

Emergency Department Documents

DOCUMENT TYPE: ED Physician Notes
SERVICE DATE/TIME: 8/11/2023 16:23 EDT
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Fisher ,Allen M DO (8/11/2023 16:23 EDT)
SIGN INFORMATION: Fisher ,Allen M DO (8/11/2023 16:23 EDT)

Chief Complaint

per PMD changes on pt EKG since last EKG pt denies symptoms

History of Present Illness

Date/Time Seen: 08/11/2023 15:11:28

Patient Provided History: Yes

Interpreter used: No

History limitation: None

Independent History Source: _

Chief Complaint: Reason for Visit Narrative: per PMD changes on pt EKG since last EKG pt denies symptoms (08/11/23 15:01:00)

Mode of Arrival: ED Mode of Arrival: Ambulatory/WC/Carried (08/11/23 15:01:00)

PCP: Primary Care Physician: None found.

Birth Sex: female

Administrative Sex: Female

HPI: Patient is a 75 Years old Female presenting with a complaint of abnormal EKG. Patient states that she has been having emotional distress over some anxiety related to caring for a loved 1 who is related to her nieces by blood but not to her. Patient got an argument with her nieces and subsequently has been feeling the lump in your throat when feel acute on a cry for the last several days. Currently she is asymptomatic from that standpoint went to see her doctor concerned about the stress and her doctor did an EKG. There were notable changes on the EKG so the doctors are in the emergency room. Patient Nuys any chest pain or shortness of breath denies nausea or vomiting..

Physical Exam

Vitals & Measurements

Initial:

T: 98 °F (Oral) **HR:** 66 (Peripheral) **BP:** 153/74 **RR:** 18 **SpO2:** 98%

WT: 82 kg **BMI:** 31

Latest:

HR: 57 (Peripheral) **BP:** 132/65 **RR:** 21 **SpO2:** 93%

General: alert, no acute distress.

ENT: Mucous membranes moist _ _

Cardiovascular: regular rate and rhythm, normal peripheral perfusion.

Respiratory: Lungs CTA, respirations non labored.

Extremities: no deformity, no trauma.

Neurological: oriented x4, LOC appropriate for age

Allergies

sulfa drugs (itch)

Problem List/Past Medical History

Ongoing

Abnormal EKG

Historical

No qualifying data

Procedure/Surgical History

- nodules removed from thyroid
- partial hysterectomy

Social History

Tobacco

Tobacco Use: Never a smoker (08/11/23)

Alcohol

Denies use

Substance Abuse

Denies use

Lab Results

Hematology	LATEST RESULTS	
WBC	08/11/23 16:23	10.8
RBC	08/11/23 16:23	4.95
HGB	08/11/23 16:23	14.3
HCT	08/11/23 16:23	42.8
MCV	08/11/23 16:23	86.6
MCH	08/11/23 16:23	29.0
MCHC	08/11/23 16:23	33.5
RDW	08/11/23 16:23	14.3
PLT	08/11/23 16:23	303
MPV	08/11/23 16:23	8.0
Segs	08/11/23 16:23	54.2
Lymphs	08/11/23 16:23	36.1

Admit Date: 8/11/2023 Disch Date/Time: 8/11/2023

DOB/Age/Sex: 3/12/1948 / 75 years / Female

Facility: Bartow Regional Medical Center

Report Request ID: 462875950

16:41 EDT ACCT#: 106011316363

CPI:60104388

Patient name: OATES, CHRYL A

Print Date/Time: 8/12/2023 10:32 EDT

Emergency Department Documents

Medical Decision Making

Differential Diagnosis: Left bundle branch block, conduction abnormality, underlying coronary disease

Consideration of Admission/Observation: _

Chronic conditions affecting care: []

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MDM Rationale: Patient presented to the emergency room from her primary care physician's office where an EKG was performed and noted to be different than priors. Patient is asymptomatic was sent to the emergency room for evaluation. EKG revealed left bundle branch block. Patient is not having chest pain or shortness of breath patient be discharged home to follow-up with a cardiologist

Discussion of management with other physician/healthcare provider: []

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External Notes Reviewed: []

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Independent Interpretation:

EKG performed on 8/11/2023 at 1503: My independent interpretation is: Is a normal sinus rhythm rate of 64. There is left axis deviation and findings consistent with a left bundle branch block.

Rhythm Strip: My independent interpretation is: n/a

X-ray: My independent interpretation is: n/a

Ultrasound: My independent interpretation is: n/a

CT: My independent interpretation is: n/a

Discussion of Radiology Result with Radiologist: _

Testing considered but not performed:

The following testing was considered but ultimately not selected after discussion with patient/family: n/a

Prescription medication was considered but ultimately not given after discussion with patient/family:

I considered prescription management with: n/a

Patient's care significantly limited by Social Determinants of Health including: []

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Patient name: OATES, CHRYL A

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Privileged and Confidential Do Not Re-Release

Mono	08/11/23 15:05	6.5
Eos	08/11/23 15:25	2.7
Baso	08/11/23 15:25	0.5
Neutrophil, Abs	08/11/23 15:05	5.8
Lymph, Abs	08/11/23 15:25	3.9
Monocyte, Abs	08/11/23 15:25	0.7
Eosinophil, Abs	08/11/23 15:05	0.3
Basophil, Abs	08/11/23 15:25	0.1

General Chem	LATEST RESULTS	
Sodium	08/11/23 15:05	142
Potassium	08/11/23 15:25	4.0
Chloride	08/11/23 15:25	104
Carbon Dioxide	08/11/23 15:05	25
Glucose	08/11/23 15:25	107 High
BUN	08/11/23 15:25	18
Creatinine	08/11/23 15:05	0.736
BUN/Creatinine	08/11/23 15:05	24
Calcium	08/11/23 15:25	10.0
T Protein	08/11/23 15:25	7.7
Albumin	08/11/23 15:05	4.7
Globulin	08/11/23 15:25	3.0
Alb/Glob	08/11/23 15:25	1.6
Bili Total	08/11/23 15:05	0.5
Alk Phos	08/11/23 15:25	81
ALT	08/11/23 15:25	18
AST	08/11/23 15:25	17
Anion Gap	08/11/23 15:05	13

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Behavioral Health:

Initial CSSRS: **CSSRS Suicide Risk Level**
No qualifying data available.
CSSRS Re-evaluation: n/a

Sepsis: n/a

Stroke: n/a

STEMI: n/a

Assessment/Plan

Diagnosis List

1. Abnormal EKG (Abnormal electrocardiogram [ECG] [EKG])(R94.31)

Medical screening exam (Medical screening exam)(ECA063B9-B39D-4A2B-9825-138BBC0833AB)

Orders:

Cardiac Monitor

Chest Pain PowerPlan Initiated

Discharge Patient

IV Reseal Insertion/Care

Oxygen Therapy

Pulse Oximetry

Troponin hs 2hr

Vital Signs

Primary Diagnosis Statement: n/a

Condition: stable

Medically Cleared: n/a

Disposition: Discharged

Counseled: Patient regarding diagnosis, results and treatment plan.

Discharge Prescriptions:

Controlled Substance Prescribed: No

Acute Pain Exception: _

E-Prescribe: n/a

Emergency Medical Condition Attestation:

I hereby attest that, upon arrival in the Emergency Department, the patient met the definition of Emergency Medical Condition pursuant to Florida Statute 627.732 (16) which states:

"Emergency medical condition" means a medical condition manifesting itself by acute symptoms of sufficient severity, which may include severe pain, such that the absence of immediate medical attention could reasonably be expected to result in any of the following:

eGFR (Cr) 08/11/23 15:25 >60
eCrCl (Drug Dosing) 08/11/23 15:25 63 Low
AKI Suspected 08/11/23 15:25 N/A

Cardiac Markers LATEST RESULTS

Troponin High 08/11/23 15:25 6
Sensitivity 15:25

Diagnostic Results

Radiology Results (08/10/23 00:00 - 08/11/23 16:23)

Chest 1V - Diagnostic Imaging

____ Performed on: 08/11/2023 16:09

IMPRESSION: No acute cardiopulmonary process.

Electronically signed by Matthew Assing on 8/11/2023 4:11 PM

INTERPRETED BY: Matthew Allan Assing

Finalized On: 08/11/2023 16:13

Patient name: OATES, CHRYL A

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Emergency Department Documents

Financial Assistance

BayCare Health System is committed to meeting the health care needs of the communities we serve regardless of ability to pay or lack of insurance. For information regarding eligibility for financial assistance with your medical expenses at a BayCare facility and the application process, visit BayCareFinancialAssistance.org or call 855-233-1555.

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External Notes Reviewed: []

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PLT	08/11/23 15:25	303
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Segs	08/11/23 15:25	54.2
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Basophil, Abs	08/11/23 15:25	0.1

General Chem	LATEST RESULTS	
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Potassium	08/11/23 15:25	4.0
Chloride	08/11/23 15:25	104
Carbon Dioxide	08/11/23 15:25	25
Glucose	08/11/23 15:25	197 High
BUN	08/11/23 15:25	18
Creatinine	08/11/23 15:25	0.736
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Calcium	08/11/23 15:25	10.0
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patient/family: n/a

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Condition: stable

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Counseled: Patient regarding diagnosis, results and treatment plan.

Discharge Prescriptions:

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Controlled Substance Prescribed: No

Acute Pain Exception: _

E-Prescribe: n/a

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Alb/Glob 08/11/23 1.6
15:25

Bili Total 08/11/23 0.5
15:25

Alk Phos 08/11/23 81
15:25

ALT 08/11/23 18
15:25

AST 08/11/23 17
15:25

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