Communication Type: Written
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Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change	Action Date/Time: 1/10/2025 13:18 PST	Action Personnel: Hossainzada CT Tech,Mohammad
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Responsible Provider/Electronically Signed by: Vasquez bornmann PA,Lisa M	Supervising Provider:	Communication Type: Written
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Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change	Action Date/Time: 1/10/2025 13:08 PST	Action Personnel: Williams RAD TECH, Timothy
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Responsible Provider/Electronically Signed by: Vasquez bornmann PA,Lisa M	Supervising Provider:	Communication Type: Written
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Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order	Action Date/Time: 1/10/2025 12:29 PST	Action Personnel: Vasquez bornmann PA,Lisa M
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Responsible Provider/Electronically Signed by: Vasquez bornmann PA,Lisa M	Supervising Provider:	Communication Type: Written
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Order Details: 01/10/25 12:28:00 PST, Stat, Injury, Back, Transport Mode: Stretcher

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 1/31/2025 01:17 PST

Doctor Cosign: Not Required

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: CT Spine Lumbar w/o Contrast (CT L-Spine w/o Contrast)

Order Comment:

Order: Complete Document Medication by History

Order Date/Time: 1/10/2025 11:48 PST

Signed Date/Time: 1/10/2025 11:48 PST

Order Status: Discontinued	Department Status: Discontinued	Catalog Type: Patient Care	Activity Type: Patient Care
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End-state Date/Time: 1/11/2025 16:03 PST

End-state Reason:

Ordering Physician: SYSTEM

Consulting Physician:

Entered By: SYSTEM on 1/10/2025 11:48 PST

Order Details: 1/10/25 11:48:12 AM PST, Routine, Stop date 1/11/25 4:03:11 PM PST

Order Comment: Ordered by Discern Expert.

Action Type: Discontinue	Action Date/Time: 1/11/2025 16:03 PST	Action Personnel: SYSTEM
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Responsible Provider/Electronically Signed by: SYSTEM	Supervising Provider:	Communication Type:
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Order Details: 01/10/25 11:48:12 PST, Routine, Stop date 01/10/25 11:48:12 PST

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order	Action Date/Time: 1/10/2025 11:48 PST	Action Personnel: SYSTEM
Responsible Provider/Electronically Signed by: SYSTEM	Supervising Provider:	Communication Type: Discern Expert

Order Details: 01/10/25 11:48:12 PST, Routine, Stop date 01/10/25 11:48:12 PST

Review Information:

Doctor Cosign: Not Required

Order Comment: Ordered by Discern Expert.

Order: Complete Document Medication by History

Order Date/Time: 1/16/2025 18:25 PST

Signed Date/Time: 1/17/2025 10:25 AWST

Order Status: Ordered	Department Status: Ordered	Catalog Type: Patient Care	Activity Type: Patient Care
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End-state Date/Time: 1/16/2025 18:25 PST

End-state Reason:

Ordering Physician: SYSTEM

Consulting Physician:

Entered By: SYSTEM on 1/17/2025 10:25 AWST

Order Details: 1/16/25 6:25:58 PM PST, Routine, Stop date 1/16/25 6:25:58 PM PST

Order Comment: Ordered by Discern Expert.

Action Type: Order	Action Date/Time: 1/17/2025 10:25 AWST	Action Personnel: SYSTEM
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Responsible Provider/Electronically Signed by: SYSTEM	Supervising Provider:	Communication Type: Discern Expert
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Order Details: 01/16/25 18:25:58 PST, Routine, Stop date 01/16/25 18:25:58 PST

Review Information:

Doctor Cosign: Not Required

Order Comment: Ordered by Discern Expert.

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Orders

Order: Communication Documentation

Order Date/Time: 1/10/2025 11:28 PST

Signed Date/Time: 1/10/2025 11:28 PST

Order Status: Discontinued	Department Status: Discontinued	Catalog Type: Patient Care	Activity Type: Asmt/Tx/Monitoring
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End-state Date/Time: 1/10/2025 18:04 PST

End-state Reason:

Ordering Physician: SYSTEM

Consulting Physician:

Entered By: SYSTEM on 1/10/2025 11:28 PST

Order Details: 1/10/25 11:28:55 AM PST, Routine

Order Comment: Order placed by Discern Rule

Action Type: Discontinue	Action Date/Time: 1/10/2025 18:04 PST	Action Personnel: SYSTEM
--------------------------	---------------------------------------	--------------------------

Responsible Provider/Electronically Signed by: SYSTEM	Supervising Provider:	Communication Type:
---	-----------------------	---------------------

Order Details: 01/10/25 11:28:55 PST, Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order	Action Date/Time: 1/10/2025 11:28 PST	Action Personnel: SYSTEM
Responsible Provider/Electronically Signed by: SYSTEM	Supervising Provider:	Communication Type: Discern Expert

Order Details: 01/10/25 11:28:55 PST, Routine

Review Information:

Doctor Cosign: Not Required

Order Comment: Order placed by Discern Rule

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

*Medication Orders**Prescription***Order: ibuprofen (ibuprofen 800 mg oral tablet)**

Order Date/Time: 1/10/2025 13:53 PST

Signed Date/Time: 1/10/2025 13:53 PST

Order Status: Completed

Clinical Category: Medications

Medication Type: Prescription

End-state Date/Time: 1/17/2025 13:53 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 13:53 PST

Order Details: 800 mg = 1 Tabs, Oral, TID, X 7 Days, # 21 Tabs, 0 Refill(s), Acute, 1/17/25 1:53:00 PM PST, Pharmacy: WALGREENS #09884, 1 Tabs Oral TID,x7 Days, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Order Comment:

Action Type: Status Change

Action Date/Time: 1/17/2025 14:02 PST

Action Personnel: SYSTEM

Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 800 mg = 1 Tabs, Oral, TID, X 7 Days, # 21 Tabs, 0 Refill(s), Acute, 01/17/25, Pharmacy: WALGREENS #09884, 1 Tabs Oral TID,x7 Days, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Prescribe

Action Date/Time: 1/10/2025 13:53 PST

Action Personnel: Vasquez bornmann PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 800 mg = 1 Tabs, Oral, TID, X 7 Days, # 21 Tabs, 0 Refill(s), Acute, 01/17/25, Pharmacy: WALGREENS #09884, 1 Tabs Oral TID,x7 Days, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Review Information:

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Medication Orders**Prescription****Order: lidocaine topical (Lidoderm 5% topical film)**

Order Date/Time: 1/10/2025 13:53 PST

Signed Date/Time: 1/10/2025 13:53 PST

Order Status: Prescribed

Clinical Category: Medications

Medication Type: Prescription

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 13:53 PST

Order Details: 1 Patches, Topical, Daily, remove patches after 12 hours, # 30 Patches, 0 Refill(s), Maintenance,

Pharmacy: WALGREENS #09884, 1 Patches Topical Daily,Instr:remove patches after 12 hours, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Order Comment:

Action Type: Prescribe

Action Date/Time: 1/10/2025 13:53 PST

Action Personnel: Vasquez bornmann PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 1 Patches, Topical, Daily, remove patches after 12 hours, # 30 Patches, 0 Refill(s), Maintenance,

Pharmacy: WALGREENS #09884, 1 Patches Topical Daily,Instr:remove patches after 12 hours, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Review Information:

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

*Medication Orders**Prescription***Order: predniSONE (predniSONE 20 mg oral tablet)**

Order Date/Time: 1/10/2025 13:53 PST

Signed Date/Time: 1/10/2025 13:53 PST

Order Status: Completed

Clinical Category: Medications

Medication Type: Prescription

End-state Date/Time: 1/15/2025 13:53 PST

End-state Reason:

Ordering Physician: Vasquez bornmann PA,Lisa M

Consulting Physician:

Entered By: Vasquez bornmann PA,Lisa M on 1/10/2025 13:53 PST

Order Details: 40 mg = 2 Tabs, Oral, Daily, X 5 Days, # 10 Tabs, 0 Refill(s), Acute, 1/15/25 1:53:00 PM PST, Pharmacy: WALGREENS #09884, 2 Tabs Oral Daily,x5 Days, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Order Comment:

Action Type: Status Change

Action Date/Time: 1/15/2025 14:02 PST

Action Personnel: SYSTEM

Responsible Provider/Electronically

Supervising Provider:

Communication Type:

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 40 mg = 2 Tabs, Oral, Daily, X 5 Days, # 10 Tabs, 0 Refill(s), Acute, 01/15/25, Pharmacy: WALGREENS #09884, 2 Tabs Oral Daily,x5 Days, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Prescribe

Action Date/Time: 1/10/2025 13:53 PST

Action Personnel: Vasquez bornmann PA,Lisa M

Responsible Provider/Electronically

Supervising Provider:

Communication Type: Written

Signed by: Vasquez bornmann PA,Lisa M

Order Details: 40 mg = 2 Tabs, Oral, Daily, X 5 Days, # 10 Tabs, 0 Refill(s), Acute, 01/15/25, Pharmacy: WALGREENS #09884, 2 Tabs Oral Daily,x5 Days, 77.11, kg, 01/10/25 11:28:00 PST, Weight

Review Information:

Doctor Cosign: Not Required

Order Comment:

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Medication Administration Record**Medications****Administration Date/Time:** 1/10/2025 12:42 PSTMedication Name: **ketorolac (Toradol)****Ingredients:** keto60Sol 60 mg 2 mL**Admin Details: (Auth)** IntraMuscular, Right Deltoid**Action Details:** Order: Vasquez bornmann PA,Lisa M 1/10/2025 12:28 PST; Perform: Ligayo EDRN,Rizal Z 1/10/2025 12:42 PST; VERIFY: Ligayo EDRN,Rizal Z 1/10/2025 12:42 PST**Administration Date/Time:** 1/10/2025 12:42 PSTMedication Name: **dexAMETHasone****Ingredients:** dexa10SolPF 10 mg 1 mL**Admin Details: (Auth)** IntraMuscular, Right Deltoid**Action Details:** Order: Vasquez bornmann PA,Lisa M 1/10/2025 12:28 PST; Perform: Ligayo EDRN,Rizal Z 1/10/2025 12:42 PST; VERIFY: Ligayo EDRN,Rizal Z 1/10/2025 12:42 PST

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Infusion Start/Stop

Infusion Billing Report

01/10/25 11:25 US/Pacific to 02/27/25 11:22 US/Pacific

FREER, JAMES
Emergency

FIN 131017766
Location: IVM ED

MRN 7605906

No Results Qualified.

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Assessment Forms

DOCUMENT TYPE: ED Vital Signs and Pain - Text
SERVICE DATE/TIME: 1/10/2025 13:59 PST
RESULT STATUS: Auth (Verified)
PERFORMED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 13:59 PST)
SIGNED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 13:59 PST)

ED Reassess / Vital Signs and Pain Adult Entered On: 1/10/2025 14:00 PST
Performed On: 1/10/2025 13:59 PST by Ligayo EDRN, Rizal Z

ED Nurse Reassessment

Nursing Note : left wrist iv removed intact, denies any numbness or tingling sensation

Ligayo EDRN, Rizal Z - 1/10/2025 13:59 PST

Discharge Care Plan

Mode of Discharge : Ambulates without assistance

Discharge Transportation : Private vehicle

Accompanied By : Family member

Ligayo EDRN, Rizal Z - 1/10/2025 13:59 PST

DOCUMENT TYPE: QM SEP-1 Triage Screen-Text
SERVICE DATE/TIME: 1/10/2025 12:11 PST
RESULT STATUS: Auth (Verified)
PERFORMED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 12:11 PST)
SIGNED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 12:11 PST)

QM SEP-1 Triage Screen v5.0 Entered On: 1/10/2025 12:11 PST
Performed On: 1/10/2025 12:11 PST by Ligayo EDRN, Rizal Z

QM SEP-1 Triage Screen

Reg SEP Susp Infection UHS : No

Pt meets criteria for sepsis : No positive SIRS data available.

Pt meets criteria for severe sepsis : No severe sepsis data available.

Ligayo EDRN, Rizal Z - 1/10/2025 12:11 PST

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

ED Nursing Documentation

DOCUMENT TYPE: Triage Note
SERVICE DATE/TIME: 1/10/2025 12:10 PST
RESULT STATUS: Auth (Verified)
PERFORMED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)
SIGNED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

ED Abuse/Neglect Adult Entered On: 1/10/2025 12:10 PST
Performed On: 1/10/2025 12:10 PST by Ligayo EDRN, Rizal Z

Abuse/Neglect Assessment

Threatened/Physically Hurt in past year : No
Abuse and Neglect Types : None
ED DV Harm or Neglect Question : No
ED DV Safe Place Verification : Yes

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST

Electronically Signed By: Ligayo, Rizal EDRN
On: 01.10.2025 12:10 PST

DOCUMENT TYPE: Triage Note
SERVICE DATE/TIME: 1/10/2025 12:10 PST
RESULT STATUS: Auth (Verified)
PERFORMED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)
SIGNED INFORMATION: Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

ED Triage RFV/Problems Entered On: 1/10/2025 12:10 PST
Performed On: 1/10/2025 12:10 PST by Ligayo EDRN, Rizal Z

Reason for Visit/Medical History ED

Reviewed Past Medical HX with Patient : Yes

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST
(As Of: 1/10/2025 12:10:18 PST)

Problems(Active)

No Chronic Problems (Cerner :NKP) Name of Problem: No Chronic Problems ; Recorder: Ligayo EDRN, Rizal Z; Code: NKP ; Last Updated: 1/10/2025 12:10 PST ; Life Cycle Date: 1/10/2025 ; Life Cycle Status: Active ; Vocabulary: Cerner

Diagnoses(Active)

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

ED Nursing Documentation

Back pain

Date: 1/10/2025 ; Diagnosis Type: Reason For Visit ;
Confirmation: Confirmed ; Clinical Dx: Back pain ;
Classification: Medical ; Clinical Service: Emergency
medicine ; Code: PNED ; Probability: 0 ; Diagnosis Code:
EB3504E6-BBDC-406B-89B6-C97C33BDD763

*Electronically Signed By: Ligayo, Rizal EDRN**On: 01.10.2025 12:10 PST*

DOCUMENT TYPE:

Triage Note

SERVICE DATE/TIME:

1/10/2025 12:10 PST

RESULT STATUS:

Auth (Verified)

PERFORMED INFORMATION:

Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

SIGNED INFORMATION:

Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

ED Social History Entered On: 1/10/2025 12:10 PST
Performed On: 1/10/2025 12:10 PST by Ligayo EDRN, Rizal Z

Social History

Cultural Practices to be honored? : No

Is Blood Transfusion Acceptable to Patient : Yes

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST

Social History

(As Of: 1/10/2025 12:10:46 PST)

Tobacco Use Screening

Tobacco Use Status : Never tobacco user

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST

*Electronically Signed By: Ligayo, Rizal EDRN**On: 01.10.2025 12:10 PST*

DOCUMENT TYPE:

Triage Note

SERVICE DATE/TIME:

1/10/2025 12:10 PST

RESULT STATUS:

Auth (Verified)

PERFORMED INFORMATION:

Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

SIGNED INFORMATION:

Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

ED Languages Entered On: 1/10/2025 12:10 PST
Performed On: 1/10/2025 12:10 PST by Ligayo EDRN, Rizal Z

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

ED Nursing Documentation

Languages

Mode of Communication for Preferred Lang : Verbal

Preferred Languages : English

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST

Electronically Signed By: Ligayo, Rizal EDRN

On: 01.10.2025 12:10 PST

DOCUMENT TYPE:

Triage Note

SERVICE DATE/TIME:

1/10/2025 12:10 PST

RESULT STATUS:

Auth (Verified)

PERFORMED INFORMATION:

Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

SIGNED INFORMATION:

Ligayo EDRN,Rizal Z (1/10/2025 12:10 PST)

ED Triage General/Screening Adult Entered On: 1/10/2025 12:10 PST

Performed On: 1/10/2025 12:10 PST by Ligayo EDRN, Rizal Z

General/Screenings Adult

Domestic Concerns : None

Suicide Risk Screening : No suicidal risk indicators identified

Infectious Diseases : None

Clinical Trial Participant -- MU : None

Ligayo EDRN, Rizal Z - 1/10/2025 12:10 PST

Electronically Signed By: Ligayo, Rizal EDRN

On: 01.10.2025 12:10 PST

DOCUMENT TYPE:

Triage Note

SERVICE DATE/TIME:

1/10/2025 11:28 PST

RESULT STATUS:

Auth (Verified)

PERFORMED INFORMATION:

Jensen EDRN,Stephanie (1/10/2025 11:28 PST)

SIGNED INFORMATION:

Jensen EDRN,Stephanie (1/10/2025 11:28 PST)

ED Triage Vitals Entered On: 1/10/2025 11:28 PST

Performed On: 1/10/2025 11:28 PST by Jensen EDRN, Stephanie

ED Vitals

Systolic Blood Pressure : 127 mmHg

Diastolic Blood Pressure : 70 mmHg

Peripheral Pulse Rate : 64 bpm

O2 Therapy : Room air

Print Date/Time 2/27/2025 11:22 PST

Medical Record

Report Request ID: 1197040212

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

ED Nursing Documentation

Peripheral Pulse Rate Method : Electronic

Peripheral Pulse Rate Location : Digit

Respiratory Rate : 16 br/min

SpO2 : 97 %

Temperature : 36.2 DegC (LOW)

Temperature Convert C to F : 97.2 DegF (LOW)

Temperature Method : Temporal Artery

Jensen EDRN, Stephanie - 1/10/2025 11:28 PST

Electronically Signed By: Jensen, Stephanie EDRN

On: 01.10.2025 11:28 PST

DOCUMENT TYPE:

Triage Note

SERVICE DATE/TIME:

1/10/2025 11:27 PST

RESULT STATUS:

Auth (Verified)

PERFORMED INFORMATION:

Jensen EDRN, Stephanie (1/10/2025 11:27 PST)

SIGNED INFORMATION:

Jensen EDRN, Stephanie (1/10/2025 11:27 PST)

ED Triage Primary Pain Assessment Entered On: 1/10/2025 11:27 PST

Performed On: 1/10/2025 11:27 PST by Jensen EDRN, Stephanie

Primary Pain

Pain Assessment Tool Utilized : Numeric

Numeric Pain Scale : 7

Jensen EDRN, Stephanie - 1/10/2025 11:27 PST

Electronically Signed By: Jensen, Stephanie EDRN

On: 01.10.2025 11:27 PST

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

*Problems*Problem Name: **No Chronic Problems****Life Cycle Date:** 1/10/2025**Life Cycle Status:** Active**Recorder:** SYSTEM**Last Updated:** 1/10/2025 13:54 PST; SYSTEM**Last Reviewed:** 1/10/2025 13:54 PST; SYSTEM**Classification:** Medical; **Confirmation:** Confirmed; **Code:** NKP (Cerner); **Course:** ; **Onset Date:** ; **Prognosis:** ; **Status Date:** 1/10/2025; **Persistence:**Problem Name: **No Chronic Problems****Life Cycle Date:** 1/10/2025**Life Cycle Status:** Active**Recorder:** Ligayo EDRN,Rizal Z**Last Updated:** 1/10/2025 12:10 PST; Ligayo EDRN,Rizal Z**Last Reviewed:** 1/10/2025 12:10 PST; Ligayo EDRN,Rizal Z**Classification:** ; **Confirmation:** ; **Code:** NKP (Cerner); **Course:** ; **Onset Date:** ; **Prognosis:** ; **Status Date:** ; **Persistence:**

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Imaging**PROCEDURE**

CT Spine Lumbar w/o Contrast

EXAM DATE/TIME

1/10/2025 13:18 PST

Report

CT Spine Lumbar w/o Contrast

HISTORY: Injury, Back.

COMPARISON: None.

PROCEDURE:

Body part: Lumbar spine.

IV contrast: None.

Technique: CT images were obtained.

Reformats: Coronal and sagittal.

FINDINGS:

Alignment: Unremarkable.

Vertebral bodies: Unremarkable.

Disc spaces: Unremarkable.

Posterior elements: Unremarkable.

Spinal canal: Pedicles somewhat shortened in the lower lumbar spine with mild central canal narrowing L4-5 and L5-S1.

Neural foramina: Grossly patent.

Soft tissues: Unremarkable.

IMPRESSION:

No lumbar spine fracture or subluxation.

MRI may be considered for further evaluation.

RADIATION DOSE:

CTDI(vol): 17.0 (mGy)

Total DLP: 654 (mGy-cm)

All CT scans are performed using radiation dose reduction techniques. Technical factors are evaluated and adjusted to ensure appropriate moderation of exposure. Automatic dose management technology applied to adjust the radiation dose to minimize exposure while achieving a diagnostic quality image.

1/10/2025 1:30 PM by Christopher Toensing, MD on TVHDRADRR01

Radimetrics Dose Report

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA, Lisa M

Imaging

Report

***** Final *****

Dictated by: Toensing MD, Christop

Dictated DT/TM: 01/10/2025 1:19 pm

Transcribed By: CCT Transcribed by: CCT

Transcribed DT/TM: 01/10/25 13:19:01

Electronically Signed by: Toensing MD, Christopher C

Signed DT/TM: 01/10/2025 1:30 pm

PROCEDURE

CT Spine Thoracic w/o Contrast

EXAM DATE/TIME

1/10/2025 13:18 PST

Report

CT Spine Thoracic w/o Contrast

HISTORY: Injury, Back.

COMPARISON: None.

PROCEDURE:

Body part: Thoracic spine.

IV contrast: None.

Technique: CT images were obtained.

Reformats: Coronal and sagittal.

FINDINGS:

Vertebral body heights, cortical margins, disc spaces and alignment are maintained. No focal osseous lesion or paraspinal soft tissue abnormality is seen. The osseous spinal canal and neural foramina are widely patent.

IMPRESSION:

No thoracic spine fracture or subluxation.

MRI may be considered for further evaluation.

RADIATION DOSE:

CTDI(vol): 10.4 - 17.0 (mGy)

Total DLP: 1090 (mGy-cm)

All CT scans are performed using radiation dose reduction techniques. Technical factors are evaluated and adjusted to ensure appropriate moderation of exposure. Automatic dose management technology applied to adjust the radiation dose to minimize exposure while achieving a diagnostic quality image.

1/10/2025 1:31 PM by Brandon A. Burk, MD on IVMDRADRR01

Radimetrics Dose Report

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Imaging

Report

***** *Final* *****

Dictated by: Burk MD, Brandon A.

Dictated DT/TM: 01/10/2025 1:18 pm

Transcribed By: BAB

BAB

Transcribed DT/TM: 01/10/25 13:25:07

Electronically Signed by: Burk MD, Brandon A.

Signed DT/TM: 01/10/2025 1:31 pm

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Triage

Recorded Date	1/10/2025
Recorded Time	11:28 PST
Recorded By	Jensen EDRN,Stephanie
Procedure	
Chief Complaint	See Below ^{T1}
Tracking Acuity	4 - Less Urgent

Textual Results

T1: 1/10/2025 11:28 PST (Chief Complaint)

back pain s/p tc yesterday; sts he was rear ended on fwy; sts he doesnt remember if he was wearing a seatbelt,
-loc; sts "my back is loose and its going to fall off"

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Measurements

Recorded Date	1/10/2025	1/10/2025
Recorded Time	11:28 PST	11:28 PST
Recorded By	SYSTEM	Jensen EDRN,Stephanie
Procedure		
Height	-	175.26
Height Inches	69.00	-
Height Method	-	Measured
Weight	-	77.11
Daily Weight kg	-	77.11
Weight lbs	170.00	-
	170.00	
Weight Method	-	Stated
		Stated
Dosing Weight Method	Stated	-
	Stated	
BSA	-	1.94
Body Mass Index Measured	-	25.1

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Vital Signs

Recorded Date	1/10/2025
Recorded Time	11:28 PST
Recorded By	Jensen EDRN,Stephanie
Procedure	
Peripheral Pulse Rate Method	Electronic
Peripheral Pulse Rate Location	Digit
Temperature (Route Not Specified)	36.2 ^L
Temperature Convert C to F	97.2 ^L
Temperature Method	Temporal Artery
Peripheral Pulse Rate	64
Respiratory Rate	16
Systolic Blood Pressure	127
Diastolic Blood Pressure	70
SpO2	97
Oxygen Therapy	Room air

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

Pain Assessment

Recorded Date	1/10/2025
Recorded Time	11:27 PST
Recorded By	Jensen EDRN,Stephanie
Procedure	
Numeric Pain Scale	7
Pain Assessment Tool Utilized	Numeric

IVM- Inland Valley Medical Center

Patient: FREER, JAMES

Admit: 1/10/2025

MRN: SWH07605906

Disch: 1/10/2025

DOB/Sex: 10/4/1992 / Male

FIN: SWH0000131017766

Attending: Vasquez bornmann PA,Lisa M

<i>Assessments and Treatments</i>

	Recorded Date	1/10/2025	1/10/2025
	Recorded Time	12:11 PST	12:11 PST
	Recorded By	Ligayo EDRN,Rizal Z	Ligayo EDRN,Rizal Z
Procedure			
KINDER Age>70		-	No
KINDER Impaired Mobility		-	Yes
KINDER Nurse Judgment		-	Yes (add comment)
KINDER Assessment Outcome		-	NOT High Risk
Menstrual Status		**NOT VALUED**	-

	Recorded Date	1/10/2025	1/10/2025
	Recorded Time	12:10 PST	11:28 PST
	Recorded By	Ligayo EDRN,Rizal Z	Jensen EDRN,Stephanie
Procedure			
Menstrual Status		-	**NOT VALUED**
Domestic Concerns		None	-
Suicide Risk Screening		See Below T1	-
ED DV Safe Place Verification		Yes	-
Threatened/Physically Hurt in Past Year		No	-
Cultural Practices to be honored?		No	-

Textual Results

T1: 1/10/2025 12:10 PST (Suicide Risk Screening)
No suicidal risk indicators identified

	Recorded Date	1/10/2025	1/10/2025
	Recorded Time	11:28 PST	11:25 PST
	Recorded By	Jensen EDRN,Stephanie	SYSTEM
Procedure			
Pregnancy Status		-	N/A
Oxygen Therapy		Room air	-
SpO2		97	-

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Infection Control

	Recorded Date Recorded Time Recorded By	1/10/2025 12:11 PST SYSTEM	1/10/2025 12:10 PST Ligayo EDRN,Rizal Z	1/10/2025 11:25 PST SYSTEM
Procedure				
Able to obtain information	-	-	Able to obtain	-
Recent Exposure to Communicable Disease	-	-	No	-
CDC Outbreak Screening	-	-	No	-
COVID-19 Previously tested	-	-	No	-
COVID-19 Vaccine Status	-	-	No	-
Hospitalized due to COVID-19	-	-	-	No
ICU	-	-	-	No
Resides in congregate care setting	No	-	-	-
Pregnant	-	-	-	Not pregnant
C.diff Screening	-	-	No	-
MRSA Screen Hx MRSA	-	-	No	-
History of TB	-	-	See Below ^{T1}	-
TB Risk Score	-	-	0	-
Symptoms of TB	-	-	No symptoms of TB	-

Textual Results

T1: 1/10/2025 12:10 PST (History of TB)
No known history of exposure to TB

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Quality Measure Info

Recorded Date	1/10/2025	1/10/2025
Recorded Time	12:11 PST	12:10 PST
Recorded By	Ligayo EDRN,Rizal Z	Ligayo EDRN,Rizal Z
Procedure		
Tobacco Use Status	-	Never tobacco user
Reg SEP Susp Infection UHS	No	-