

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : ADDISON, JOY CAROLINE (00468) Location : Ground W123 2 Admission 02/23/2015
Date :
Medical Record # : 5278 848 055 FG Gender : F Date of Birth : 09/21/1942
Physician : Charette, Yannick Pharmacy : Emergency Pharmacy
Allergies : Erythromycin, Sulfa Antibiotics, Iodine Compounds
Diagnoses : Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Fibromyalgia(M79.7), Osteoporosis, unspecified (M81.9), Sleep apnoea, obstructed(G47.30), Cataract, unspecified(H26.9), Unspecified diabetes mellitus with certain circulatory complications(E14.52), Oedema, unspecified(R60.9), Spinal stenosis, lumbar region(M48.06), Irritable bowel syndrome with diarrhoea(K58.0), Acquired absence of leg at or below knee(Z89.5), Peripheral vascular disease, unspecified(I73.9), Angina pectoris, unspecified(I20.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Pure hypercholesterolaemia(E78.0), Obesity, unspecified(E66.9), Heart disease, unspecified(I51.9), Disorder of thyroid, unspecified(E07.9), Recurrent depressive disorder, current episode moderate(F33.1), Other retinal detachments(H33.5), Venous insufficiency (chronic)(peripheral)(I87.2), Chronic obstructive pulmonary disease, unspecified(J44.9), Bladder disorder, unspecified(N32.9), Intraductal carcinoma in situ of left breast(D05.11)

Effective Date: 10/14/2025 15:04 Type: Physician Note

Note Text : Right lower leg is good.
Feet cleaned with wet wipes.
Detritus removed.
Nails trimmed and filed.
Callous care completed.
Lotion applied to lower legs and feet.
Treatment tolerated well.

Author:Yvonne Durham RESP - Nursing - Footcare Nurse [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 10:17 Type: Physician Note

Note Text : Resident has been feeling unwell, reports having a runny nose, cough and loose stool. She's also noticing aches and pains. I explained to her that she most likely has a viral infection and it is normal to have symptoms, however, the key thing to note is if she is noticing improvement. Her medications were reviewed and several changes were done. We will monitor to see if she feels better.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

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Department: All

Resident Name : ALLAN, MARJORIE (001070)

Location : Ground W126 1

Admission 05/28/2024

Medical Record # : 1455 472 710 EW

Gender : F

Date :

Date of Birth : 11/29/1937

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : Penicillins

Diagnoses : Benign hypertension(I10.0), Lipid storage disorder, unspecified(E75.6), Hypothyroidism, unspecified(E03.9), Unspecified dementia(F03),
Embolism and thrombosis of arteries of lower extremities(I74.3), Type 2 diabetes mellitus without (mention of) complications(E11.9), Urinary
tract infection, site not specified(N39.0), Pure hypercholesterolaemia(E78.0)

Effective Date: 10/03/2025 10:59 Type: Physician Note

Note Text : Resident has stage 1 pressure wound in bottock/coccyx area, will do cleansing of area twice daily and PRN when incontinence,
will apply stock barrier cream/zinc oxide with each cleansing, will monitor

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-
SIGNED]

Signature: _____

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Resident Name :	ATKIN, STEPHEN GEORGE (00751)	Location :	3 West W315 1	Admission Date :	07/10/2018
Medical Record # :	6599 127 518 YC	Gender :	M	Date of Birth :	08/29/1946
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03), Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Cataract, unspecified(H26.9), Localized swelling, mass and lump, neck(R22.1), Other sleep apnoea (G47.38), Hyperlipidaemia, unspecified(E78.5), Type 2 diabetes mellitus without (mention of) complications(E11.9), Personal history of peptic ulcer disease(Z87.10)				

Effective Date: 10/08/2025 10:01 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported or recently documented. Previously noted left anterior axillary boil have resolved. No further hematuria and no other lower UT symptoms noted. Urine culture was positive for proteus.

For soft tissue infection/boil, resident received a course of treatment with Keflex. Susceptibilities indicate that Keflex would also cover proteus in the urine. Monitor for any further health concerns.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

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Resident Name : BALL, MARGARET (00945)

Location : 3 West W325 1

Admission 05/24/2022

Medical Record # : 4622 713 594 WM

Gender : F

Date :

Date of Birth : 04/23/1937

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Meloxicam, Vioxx

Diagnoses : Alzheimer's disease, unspecified(G30.9), Arthritis, unspecified, other site(M13.98), Osteoporosis, unspecified(M81.9), Glaucoma, unspecified(H40.9), Hyperlipidaemia, unspecified(E78.5), Depressive episode, unspecified(F32.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Other specified degenerative disorders of nervous system in diseases classified elsewhere(G32.8)

Effective Date: 10/03/2025 12:29 Type: Family/Resident Involvement

Data : Writer called POA re fall last night. No concern raised during phone conversation.

- Writer informed POA that there's no injury noted and res is able to move around without difficulties. POA was happy about it.

Action :

Response :

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:01 Type: Physician Note

Note Text : Assessed on medical rounds. Resident sustained a near missed fall on September 26th, in her wheelchair reaching forward to the floor. No injuries were sustained. Activity and function as her usual. No pain or problematic symptoms noted. Recent weights have been stable. Resident appears as per her usual, awake, calm and appears comfortable. Color okay, resps easy and regular.

Ongoing CDM, falls prevention. No changes to medical management at this time. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

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Department: All

Resident Name : BAXTER, JOSEPHINE (001114) Location : 3 East E302 1 Admission 03/12/2025
Medical Record # : 8289 829 999 LL Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 12/19/1929
Allergies : Shellfish, Shrimp
Diagnoses : Alzheimer's disease, unspecified(G30.9), Unspecified dementia(F03), Osteoporosis, unspecified(M81.9)

Effective Date: 10/10/2025 10:43 Type: Family/Resident Involvement

Data : to update POA

Action : POA-Peter called back on writer's VM. Writer gave detailed update on the inappropriate behaviour incident with co-resident on Oct 10 at 0400H.

- POA raised no concern and was thankful for the update.

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/10/2025 10:26 Type: Family/Resident Involvement

Data : to update POA regarding the behaviour incident on Oct 10 at 0400H (inappropriate behaviour received from co-resident-SW)

Action : Writer called POA-Peter on Oct 10 at 1028 to Give update regarding he behaviour incident on Oct 10 at 0400H (inappropriate behaviour received from co-resident-SW).

- However, No response so left VM to call back - call back no. provided with incharge ext.

Response : ongoing monitoring

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/10/2025 04:30 Type: Behaviour - Responsive Behaviour

LATE ENTRY

Type of Behaviour : Inappropriate behavior.

Antecedent/Triggers : dementia, ongoing wandering behavior

Describe the behaviour : Around 0400 hr, resident J.B. told the PSW that there is someone lying in my bed. PSW found S.W. in co-resident J. B.'s room without a shirt which was lying on the floor.

Disruptiveness (Data)/Consequences to the behaviour : resident's personal space was disrupted

Interventions (review/update care plan) (Action) : did not voice out any concerns. As per J.B. statement S.W. did not do anything except removing the shirt and lying down in the co-resident J.B.'s bed.

Change in medication : no

What are the risks and causes : risks: resident's privacy disruption

Causes: S.W.'s wandering

Outcome(s)(Result) : Resident J.B. was sleeping through the night

Substitute Decision Maker notified (if not, explain) : to be notified by morning staff.

Author:Prancy Patel RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

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Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	BAXTER, JOSEPHINE (001114)	Location :	3 East E302 1	Admission	03/12/2025
Medical Record # :	8289 829 999 LL	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	12/19/1929
Allergies :	Shellfish, Shrimp				
Diagnoses :	Alzheimer's disease, unspecified(G30.9), Unspecified dementia(F03), Osteoporosis, unspecified(M81.9)				

Effective Date: 10/10/2025 04:00 Type: Behaviour - Follow up

LATE ENTRY

Note Text : The resident was sleeping through the night without any concerns. The night staff was checking up on both the residents; sleeping breathing even and unlaboured.

Author:Prancy Patel RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 15:29 Type: Family/Resident Involvement

Data : Phone call was placed to POA to get the concern for FLU and COVID-19 vaccine

Action : Informed consent received for both vaccines

Response : documented accordingly.

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

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Resident Name : BEEDIE, JOAN (001064) Location : 2 West W222 2 Admission Date : 05/01/2024
Medical Record # : 2019 767 413 NP Gender : F Date of Birth : 06/30/1937
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Septra
Diagnoses : Hypothyroidism, unspecified(E03.9), Bronchiectasis(J47), Benign hypertension(I10.0), Irritable bowel syndrome(K58), Gastric diverticulum (K31.4), Chronic obstructive pulmonary disease, unspecified(J44.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Anxiety disorder, unspecified(F41.9), Atherosclerotic heart disease of native coronary artery(I25.10), Cystoid Macular oedema following cataract surgery(H59.81), Cachexia(R64)

Effective Date: 10/07/2025 10:03 Type: Family/Resident Involvement

Data : F/U assessment on resident r/t responsive beh. by co-resident-IW on Oct 6 as per report

Action : writer went to see resident on Oct 7. Currently resident is comfortably laying down in bed with eyes closed. Resident is awake, alert and responsive.

- Upon recalling co-resident-IW's responsive behaviour on Oct 6, Resident stated that , " Oh no worries,I'm doing ok and Irene doesn't bother me at all."
- Resident seems happy and energetic today. GDS done - no abnormalities reflected.
- encourage resident press the cal bell if resident needs any assistance/help.
- Resident was thankful top writer to checking on resident.

Response : ongoing Monitoring.

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:01 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Reviewed regarding pain tracking. No concerns regarding pain noted on recent pain tracking notes in May and August. Recent monthly pain management shows that pain management is effective. Recent pain scores reviewed, usually 0. Numerical pain scores occasionally in the range of 1 to 4. Recent VS stable. O2 sats normal at 97% on supplemental oxygen via nasal prongs (as per RT assessment).

Pain management appears effective. Pain tracking will be discontinued. Ongoing CDM with no other changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

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Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : BOS, GEERTRUIDA (00794) Location : 3 West W312 1 Admission 03/21/2019
Medical Record # : 9679 650 896 YF Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 07/14/1930
Allergies : No Known Allergies
Diagnoses : Other specified rheumatoid arthritis(M06.8), Other specified arthritis, other site(M13.88), Degeneration of macula and posterior pole(H35.3),
Phlebitis and thrombophlebitis of unspecified site(I80.9), Stroke, not specified as haemorrhage or infarction(I64), Obesity, unspecified(E66.
9), Benign hypertension(I10.0)

Effective Date: 10/03/2025 15:28 Type: Family/Resident Involvement

Data : Writer received the phone call from resident son/POA to provided the consent for FLU and COVID-19 vaccine

Action : Informed consent received for both FLU and COVID-19 vaccine

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 12:40 Type: Family/Resident Involvement

Data : left a VM to POA to inform re incident happened yesterday.

Action :

Response :

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-
SIGNED]

Signature: _____

Effective Date: 10/03/2025 00:52 Type: Behaviour - Responsive Behaviour

LATE ENTRY

Type of Behaviour : none

Antecedent/Triggers : co-resident tried to hit res with the wheelchair

Describe the behaviour : co-resident tried to hit res with the wheelchair, res did not react but continue to move. staff intervened

Disruptiveness (Data)/Consequences to the behaviour :

Interventions (review/update care plan) (Action) : aggressive resident kept on 1:1 watch to prevent further incident

Change in medication :

What are the risks and causes :

Outcome(s)(Result) : situation under control

Substitute Decision Maker notified (if not, explain) : passed on to day shift

Author:Truelove Nwachukwu RESP - Nursing - RN - Unit Supervisor [e-
SIGNED]

Signature: _____

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Resident Name :	BRITT, MARY (00867)	Location :	2 West W216 1	Admission	01/05/2021
Medical Record # :	2272 355 955 RT	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	05/21/1942
Allergies :	No Known Allergies				
Diagnoses :	Dementia in Alzheimer's disease, unspecified(F00.9), Cerebellar stroke syndrome(G46.4), Anxiety disorder, unspecified(F41.9), Grand mal seizures, unspecified (with or without petit mal), intractable(G40.61), Embolism and thrombosis of other specified veins(I82.8), Depressive episode, unspecified(F32.9), Lymphoedema, not elsewhere classified(I89.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Osteoporosis, unspecified(M81.9)				

Effective Date: 10/01/2025 12:48 Type: Family/Resident Involvement

Data : Resident has a new order to put mineral oils to bilateral ears at bedtime.

Action : POA (daughter) was called and notified about the order and was explained that mineral oil will put into the the ears for few days. POA wants a call back after cleaning the resident's ears.

Response : Will pass the information to night nurse.

Author:Sukhneet Kaur RESP - Nursing - RN [e-SIGNED]

Signature: _____

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Resident Name : CARBONE, SARINA (001145)

Location : 3 West W317 1

Admission 07/16/2025

Medical Record # : 1903 482 733 JM

Gender : F

Date :

Date of Birth : 04/09/1934

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Spironolactone, ASA, PENICILLINS

Diagnoses : Stroke, not specified as haemorrhage or infarction(I64), Depressive episode, unspecified(F32.9), Congestive heart failure(I50.0), Unspecified diabetes mellitus with poor control, so described(E14.64), Atrial flutter, unspecified(I48.91), Malignant neoplasm of bladder, unspecified(C67.9), Hypothyroidism, unspecified(E03.9), Benign hypertension(I10.0), Candidal stomatitis(B37.0), Gout, unspecified, other site(M10.98), Other sleep apnoea(G47.38), Dementia in other specified diseases classified elsewhere(F02.8), Hyperlipidaemia, unspecified (E78.5)

Effective Date: 10/09/2025 22:30 Type: Physician Note

LATE ENTRY

Note Text : Through the head to toe assessment, no injuries, no swelling, no bruise, no inward/outward rotation noted. HIR initiated. Resident denied pain/ discomfort. Resident assisted off the floor back to her bed. (Draft)

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor

Signature: _____

Effective Date: 10/08/2025 10:02 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported or recently documented. No recently documented problematic behaviours. Nursing staff reports that resident occasionally calls out, but does not seem to have any other problematic symptoms. At the time of rounds she was seen to be alert, seated in chair, appeared calm and comfortable. Color normal, resps easy and regular.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

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Resident Name :	CELLI, ITALO (001120)	Location :	2 West W218 1	Admission	04/09/2025
Medical Record # :	2376 966 517 WK	Gender :	M	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	02/08/1936
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03)				

Effective Date: 10/06/2025 10:03 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported or recently documented. Resident has been on pain tracking which was reviewed with no recent concerns noted. Resident seen to be alert, seated in chair, appears calm and comfortable. Color normal, resps easy and regular.

Ongoing CDM with palliative approach. Pain tracking will be discontinued at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

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Resident Name :	CLELAND, AILEEN (001109)	Location :	2 West W205 2	Admission	02/19/2025
Medical Record # :	7429 225 332 BB	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	07/01/1940
Allergies :	Bacitracin, Polymyxin B, Fish				
Diagnoses :	Benign hypertension(I10.0), Arthritis, unspecified, unspecified site(M13.99), Unspecified dementia(F03), Type 2 diabetes mellitus without (mention of) complications(E11.9), Glaucoma, unspecified(H40.9)				

Effective Date: 10/06/2025 10:03 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported or recently documented. No pain or other problematic symptoms. Resident seen to be alert, seated in chair, calm and appears comfortable. Color okay, resps easy and regular. Recent bloodwork reviewed, Alc 5.5. Ongoing CDM with no changes at this time.
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Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
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Resident Name : CONBOY, GERRY (001102) Location : 2 West W210 1 Admission 12/24/2024
Medical Record # : 2619 598 093 CG Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 01/07/1943
Allergies : No Known Allergies
Diagnoses : Osteoporosis, unspecified(M81.9), Unspecified dementia(F03), Benign hypertension(I10.0), Disorders of initiating and maintaining sleep [insomnias](G47.0)

Effective Date: 10/12/2025 09:28 Type: Family/Resident Involvement

Data : Family informed writer to assess her mom's legs.

Action : Writer assessed her legs . swelling observed on both ankles side. no pain and discomfort noticed . Resident refused pain as well. its +1 pitting edema.

Educate staff to elevate the legs . Its on MD round for advice for further treatment. Incharge aware

Response : Plan of care on going

Author:Amanpreet Tung RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:04 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported or recently documented. Activity and function as per usual. She participates in programs. No concerns regarding mood or behaviour. Resident was seen to be alert, seated in chair, appeared calm and comfortable. Color normal, resps easy and regular. Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

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Department: All

Resident Name : CORBETT, MICHELE JACQUELINE (00790) Location : 2 West W215 1 Admission 02/20/2019
Date :
Medical Record # : 8932 955 050 KM Gender : F Date of Birth : 10/15/1961
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Penicillins
Diagnoses : Benign hypertension(I10.0), Stroke, not specified as haemorrhage or infarction(I64), Bell's palsy(G51.0), Hyperlipidaemia, unspecified(E78.5), Old myocardial infarction(I25.2), Atherosclerosis of renal artery(I70.1), Obesity, unspecified(E66.9), Hemiplegia of unspecified type of non-dominant side(G81.91), Peripheral vascular disease, unspecified(I73.9), Atrial fibrillation, unspecified(I48.90), Respiratory failure, unspecified, type II [hypercapnic](J96.91), Chronic obstructive pulmonary disease, unspecified(J44.9), Osteoporosis, unspecified(M81.9), Anxiety disorder, unspecified(F41.9), Post-schizophrenic depression(F20.4), Cellulitis of other sites(L03.8), Hypotension, unspecified(I95.9), Somnolence(R40.0), Resistance to methicillin(U82.1), Fracture of lumbar vertebra, L1 level, closed(S32.000), Pneumonia, unspecified(J18.9), Type 2 diabetes mellitus with poor control, so described(E11.64)

Effective Date: 10/06/2025 10:05 Type: Physician Note

LATE ENTRY

Note Text : Lab results reviewed, recent vaginal swab negative for yeast. No ongoing vaginal symptoms have been reported.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	CORNISH, WENDY (00933)	Location :	2 West W221 1	Admission Date :	03/23/2022
Medical Record # :	9266 340 851 DT	Gender :	F	Date of Birth :	11/01/1948
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Aspirin, Erythromycin, Keflex				
Diagnoses :	Type 2 diabetes mellitus with poor control, so described(E11.64), Benign hypertension(I10.0), Arthritis, unspecified, other site(M13.98), Hypothyroidism, unspecified(E03.9), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Peripheral vascular disease, unspecified(I73.9), Pneumonia, unspecified(J18.9), Neuropathic arthropathy(M14.6)				

Effective Date: 10/06/2025 10:06 Type: Physician Note

LATE ENTRY

Note Text : No new issues or health concerns reported, other than reported laceration at the right abdominal skin fold. Resident reported injury happened when the incontinence product was removed, damaging the skin at the right abdominal skin fold. Resident reports feeling well at the time of rounds today and denied any health concerns.

Resident appeared alert, pleasant, seated in wheelchair. Mood appeared euthymic. Color normal, resps easy and regular. Glycemic control reviewed, recent blood sugars good, ranging between 4.9 and 7.8. Image of right abdominal skin fold wound reviewed on wound rounds, appears to be a superficial fissure in the skin fold.

Ongoing CDM. No changes at this time. Skin breakdown at right abdominal skin fold being monitored on woundrounds with treatment measures in place.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : COX, CICELY (001106) Location : 3 East E321 2 Admission Date : 02/26/2025
Medical Record # : 9112 586 681 RD Gender : F Date of Birth : 05/06/1933
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Hypothyroidism, unspecified(E03.9), Type 2 diabetes mellitus with poor control, so described(E11.64), Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Hyperlipidaemia, unspecified(E78.5), Urinary tract infection, site not specified (N39.0)

Effective Date: 10/08/2025 10:01 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported. No pain or problematic symptoms noted. Intakes remain generally poor. Resident was seen awake, seated quietly in chair, appeared calm and comfortable. Color okay, resps quiet and easy.

Ongoing palliative approach to care with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:01 Type: Physician Note

Note Text : Assessed on medical rounds. Resident noted to have cough in the morning at the time of cares on September 29th. Follow-up nursing assessments revealed no further signs or symptoms or other health concerns. Pain scores have been 0. Intakes consistently low. No problematic symptoms noted. Recent VS stable. Ongoing palliative approach to care with no changes to medical management at this time. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : CRAWFORD, ALVA (001113) Location : Ground W106 1 Admission 03/04/2025
Medical Record # : 9508 052 454 MX Gender : F Date :
Physician : Charette, Yannick Pharmacy : Medisystem Barrie IMM Date of Birth : 02/01/1919
Allergies : Trimethoprim, Avelox, Macrobid, Amlodipine, Sulfa Antibiotics
Diagnoses : Atrial Fibrillation, Unspecified(I48.90), Arthritis, unspecified, unspecified site(M13.99), Degeneration of macula and posterior pole(H35.3),
Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Diverticular disease of intestine, part unspecified, without perforation or
abscess(K57.9)

Effective Date: 10/15/2025 12:04 Type: Physician Note

Note Text : S/O: I was approached by staff regarding concerns expressed by POA about ?headache. I found resident in room, sitting up on chair, calm, does not appear to be in immediate distress. She was easily awoken, denies headache, dizziness, or pain at the moment but did endorse her head feeling "all messed up" earlier today. No recent falls or trauma. No focal neurological deficits were appreciated during examination. When asked to expand on how she is feeling, she mentioned "I want to die" and "I don't know what I am doing here". On review of documentation, I note physician (9/19/2025) and daughter Peggy (10/1/2025) has been involved regarding MAID, and it was agreed at the time that they would not pursue MAID since Alva has a history of expressing a desire to die since moving into LTC years ago. Alva did voice having pain when moving her right shoulder but endorses that she is not in pain currently. Relevant medications,

- Acetaminophen 1300 mg PO at 0800
- Acetaminophen 650-1300 mg PO Daily PRN
- Voltaren applied to knees BID

A: Expressed wishes.

P:

1. NM and I attempted to reach POA/daughter Peggy over the phone, however we were unfortunately unable to reach her. NM has left her a voicemail to call back. We will explore MAID with Peggy.
2. Consider addition of acetaminophen scheduled during the day. (Draft)

Author: Gustavo Mindreau RESP - Nursing - Nurse Practitioner

Signature: _____

Effective Date: 10/03/2025 10:43 Type: Physician Note

Note Text : Resident hasn't been feeling well during the last week, difficulty with eyelids and some dizziness. Indapamide was recently added due to high blood pressure, blood work to be done to monitor electrolytes and renal function. As for her eyes, will provide daily eye care x 5 days.

Author: Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 15:23 Type: Family/Resident Involvement

Data : Writer received call from daughter and POA Peggy this morning.

Peggy expressed concern for resident stating that she was supposed to come visit but that resident asked her not to. POA further expressed resident recently expressing desire to explore MAID but had since decided against it.

Action : Resident has brought up being done with life to multiple staff since admission due to her advanced age, not in a suicidal manner. POA expressed she has said the same for years especially since moving into LTC.

Writer went and spent half an hour speaking with resident and listening to her, reminiscing and looking through photo albums. Expressed

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : CRAWFORD, ALVA (001113)

Location : Ground W106 1

Admission 03/04/2025

Medical Record # : 9508 052 454 MX

Gender : F

Date :

Date of Birth : 02/01/1919

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : Trimethoprim, Avelox, Macrobid, Amlodipine, Sulfa Antibiotics

Diagnoses : Atrial Fibrillation, Unspecified(I48.90), Arthritis, unspecified, unspecified site(M13.99), Degeneration of macula and posterior pole(H35.3),
Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Diverticular disease of intestine, part unspecified, without perforation or
abscess(K57.9)

calmly feeling like she has lived a good life and is ready to go anytime. Writer actively listened and allowed resident to express her feelings without judgement. Resident was extremely grateful. Resident also expressed that she wants to see her family but sometimes feels like she isn't much to visit as she just prefers the quiet of her day in her room.

Support provided and resident in pleasant jovial spirits at end of discussion and also seemed to be looking forward to the visit with her daughter this afternoon.

Response : Resident expressed mouth pain to PSW but denied when writer went to assess.

Care provided as per care plan. Follow up call with Peggy whom was also very grateful. Peggy asked that resident is on list for pet visits and even requested her to be woken when they are in the building as this bring the resident great joy. Same communicated to programs department.

Author:Maloree Hughes RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : CRITTENDEN, JAMES (00947)

Location : 2 East E212 1

Admission 04/22/2025

Medical Record # : 3440 660 532 JJ

Gender : M

Date :

Date of Birth : 10/01/1956

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Sulfa Antibiotics

Diagnoses : Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Bipolar
affective disorder, unspecified(F31.9), Transient cerebral ischaemic attack, unspecified(G45.9), Benign hypertension(I10.0), Delusional
disorder(F22.0)

Effective Date: 10/06/2025 10:01 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported. Resident's activity and function as per his usual. He continues to ambulate independently at times, wandering around the unit. No agitation or problematic behaviours or mental health symptoms noted. No pain or problematic symptoms. Resident seen to be alert, ambulatory, no apparent distress. Color okay, resps easy and regular.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : CROTTY, MARIE (001139)

Location : 3 East E303 1

Admission 06/18/2025

Medical Record # : 5414 636 893

Gender : F

Date :

Date of Birth : 02/13/1950

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Corn, NKD allergies

Diagnoses : Benign hypertension(I10.0), Hypothyroidism, unspecified(E03.9), Other specified arthritis, multiple sites(M13.80), Frontal lobe dementia (G31.02), Other sleep apnoea(G47.38), Osteoporosis, unspecified(M81.9), Sleep disorder, unspecified(G47.9), Dysphasia and aphasia (R47.0)

Effective Date: 10/07/2025 08:25 Type: Family/Resident Involvement

Data : Writer called asking for consent from the POA to take updated wound rounds photos.

Action : POA gave consent.

Response :

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 17:50 Type: Family/Resident Involvement

Data : Resident daughter visited and mentioning that resident having small scar on her left hand palm.

Action : Writer mentioned that she noticed this afternoon and gonna call to inform you. POA daughter mentioned that it might because of knife as she saw on Friday evening that res is having trouble in cutting food and mentioned that to psw staff to cut the food for res. Writer mentioned that she will make sure that food will be cut down.

Response : will monitor and pass it on staff.

Author:Roshni Chaudhari RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/04/2025 14:38 Type: Family/Resident Involvement

Data : During care conference family consented FLU vaccine only.

Action : Informed consent for FLU vaccine provided to NM AJ from POA .

Response : documented accordingly.

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 20:01 Type: Family/Resident Involvement

Data : Writer asked POA for permission regarding using the building supply for distilled water.

Action : POA mentioned that "it would have been nice if she would have been notified when it was running out. that nobody informed her anything, then she could have sent it right away". Writer apologized about it and asked for permission for using our supply for tonight and she could send her supply in the morning. POA replied "I guess so. There's no other choice. I just don't understand why I wasn't notified earlier. Just make sure there's no residue in the morning because it's not good for the system. Make sure you guys clean it well in the morning. I will

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : CROTTY, MARIE (001139)

Location : 3 East E303 1

Admission 06/18/2025

Medical Record # : 5414 636 893

Gender : F

Date :

Date of Birth : 02/13/1950

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Corn, NKD allergies

Diagnoses : Benign hypertension(I10.0), Hypothyroidism, unspecified(E03.9), Other specified arthritis, multiple sites(M13.80), Frontal lobe dementia
(G31.02), Other sleep apnoea(G47.38), Osteoporosis, unspecified(M81.9), Sleep disorder, unspecified(G47.9), Dysphasia and aphasia
(R47.0)

come in the morning to check it". Writer received permission and notified evening manager.

Response : Distilled water from the facility supplied for resident CPAP for tonight. Will endorse to morning staff and unit supervisor.

Author:Crizzia Payumo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : D'ULISSE, MARCELLO (00889)

Location : 3 East E309 2

Admission 05/20/2021

Medical Record # : 7807 368 621 EW

Gender : M

Date :

Date of Birth : 04/21/1967

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Type 2 diabetes mellitus with established or advanced kidney disease(E11.23), Depressive episode, unspecified(F32.9), Mild cognitive disorder(F06.7), Hyperlipidaemia, unspecified(E78.5), Type 2 diabetes mellitus with ketoacidosis(E11.10)

Effective Date: 10/05/2025 15:35 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both vaccines

Response : documented accordingly

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : DARBY, JOHN (001149) Location : 3 West W313 1 Admission Date : 08/05/2025
Medical Record # : 4586 093 876 FF Gender : M Date of Birth : 09/15/1950
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Benign hypertension(I10.0), Chronic obstructive pulmonary disease, unspecified(J44.9), Other and unspecified cirrhosis of liver(K74.6), Acute renal failure, unspecified(N17.9), Congestive heart failure(I50.0), Delirium, unspecified(F05.9), Mental and behavioural disorders due to use of alcohol, harmful use(F10.1), Fracture of second cervical vertebra, closed(S12.100), Dependence on renal dialysis(Z99.2)

Effective Date: 10/08/2025 10:03 Type: Physician Note

LATE ENTRY

Note Text : Resident has been on sleep tracking with no concerns noted. He receives Melatonin 5 mg at hs, Sertraline 25 mg at hs and Zopiclone 7.5 mg at hs. Sleep pattern has been good, Zopiclone will be weaned with dose reduction to 5 mg at hs at this time. Reassess sleep pattern and Zopiclone in a couple of weeks time.

Glycemic control reviewed. Blood sugars have been normal, with no noted diagnosis of diabetes and no hypoglycemic agents. Discontinue post-monitoring at this time.

Dictated by Dr. Lee Andersendictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 16:41 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both FLU and COVID

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	DARNBROUGH, JEAN (001009)	Location :	2 West W215 2	Admission Date :	04/13/2023
Medical Record # :	2215 584 919 GH	Gender :	F	Date of Birth :	12/10/1943
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Iron				
Diagnoses :	Chronic obstructive pulmonary disease, unspecified(J44.9), Cellulitis, unspecified(L03.9), Other cerebral infarction(I63.8), Urinary tract infection, site not specified(N59.0), Benign hypertension(I10.0), Other and unspecified cirrhosis of liver(K74.6), Rheumatoid arthritis, unspecified(M06.9), Psoriasis, unspecified(L40.9), Chronic kidney disease, unspecified(N18.9), Other obesity(E66.8), Presence of artificial knee(Z96.61), Adult T-cell lymphoma/leukaemia [HTLV-1 associated](C91.5), Dysphasia and aphasia(R47.0), Pneumonia, unspecified(J18.9), Anaemia, unspecified(D64.9)				

Effective Date: 10/06/2025 10:07 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new concerns reported or recently documented. She remains in bed as per her preference. No pain or problematic symptoms. Intakes variable, as per her usual. She receives oral nutritional supplement. Weights reviewed, stable over the past six months. VS stable. Pain scores 0.

Ongoing CDM with no acute concerns at this time. Old order for accurate in and outs discontinued as it is not indicated at this time.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	DAVIAU, MILDRED (001141)	Location :	2 West W224 1	Admission Date :	07/03/2025
Medical Record # :	7156 953 932 KV	Gender :	F	Date of Birth :	08/13/1933
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	NKD allergies				
Diagnoses :	Fracture of femur, part unspecified, closed(S72.900), Unspecified fracture of neck of femur, closed(S72.090), Intracerebral haemorrhage, unspecified(I61.9)				

Effective Date: 10/06/2025 10:08 Type: Physician Note

LATE ENTRY

Note Text : See quarterly medication review note.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : DEBEER, GERARDINA (00983) Location : 3 West W305 2 Admission : 11/16/2022
Medical Record # : 1730 678 156 PF Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 01/16/1936
Allergies : Trihexyphenidyl, Cats, Mold, anticholinergics
Diagnoses : Parkinson's disease(G20), Tremor, unspecified(R25.1), Rheumatoid arthritis, unspecified(M06.9), Arthritis, unspecified, multiple sites(M13.90), Unspecified dementia(F03), Pathological fracture, not elsewhere classified, unspecified site(M84.49)

Effective Date: 10/08/2025 10:04 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Based on recent weights, concern regarding some possible weight loss. However, reweigh indicated less potential weight loss. RD referral has been made.

Resident remains on safety checks with respect to falls risk. She has been on pain tracking, with no concerns regarding pain noted. Due to BPSD with occasional agitation/aggression associated with cares, and single episode of physical aggression towards coresidents, resident has been on DOS tracking and one to one staffing. Behaviour management coordinator involved and will be reviewing triggers for behaviours in more detail. Referral to BSO has been made and involvement will be ongoing. Care plan to be updated with intervention in an effort to improve non-pharmacologic strategies regarding BPSD. Medications at this time include Sertraline 100 mg daily and Melatonin 5 mg at hs. At the time of rounds resident was noted to be seated in her wheelchair, alert and pleasant and appeared calm. Interactive as per her usual. No specific complaints identified. Color okay, resps easy and regular. Abdomen soft and benign.

As noted, RD referral regarding weight loss/nutrition. Continue with one to one staffing at this time and monitor regarding BPSD. Care plan to be updated with non-pharmacologic strategies for BPSD, and continue to follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 13:24 Type: Family/Resident Involvement

Data : Writer called POA to informed about the incident yesterday. She voiced, that somebody called her last night and she advised the writer to let the one who called her make a documentation to prevent calling her twice as she is going through a lot.

Action : - there was no documentation mentioned that the POA was advised last night.

Response :

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 18:47 Type: Behaviour - Responsive Behaviour

LATE ENTRY

Type of Behaviour : kicking, grabbing

Antecedent/Triggers : while moving in the wheelchair

Describe the behaviour : kicking, grabbing

Disruptiveness (Data)/Consequences to the behaviour : hits other residents and staff

Interventions (review/update care plan) (Action) : 1:1 watch initiated

Change in medication : none

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : DEBEER, GERARDINA (00983) Location : 3 West W305 2 Admission Date : 11/16/2022
Medical Record # : 1730 678 156 PF Gender : F Date of Birth : 01/16/1936
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Trihexyphenidyl, Cats, Mold, anticholinergics
Diagnoses : Parkinson's disease(G20), Tremor, unspecified(R25.1), Rheumatoid arthritis, unspecified(M06.9), Arthritis, unspecified, multiple sites(M13.90), Unspecified dementia(F03), Pathological fracture, not elsewhere classified, unspecified site(M84.49)

What are the risks and causes :

Outcome(s)(Result) : situation under control

Substitute Decision Maker notified (if not, explain) : passed on to day shift

Author:Truelove Nwachukwu RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 05:07 Type: Behaviour - Responsive Behaviour

Type of Behaviour : physical aggression directed towards staff.

Antecedent/Triggers : incontinence care.

Describe the behaviour : Approximately 0330, the resident continuously rang the call bell. PSW staff responded and entered the room to check on the resident. The resident stated that she wanted to get out of the bed, and according to the resident's care plan, whenever resident is awake , staff should dress her up and put her in the chair. Resident was physically aggressive towards staff while they provided incontinence care, resident punched one of the staff members on lips and while transfer bit the other staff member. Given resident behaviour only incontinence care was provided and resident was transferred in wheelchair to avoid falls and further escalation . Resident didn't allow staff to change her clothes.

Disruptiveness (Data)/Consequences to the behaviour :

Interventions (review/update care plan) (Action) : resident calms down on her own when given her space and time to deescalate.

Change in medication : none

What are the risks and causes : Causes: Resident is always resistive during care, would continuously try to hit staff members when approached for care.

Outcome(s)(Result) : hit staff members and bit one of them.

Substitute Decision Maker notified (if not, explain) : to be notified by day staff.

Author:Yasmeen Kaur RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:02 Type: Physician Note

Note Text : Assessed on medical rounds. Resident continues to be follow regarding BPSD. Behaviour management coordinator following, BSO referral made. No new concerns reported or recently documented. Resident seen seated in her chair, alert, appears as per her usual. Color okay, resps easy and regular. Recent abdominal x-ray showed findings consistent with mild constipation.

Due to frequent abdominal concerns by resident and radiographic findings of constipation, add Clearlax 17 grams daily and follow.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : DEBEER, GERARDINA (00983)

Location : 3 West W305 2

Admission 11/16/2022

Medical Record # : 1730 678 156 PF

Gender : F

Date :

Date of Birth : 01/16/1936

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Trihexyphenidyl, Cats, Mold, anticholinergics

Diagnoses : Parkinson's disease(G20), Tremor, unspecified(R25.1), Rheumatoid arthritis, unspecified(M06.9), Arthritis, unspecified, multiple sites(M13.90), Unspecified dementia(F03), Pathological fracture, not elsewhere classified, unspecified site(M84.49)

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : DERBYSHIRE, LORAINE (00942)

Location : 3 East E311 1

Admission 05/03/2022

Medical Record # : 8398 047 434 BR

Gender : F

Date :

Date of Birth : 03/21/1954

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Cats, Pollen

Diagnoses : Hyperlipidaemia, unspecified(E78.5), Hypothyroidism, unspecified(E03.9), Asthma, unspecified, without stated status asthmaticus(J45.90),
Rheumatoid arthritis, unspecified(M06.9), Unspecified dementia(F03), Anaemia due to enzyme disorder, unspecified(D55.9), Unspecified
diabetes mellitus with advanced ophthalmic disease(E14.36), Oedema, unspecified(R60.9), Stroke, not specified as haemorrhage or
infarction(I64), Uterovaginal prolapse, unspecified(N81.4), Fracture of femur, part unspecified, closed(S72.900)

Effective Date: 10/08/2025 10:02 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. On October 3rd resident was noted to have hoarseness and occasional cough. She has been on isolation with droplet/contact precautions in place. However she is poorly compliant. When out of her room she is encourage to wear a mask, and enhanced cleaning of surfaces is being implemented. On October 6, resident was noted to still have hoarseness and occasional cough. Since then, symptoms are noted to be improved. She has been afebrile, VS stable. She was seen to be seated in chair, alert, calm and comfortable. No cough observed. Color normal, resps easy and regular. MRVP results positive for rhinovirus.

Mild upper respiratory infection secondary to rhinovirus. Continue to monitor, continue with IPAC measures.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 15:41 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both vaccines

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : DINGWELL, KATHLEEN (KAY) (001096) Location : 3 West W301 2 Admission Date : 10/30/2024
Medical Record # : 5657 437 231 LW Gender : F Date of Birth : 06/05/1944
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Benign hypertension(I10.0), Unspecified dementia(F03), Hypothyroidism, unspecified(E03.9)

Effective Date: 10/08/2025 10:06 Type: Physician Note

LATE ENTRY

Note Text : Seen on medical rounds. Resident was noted to have lower UT symptoms and she was treated empirically with MacroBID. Urine was collected and sent for C&S after initiation of MacroBID, with urine culture showing no growth. No ongoing symptoms have been noted. Activity and function as per her usual. BPSD as per her usual. Today she was seen to be alert, ambulatory at times, interactive and confused as per her usual. Color okay, resps easy and regular. No apparent discomfort. Bloodwork reviewed, CBC and LUC okay.

Ongoing CDM. BPSD with multiple non-pharmacologic and pharmacological strategies in place. Likely UTI, treated with MacroBID. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 16:51 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both FLU and COVID vaccine

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : DONNELLY, BARBARA (001037)

Location : 2 West W214 1

Admission 11/29/2023

Medical Record # : 7870 643 249 LT

Gender : F

Date :

Date of Birth : 04/09/1939

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Unspecified dementia(F03), Benign hypertension(I10.0), Occlusion and stenosis of carotid artery(I65.2), Polyp of colon(K63.5), Other specified arthritis, unspecified site(M13.89), Carcinoma in situ of skin of other and unspecified parts of face(D04.3)

Effective Date: 10/06/2025 10:09 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or concerns reported or recently documented. Previous noted bilateral popliteal skin fold MASD have resolved. Resident seen to be alert, seated in chair, appears calm and comfortable. Color okay, resps easy and regular.

Ongoing CDM, Betaderm and zinc barrier cream to popliteal skin folds have been discontinued as MASD have resolved.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : DUMAIS, LINDA (001058) Location : 2 East E208 1 Admission : 04/09/2024
Medical Record # : 3088 545 078 FN Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 09/03/1950
Allergies : adhesives
Diagnoses : Unspecified dementia(F03), Chronic kidney disease, unspecified(N18.9), Other thyrotoxicosis(E05.8), Primary generalized (osteo)arthrosis (M15.0), Disorder of pituitary gland, unspecified(E23.7), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Paranoid personality disorder(F60.0), Delusional disorder(F22.0), Other and unspecified right bundle-branch block(I45.1)

Effective Date: 10/07/2025 17:10 Type: Family/Resident Involvement

Data : Writer receive the phone call for residents POA provided the consent for bot FLU and COVID 10 vaccine
POA also mention tham mom can refuse the vaccine as did in the past.

Action : documented accordingly

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:02 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported. Resident activity and function as per her usual. No pain or problematic symptoms. Resident seen to be alert, ambulatory, appeared calm and comfortable. Color okay, resps easy and regular.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : EDWARDS, SHIRLEY (001072)

Location : 2 West W222 1

Admission 06/19/2024

Medical Record # : 6156 989 979 MC

Gender : F

Date :

Date of Birth : 03/29/1936

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Morphine

Diagnoses : Emphysema, unspecified(J43.9), Unspecified dementia(F03), Benign hypertension(I10.0), Chronic obstructive pulmonary disease, unspecified(J44.9), Tricuspid stenosis with insufficiency(I07.2), Enterocolitis due to Clostridium difficile(A04.7), Degeneration of macula and posterior pole(H35.3), Primary generalized (osteo)arthrosis(M15.0), Urinary tract infection, site not specified(N39.0), Atrial fibrillation, unspecified(I48.90)

Effective Date: 10/06/2025 10:10 Type: Physician Note

LATE ENTRY

Note Text : Seen on medical rounds. As previously noted, resident has had recurrent hematuria. Recent urine cultures not diagnostic of UTI, showing no growth or mixed growth. Over the weekend, gross hematuria noted and reported abdominal pain. MD on call was contacted and provided order for prn Hydromorphone. POA was contacted, and indicated wishes for care in the home. Some reduced intakes recently, increase reports of abdominal pain. Laxatives recently increase due to concern regarding possible constipation. For pain management, resident is also on Butran's 5 patch. She has a known history of recurrent UTI's dating back to prior admission to Mill Creek.

Resident has been afebrile, VS stable. Recent bloodwork reviewed, Hb 115, stable.

Family meeting held today with resident's POA, daughter-in-law Terry from 1000 until 1023. Discussed recent health condition, recurrent hematuria. Despite non-diagnostic urine cultures, possibility remains that hematuria may represent hemorrhagic cystitis secondary to UTI. However, other urinary tract pathology may be underlying etiology such as malignancy. POA understands, and given resident's chronic disease, including dementia, with gradually declining health condition, cognition, quality of life etc, POA has expressed wishes for palliative approach to care, conservative measures in the home, prioritizing quality of life and symptom management. POA is agreeable to increase in Butran's patch for pain management plus addition of Hydromorphone for episodic/breakthrough, possible increase in oral nutritional supplement. Due to ongoing hematuria, DOAC will be discontinued. Risk of stroke in the setting of AFIB discussed, POA aware.

Proceed with palliative approach to care, hematuria NYD, possible underlying urologic malignancy. Conservative measures only, no further antibiotics at this time, focus on quality of life and comfort. Orders provided as above.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 01:45 Type: Family/Resident Involvement

Data : Writer contacted the POA and provided an update regarding the resident's current condition.

Action : Writer informed the POA about the current bleeding episodes and inquired whether she wished for the resident to be sent to the hospital if the condition worsened. The POA advised not to send the resident to the hospital tonight, as she has a scheduled meeting with the physician tomorrow. POA requested to manage the resident's pain and keep her comfortable overnight.

Response : POA was thankful for the phone call.

Author:Delna Mathew RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 14:38 Type: Family/Resident Involvement

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : EDWARDS, SHIRLEY (001072)

Location : 2 West W222 1

Admission 06/19/2024

Medical Record # : 6156 989 979 MC

Gender : F

Date :

Date of Birth : 03/29/1936

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Morphine

Diagnoses : Emphysema, unspecified(J43.9), Unspecified dementia(F03), Benign hypertension(I10.0), Chronic obstructive pulmonary disease, unspecified(J44.9), Tricuspid stenosis with insufficiency(I07.2), Enterocolitis due to Clostridium difficile(A04.7), Degeneration of macula and posterior pole(H35.3), Primary generalized (osteo)arthrosis(M15.0), Urinary tract infection, site not specified(N39.0), Atrial fibrillation, unspecified(I48.90)

LATE ENTRY

Data : Writer received the phone call from POA to provided the consent for FLU and COVID vaccine

Action : Documented under the immunization tab

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	ELIASSEN, BENT (001125)	Location :	Ground W120 1	Admission	04/30/2025
Medical Record # :	4968 836 975 EP	Gender :	M	Date :	
Physician :	Charette, Yannick	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	06/05/1931
Allergies :	Cat dander, Dust				
Diagnoses :	Atrial fibrillation, unspecified(I48.90), Asthma, unspecified, without stated status asthmaticus(J45.90), Other sleep apnoea(G47.38), Benign neoplasm of ascending colon(D12.2), Unspecified dementia(F03)				

Effective Date: 10/06/2025 12:12 Type: Physician Note

Note Text : Bilateral lower legs are poor has dressings present on both front shins.
Feet cleaned with wet wipes.
Detritus removed.
Nails trimmed and filed. Callous care completed.
Lotion applied to lower legs and feet.
Treatment was tolerated well.

Author:Yvonne Durham RESP - Nursing - Footcare Nurse [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : EVES, DOUGLAS (001086)

Location : 3 East E314 1

Admission 09/12/2024

Medical Record # : 4980 270 898 JD

Gender : M

Date :

Date of Birth : 12/05/1952

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Glaucoma, unspecified(H40.9), Depressive episode, unspecified(F32.9), Progressive supranuclear ophthalmoplegia [Steele-Richardson-Olszewski](G23.1), Atrial flutter, unspecified(I48.91), Malignant neoplasm of prostate(C61), Other specified intervertebral disc degeneration (M51.3)

Effective Date: 10/09/2025 02:35 Type: Family/Resident Involvement

LATE ENTRY

Data : POA came to see writer in the office to let me know that Doug will not be having 1 to 1 going forward. POA told me that she had a conversation with DOC Stacey and agreed to move to a room closer to the nursing station.

Action : Writer listened to POA and told her that Doug would be added to the list to move to a closer room.

Response : POA was thankful but apprehensive and nervous about the resident having another bad fall.

Author:Teri Saric RESP - Social Services - Admissions Coordinator [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:03 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported. No recent SOB. No pain or other problematic symptoms reported. He continues on Amiloride 5 mg and Furosemide 20 mg daily for CHF. Intakes stable. Recent weights reviewed, stable. VS also stable. Resident seen to be alert, seated quietly in wheelchair, appeared calm and comfortable, resps easy and regular.

Ongoing CDM, including CHF. Daily weights will be discontinued as weights have been stable on current interventions. Follow. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 13:21 Type: Family/Resident Involvement

Data : Writer had discussion with the wife, Wife provide the verbale consent to change to DNR.

Action : Writer sign the paper for DNR. Update the orders in PCC.

Response : No further concern from POA at this time. Paper filed in his chart,

Author:Dhara Patel RESP - Nursing - Associate Nurse Manager [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 12:53 Type: Family/Resident Involvement

Data : The Writer was not present for care conference yesterday to review the resident's 1:1; rebooking meeting with the resident's POA next week; VM left for Diane (wife) to facilitate date/time; pending response.

Action :

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : EVES, DOUGLAS (001086) Location : 3 East E314 1 Admission 09/12/2024
Medical Record # : 4980 270 898 JD Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 12/05/1952
Allergies : No Known Allergies
Diagnoses : Glaucoma, unspecified(H40.9), Depressive episode, unspecified(F32.9), Progressive supranuclear ophthalmoplegia [Steele-Richardson-Olszewski](G23.1), Atrial flutter, unspecified(I48.91), Malignant neoplasm of prostate(C61), Other specified intervertebral disc degeneration (M51.3)
Response :

Author:Ashline Johnstone RESP - Nursing - Behaviour Support Manager [e-SIGNED] Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : FENNELL, WILLIAM (001150)

Location : Ground W118 1

Admission 08/19/2025

Medical Record # : 1329 268 096 NY

Gender : M

Date :

Date of Birth : 03/21/1941

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Huntington's disease(G10), Presence of other heart-valve replacement(Z95.4), Other specified disorders of bladder(N32.8), Low back pain (M54.5), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperlipidaemia, unspecified(E78.5), Chronic obstructive pulmonary disease, unspecified(J44.9), Intervertebral disc disorder, unspecified(M51.9), Other and unspecified dysphagia(R13.8)

Effective Date: 10/01/2025 21:47 Type: Family/Resident Involvement

LATE ENTRY

Data : POA provided consent for Flu vaccine decline the COVID vaccine

Action : immunization tab updated

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : GARBUTT, SANDRA (00966)

Location : 3 East E322 2

Admission 07/26/2022

Medical Record # : 5054 155 899 XM

Gender : F

Date :

Date of Birth : 04/13/1954

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Chronic obstructive pulmonary disease, unspecified(J44.9), Diabetic retinopathy(H36.0), Oedema, unspecified(R60.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Other acute renal failure(N17.8), Hemiplegia of unspecified type of dominant side(G81.90)

Effective Date: 10/08/2025 10:04 Type: Physician Note

LATE ENTRY

Note Text : See quarterly medication review.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	GARY, HELEN (00943)	Location :	Ground W105 1	Admission	05/10/2022
Medical Record # :	5885 733 476 HJ	Gender :	F	Date :	
Physician :	Charette, Yannick	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	05/02/1939
Allergies :	No Known Allergies				
Diagnoses :	Frontal lobe dementia(G31.02), Benign hypertension(I10.0), Oedema, unspecified(R60.9), Ulcerative colitis, unspecified(K51.9)				

Effective Date: 10/03/2025 10:25 Type: Physician Note

Note Text : s: Nursing staff reports resident c/o left eye pain and redness. Today, the resident denies any symptoms
o: left eye showing some crusting, mild redness
a: conjunctivitis
p: tobramycin 0.3 ophthalmic 2 drops in left eye three times daily x 7 days, fu prn

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : GASPAR, BETTY (001071)

Location : 2 East E217 1

Admission 06/04/2024

Medical Record # : 2414 315 974 VL

Gender : F

Date :

Date of Birth : 07/15/1930

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Sulfamethoxazole

Diagnoses : Delirium, unspecified(F05.9), Other specified anaemias(D64.8), Chronic kidney disease, unspecified(N18.9), Carrier of drug-resistant Clostridium difficile(Z22.303), Atrial fibrillation(I48.0), Benign hypertension(I10.0), Arthritis, unspecified, unspecified site(M13.99), Unspecified dementia(F03), Anaemia, unspecified(D64.9), Magnesium deficiency(E61.2), Hypothyroidism, unspecified(E03.9), Irritable bowel syndrome with mixed bowel habits [IBS-M](K58.3), Other and unspecified dysphagia(R13.8), Pathological fracture, not elsewhere classified, pelvic region and thigh(M84.45), Acquired absence of genital organ(s)(Z90.7), Intracranial injury, unspecified(S06.9), Other specified disorders of thyroid(E07.88)

Effective Date: 10/07/2025 17:17 Type: Family/Resident Involvement

Data : Writer received the phone call from resident POA to provided consent for FLU and covid vaccine

Action : documented accordingly

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:03 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or concerns reported other than bruise on her left forearm. This will be monitor on wound rounds. Resident was seen to be seated in wheelchair, appeared calm and in no distress. Color okay, slightly pale. Mucus membranes moist. Resps easy and regular.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : GILLIS, RETA (00979) Location : 3 East E306 1 Admission Date : 11/03/2022
Medical Record # : 5550 952 294 WW Gender : F Date of Birth : 04/17/1934
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Other specified disorders of bone density and structure, multiple sites(M85.80), Dementia in Alzheimer's disease, atypical or mixed type (F00.2), Malignant neoplasm of right bronchus or lung unspecified(C34.90), Other fusion of spine, cervical region(M43.22), Mental and behavioural disorders due to use of alcohol, harmful use(F10.1), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Sleep apnoea, obstructed(G47.30), Degeneration of macula and posterior pole(H35.3), Senile cataract, unspecified(H25.9), Conductive hearing loss, bilateral(H90.0), Cataract, unspecified(H26.9)

Effective Date: 10/08/2025 10:05 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident on isolation with contact/droplet precautions due to mild upper respiratory symptoms including occasional cough, hoarse voice. Symptoms are improving with resident to be slightly hoarse yesterday but no other symptoms noted. Intakes good. Recent VS stable. She appeared alert, calm and comfortable. No cough observed. Color okay, resps easy and regular. MRVP positive for rhinovirus.

Mild upper respiratory infection secondary to rhinovirus. Continue to monitor, clinically stable and improving. Ongoing IPAC precautions as per protocol.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 15:46 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both vaccines

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : GLASSIER, BARBARA (001155) Location : Ground W109 1 Admission 10/08/2025

Medical Record # : 2687 827 531 FE

Gender : F

Date :

Date of Birth : 09/07/1952

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Arthritis, unspecified, unspecified site(M13.99), Glaucoma, unspecified(H40.9), Lichen planus, unspecified(L43.9), Hypothyroidism, unspecified(E03.9), Scoliosis unspecified, unspecified site(M41.99), Other sleep apnoea(G47.38), Osteoporosis, unspecified(M81.9), Retention of urine(R33), Vascular dementia, unspecified(F01.9), Depressive episode, unspecified(F32.9), Other specified intervertebral disc disorders(M51.8), Unspecified dislocation of elbow, open(S53.191), Neoplasm of uncertain or unknown behaviour of bladder(D41.4), Dysphasia and aphasia(R47.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9)

Effective Date: 10/13/2025 14:24 Type: Family/Resident Involvement

Data : Writer called POA to discuss about resident's health status and poor intake. as resident is newly admitted to facility not quite aware of baseline for this resident.

During meals when staff assisting with feeding, resident consistently noted clenching teeth, so very minimal fluid & food intake.

Encouraged resident, pushed fluids able to drink minimal approx 100mls of chocolate milk.

resident was awake and alert, responding to verbal stimuli, able to communicate, but appeared pale.

VS stable documented in PCC by US. No hypotensive.

No urine output noted in drainage bag since this morning as per US.

Catheter was flushed during Noon time, patent.

Again, around 1420 writer assessed resident was awake and alert in her bed, noted some amount of urineoutput (approx 100mls) in leg bag.

with PM snack writer attempted to feed resident had orange juice without any difficulties, and PSW staff continued feeding.

Action : POA called back and had a discussion with US.

US gave update on resident and POA wishes to continue to monitor resident.

No concerns from POA.

Response : US aware to Continue to monitor resident's intake and push fluids.

Author:Shreya Patel RESP - Nursing - RN - Nurse Manager [e-SIGNED]

Signature: _____

Effective Date: 10/12/2025 15:33 Type: Family/Resident Involvement

Data : Resident's poor food/ fluids intake.

Action : This writer made POA, CHRISTINE GLASSIER aware. Christine GLASSIER stated " I would like dietitian to email me about concerns as I am a healthcare worker, and I can't talk at work". In charge informed.

Response :

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : GRAJALES, ANGEL (001117) Location : 3 West W323 2 Admission Date : 03/26/2025
Medical Record # : 8568 448 941 JB Gender : M Date of Birth : 07/01/1942
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Bell's palsy(G51.0), Cataract, unspecified(H26.9), Glaucoma, unspecified(H40.9), Unspecified urinary incontinence(R32), Oropharyngeal dysphagia(R13.0)

Effective Date: 10/08/2025 10:07 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported or recently documented. Ongoing oropharyngeal dysphagia on pureed solids and thickened fluids. Ongoing catheter care. Weights reviewed, stable. Resident was seen to be awake, calm, seated in chair. He appeared comfortable. Color okay, resps easy and regular.

Ongoing CDM. RD recently reviewed for referral for SLP assessment.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 16:46 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : POA's collaboratively agree for FLU vaccine only.

Response : Documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:03 Type: Physician Note

Note Text : Assessed on medical rounds. No new issues or health concerns reported. Activity and function as per his usual. He has known significant oral pharyngeal dysphagia. It is reported that he has been tolerating pureed textures and thickened fluids over the past few months. Previously he was noted to have coughing on minced textures. Resident seen to be seated in chair, alert, calm and in no distress at the time of rounds. No coughing observed. Resps easy and regular, color normal. Continue with pureed textures, pudding thickened fluids. RD reassessment has been requested. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : GRAJALES, ANGEL (001117)

Location : 3 West W323 2

Admission 03/26/2025

Medical Record # : 8568 448 941 JB

Gender : M

Date :

Date of Birth : 07/01/1942

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Bell's palsy(G51.0), Cataract, unspecified(H26.9), Glaucoma, unspecified(H40.9), Unspecified urinary incontinence(R32), Oropharyngeal
dysphagia(R13.0)

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : GREEN, JO-ANNE ROSE (00305) Location : 3 West W310 1 Admission 11/12/2012
Medical Record # : 6759 554 717 AN Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 10/29/1944
Allergies : No Known Allergies
Diagnoses : Congenital hydrocephalus, unspecified(Q03.9), Delayed union of fracture, pelvic region and thigh(M84.25), Pervasive developmental disorder, unspecified(F84.9), Cervical disc disorder unspecified site(M50.9), Osteoporosis, unspecified(M81.9), Mild cognitive disorder(F06.7), Intertrochanteric fracture, closed(S72.100)

Effective Date: 10/15/2025 14:46 Type: Family/Resident Involvement

Data : Call was placed to husband Richard in regards to medication time change from 0600 to 0800

Action :

Response : Husband agrees to and has no concerns regarding this change.

Author:Gail Bungay RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:08 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident noted to have MASD on the buttocks. Recently assessed, concern regarding candida, treatment with Canesten and Hydrocortisone initiated plus zinc barrier cream. Stools remain soft to loose. Image of buttock on wound rounds reviewed, improved from previous.

Continue current management regarding buttock, candida, incontinence dermatitis. Discontinue Senokot one tab routinely, due to soft to loose stools. PRN Senokot remains in place. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:04 Type: Physician Note

Note Text : Assessed on medical rounds. Resident noted to have MASD on her buttocks recently. At the time of rounds, she was seated in her tilt wheelchair, appeared calm and comfortable. Buttocks were not viewed directly but images were reviewed on wound rounds. Numerous erythematous papules noted on bilateral buttocks. Likely candida, treatment with Canesten 2% Hydrocortisone powder bid follow by zinc barrier bid and prn has been ordered.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : GREEN, JO-ANNE ROSE (00305)

Location : 3 West W310 1

Admission 11/12/2012

Medical Record # : 6759 554 717 AN

Gender : F

Date :

Date of Birth : 10/29/1944

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Congenital hydrocephalus, unspecified(Q03.9), Delayed union of fracture, pelvic region and thigh(M84.25), Pervasive developmental disorder, unspecified(F84.9), Cervical disc disorder unspecified site(M50.9), Osteoporosis, unspecified(M81.9), Mild cognitive disorder(F06.7), Intertrochanteric fracture, closed(S72.100)

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	GRIGG, JOYCE (00872)	Location :	3 East E321 1	Admission Date :	01/21/2021
Medical Record # :	5625 699 771 PD	Gender :	F	Date of Birth :	11/21/1951
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Delirium, unspecified(F05.9), Stroke, not specified as haemorrhage or infarction(I64), Nontoxic single thyroid nodule(E04.1), Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Depressive episode, unspecified(F32.9), Unspecified dementia(F03)				

Effective Date: 10/08/2025 10:06 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident noted to have some reports of reduced vision in her left eye. She is somewhat a vague historian but seems to report reduced vision in the left eye since recent acute glaucoma. She denies pain or other symptoms. She has ongoing ophthalmology follow-up regarding glaucoma, with treatment in place, and also had recent bilateral cataract excisions, IOL. OE she was alert, pleasant and ambulatory. Mood appeared good. Pupils asymmetrical, left pupil larger than right with slight asymmetry. No tearing/discharge/hyperemia or other visible ocular concerns. On screening assessment of vision, resident is able to count fingers with left eye.

Follow-up CT regarding biliary carcinoma is booked for October 10th. Follow-up with ophthalmology is booked in November.

Ongoing CDM. Reduced visual acuity left eye, likely secondary to previous acute glaucoma. Monitor for further concerns. Plan for ophthalmology follow-up in November.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : HARE, MINKJE (001142) Location : 2 East E202 1 Admission 07/10/2025
Medical Record # : 6300 716 518 VR Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 12/14/1931
Allergies : Tape, NKD allergies
Diagnoses : Dementia in other specified diseases classified elsewhere(F02.8), Hearing loss, unspecified(H91.9), Benign hypertension(I10.0), Multiple fractures of 2 - 4 ribs, closed(S22.400), Arthritis, unspecified, other site(M13.98), Glaucoma, unspecified(H40.9)

Effective Date: 10/06/2025 10:04 Type: Physician Note

LATE ENTRY

Note Text : See quarterly medication review note.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 15:01 Type: Family/Resident Involvement

Data : The writer called POA for give an update about the found hearing aid

Action : The call went on voice message, left voice message to call back and ext provided

Response :

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HAWKINS, PERCY (001130) Location : 2 East E203 1 Admission Date : 05/15/2025
Medical Record # : 1793 645 456 XT Gender : M Date of Birth : 06/15/1938
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : NKD allergies
Diagnoses : Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Peripheral vascular disease, unspecified(I73.9), Hearing loss, unspecified (H91.9), Osteoporosis, unspecified(M81.9), Unspecified dementia(F03), Aortic (valve) stenosis(I35.0), Embolism and thrombosis of other specified veins(I82.8), Iron deficiency anaemia, unspecified(D50.9), Unspecified fracture of neck of femur, closed(S72.090), Alzheimer's disease, unspecified(G30.9), Chronic obstructive pulmonary disease, unspecified(J44.9)

Effective Date: 10/06/2025 10:05 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Concern noted regarding lower extremity edema. Resident has a history of the same, and previously utilized edema wear to assist with edema. He remains on Lasix 40 mg po daily. Resident was seen to be alert, pleasant and seated in chair, feet dependent on the floor. Lower extremity show pitting edema approximately two thirds to knees. Skin warm, intact. No increase heat/erythema noted. Non-tender on palpation. Resps easy and regular. Bloodwork reviewed, CBC and LUC okay, withHb 100.

Ongoing CDM. For lower extremity edema, continue with Lasix and add edema wear. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 15:27 Type: Family/Resident Involvement

Data : The resident's POA came to the writer and informed that resident is having rash on his right and left lower leg.

Action : The writer assessed the resident's leg and uploaded the pictures on the wound rounds.The writer will notify the incoming nurse as well.

Response : Continue to monitor resident with a current plan of care

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HAWLEY, BEVERLEY (001046)

Location : 2 East E224 1

Admission 02/07/2024

Medical Record # : 6296 491 951 PR

Gender : F

Date :

Date of Birth : 10/01/1933

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Cyclobenzaprine, Ibuprofen

Diagnoses : Glaucoma, unspecified(H40.9), Polyneuropathy, unspecified(G62.9), Blindness, binocular(H54.0), Type 2 diabetes mellitus with advanced ophthalmic disease(E11.36), Arthrosis, unspecified(M19.9), Benign hypertension(I10.0), Degenerative disease of nervous system, unspecified(G31.9), Other cerebral infarction(I63.8), Thrombotic microangiopathy(M31.1), Malignant neoplasm of central portion of breast, unspecified side(C50.19), Acute myocardial infarction, unspecified(I21.9), Fatty (change of) liver, not elsewhere classified(K76.0), Irritable bowel syndrome with mixed bowel habits [IBS-M](K58.3), Other specified heart block(I45.5), Haemorrhoids, unspecified(K64.9)

Effective Date: 10/13/2025 20:14 Type: Family/Resident Involvement

Data : On friday the Oct.10, residents daughter approached writer in the common area on the unit pushing her mom in the wheelchair and informed writer that her mom expressed the wish to be vaccinated not only with the flu vaccine but also with the COVID vaccine.Daughter asked her mom if she can repeat what she told her the other day about vaccine.

Resident asked her daughter to remind her what did she mean by that, than daughter said didn't you said that you want Flu and COVID vaccine as well, resident repeated i might as well get COVID too.

Action : Writer documented under immunization tab and will follow with the resident of the day on immunization

Response : as above.

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:17 Type: Family/Resident Involvement

Data : The writer called the POA Jane at 1015

Action : The writer informed the POA the staff received an order for resident to collect the urine sample. POA was thankful for the update.

Response : Will try to collect the urine sample this afternoon

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/07/2025 21:15 Type: Family/Resident Involvement

Data : Call from POA Jane. She requested to have a discussion with MD. She wants resident to be placed on"Low grade daily antibiotics ongoing.

Action : On assessment, resident has no fever, she complained of frequency, urgency and dysuria. She asked for Tylenol, and something to help her sleep. She has Tylenol and Melatonin PRN. Unit Nurse will administer. MD notified

Response : Order obtained- from MD for Urine C+S and ongoing monitoring for urinary symptoms.

Author:Bidemi Adeniji RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HAWLEY, BEVERLEY (001046)

Location : 2 East E224 1

Admission 02/07/2024

Medical Record # : 6296 491 951 PR

Gender : F

Date :

Date of Birth : 10/01/1933

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Cyclobenzaprine, Ibuprofen

Diagnoses : Glaucoma, unspecified(H40.9), Polyneuropathy, unspecified(G62.9), Blindness, binocular(H54.0), Type 2 diabetes mellitus with advanced ophthalmic disease(E11.36), Arthrosis, unspecified(M19.9), Benign hypertension(I10.0), Degenerative disease of nervous system, unspecified(G31.9), Other cerebral infarction(I63.8), Thrombotic microangiopathy(M31.1), Malignant neoplasm of central portion of breast, unspecified side(C50.19), Acute myocardial infarction, unspecified(I21.9), Fatty (change of) liver, not elsewhere classified(K76.0), Irritable bowel syndrome with mixed bowel habits [IBS-M](K58.3), Other specified heart block(I45.5), Haemorrhoids, unspecified(K64.9)

Effective Date: 10/06/2025 10:06 Type: Physician Note

LATE ENTRY

Note Text : Resident sustained a fall on October 4th with no apparent injuries. She was monitored on head injury routine with no concerns. No subsequent pain or other new concerns noted. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/04/2025 01:18 Type: Family/Resident Involvement

Data : Residents POA called the staff to let them know that the resident is hallucinating and requested to provide her prn risperidone and melatonin.

Action : The writer approached the resident, she stated that she is in a train compartment which is flying and there are some few men in the room working beside her bed. PRN meds were administered as per MD order and the writer sat with the resident on her request for a few min.

Response : Resident is sleeping now and no concerns are noted. Ongoing monitoring for further concerns.

Author:Ruhan Mansuri RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HOLDCROFT, JOHN (001036) Location : 3 West W316 1 Admission 11/15/2023
Medical Record # : 1732 828 353 GJ Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 04/10/1962
Allergies : No Known Allergies
Diagnoses : Other disorders of psychological development(F88), Bipolar affective disorder, unspecified(F31.9), Gout, unspecified, unspecified site(M10.99), Other specified rheumatoid arthritis(M06.8), Primary generalized (osteo)arthrosis(M15.0), Type 2 diabetes mellitus without (mention of) complications(E11.9)

Effective Date: 10/14/2025 06:32 Type: Family/Resident Involvement

Data : No Blood noted on resident rectum during this shift

Action :

Response : Monitoring continue (Draft)

Author:Obianuju Nebo RESP - Nursing - RPN

Signature: _____

Effective Date: 10/13/2025 17:59 Type: Family/Resident Involvement

Data : Res reported that when he wipe his rectum after defecation he noted a small amount of blood

Action : Res denies abdominal pain. Res appears relaxed and calm. No changes to his routine. No s/s of N/V, body weakness or loss of appetite.

Response : Will continue to monitor res for s/s of melena.

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	HRISTOVSKI, PERSA (00864)	Location :	3 West W308 1	Admission Date :	12/17/2020
Medical Record # :	8627 046 934 WD	Gender :	F	Date of Birth :	10/20/1949
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Cataract, unspecified(H26.9), Glaucoma, unspecified(H40.9), Hypothyroidism, unspecified(E03.9), Recurrent depressive disorder, current episode mild(F33.0), Unspecified dementia(F03), Delusional disorder(F22.0)				

Effective Date: 10/01/2025 10:05 Type: Physician Note

Note Text : Assessed on medical rounds. Resident continues to be followed for decline in health condition after fall and hospitalization, which appears consistent with hypoactive delirium, on baseline of significant dementia. She was noted to have sustained a fall in the dining room on September 25 with no apparent injuries. Intakes have been poor over the month of September. RD recently assessed and increase oral supplementation with Resource to 120 ml tid. Resident is not demonstrating any new signs or symptoms. She is often drowsy.

Weights reviewed, approximately 6 kg weight loss noted over two weeks in September. VS stable, BP in the lower range. Resident seen resting quietly on her bed, facial bruising yellowish, resolving. Color okay, resps easy and regular. Abdomen benign. Extremities okay. Skin warm and dry. Bloodwork reviewed, CBC, LUC, calcium, magnesium, TSH, and CRP normal. Urine positive for Klebsiella.

Dementia, hypoactive delirium. No apparent acute medical cause at this time. Urine culture positive for Klebsiella but resident showing no specific signs of lower UTI and bloodwork unremarkable, so urine culture results likely represent asymptomatic bacteriuria. Family has been notified, and they do not wish to proceed with antibiotic treatment at this time. Due to lower BP, Amlodipine will be held and reassess in a couple of weeks time or sooner if concern. Due to drowsiness, Aripiprazole will be reduced to 2 mg po daily. Overall, palliative approach to care. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author: Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HRYTZAK, DENNIS (001107)

Location : 2 West W212 1

Admission 02/06/2025

Medical Record # : 8244 997 758 LB

Gender : M

Date :

Date of Birth : 09/29/1954

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : NKD allergies

Diagnoses : Other cerebral palsy(G80.8), Vascular dementia, unspecified(F01.9), Other specified chronic obstructive pulmonary disease(J44.8), Type 2 diabetes mellitus with autonomic neuropathy(E11.42), Idiopathic peripheral autonomic neuropathy(G90.0), Presence of cardiac pacemaker (Z95.00), Transient cerebral ischaemic attack, unspecified(G45.9), Cellulitis, unspecified(L03.9), Haemorrhoids in the puerperium, unspecified as to episode of care, or not applicable(O87.209)

Effective Date: 10/06/2025 10:11 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident sustained an unwitnessed fall on October 1st, from bed. He had no significant injuries but a minor skin tear to his left forearm. This is on wound rounds, and will be followed by nursing staff as per skin and wound program protocol. He was monitored on head injury routine which was reviewed with no concerns.

Constipation and laxatives reviewed. Resident remains frequently on bowel list, on Lactulose 30 mls po bid, and Senokot two tabs prn for constipation.

Resident was seen to be alert, seated in chair appeared calm and pleasant. Color okay, resps easy and regular.

Ongoing measures for falls prevention. Fall risks due to Parkinsonism, unsteady gait/posture, attempts to mobilize independently. For constipation, add Senokot two tabs routinely and follow regarding bowel pattern.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HUGHES, PAUL (001023) Location : 3 West W316 2 Admission Date : 07/11/2023
Medical Record # : 9449 337 121 CN Gender : M Date of Birth : 11/14/1944
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Sleep apnoea, central(G47.31), Supraventricular tachycardia(I47.1), Atrial fibrillation, unspecified(I48.90), Old myocardial infarction(I25.2), Atherosclerotic heart disease of native coronary artery(I25.10), Pathological fracture, not elsewhere classified, unspecified site(M84.49)

Effective Date: 10/15/2025 11:14 Type: Family/Resident Involvement

Data : to update POA re. fall on Oct 15

Action : writer called POA-Brenda to give update Re. fall on Oct 15. However, No response so left VM. Call back no. provided with incharge ext.

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/15/2025 11:11 Type: Family/Resident Involvement

Data : To Update POA Re. Physical aggression towards staff on Oct 15 at around 0300H

Action : writer called POA-Brenda to give update Re. Physical aggression towards staff on Oct 15 at around 0300H. However, No response so left VM. Call back no. provided with incharge ext.

Response : ongoing Monitoring

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/15/2025 03:55 Type: Behaviour - Responsive Behaviour

Type of Behaviour : physical aggression initiated towards staff.

Antecedent/Triggers : incontinence care, clothes and brief were soiled with urine.

Describe the behaviour : Around 0225, resident's call bell/ bed alarm went off and staff went to resident's room to answer it. Staff found resident on the floor on left side of the bed on top of the floor mat. Emergency call bell was pulled for further assistance. US went and assessed the resident, resident was top of the floor mat in right side lying position. Resident was heavily incontinent of urine, his brief, hip protectors, t-shirt were soiled with urine. Incontinence care was provided to the resident by PSW staff and by US collectively. Resident didn't display any signs of agitation or resistiveness initially but while Turning him in order to change his brief and provide care, resident punched US YK in abdomen 2-3 times and tried to pull her towards him.

Disruptiveness (Data)/Consequences to the behaviour : physical aggression towards staff.

Interventions (review/update care plan) (Action) : reviewed.

Change in medication : none

What are the risks and causes : cause: incontinence care.

risk: risk of injury to others and self .

Outcome(s)(Result) :

Substitute Decision Maker notified (if not, explain) : to be notified by day staff.

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HUGHES, PAUL (001023)

Location : 3 West W316 2

Admission 07/11/2023

Medical Record # : 9449 337 121 CN

Gender : M

Date :

Date of Birth : 11/14/1944

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Type 2 diabetes mellitus without (mention of) complications(E11.9), Sleep apnoea, central(G47.31), Supraventricular tachycardia(I47.1), Atrial fibrillation, unspecified(I48.90), Old myocardial infarction(I25.2), Atherosclerotic heart disease of native coronary artery(I25.10), Pathological fracture, not elsewhere classified, unspecified site(M84.49)

Author:Yasmeen Kaur RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:09 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported or recently documented. Activity and function as per his usual. He was seen to be alert, seated in chair, appears calm and comfortable. Verbally interactive, no health concerns voiced, confused as his usual. Color okay, resps easy and regular.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 15:23 Type: Family/Resident Involvement

Data : Writer received the phone call from residents POA to provided the consent for FLU vaccine only

Action : Informed consent received for FLU vaccine only.

Response : documented accordingly under immunization tab

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : HUYER, JACOB (001105) Location : 3 West W319 1 Admission Date : 01/29/2025
Medical Record # : 3138 737 972 NJ Gender : M Date of Birth : 05/17/1953
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Ciprofloxacin
Diagnoses : Parkinson's disease(G20), Other hypotension(I95.8), Other and unspecified dysphagia(R13.8), Urinary tract infection, site not specified (N39.0), Dementia in Parkinson's disease(F02.3), Delirium, unspecified(F05.9), Stroke, not specified as haemorrhage or infarction(I64)

Effective Date: 10/12/2025 07:19 Type: Behaviour - Responsive Behaviour

Type of Behaviour : Responsive Behaviour

Antecedent/Triggers : Bed alarm activated. Upon entering room, resident observed ambulating without an assistive device. Staff encouraged the resident to return to bed for safety. The resident became verbally agitated, stated "leave my room," and began counting aloud, prompting staff to exit. Staff ensured the resident was stable before leaving the room.

Describe the behaviour : Resident throwing stuff on the staff, yelling and asking the staff to leave his room

Disruptiveness (Data)/Consequences to the behaviour : Harm to self, Staff

Interventions (review/update care plan) (Action) : The Resident asked staff to leave the room; space was provided as requested.

Change in medication : No

What are the risks and causes : The Resident may fall or hurt himself during an outburst.

Outcome(s)(Result) :

Substitute Decision Maker notified (if not, explain) : Yes (Draft)

Author:Obianuju Nebo RESP - Nursing - RPN

Signature: _____

Effective Date: 10/08/2025 10:10 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork reviewed, CBC, LUC, calcium, magnesium, Vitamin D, TSH and ALP unremarkable.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 11:40 Type: Family/Resident Involvement

Data : to update POA re. witnessed fall on Sept 30 at 1922H

Action : Writer called POA-Margaret and informed regarding witnessed fall on Sept 30 at 1922H.

- POA raised no concern and was thankful for the update.

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:06 Type: Physician Note

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	HUYER, JACOB (001105)	Location :	3 West W319 1	Admission Date :	01/29/2025
Medical Record # :	3138 737 972 NJ	Gender :	M	Date of Birth :	05/17/1953
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Ciprofloxacin				
Diagnoses :	Parkinson's disease(G20), Other hypotension(I95.8), Other and unspecified dysphagia(R13.8), Urinary tract infection, site not specified (N39.0), Dementia in Parkinson's disease(F02.3), Delirium, unspecified(F05.9), Stroke, not specified as haemorrhage or infarction(I64)				

Note Text : Assessed on medical rounds. Resident sustained falls on September 25, 28th and three falls on September 30th associated with agitation related to fire drill. He sustained no injuries during these falls and has been monitored on head injury routine. Sertraline was increased one week ago to 100 mg po daily. Laxatives were increased one week ago and some improvement in bowel pattern has been noted over the past few days.

VS reviewed. Postural VS have not been consistently completed but on one occasion there was a significant postural drop in BP later in the day. At the time of rounds, resident was seen to be alert, euthymic, seated in wheelchair. No agitation noted. Mood appeared euthymic. Color okay, resps easy and regular.

Ongoing measures for falls prevention, with recurrent falls related to Parkinson's disease, postural hypotension, ongoing efforts to mobilize independently, and medications possibly contributing. Monitor mood on recently increased Sertraline, and monitor bowel pattern on increase in laxatives. Continue to monitor postural VS. Resident has been on Midodrine once daily in the morning, and an additional dose of 5 mg will be added at 1400 hours at this time to avoid significant hypotension later in the day. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : IANNELLO, ROSA (001098)

Location : Ground W102 1

Admission 11/07/2024

Medical Record # : 8819 177 372 XM

Gender : F

Date :

Date of Birth : 07/01/1928

Physician :

Pharmacy : Medisystem Barrie IMM

Allergies : Aspirin

Diagnoses : Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Other specified cataract(H26.8), Benign hypertension(I10.0), Occlusion and stenosis of carotid artery(I65.2), Vascular dementia, unspecified(F01.9), Hyperlipidaemia, unspecified (E78.5), Other specified diabetes mellitus without (mention of) complication(E13.9), Hypothyroidism, unspecified(E03.9), Degeneration of macula and posterior pole(H35.3), Other specified diabetes mellitus with poor control, so described(E13.64)

Effective Date: 10/07/2025 22:09 Type: Family/Resident Involvement

Data : POA Vincenza spoke with writer regarding female/male staff care for Rosa.

Action : POA stated she is comfortable with her mother Rosa receiving care from both female and male staff. POA would like one female staff to present at all times when secondary male staff is assisting.

Response : Plan of care updated to reflect changes.

Author:Caitlyn Chard RESP - Nursing - Resident Care Manager [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 08:52 Type: Physician Note

Note Text : Care conference with POA occurred yesterday. Pain and discomfort was a concern as the resident can't express herself. Her pain medications were reviewed and her scheduled hydromorphone will be increased to 1 mg PO TID and her breakthrough will be increased to Hydromorphone 0.5 mg PO q4h as needed. If she can tolerate the increase and she is still showing discomfort, we will consider changing her schedule to the long acting Hydromorphone 3 mg PO Q12H and then review.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : KILMURRAY, DANA (001140)

Location : 2 West W207 1

Admission 06/25/2025

Medical Record # : 3611 361 670 DD

Gender : F

Date :

Date of Birth : 11/08/1973

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : NKD allergies

Diagnoses : Other specified disorders of muscle, upper arm(M62.82), Pure hypercholesterolaemia(E78.0), Hypothyroidism, unspecified(E03.9), Obesity due to excess calories(E66.0), Emotionally unstable personality disorder(F60.3), Soft tissue disorder, unspecified, multiple sites(M79.90), Asthma, unspecified, without stated status asthmaticus(J45.90), Embolism and thrombosis of unspecified vein(I82.9), Primary pulmonary hypertension(I27.0), Schizoaffective disorder, unspecified(F25.9)

Effective Date: 10/06/2025 10:12 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported. Resident was out for consultation with gynecology this morning, and she reports that endometrial biopsies were completed. No note or other instructions have been received yet from gynecology.

Resident appears as per her usual, seated in chair, appears calm and comfortable. Color okay, resps easy and regular. Recent bloodwork reviewed, CBC okay(on monthly CBC for monitoring due to Clozapine).

Ongoing CDM with no changes at this time. Await results of endometrial biopsy/gynecology consultation note.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 13:18 Type: Family/Resident Involvement

Data : The Writer had attempted to connect with the resident's daughter Sam (SDM) to review goals of care as during post admission care conference both the resident and her daughter requested some time to think about code status. The Writer had left a voicemail for Sam, stated non-urgent call but requested call back to arrange date/time to meet.

Action :

Response :

Author:Ashline Johnstone RESP - Nursing - Behaviour Support Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : KOHLI, JAGJEET (001092) Location : Ground W115 2 Admission Date : 10/15/2024
Medical Record # : 9213 356 620 YV Gender : M Date of Birth : 11/21/1949
Physician : Charette, Yannick Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Cerebral infarction, unspecified(I63.9), Type 2 diabetes mellitus without (mention of) complications(E11.9), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Hypo-osmolality and hyponatraemia(E87.1)

Effective Date: 10/11/2025 18:01 Type: Family/Resident Involvement

Data : Stage 2 pressure wound to left heel, new order in place

Action : Writer called POA, RINKU KOHLI to give an update. A voice message left to call back.

Response :

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor [e-SIGNED] Signature: _____

Effective Date: 10/07/2025 15:22 Type: Family/Resident Involvement

Data : pressure injury stage 2 to left heel outer side

Action : A voice message left to POA, RINKU KOHLI for an update.

Response :

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor [e-SIGNED] Signature: _____

Effective Date: 10/03/2025 09:28 Type: Physician Note

Note Text : The resident has recurrent redness along nail bed of right middle finger, when examined, the area wasn't warm but redness was noted, nail is growing into the skin. Soaking his finger in warm water/saline a few times daily x 5 days will be done, will monitor.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED] Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	LALIBERTE, BARBARA (00847)	Location :	2 East E211 1	Admission Date :	04/10/2020
Medical Record # :	8107 632 831 NH	Gender :	F	Date of Birth :	08/27/1942
Physician :	Mossman, Kerstin	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Accupril, Ativan, Avapro, Pollen				
Diagnoses :	Chronic obstructive pulmonary disease, unspecified(J44.9), Atherosclerotic heart disease of native coronary artery(I25.10), Depressive episode, unspecified(F32.9), Type 2 diabetes mellitus with poor control, so described(E11.64), Blindness, binocular(H54.0), Glaucoma, unspecified(H40.9), Hypothyroidism, unspecified(E03.9), Benign hypertension(I10.0)				

Effective Date: 10/14/2025 15:17 Type: Physician Note

Note Text : LTC visit, review re anemia, insomnia and chronic pain. Review with Pt and staff: no blood per rectum, no blood in urine or from vagina, no excessive nose bleeds, Pt is eating small amounts only, no abdo pain, no dysphagia, followed by RD. On chronic oxygen.

Medication review shows no specific GI irritating meds, on PPI therapy. V/S stable.

O/E: NAD, Pt alert, eating lunch, feels well, skin clear, colour unchanged, no lower limb edema, abdomen soft to touch. A/P: Anemia NYD, on iron and PPI therapy to assist, insomnia, possibly related to pain as in past as Pt requires assistance to turn in bed or with any readjustments given impaired vision, chronic COPD with oxygen, for vaccine update as available, plan:

- can increase Lyrica and Dilaudid at night to assist with pain and improve sleep
- monitor Hg, next due in Nov/Dec, monitor for any blood loss
- encourage food and fluid intake
- F/U as needed and for routine visit

Author:Dr.Kerstin Mossman RESP - Medical Services - MD - Physician [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	LANNO, MICHAEL (001075)	Location :	3 West W320 1	Admission Date :	07/11/2024
Medical Record # :	3149 219 499 WW	Gender :	M	Date of Birth :	07/01/1967
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Penicillin, Sulfa Antibiotics, Cats				
Diagnoses :	Congestive heart failure(I50.0), Benign hypertension(I10.0), Secondary malignant neoplasm of inguinal and lower limb lymph nodes(C77.4), Asthma, unspecified, without stated status asthmaticus(J45.90), Other sleep apnoea(G47.38), Obesity, unspecified(E66.9), Atrial fibrillation, unspecified(I48.90), Pure hypercholesterolaemia(E78.0), Arthritis, unspecified, unspecified site(M13.99), Celiac disease(K90.0), Type 2 diabetes mellitus with multiple other complications(E11.78), Diabetic retinopathy(H36.0), Osteomyelitis, unspecified, unspecified site(M86.99), Mild depressive episode(F32.0), Dyspnoea(R06.0), Anaemia, unspecified(D64.9), Old myocardial infarction(I25.2), Ischaemic cardiomyopathy(I25.5), Acquired absence of upper and lower limbs [any level](Z89.8), Sepsis, unspecified(A41.9), Pneumonia, unspecified (J18.9), Acute renal failure, unspecified(N17.9), Hyperkalaemia(E87.5)				

Effective Date: 10/10/2025 22:48 Type: Behaviour - Follow up

Note Text : Writer was shared an email from RD that resident had sent to her regarding concerns he had about times he was to receive his eye drops. Writer went upstairs and spoke with the nurse on the floor prior to meeting with resident, writer was called away for about 5 minutes to deal with another resident concern. Writer received a call from the unit nurse, she stated that resident called her terrible names, screaming that she's "f++cking stupid". He told her to give him his insulin and his eye drops and to get out. Writer went to speak with resident moments later and was welcomed with him screaming at writer stating that "I will see you and Sadie on Monday" writer asked why and resident screamed "you f++king know why" writer told him that writer had read his email and was up there to assist, resident screamed, very loudly "You don't f++king go to the f++king nurse before talking to me" writer told resident that writer needed to gather all information about his concern prior to meeting with him. He continued screaming and swearing, calling the unit nurse names. Resident told the unit nurse to give him his insulin pen and eye drops and to get the f++k out of his room, refusing to let the nurse administer, writer offered to administer and he also refused stating he'd do it his f++king self.

Writer informed resident that the way he spoke to the nurse and writer was not appreciated and reminded him that staff speak to him respectfully and would appreciate the same in return

Author:Melissa Brown RESP - Nursing - RPN - Associate Nurse Manager [e-SIGNED]

Signature: _____

Effective Date: 10/10/2025 18:10 Type: Behaviour - Responsive Behaviour

Type of Behaviour : Verbal aggression towards the writer.

Antecedent/Triggers : Resident was triggered by why the nurse manager did not come and see to him before going to the unite supervisor.

Describe the behaviour : Writer went to the resident's room @1605 hr for the scheduled 1700 medications and resident told "I need my prn eye drops too," Writer asked the resident if it is okay when writer will come to give the insulin along with that will give eye drops too. Resident agreed and writer left. after sometime the nurse manager came and asked the writer regarding this information, writer gave all the information as mentioned above. Nurse manager told the writer she will see him later, due to some emergency. writer went to the resident's room for administration of insulin and eye drops @1700 hr. Writer verified the resident that he agreed for the eye drops administration with insulin administration. Resident stated "who told you, someone came and see you, where is she, nurse manager should come first to see me before see fu** nurses, why she is not here, why you are asking me like this, see yourself and then talk to me, you fucking idiot, you doing your thing by own..where is fuc*** manager and , you so dumb, fuc** new nurse, if you don't like then go away, right now..so on." Resident was so verbally abusive and aggressive, swearing and too loud and completely inappropriate behaviour to the writer. writer tried to give insulin and eye drops, resident took it away from the writer's hand and told "I will administered by myself". writer documented that resident will self administered. and inform the upcoming nurse for follow up. Writer informed this event to nurse manager M.b and she came and spoke to the resident ,he was really verbally abusive and aggressive towards the nurse manager as well.

Disruptiveness (Data)/Consequences to the behaviour :

Interventions (review/update care plan) (Action) :

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : LANNO, MICHAEL (001075)

Location : 3 West W320 1

Admission 07/11/2024

Medical Record # : 3149 219 499 WW

Gender : M

Date :

Date of Birth : 07/01/1967

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Penicillin, Sulfa Antibiotics, Cats

Diagnoses : Congestive heart failure(I50.0), Benign hypertension(I10.0), Secondary malignant neoplasm of inguinal and lower limb lymph nodes(C77.4), Asthma, unspecified, without stated status asthmaticus(J45.90), Other sleep apnoea(G47.38), Obesity, unspecified(E66.9), Atrial fibrillation, unspecified(I48.90), Pure hypercholesterolaemia(E78.0), Arthritis, unspecified, unspecified site(M13.99), Celiac disease(K90.0), Type 2 diabetes mellitus with multiple other complications(E11.78), Diabetic retinopathy(H36.0), Osteomyelitis, unspecified, unspecified site(M86.99), Mild depressive episode(F32.0), Dyspnoea(R06.0), Anaemia, unspecified(D64.9), Old myocardial infarction(I25.2), Ischaemic cardiomyopathy(I25.5), Acquired absence of upper and lower limbs [any level](Z89.8), Sepsis, unspecified(A41.9), Pneumonia, unspecified (J18.9), Acute renal failure, unspecified(N17.9), Hyperkalaemia(E87.5)

Change in medication :

What are the risks and causes :

Outcome(s)(Result) :

Substitute Decision Maker notified (if not, explain) : self POA.

Author:Mansi Panchal RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:11 Type: Physician Note

LATE ENTRY

Note Text : See quarterly medication review.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:07 Type: Physician Note

Note Text : No new health concerns on rounds. Glycemic control reviewed. Blood sugars between 6 and 15, mostly between 8 and 13 which is a significant improvement from previous glycemic control. No changes will be made at this time and continue to follow.

Ongoing Coumadin anticoagulation with target INR between 2 and 3. Most recent INR 2.1. No changes made. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : LEGRIS, ROBERT (001054)

Location : 3 East E318 1

Admission 03/19/2024

Medical Record # : 5223 559 575 LF

Gender : M

Date :

Date of Birth : 12/30/1929

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Codeine, HYDROmorphone, Mirtazapine, Morphine, OLANZapine, Penicillin

Diagnoses : Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Carcinoma in situ of prostate(D07.5), Carcinoma in situ of bladder(D09.0),
Embolism and thrombosis of other specified veins(I82.8), Gastro-oesophageal reflux disease without oesophagitis(K21.9)

Effective Date: 10/05/2025 15:55 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both vaccines flu and COVID

Response : documented accordingly

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	LEMAY, LEONA (001078)	Location :	3 West W322 2	Admission	07/18/2024
Medical Record # :	1391 003 371 KK	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	03/21/1936
Allergies :	No Known Allergies				
Diagnoses :	Arthritis, unspecified, other site(M13.98), Pure hypercholesterolaemia(E78.0), Syncope and collapse(R55), Iron deficiency(E61.1), Presence of coronary angioplasty implant and graft(Z95.5), Benign hypertension(I10.0), Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delirium, unspecified(F05.9), Depressive episode, unspecified(F32.9), Constipation(K59.0)				

Effective Date: 10/09/2025 20:44 Type: Physician Note

Note Text : Assessed on medical rounds. Reviewed regarding glycemic control. Alc noted to be elevated recently, greater than 9. Metformin 250 mg po bid was started one week ago. Blood sugars remain elevated in the range of 11 to 17. At this time, Metformin will be increased to 500 mg po bid, follow and reassess in a couple of weeks time or sooner if concern.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : LEPSCHI, MARGARETA MARIA (00556) Location : 2 East E204 1 Admission 03/03/2016
Medical Record # : 2719 841 815 YY Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 05/07/1933
Allergies : No Known Allergies
Diagnoses : Benign hypertension(I10.0), Osteoporosis, unspecified(M81.9), Unspecified dementia(F03), Arthritis, unspecified, unspecified site(M13.99),
Syncope and collapse(R55), Depressive episode, unspecified(F32.9), Petit mal, unspecified, without grand mal seizures, not stated as
intractable(G40.70), Generalized anxiety disorder(F41.1)

Effective Date: 10/06/2025 10:07 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident noted to have bruise to her forehead and back, subsequent to fall on September 29th.
These will be monitored on wound rounds. No other new health concerns noted. Ongoing CDM and follow.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 13:29 Type: Family/Resident Involvement

Data : bruise on left forehead. (identified on Oct 3 by Night US)

Action : Writer called POA-Diana and informed regarding new bruise. POA raised no concern and was thankful for the update.

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : LLOYD, ELIZABETH ANNE (00776) Location : 3 West W309 1 Admission 12/04/2018
Medical Record # : 4914 979 291 MN Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 09/15/1943
Allergies : No Known Allergies
Diagnoses : Unspecified dementia(F03), Parkinson's disease(G20), Recurrent depressive disorder, unspecified(F33.9), Schizophrenia, unspecified(F20.9), Bipolar affective disorder, unspecified(F31.9), Oedema, unspecified(R60.9), Hypothyroidism, unspecified(E03.9), Benign hypertension (I10.0), Chronic kidney disease, unspecified(N18.9), Anaemia, unspecified(D64.9), Gastro-oesophageal reflux disease without oesophagitis (K21.9), Arthrosis, unspecified(M19.9), Monoclonal gammopathy of undetermined significance (MGUS)(D47.2), Arthritis, unspecified, multiple sites(M13.90), Osteoporosis, unspecified(M81.9)

Effective Date: 10/08/2025 10:13 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported or recently documented. She has been monitored regarding fluid intakes which appear to be adequate according to documentation. No pain or problematic symptoms noted. Resident seen to be seated in chair, appears alert, calm and comfortable. Color slightly pale, resps easy and regular. Bloodwork reviewed, Hb 79 and EGFR 15.

Ongoing palliative approach to care. Discontinue accurate intakes as fluid intakes appear adequate. Chronic anemia andCKD stable.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : LOPEZ, NORMA (001093) Location : 3 West W305 1 Admission Date : 10/18/2024
Medical Record # : 9530 331 389 WB Gender : F Date of Birth : 01/19/1946
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Benign paroxysmal vertigo(H81.1), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Varicose veins of other specified sites (I86.8), Hypothyroidism, unspecified(E03.9), Osteoporosis, unspecified(M81.9), Other sleep apnoea(G47.38), Unspecified dementia(F03), Migraine, unspecified(G43.9)

Effective Date: 10/08/2025 17:36 Type: Family/Resident Involvement

Data : POA requested not to shave res. POA comes and shaves her during the visit.

- Res have on and off redness above her lips.

Action : Evening staff aware, will advise morning staff.

Response :

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:14 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported or recently documented. Skin fold rash under left breast noted last week, slightly erythematous with foul odor noted. Canesten cream with Hydrocortisone has been implemented. No other new health concerns. Resident seen seated in chair, appeared awake, calm and comfortable. Color okay, resps easy and regular.

Ongoing CDM, palliative approach. Continue with Canesten/Hydrocortisone for left breast skin fold rash.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:08 Type: Physician Note

Note Text : Assessed on medical rounds. No new issues or concerns reported, other than skin fold rash under left breast. Query MASD versus candida. Resident seen to be alert, seated in wheelchair, appeared calm and comfortable. Color okay, resps easy and regular. Skin fold rash to be assessed by nursing staff as per skin and wound protocol and initiate interventions as indicated or report concerns to MD if required.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	LOPEZ, NORMA (001093)	Location :	3 West W305 1	Admission	10/18/2024
Medical Record # :	9530 331 389 WB	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	01/19/1946
Allergies :	No Known Allergies				
Diagnoses :	Benign paroxysmal vertigo(H81.1), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Varicose veins of other specified sites (I86.8), Hypothyroidism, unspecified(E03.9), Osteoporosis, unspecified(M81.9), Other sleep apnoea(G47.38), Unspecified dementia(F03), Migraine, unspecified(G43.9)				

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : LUPO, ANTONIETTA (001153) Location : 2 East E209 1 Admission Date : 09/23/2025
Medical Record # : 5651 039 991 VM Gender : F Date of Birth : 09/12/1938
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Spontaneous rupture of flexor tendons, ankle and foot(M66.37), Other specified arthritis, unspecified site(M13.89), Arthrodesis status(Z98.1), Presence of artificial knee(Z96.61), Unspecified dementia(F03), Arthritis, unspecified, multiple sites(M13.90), Vitamin B deficiency, unspecified(E53.9), Heart disease, unspecified(I51.9), Presence of cardiac pacemaker(Z95.00), Bell's palsy(G51.0)

Effective Date: 10/06/2025 10:08 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork results reviewed for this recently admitted resident. CBC and LUC okay but Hb low at 98, with mean cell volume noted at 91. Lipid profile okay, liver enzymes okay, Vitamin D low at 56.6, TSH slightly elevated at 6.62 and ferritin normal at 377. Resident is on Vitamin D 2000 units daily. For how long she has been on this supplement and compliance with this supplement prior to admission to Mill Creek are unclear, so continue same and recheck Vitamin D level in one month. Also recheck CBC to ensure Hb is stable, iron profile, and recheck TSH with T4. Annual bloodwork has been ordered.

Resident noted to have a fall on October 2nd with no apparent injuries. She was monitored on head injury routine with no concerns.

Sleep pattern reviewed, overall sleep okay but she is sometime notice to have increase confusion in the evening and is sometimes up late in the evening. Melatonin 5 mg po daily was recently started. PRN Oxazepam (as prescribed prior to admission to Mill creek has been used two times thus far in October. Continue to monitor sleep pattern during transition to long term care facility, with no further changes at this time. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 14:10 Type: Family/Resident Involvement

Data : The writer called POA this afternoon at 1410

Action : The writer explained to the POA that the resident refused care last night as well as this morning. The POA requested to shower the resident tomorrow and inform the writer to give him a call so, the POA can talk to the resident. The POA mentioned that to tell the resident that his husband was in the hospital and re approached the resident. Informed the staff but residents are currently at the activity area.

Response : Continue to monitor resident with a current plan of care

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 00:27 Type: Family/Resident Involvement

Data : family requested to use wheelchair for ambulation

Action : a writer made a referral for a physiotherapist to assess the resident.

Response :

Author:Prexaben Chaudhari RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : LUPO, ANTONIETTA (001153)

Location : 2 East E209 1

Admission 09/23/2025

Medical Record # : 5651 039 991 VM

Gender : F

Date :

Date of Birth : 09/12/1938

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Spontaneous rupture of flexor tendons, ankle and foot(M66.37), Other specified arthritis, unspecified site(M13.89), Arthrodesis status(Z98.1), Presence of artificial knee(Z96.61), Unspecified dementia(F03), Arthritis, unspecified, multiple sites(M13.90), Vitamin B deficiency, unspecified(E53.9), Heart disease, unspecified(I51.9), Presence of cardiac pacemaker(Z95.00), Bell's palsy(G51.0)

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	MACDONALD, BARBARA (00909)	Location :	Ground W101 1	Admission	09/30/2021
Medical Record # :	8003 809 913 YG	Gender :	F	Date :	
Physician :	Charette, Yannick	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	06/27/1938
Allergies :	media contrast				
Diagnoses :	Benign hypertension(I10.0), Other specified degenerative diseases of nervous system(G31.8), Stroke, not specified as haemorrhage or infarction(I64), Disorder of breast, unspecified(N64.9), Malignant neoplasm of uterus, part unspecified(C55), Atrial fibrillation, unspecified (I48.90), Parkinson's disease(G20), Osteoporosis, unspecified(M81.9), Fracture of base of femoral neck (cervicotrochanteric) closed(S72.010)				

Effective Date: 10/07/2025 18:21 Type: Family/Resident Involvement

Data : Wheezing breathing and unproductive coughs. Resident afebrile. vitals obtained and charted.

Action : NP aware. New order in place. Resident remains on isolation. ROYELLA MERCER made aware.

Response :

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	MACDONALD, EVAN (001050)	Location :	Ground W116 2	Admission	02/21/2024
Medical Record # :	7046 112 699 TM	Gender :	M	Date :	
Physician :	Charette, Yannick	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	07/08/1943
Allergies :	No Known Allergies				
Diagnoses :	Alzheimer's disease, unspecified(G30.9), Other specified diabetes mellitus with established or advanced kidney disease(E13.23), Pure hypercholesterolaemia(E78.0), Guillain-BarrT syndrome(G61.0), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Chronic kidney disease, unspecified(N18.9), Other specified disorders of bone density and structure, multiple sites(M85.80), Thrombocytopenia, unspecified(D69.6)				

Effective Date: 10/03/2025 09:01 Type: Physician Note

Note Text : Resident has recurrent finger issue, will apply mupirocin and CLOTRIMAZOLE x 5 days, once improved, we could consider using palm protector.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MACDONALD, GEORGE (001090) Location : 3 East E310 1 Admission Date : 11/04/2024
Medical Record # : 2527 243 980 AR Gender : M Date of Birth : 09/19/1945
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Peripheral vascular disease, unspecified(I73.9), Fracture of base of femoral neck (cervicotrochanteric) closed(S72.010), Rheumatoid arthritis, unspecified(M06.9), Reactive thrombocytosis(D75.81), Acquired absence of leg at or below knee(Z89.5), Stroke, not specified as haemorrhage or infarction(I64), Embolism and thrombosis of other specified veins(I82.8), Presence of cardiac pacemaker(Z95.00), Pathological fracture, not elsewhere classified, pelvic region and thigh(M84.45), Injury of portal or splenic vein(S35.3), Fitting and adjustment of urinary device(Z46.6)

Effective Date: 10/08/2025 10:07 Type: Physician Note

LATE ENTRY

Note Text : Resident has been on isolation with droplet precautions due to mild upper respiratory symptoms. Symptoms have improved with no clinical concerns at this time. Chest x-ray was negative, MRVP positive for rhinovirus. Continue to monitor, ongoing IPAC precautions as per protocol.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : MACHADO, CECELIA (001146) Location : 2 East E225 1 Admission 07/17/2025
Medical Record # : 8853 623 810 RC Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 01/17/1935
Allergies : Clarithromycin, Penicillin, Sulfa Antibiotics
Diagnoses : Unspecified dementia(F03), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Hypothyroidism, unspecified(E03.9),
Hyperlipidaemia, unspecified(E78.5), Atrial flutter, unspecified(I48.91), Tendency to fall, not elsewhere classified(R29.6), Pain in joint,
shoulder region(M25.51)

Effective Date: 10/08/2025 10:14 Type: Family/Resident Involvement

Data : The writer called POA at 1010 for an update regarding residents fall

Action : The writer provided detailed information of the fall and POA was thankful for the information. No concerns noted currently.

Response : Continue to monitor resident with a current plan of care

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	MackENZIE, JANET LYNN (00434)	Location :	2 East E216 1	Admission Date :	09/16/2014
Medical Record # :	3401 112 713 VX	Gender :	F	Date of Birth :	02/23/1965
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	PENICILLIN				
Diagnoses :	Benign hypertension(I10.0), Stroke, not specified as haemorrhage or infarction(I64), Unspecified injury of head(S09.9), Obesity, unspecified (E66.9), Hemiplegia of unspecified type of non-dominant side(G81.91), Depressive episode, unspecified(F32.9), Other hyperlipidaemia (E78.4), Excessive and frequent menstruation with regular cycle(N92.0), Fracture of lower (distal) end of tibia with or without fibula, closed (S82.300), Type 2 diabetes mellitus without (mention of) complications(E11.9), Other sleep apnoea(G47.38), Other bipolar affective disorders(F31.8), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Primary generalized (osteo)arthrosis(M15.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gout, unspecified, unspecified site (M10.99), Unspecified dementia(F03)				

Effective Date: 10/06/2025 10:09 Type: Physician Note

LATE ENTRY

Note Text : Resident recently out for staging CT chest, with findings including 4 mm right upper lobe pulmonary nodule unable to rule out metastatic disease. She is noted to have heterogenous thyroid and bulky spleen. Recent bloodwork reviewed, TSH in August was normal.

Await plans with respect to approach to care(renal cell carcinoma), and consider further investigations regarding thyroid enlargement.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MARCHAND, HANS (001025) Location : 3 East E317 1 Admission Date : 07/25/2023
Medical Record # : 9260 156 733 BE Gender : M Date of Birth : 07/15/1941
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : No Known Allergies
Diagnoses : Atrial fibrillation, unspecified(I48.90), Hypokalaemia(E87.6), Syncope and collapse(R55), Hypotension, unspecified(I95.9), Acidosis(E87.2), Nontoxic single thyroid nodule(E04.1), Delirium, unspecified(F05.9), Parkinson's disease(G20), Spinal stenosis, unspecified site(M48.09), Hyperlipidaemia, unspecified(E78.5), Interstitial pulmonary disease, unspecified(J84.9), Hyperplasia of prostate(N40), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Other specified disorders of bladder(N32.8), Umbilical hernia without obstruction or gangrene(K42.9)

Effective Date: 10/08/2025 10:08 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident recently had virtual follow-up with neurology on October 2nd. Neurology note indicates consideration of weighted wrists to help with tremor that may be affecting eating/feeding. Optometry assessment was also recommended due to decline in visual acuity, and recommendation to consider increase in Clearlax to bid for constipation. No changes to Levocarb.

Resident denies difficulty with feeding himself, and has decline offer for weighted utensils. He also declines any concerns regarding his visual acuity. Bowel pattern reviewed, bowel movements occurring most days with stools formed to soft, on Clearlax 34 grams daily already, in addition to Senokot three tabs daily plus prn.

Resident continues to be followed regarding calf wound secondary to previous hematoma. Assessed by NP yesterday according to wound care nurse. Wound has been stable, wound base appeared improved with reduced slough. Trial discontinuation of Indidine at this time, and proceed with Opticell AG. Continue to follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MARSHALL, DARLENE (001111) Location : 2 West W217 1 Admission : 02/25/2025
Medical Record # : 9480 062 158 DC Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 05/16/1941
Allergies : NKD allergies
Diagnoses : Unspecified dementia(F03), Benign hypertension(I10.0), Atrial fibrillation, unspecified(I48.90), Osteoporosis, unspecified(M81.9)

Effective Date: 10/11/2025 12:14 Type: Family/Resident Involvement

Data : The resident was asking for chicken salad in the lunch .As Resident is on Sodium restricted diet

Action : Writer called POA to get her permission. POA said , no problem you can give it to her. So Psw served chicken salad this afternoon with daughters permission

Response :

Author:Amanpreet Tung RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/07/2025 12:09 Type: Family/Resident Involvement

Data :

Action : POA called back . Daughter said , she will bring another pair this evening and I asked you mum is asking for beef sandwich . she said we can give her today. she can break the rules today as she is bring KFC for her too . writer will give back her broker pair to her daughter

Response :

Author:Amanpreet Tung RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/07/2025 11:40 Type: Family/Resident Involvement

Data : PSW reported that resident glasses found on the floor broken.

Action : Try to call POA from yesterday left voice mail to call us back . I called again today but no response . in charge aware.

Response :

Author:Amanpreet Tung RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:13 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident noted to have abdominal skin rash, for which intra dry was initiated approximately one week ago. She is also noted to have some MASD on her buttocks, with excoriation leading to a skin tear on the left buttock.

OnOctober 4 resident reported some nasal congestion with no other respiratory symptoms or health concerns. This was transient, with no respiratory symptoms or concerns.

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MARSHALL, DARLENE (001111)

Location : 2 West W217 1

Admission 02/25/2025

Medical Record # : 9480 062 158 DC

Gender : F

Date :

Date of Birth : 05/16/1941

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : NKD allergies

Diagnoses : Unspecified dementia(F03), Benign hypertension(I10.0), Atrial fibrillation, unspecified(I48.90), Osteoporosis, unspecified(M81.9)

Behavior tracking, sleep tracking reviewed. Sleep pattern remain somewhat variable, however resident appears to be getting better quality/more sleep, according to tracking. She is currently on Risperdal 0.25 mg daily at hs to reduce anxiety/fearfulness at night time and promote better quality sleep. Weights reviewed, 88 kg on October 1st(down from maximum of approximately 95 kg in August. Resident was assessed regarding skin concerns. Very mild erythema noted in abdominal skin folds, skin intact. Skin tear noted on left buttock as well as second skin tear on left medial buttock near the coccyx.

For abdominal skin fold mild MASD, recommend zinc barrier cream and follow on wound rounds. Buttock skin tears will be cleansed, dressing applied, and follow by nursing staff as per skin and wound program protocol. Weight/fluid retention improved on current medications, with no concerns re"renal function/electrolytes' continue same.

Continue current dose of Risperidone which seemed to have improved BPSD/sleep pattern somewhat. Continue to monitor.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 13:34 Type: Family/Resident Involvement

LATE ENTRY

Data : Writer approached POA during visit to obtain the consent for FLU and COVID vaccine

Action : Informed consent received for both vaccines FLU and COVID vaccines

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	MARTEL, PIERRETTE (00904)	Location :	2 West W213 1	Admission Date :	09/16/2021
Medical Record # :	6899 185 638 BN	Gender :	F	Date of Birth :	04/18/1932
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Oedema, unspecified(R60.9), Benign hypertension(I10.0), Paroxysmal atrial fibrillation(I48.00), Cataract, unspecified(H26.9), Anaemia, unspecified(D64.9), Noninfective gastroenteritis and colitis, unspecified(K52.9), Hypokalaemia(E87.6), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Pleural effusion, not elsewhere classified(J90)				

Effective Date: 10/07/2025 10:30 Type: Family/Resident Involvement

Data : F/U assessment on resident r/t responsive beh. by co-resident-IW as per report

Action : writer went to see resident on Oct 7. Currently resident is comfortably sitting down in her room and watching TV. . Resident is awake, alert and responsive.

- Upon recalling co-resident-IW's responsive behaviour , Resident stated that , "yeah, I rememberthat, but I'm doing ok no, I'm just scared."
- Resident seems happy and energetic today. GDS done.
- Resident denies of having any pain/discomfort at this moment- Pain Ax done.
- Upon assessment, No new skin issues noted. H-T-T assessment done.
- encourage resident press the call bell if resident needs any assistance/help.
- POA-David Made aware of today's assessment. POA was thankful for the update.

Response : ongoing monitoring

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 22:30 Type: Family/Resident Involvement

Data : Writer was informed by RCM that residents son was in and was upset that co resident IW had physical altercation with his mother. POA voiced concerns regarding residents safety to RCM.Writer went up to the floor to investigate and the PSW staff stated thatthey had heard about an altercation during the weekend, however staff were not present when this occurred.

Action : Writer requested that a head to toe, a GDS and a pain assessment to be done by registered staff and initiated 1:1 with co resident. Writer informed POA of the intervention and that this would be investigated.

Response : POA was pleased with the interventions put in place and would appreciate a follow up

Author:Melissa Brown RESP - Nursing - RPN - Associate Nurse Manager [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 21:45 Type: Family/Resident Involvement

Data : POA David stated concerns regarding Martel to writer.

Action : POA David stated Martel is scared to go to sleep with fear another co-res will enter her room again. Resident additionally stated a physical altercation occurred between her and a co-resident over the weekend. POA voiced concern for no communication regarding his mother's safety.

Response : Writer informed POA his concern will be relayed to the Nurse Manager M. Brown and an investigation into what occurred will be conducted. POA appreciative his concerns are being looked into.

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : MARTEL, PIERRETTE (00904)

Location : 2 West W213 1

Admission 09/16/2021

Medical Record # : 6899 185 638 BN

Gender : F

Date :

Date of Birth : 04/18/1932

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Oedema, unspecified(R60.9),
Benign hypertension(I10.0), Paroxysmal atrial fibrillation(I48.00), Cataract, unspecified(H26.9), Anaemia, unspecified(D64.9), Noninfective
gastroenteritis and colitis, unspecified(K52.9), Hypokalaemia(E87.6), Diverticular disease of intestine, part unspecified, without perforation
or abscess(K57.9), Pleural effusion, not elsewhere classified(J90)

Author:Caitlyn Chard RESP - Nursing - Resident Care Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : MCKINNON, JOSEPHINE (00915)

Location : Ground W121 1

Admission 10/27/2021

Medical Record # : 4475 287 258 AG

Gender : F

Date :

Date of Birth : 01/08/1934

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Carcinoma in situ of skin, unspecified(D04.9), Degeneration of macula and posterior pole(H35.3), Other specified arthritis, unspecified site(M13.89)

Effective Date: 10/01/2025 16:55 Type: Family/Resident Involvement

Data : Resident daughter in with dog for visit

Action : Took resident off unit. Dog has history of jumping up on resident.

Response : No new scratches noted at this time

Author:Maloree Hughes RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : MCLEISH, ELLEN (001063)

Location : 2 East E206 1

Admission 04/30/2024

Medical Record # : 4463 996 415 AB

Gender : F

Date :

Date of Birth : 07/19/1959

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Environmental allergen

Diagnoses : Sequelae of cerebral infarction(I69.3), Ulcerative colitis, unspecified(K51.9), Schizophrenia, unspecified(F20.9), Proteus (mirabilis) (morganii) as the cause of diseases classified to other chapters(B96.4), Other bipolar affective disorders(F31.8), Personal history of other psychoactive substance abuse(Z86.48), Tachycardia, unspecified(R00.0), Cellulitis of finger(L03.00)

Effective Date: 10/14/2025 01:25 Type: Behaviour - Follow up

Note Text : a resident started asking for a glass of water with ice cube from around 21:30 and continuously asking for cold, and hot, and cold water until 1.30 am; not only that a resident continuously ringing a call bell after finishing a glass of water since last 4hours

Author:Prexaben Chaudhari RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:10 Type: Physician Note

LATE ENTRY

Note Text : See quarterly medication review note.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	MCPHAIL, DONALD (001104)	Location :	2 West W208 1	Admission Date :	01/09/2025
Medical Record # :	4434 320 976 BN	Gender :	M	Date of Birth :	02/29/1936
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Environment, POLYSPORIN				
Diagnoses :	Arthritis, unspecified, unspecified site(M13.99), Mild cognitive disorder(F06.7), Pulmonary embolism without mention of acute cor pulmonale (I26.9), Chronic kidney disease, unspecified(N18.9), Cardiac arrhythmia, unspecified(I49.9), Atrial Fibrillation, Unspecified(I48.90), Dementia in Alzheimer's disease, atypical or mixed type(F00.2), Epilepsy, unspecified, not stated as intractable(G40.90), Hypokalaemia (E87.6), Pneumonia, unspecified(J18.9), Acquired absence of other parts of digestive tract(Z90.4)				

Effective Date: 10/09/2025 19:08 Type: Family/Resident Involvement

Data : POA would like to discontinue protein powder.

Action : States that resident does not need it anymore. Education provided but resident would like to discontinue it . put into doctors rounds.

Response : Plan of care continues. Continuous monitoring in place. will report to oncoming staff.

Author:Staceyann Grant RESP - Nursing - Agency - RPN - Unit Supervisor
[e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 11:01 Type: Physician Note

Note Text : 89 Y M with dementia, CKD, HFpEF & aFib, goals of care primarily comfort care & pain management - progress note for issues as below:

1. Quarterly Medication Review

- Falls risk: bisoprolol at 2.5 mg, HR and BP stable and WNL recently. Hydromorphone 0.5 mg BID PRN with dressing changes - tolerating well. No falls since Aug 11th.
- Anticholinergic burden: sertraline, risperidone. Benefits of reducing significant agitation/aggression BPSD currently outweighing risks given no recent falls, no confusion/pt otherwise at baseline behaviourally
- QT prolongation: sertraline & Risperidone. Given current GOC of comfort care and recent decline in health, no change necessary.
- Medications otherwise appropriate for controlling sx & preventing complications of pt's comorbidities

2. Coccyx wound

- Fairly rapid progression, most recent examination in person today shows signs of surrounding cellulitis (mild-moderate tan coloured drainage, rapid progression, blanching erythema). pt vitally stable and systemically well.
- Wound swabs: MRSA & GBS. See report for susceptibilities.
- Current mgmt: Vashe-soaked gauze applied to wound bed 1-3 times, Sureprep to periwound, Inadine sheet to wound bed, Cover with Optifoam gel. Change q3 days and PRN. Abx not w/in GOC

3. Palliative status/pain management

- F/u end-of-life care meeting scheduled for tomorrow Oct 7 12:00 pm in person, with Gail present. Comfort care as per family.
- Pain worst during dressing changes for coccyx, currently well controlled on Hydromorphone 0.5 mg BID PRN with dressing changes, acetaminophen 1000 mg TID, Diclofenac gel
- Roho pillow & air mattress for offloading & symptomatic management

ASSESSMENT & PLAN:

89 Y M, for palliative/comfort care, with dementia/hx BPSD, coccygeal wound, CKD, HFpEF & aFib.

1. Medication review: no medication changes necessary at this time
2. Coccygeal wound: clinically shows signs of cellulitis surrounding the wound, however given palliative status & discussion with family, abx

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MCPHAIL, DONALD (001104)

Location : 2 West W208 1

Admission 01/09/2025

Medical Record # : 4434 320 976 BN

Gender : M

Date :

Date of Birth : 02/29/1936

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Environment, POLYSPORIN

Diagnoses : Arthritis, unspecified, unspecified site(M13.99), Mild cognitive disorder(F06.7), Pulmonary embolism without mention of acute cor pulmonale (I26.9), Chronic kidney disease, unspecified(N18.9), Cardiac arrhythmia, unspecified(I49.9), Atrial Fibrillation, Unspecified(I48.90), Dementia in Alzheimer's disease, atypical or mixed type(F00.2), Epilepsy, unspecified, not stated as intractable(G40.90), Hypokalaemia (E87.6), Pneumonia, unspecified(J18.9), Acquired absence of other parts of digestive tract(Z90.4)

are not within GOC. Abx may be appropriate/could be considered for symptomatic management to reduce pain & discomfort in the region.

3. Palliative status & pain management: Family has chosen comfort care as the established goal of care. Ensure family involvement in ongoing decisions. Consider abx for coccygeal wound symptoms as above, to be brought up in family meeting tomorrow Oct 7 at 12pm.

Dr. Daniel Friedberg, PGY2 FM

Reviewed with Supervisor: Dr. Andersen, LTC Physician

Author:Dr. Lee Andersen RESP - Medical Services - MD - Physician [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 08:39 Type: Family/Resident Involvement

Data : POA's request for the eye drops

Action : POA/Wife-Diane gave writer the systane eye drops and informed that, she received the systane eye drop for resident from eye doctor and drop off the eye drop with write.

- as per POA, : Systane eye drop - instil 1 drop into Both eyes one time a day.

- Also POA mentioned that she does not have any papers or notes from the doctor and also we didn't received any fax for the resident yet.

- Assessed resident's both eyes, No drainage, redness, discharge, inflammation, swelling, crusty eyes, watery eyes, Blurry eyes or pain noted at this moment.

- Resident's vision is at baseline and wearing his glasses all the time.

- detailed emailed with POA's request/vconcern sent to MD and NMs.

Response : Awaiting Response from MD

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 07:51 Type: Family/Resident Involvement

Data : new skin tear on right heel

Action : writer inform to POA-Diane regarding new skin tear on right heel when POA came into Visit to resident on Oct 2. Also informed regarding new Tx order on right buttocks as per NP's order.

- POA was thankful for the update and raised no concern.

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MCPHAIL, DONALD (001104) Location : 2 West W208 1 Admission Date : 01/09/2025
Medical Record # : 4434 320 976 BN Gender : M Date of Birth : 02/29/1936
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Environment, POLYSPORIN
Diagnoses : Arthritis, unspecified, unspecified site(M13.99), Mild cognitive disorder(F06.7), Pulmonary embolism without mention of acute cor pulmonale (I26.9), Chronic kidney disease, unspecified(N18.9), Cardiac arrhythmia, unspecified(I49.9), Atrial Fibrillation, Unspecified(I48.90), Dementia in Alzheimer's disease, atypical or mixed type(F00.2), Epilepsy, unspecified, not stated as intractable(G40.90), Hypokalaemia (E87.6), Pneumonia, unspecified(J18.9), Acquired absence of other parts of digestive tract(Z90.4)

Effective Date: 10/01/2025 14:26 Type: Physician Note

Note Text : S/O:

A: Pressure injury to right buttocks, likely DTI given clinical progression.

P: For pressure injury to right buttocks, (1) Soak 4x4 gauze with Vashe, remove excess Vashe from gauze so it is not soaking wet, apply to wound bed for 5-10 minutes, then remove. Can repeat this 1-3 times. Pat dry afterwards. (2) Apply Sureprep to periwound (3) Apply Inadine sheet cut to shape to wound bed (4) Cover with Optifoam gentle (5) Change q 3 days and PRN (Draft)

Author:Gustavo Mindreau RESP - Nursing - Nurse Practitioner

Signature: _____

Effective Date: 10/01/2025 12:46 Type: Family/Resident Involvement

Data : Resident has a new order to put tubigrip on to bilateral legs.

Action : POA (Spouse) was called, was notified via phone call, POA voiced no concerns and appreciated the call.

Response :

Author:Sukhneet Kaur RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MORIN, ROBERT (001154) Location : 3 West W324 1 Admission : 10/02/2025
Medical Record # : 5024 173 618 MJ Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 07/17/1941
Allergies : Flu Virus Vaccine
Diagnoses : Idiopathic gout, ankle and foot(M10.07), Hypothyroidism, unspecified(E03.9), Hyperplasia of prostate(N40), Hyperlipidaemia, unspecified (E78.5), Type 2 diabetes mellitus without (mention of) complications(E11.9), Dementia in Alzheimer's disease, unspecified(F00.9), Seizure disorder, so described(R56.80), Mental and behavioural disorders due to use of alcohol, harmful use(F10.1), Cyst of pancreas(K86.2), Other problems related to life-management difficulty(Z73.8), Sepsis, unspecified(A41.9), Delirium, unspecified(F05.9), Glaucoma, unspecified(H40.9), Embolism and thrombosis of unspecified vein(I82.9)

Effective Date: 10/08/2025 10:15 Type: Physician Note

LATE ENTRY

Note Text : See admission physical.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 12:29 Type: Family/Resident Involvement

Data : re. immunization status

Action : POA-catherine gave consent for all the immunization except Shingles as POA mentioned that REsident does not have h/o shingles and staff can call POA If required.

- Resident has a flu shot allergy as per the resident's admission record and also entered into PCC under allergy tab . POA made aware.
- IPAC aware

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 09:14 Type: Family/Resident Involvement

Data : Consent from POA given to use AC when needed. Resident likes it warmer, he will get cold easily.

Action :

Response :

Author:Teri Saric RESP - Social Services - Admissions Coordinator [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	MORIN, SHIRLEY (00938)	Location :	2 East E209 2	Admission Date :	04/06/2022
Medical Record # :	1442 556 237 EM	Gender :	F	Date of Birth :	01/05/1963
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Penicillin				
Diagnoses :	Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Unspecified diabetes mellitus with poor control, so described(E14.64), Chronic kidney disease, unspecified(N18.9), Hypothyroidism, unspecified(E03.9), Benign hypertension(I10.0), Urinary tract infection, site not specified(N59.0), Oedema, unspecified(R60.9), Sleep apnoea, obstructed(G47.30), Fatty (change of) liver, not elsewhere classified(K76.0), Drug-induced dystonia(G24.0), Orthostatic hypotension(I95.1)				

Effective Date: 10/06/2025 10:11 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork reviewed, CBC stable.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MORRIS, DOROTHY (00961) Location : 2 West W201 2 Admission 07/07/2022
Medical Record # : 7204 054 378 KT Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 07/06/1935
Allergies : Macrobid, Macrodantin
Diagnoses : Osteoporosis, unspecified(M81.9), Other specified arthritis, other site(M13.88), Other specified cataract(H26.8), Other spinal muscular atrophies and related syndromes(G12.8), Benign hypertension(I10.0), Synovial cyst of popliteal space [Baker](M71.2), Other fracture of lower end of radius, closed(S52.580)

Effective Date: 10/14/2025 11:02 Type: Family/Resident Involvement

Data : Writer connected with the resident's son Warren (POA) regarding the scheduled meeting to discuss the RNAO Palliative Pathway and review goals of care for the resident.

Action : Warren expressed to the Writer he'd need to reschedule the discussion as his brother (also POA) is not quite ready to have the discussion/make decisions and apologized to the Writer. The Writer provided emotional support as the conversation for shifting goals of care can be difficult and explained that Writer can re-book at an alternative time once he hears from his brother. Warren thanked Writer.

Response :

Author:Ashline Johnstone RESP - Nursing - Behaviour Support Manager [e-SIGNED]

Signature: _____

Effective Date: 10/13/2025 21:19 Type: Family/Resident Involvement

Data : On september 29,writer received the msg that he is providing informed consent for both Flu and COVID vaccin.

Action : documented under immunization tab

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control Manager [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 13:14 Type: Family/Resident Involvement

Data : The Writer had hosted the resident's annual care conference back in September and upon discussion of the resident's code status, the family did not wish to discuss it at that time as they requested to take some time to talk amongst each other and determine goals of care.

Action : The Writer called Warren (POA/Son) today to circle back on goals of care topic and book a date/time to have discussion. Warren informed Writer he's available October 14th at 11am and will join virtually via telephone.

Response : The Writer has sent an email invite to the interdisciplinary team to join.

Author:Ashline Johnstone RESP - Nursing - Behaviour Support Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MUGFORD, RITA (00988)

Location : 3 East E301 1

Admission 12/07/2022

Medical Record # : 5243 301 339 BL

Gender : F

Date :

Date of Birth : 11/05/1950

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Unspecified urinary incontinence(R32), Arthritis, unspecified, unspecified site(M13.99), Obesity, unspecified(E66.9), Other ulcerative colitis (K51.8), Benign hypertension(I10.0), Other sleep apnoea(G47.38), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Presence of artificial hip(Z96.60)

Effective Date: 10/08/2025 10:09 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident noted to have occasional cough, and reported malaise, on sat yesterday. Today she reports some ongoing cough. She has been on isolation with contact precautions. No apparent nasal discharge or congestion. She denies sore throat. Unit on respiratory outbreak with rhinovirus identified as cause of agent. Resident appears to be eating and drinking well.

O/E she has been febrile, VS stable. She was resting in bed, alert, pleasant and interactive. Color okay, mucus membranes moist. No apparent nasal congestion or nasal discharge. No cough observed, normal breath sounds bilaterally with no adventital sounds heard.

Likely viral respiratory infection, query rhinovirus. Continue with isolation, droplet/contact precautions. NP swab for MRVP depending on IPAC/Public health direction. Monitor VS bid. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MULHALL, REGINALD (00877)

Location : 3 East E316 1

Admission 03/25/2021

Medical Record # : 4420 464 432 CA

Gender : M

Date :

Date of Birth : 01/05/1962

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Cytomegaloviral pancreatitis(B25.2), Pneumonia, unspecified(J18.9), Alcoholic cirrhosis of liver(K70.3), Benign hypertension(I10.0), Ascites (R18), Hyperosmolality and hypernatraemia(E87.0), Atrial fibrillation, unspecified(I48.90), Peripheral vascular disease, unspecified(I73.9), Wernicke's encephalopathy(E51.2)

Effective Date: 10/12/2025 11:52 Type: Family/Resident Involvement

Data : The writer called son Hyden to provide information regarding the MASD

Action : The writer left voice message to call back and ext 5239 provided

Response :

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:02 Type: Physician Note

Note Text : Assessed on medical rounds. Resident is concern that he continues to require prescription cream for his groin rash. He was previously noted to likely have a candidal rash involving groin skin folds and Canesten/Hydrocortisone plus zinc barrier was previously ordered. Nursing assessment at this time indicates only very mild skin fold redness in the groins. Canesten/Hydrocortisone will be discontinued. Area will be monitored as per nursing protocol and zinc cream to be used.

Resident also expressed request for foot care. Nails are thickened, over groin. Foot care has been requested.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : MUSSO, CARMELA VIENNA (00449) Location : Ground W122 1 Admission 12/22/2014
Date :
Medical Record # : 9629 493 611 EW Gender : F Date of Birth : 10/17/1934
Physician : Charette, Yannick Pharmacy : Medisystem Barrie IMM
Allergies : Acetaminophen, Avelox, Penicillins, Tramacet
Diagnoses : Thalassaemia, unspecified(D56.9), Benign hypertension(I10.0), Postmenopausal osteoporosis(M81.0), Polyarthrosis, unspecified(M15.9),
Cataract, unspecified(H26.9), Aneurysm and dissection of unspecified site(I72.9), Orthostatic hypotension(I95.1), Other disorders of
peripheral nervous system(G64), Anxiety disorder, unspecified(F41.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9),
Constipation(K59.0), Pain in joint, lower leg(M25.56), Atrial fibrillation, unspecified(I48.90), Hyperlipidaemia, unspecified(E78.5), Urinary
tract infection, site not specified(N39.0), Subacute and chronic vaginitis(N76.1), Other vascular dementia(F01.8), Lichen sclerosus et
atrophicus(L90.0), Postmenopausal atrophic vaginitis(N95.2), Hypo-osmolality and hyponatraemia(E87.1), Other specified extrapyramidal
and movement disorders(G25.8), Other disorders of lung(J98.4), Emphysema, unspecified(J43.9), Other ill-defined heart diseases(I51.8),
Embolism and thrombosis of other specified veins(I82.8)

Effective Date: 10/02/2025 16:45 Type: Family/Resident Involvement

Data : Daughter (Rita) was requesting for ear cleaning, and oil drops for ear as res having ear wax.

Action : Writer did see there is ear wax present in both ears.

- Added to MD round.

Response :

Author:Feny Patel RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : MUSZYNSKI, ELEANOR MARY (001136) Location : 2 East E220 1 Admission Date : 06/10/2025
Medical Record # : 7758 538 990 MH Gender : F Date of Birth : 02/26/1936
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Penicillin
Diagnoses : Idiopathic peripheral autonomic neuropathy(G90.0), Other hypertrophic osteoarthropathy, multiple sites(M89.40), Barrett's esophagus(K22.7), Thyrotoxicosis, unspecified(E05.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Polymphocytic leukaemia of T-cell type(C91.6), Atrial flutter, unspecified(I48.91), Postcholecystectomy syndrome(K91.5), Ulcer of lower limb, not elsewhere classified(L97), Diabetic polyneuropathy(G63.2), Type 2 diabetes mellitus with poor control, so described(E11.64), Hypothyroidism, unspecified(E03.9), Vitamin B12 deficiency anaemia, unspecified(D51.9), Primary generalized (osteo)arthrosis(M15.0), Localized oedema(R60.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Incisional hernia with obstruction, without gangrene(K43.0)

Effective Date: 10/15/2025 14:03 Type: Family/Resident Involvement

Data : Pace Cardiology called asking for the residents medication list for her upcoming appointment.

Action : Writer called POA and was given consent to fax over the list

Response :

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/13/2025 17:51 Type: Family/Resident Involvement

Data : assessment of coccyx

Action : writer went to resident room and asked her for do assessment of coccyx area, but resident refused and said there is no concerns in that area.

Response : IC is notified.

Author:Maryam Dolatabady RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/11/2025 00:22 Type: Family/Resident Involvement

Data : a writer was informed that a family was concerned about the changes in skin integrity over the coccyx

Action : a writer informed the resident and requested the resident to allow the writer to check the skin integrity around the coccyx area to obtain the consent from the resident. However a resident became upset and stated no there is nothing for you to check and none of my family members mentioned any concerns to me and how come my family knows that I can possibly have any skin changes around the coccyx areas, No there is nothing for you to check and I am not allowing you to check it so yes you have mentioned me and I am saying NO.

Response :

Author:Prexaben Chaudhari RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:12 Type: Physician Note

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	MUSZYNSKI, ELEANOR MARY (001136)	Location :	2 East E220 1	Admission Date :	06/10/2025
Medical Record # :	7758 538 990 MH	Gender :	F	Date of Birth :	02/26/1936
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Penicillin				
Diagnoses :	Idiopathic peripheral autonomic neuropathy(G90.0), Other hypertrophic osteoarthropathy, multiple sites(M89.40), Barrett's esophagus(K22.7), Thyrotoxicosis, unspecified(E05.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Polymphocytic leukaemia of T-cell type(C91.6), Atrial flutter, unspecified(I48.91), Postcholecystectomy syndrome(K91.5), Ulcer of lower limb, not elsewhere classified(L97), Diabetic polyneuropathy(G63.2), Type 2 diabetes mellitus with poor control, so described(E11.64), Hypothyroidism, unspecified(E03.9), Vitamin B12 deficiency anaemia, unspecified(D51.9), Primary generalized (osteo)arthrosis(M15.0), Localized oedema(R60.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Incisional hernia with obstruction, without gangrene(K43.0)				

LATE ENTRY

Note Text : Bloodwork was ordered to investigate fatigue, as well as some upper GI symptoms. CBC and LUC normal, H.Pylori serology negative, calcium and magnesium okay, CRP modestly elevated at 23.1, TSH normal and Alc 6.8. Overall, unremarkable.

Resident recently out for Chiropody, with recommendations received to apply Betadine and dry gauze. Orders have been provided. Plans in place for further follow-up with Chiropody. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	NEWMAN, PHYLLIS (001034)	Location :	Ground W104 1	Admission Date :	11/02/2023
Medical Record # :	1451 295 313 EH	Gender :	F	Date of Birth :	06/27/1932
Physician :	Charette, Yannick	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03), Atrial Fibrillation, Unspecified(I48.90), Other specified dermatitis(L30.8), Hyperlipidaemia, unspecified(E78.5), Malignant hypertension(I10.1)				

Effective Date: 10/03/2025 09:40 Type: Physician Note

Note Text : Resident's current status was discussed and reviewed. As per nursing, no improvement was noted. She doesn't express any signs of pain/discomfort and bowel habits have been regular. unfortunately she has low attention span and she is constantly looking to be with staff/people. And her grip strength is very good, occasionally causing some injuries to others, the behaviours don't look malicious. Medication list was reviewed and risperidone will be increased to 1 mg PO once daily.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	OLIVERA, WASHINGTON (00996)	Location :	3 West W315 2	Admission Date :	02/07/2023
Medical Record # :	1182 809 093 YB	Gender :	M	Date of Birth :	02/05/1938
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03), Benign hypertension(I10.0), Hypothyroidism, unspecified(E03.9), Syncope and collapse(R55), Aortic (valve) stenosis(I35.0), Disorder of lipoprotein metabolism, unspecified(E78.9), Embolism and thrombosis of other specified veins(I82.8), Other and unspecified dysphagia(R13.8)				

Effective Date: 10/08/2025 10:16 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues reported or recently documented, other than fall sustained on October 1st. No apparent injuries, no subsequent pain. Resident has been active as per his usual since.

Resident seem to be alert, appears comfortable and pleasant. Color okay, resps easy and regular.

Ongoing CDM. Recent fall with no significant injury. No changes to medical management at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:09 Type: Physician Note

Note Text : Assessed on medical rounds. No concerns reported or recently documented. Resident activity and function as per his usual. Pain management appears good. Intakes stable. He continues to ambulate independently with his walker, and without his walker in his room. Resident reports feeling well, no new complaints. He was seen to be alert, pleasant, and interactive with limited English as per his usual. Color okay, resps easy and regular. Abdomen soft and benign.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : PALFREY, RONALD (001137) Location : 3 East E304 1 Admission Date : 06/12/2025
Medical Record # : 3294 140 839 LT Gender : M Date of Birth : 10/01/1940
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : NKD allergies
Diagnoses : Paraplegia of unspecified type, unspecified, at thoracic level(G82.292), Traumatic amputation at level between hip and knee(S78.1), Atrial Fibrillation, Unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atherosclerotic heart disease of native coronary artery(I25.10), Acute myocardial infarction, unspecified(I21.9), Sleep apnoea, obstructed(G47.30), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Other chronic pain(R52.2), Sepsis due to streptococcus, group A(A40.0)

Effective Date: 10/08/2025 10:10 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Reviewed regrading pain management. Pain scores generally reported between 0 and 6. Activity improved with resident spending much of the day up in his wheelchair. PRN Hydromorphone has been used three times thus far in October documented as effective.

Resident recently received medication error, with administration of two doses of Hydromorph Contin 6 mg in the evening last week. Orders provided to monitor closely for signs of opioid overdose and orders were provided for Malozone. No concerns on monitoring, and Malozone was not required.

It is also noted that resident often refuses routine Salbutamol. He has an order for prn Salbutamol as well.

Bloodwork reviewed, CBC and LUC okay.

Pain management generally improved. Continue current interventions, discontinue pain tracking. Routine Salbutamol discontinued and continue with prn Salbutamol. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:03 Type: Physician Note

Note Text : Reassessed regarding pain management on rounds today. Hydromorph Contin recently increased to 6 mg at hs. Resident also receives Tylenol 1 gram tid, topical Voltaren for low back pain, Dantrolene and Pregabalin. Over the past couple of weeks there have been reduced use of prn Hydromorphone. When used, prn Hydromorphone is generally effective. Pain scores reviewed, ranging between 0 and 6. Continue current management and continue to follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : PARENT, PHYLLIS (001143)

Location : 3 West W314 1

Admission 07/11/2025

Medical Record # : 4548 791 575 HN

Gender : F

Date :

Date of Birth : 12/15/1934

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : NKD allergies

Diagnoses : Benign hypertension(I10.0), Eczema herpeticum(B00.0), Arthritis, unspecified, other site(M13.98), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Dementia in Alzheimer's disease, unspecified(F00.9), Fall involving adult walker(W05.01), Fracture of other part of upper end of humerus, closed(S42.280), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Disorders of initiating and maintaining sleep [insomnias](G47.0), Gastro-oesophageal reflux disease with oesophagitis(K21.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Conductive hearing loss, unspecified(H90.2), Chronic obstructive pulmonary disease, unspecified(J44.9), Other acute renal failure(N17.8)

Effective Date: 10/08/2025 10:17 Type: Physician Note

LATE ENTRY

Note Text : See quarterly medication review.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	PATER, GEORGE JOSEPH (00835)	Location :	2 East E223 1	Admission Date :	01/09/2020
Medical Record # :	5373 707 032 XB	Gender :	M	Date of Birth :	12/01/1955
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Bupropion, Ciprofloxacin, Diltiazem, Doxazosin, Hydrochlorothiazide, Lamotrigine, Mirtazapine, Oxycodone, Penicillin, Quinapril, Rosuvastatin, Telmisartan, Tramadol, Valproic Acid, Cephalosporins				
Diagnoses :	Alzheimer's disease, unspecified(G30.9), Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified hypothyroidism(E03.8), Depressive episode, unspecified(F32.9), Bipolar affective disorder, unspecified(F31.9), Personality disorder, unspecified(F60.9), Chronic prostatitis(N41.1), Cyst of kidney, acquired(N28.1), Spinal stenosis, unspecified site(M48.09), Iron deficiency anaemia, unspecified(D50.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Constipation(K59.0), Delirium, unspecified(F05.9), Other chronic pain(R52.2), Other specified degenerative disorders of nervous system in diseases classified elsewhere(G32.8), Fracture of lumbar vertebra, L4 level, closed(S32.030), Encephalopathy, unspecified(G93.4), Pure hypercholesterolaemia(E78.0)				

Effective Date: 10/06/2025 10:13 Type: Physician Note

LATE ENTRY

Note Text : Resident currently admitted to RVH, after transfer to hospital on October 3rd due to change in health condition. He was diagnosed with sepsis, possible urinary/aspiration/pneumonia/cellulitis source, we will wait for further updates.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	PEARSE, CAROLE (001065)	Location :	2 East E210 1	Admission	05/02/2024
Medical Record # :	6149 576 230 JF	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	10/17/1937
Allergies :	Prochlorperazine				
Diagnoses :	Arthritis, unspecified, unspecified site(M13.99), Other specified diabetes mellitus without (mention of) complication(E13.9), Atrial Fibrillation, Unspecified(I48.90), Presence of cardiac pacemaker(Z95.00), Benign hypertension(I10.0), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Lobular carcinoma in situ of breast, unspecified side(D05.09), Osteoporosis, unspecified(M81.9), Polyneuropathy, unspecified(G62.9), Fracture of rib, closed(S22.300)				

Effective Date: 10/05/2025 12:40 Type: Family/Resident Involvement

Data : received a call from POA(Karen), who reported that her sister visited resident last night and observed resident appeared drowsy and believed that the resident might be septic and requested transfer to the hospital.

Action : writer explained that the resident is currently awake, alert and responsive and VSS and no sign of distress noted. despite this, POA insisted on hospital transfer.

Response : resident transferred to RVH at 13:00

Author: Maryam Dolatabady RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : PEDEN, CATHERINE (001051)

Location : 3 West W302 1

Admission 03/05/2024

Medical Record # : 1012 509 913 KK

Gender : F

Date :

Date of Birth : 08/17/1930

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Unspecified dementia(F03), Essential tremor(G25.0)

Effective Date: 10/05/2025 16:29 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : informed consent received for both flu and COVID vaccine

Response : documented accordingly

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : PETRIC, ELIZABETH (00984)

Location : 3 West W322 1

Admission 11/17/2022

Medical Record # : 9186 437 290 DM

Gender : F

Date :

Date of Birth : 10/08/1931

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Unspecified dementia(F03), Cystoid Macular oedema following cataract surgery(H59.81), Arthritis, unspecified, other site(M13.98),
Conductive hearing loss, unspecified(H90.2), Malignant neoplasm of central portion of breast, unspecified side(C50.19), Benign
hypertension(I10.0), Malignant neoplasm of ureter(C66), Osteoporosis, unspecified(M81.9)

Effective Date: 10/08/2025 10:18 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork reviewed, CBC and IUC okay.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	PICKETT, ELIZABETH (001010)	Location :	2 West W223 2	Admission Date :	04/18/2023
Medical Record # :	3191 005 689 WE	Gender :	F	Date of Birth :	02/13/1960
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Spiders				
Diagnoses :	Acquired absence of leg at or below knee(Z89.5), Osteoporosis, unspecified(M81.9), Primary generalized (osteo)arthrosis(M15.0), Chronic obstructive pulmonary disease, unspecified(J44.9), Depressive episode, unspecified(F32.9), Type 2 diabetes mellitus without (mention of) complications(E11.9), Hereditary and idiopathic neuropathy, unspecified(G60.9), Other specified intervertebral disc degeneration(M51.3), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Chronic lymphocytic leukaemia of B-cell type(C91.1), Unspecified fracture of neck of femur, closed(S72.090)				

Effective Date: 10/06/2025 10:14 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Last week, Hydromorph Contin was increased to 10.5 mg po bid. Due to concerns regarding decreased renal function, oral Voltaren have been placed on hold.

Resident reports that pain control is not as good as previous, but better than last week. Numerical pain scores reported between 0 and 8 with PAINAD scores (when documented) 0. Resident has no ongoing GI symptoms and intakes have improved. She still reports that she feels shaky, and has been using prn Lorazepam, which she reports is helpful for her. She does have a history of panic, and reports that thinking about her son is a trigger for her.

PRN Oxycodone has been used approximately three to four times per day, generally effective.

Recent VS stable. Glycemic control reviewed, okay. Resident was alert, pleasant, conversational and interactive. She did not appear in any discomfort during our conversation. Color normal, resps easy and regular. Mucus membranes moist. Bloodwork reviewed, EGFR returned to previous baseline and potassium normal.

Previously noted decline in renal function resolved. Continue to encourage fluids. Resume oral Diclofenac for pain management, continue to follow regarding pain management. Continue with LUC weekly. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : PIDLYSNY, ANGELA (00708)

Location : 3 West W301 1

Admission 01/25/2018

Medical Record # : 5530 695 716 VX

Gender : F

Date :

Date of Birth : 06/22/1933

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Nitroglycerin, Sulfa Antibiotics

Diagnoses : Unspecified dementia(F03), Arthritis, unspecified, multiple sites(M13.90), Cataract, unspecified(H26.9), Depressive episode, unspecified (F32.9), Paranoid personality disorder(F60.0)

Effective Date: 10/08/2025 10:18 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported. On review, she is noted to have areas of erythema on her buttocks, on wound rounds. Changes appear to be chronic, possibly related in part to MASD and to pressure. Pressure relief measures are in place and topical treatment with zinc barrier. At the time of rounds, she was seated in wheelchair, awake, calm and appeared comfortable. Color okay, resps quiet and easy. Ongoing CDM, advanced dementia with palliative approach. Pressure/MASD on buttocks will be follow on wound rounds, interventions in place.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:10 Type: Physician Note

Note Text : Assessed on medical rounds. Resident had a single episode of emesis on September 29th. No further GI concerns have been noted. She also has been noted to have bruise of unknown etiology, investigated as per protocol. Resident was seen to be awake, seated quietly in PASD tilt wheelchair. She appeared calm and comfortable. Color normal, resps easy and regular.

Advanced dementia, ongoing palliative approach to care. Bruise to be monitored by nursing staff as per skin and wound program protocol.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	POLLO, MOLLY (001110)	Location :	2 East E214 1	Admission Date :	02/20/2025
Medical Record # :	3668 071 818 PR	Gender :	F	Date of Birth :	07/13/1942
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Dye, iodinated contrast media, seasonal				
Diagnoses :	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Aortic (valve) stenosis(I35.0), Presence of cardiac pacemaker(Z95.00), Atherosclerotic heart disease of native coronary artery(I25.10), Atrial Fibrillation, Unspecified(I48.90), Personal history of COVID-19(U07.5), Pure hypercholesterolaemia(E78.0), Fracture of thoracic vertebra T7- T12, closed(S22.010), Osteoporosis, unspecified(M81.9), Other ulcerative colitis(K51.8), Diaphragmatic hernia without obstruction or gangrene(K44.9), Anaemia, unspecified(D64.9)				

Effective Date: 10/03/2025 14:39 Type: Family/Resident Involvement

Data : Call from RVH at 1532 that they are waiting for a transport to pick up resident

Action : Writer called resident's SON David P. that resident's appointment is done, and that she is waiting for transport to pick her up. POA said he has Red Cross booked and will call them immediately to pick up resident. He stated "I will take it from here, thank you." Appt location extension number provided to POA.

Response : Awaiting resident's arrival back to home

Author:Bidemi Adeniji RESP - Nursing - RN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : POTTER, GWENDOLYN (001052)

Location : 3 East E323 1

Admission 03/07/2024

Medical Record # : 8754 182 874 KP

Gender : F

Date :

Date of Birth : 02/21/1931

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Meloxicam

Diagnoses : Unspecified dementia(F03), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Other and unspecified irritable bowel syndrome(K58.8), Anaemia in other chronic diseases classified elsewhere(D63.8), Atrial Fibrillation, Unspecified(I48.90), Congenital malformation of heart, unspecified(Q24.9), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Scoliosis, unspecified, lumbar region(M41.96), Other specified intervertebral disc degeneration(M51.3), Osteoporosis, unspecified(M81.9), Embolism and thrombosis of other specified veins(I82.8)

Effective Date: 10/05/2025 16:32 Type: Family/Resident Involvement

Data : Writer received the msg that after the discussion with the families and resident they decided to provide consent

Action : Informed consent received for both vaccines FLU and COVID

Response : documented accordingly

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : READ, BARBARA (001148)

Location : 2 East E221 2

Admission 08/01/2025

Medical Record # : 8551 751 616 HM

Gender : F

Date :

Date of Birth : 09/12/1944

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Methotrimeprazine, Altace, Mavik, Nozinan

Diagnoses : Benign hypertension(I10.0), Spinal stenosis, unspecified site(M48.09), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Cerebral infarction due to thrombosis of cerebral arteries(I63.3), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Anxiety disorder, unspecified(F41.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Other specified intervertebral disc degeneration(M51.3), Other specified diseases of gallbladder(K82.8), Chronic gastritis, unspecified(K29.5), Iron deficiency anaemia, unspecified(D50.9), Anal fissure, unspecified(K60.2), Cerebral infarction, unspecified(I63.9), Migraine, unspecified (G43.9), Depressive episode, unspecified(F32.9), Fracture of nasal bones, closed(S02.200)

Effective Date: 10/06/2025 15:18 Type: Family/Resident Involvement

Data : The writer called POA to provide an update regarding resident's fall which happen on Oct 5, 2025 at 1800

Action : The POA was aware

Response : Continue to monitor resident with a current plan of care

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:14 Type: Physician Note

LATE ENTRY

Note Text : Resident sustained a fall yesterday October 5th with no apparent injuries. Head injury routine is ongoing, with no other concerns noted.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	RENTON, MADGE (001035)	Location :	2 West W226 1	Admission Date :	11/09/2023
Medical Record # :	1961 254 537 DW	Gender :	F	Date of Birth :	12/19/1939
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Atherosclerotic heart disease of native coronary artery(I25.10), Type 2 diabetes mellitus with poor control, so described(E11.64), Benign hypertension(I10.0), Depressive episode, unspecified(F32.9), Other specified degenerative diseases of nervous system(G31.8)				

Effective Date: 10/09/2025 09:12 Type: Family/Resident Involvement

Data : Residents constantly sliding off her wheelchair.

Action : PSWs report that the resident frequently slides forward when seated in her wheelchair, requiring frequent repositioning. A physiotherapy referral has been completed to reassess seating and determine if a pommel cushion is needed.

Response : No other concern noted, plan of care ongoing.

Author:Joebelyn Cureg RESP - Nursing - Resident Care Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : RIVERS, CRAIG (00990) Location : 3 East E312 2 Admission : 09/07/2024

Medical Record # : 7815 213 314 EM

Gender : M

Date :

Date of Birth : 06/02/1944

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Cephalosporins, Penicillins, Elastoblast

Diagnoses : Benign hypertension(I10.0), Delirium, unspecified(F05.9), Peripheral vascular disease, unspecified(I73.9), Chronic ulcer of skin, not elsewhere classified(L98.4), Anaemia, unspecified(D64.9), Cellulitis, unspecified(L03.9), Other and unspecified hydronephrosis(N13.3), Fracture of ankle NOS, closed(S82.890), Mild cognitive disorder(F06.7), Traumatic amputation at shoulder joint(S48.0), Motorcycle rider [any] injured in unspecified traffic accident(V29.9), Arthritis, unspecified, other site(M13.98), Carrier of other drug-resistant micro-organism (Z22.308), Resistance to methicillin(U82.1)

Effective Date: 10/08/2025 10:11 Type: Physician Note

LATE ENTRY

Note Text : No new issues or health concerns reported on rounds. Resident has been on monitoring regarding intakes. Documentation reviewed, fluid intakes appear adequate and stable. Bloodwork reviewed, CBC and LUC okay.

No changes to medical management at this time but monitoring of accurate fluid intakes discontinued.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 15:54 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : informed consent received for both vaccines

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:04 Type: Physician Note

Note Text : Resident completing course of antibiotics for UTI, based on clinical symptoms and C&S results. No other new health concerns reported. Recent weight and VS have been stable. Continue current management and follow.

Dictated by Dr. Lee Andersen dictated butnot read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : RIVERS, CRAIG (00990) Location : 3 East E312 2 Admission 09/07/2024

Medical Record # : 7815 213 314 EM

Gender : M

Date :

Date of Birth : 06/02/1944

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Cephalosporins, Penicillins, Elastoblast

Diagnoses : Benign hypertension(I10.0), Delirium, unspecified(F05.9), Peripheral vascular disease, unspecified(I73.9), Chronic ulcer of skin, not elsewhere classified(L98.4), Anaemia, unspecified(D64.9), Cellulitis, unspecified(L03.9), Other and unspecified hydronephrosis(N13.3), Fracture of ankle NOS, closed(S82.890), Mild cognitive disorder(F06.7), Traumatic amputation at shoulder joint(S48.0), Motorcycle rider [any] injured in unspecified traffic accident(V29.9), Arthritis, unspecified, other site(M13.98), Carrier of other drug-resistant micro-organism (Z22.308), Resistance to methicillin(U82.1)

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : RONEY, LOREEN (00200)

Location : 2 West W205 1

Admission 04/13/2011

Medical Record # : 9187 869 293 MJ

Gender : F

Date :

Date of Birth : 09/09/1948

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Codeine, Morphine, Penicillin, Trimethoprim, Fluzone, Sulfa Antibiotics, FLUVIRAL, LATEX, VAXIGRIP

Diagnoses : Other chronic pain(R52.2), Ileostomy status(Z93.2), Lactose intolerance, unspecified(E73.9), Hydrocephalus, unspecified(G91.9), Obesity, unspecified(E66.9), Seizure disorder, so described(R56.80), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Arthritis, unspecified, unspecified site(M13.99), Cerebral palsy, unspecified(G80.9), Stroke, not specified as haemorrhage or infarction(I64), Other and unspecified ventral hernia with obstruction, without gangrene(K43.6), Post-traumatic stress disorder(F43.1), Hallucinations, unspecified (R44.3), Delirium, unspecified(F05.9), Unspecified nonorganic psychosis(F29), Primary generalized (osteo)arthrosis(M15.0), Cerebral infarction, unspecified(I63.9), Hemiplegia of unspecified type of non-dominant side(G81.91), Recurrent depressive disorder, unspecified (F33.9), Urinary tract infection, site not specified(N39.0), Visual field defects(H53.4), Postcholecystectomy syndrome(K91.5)

Effective Date: 10/06/2025 10:15 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported, other than a scratch/excoriation on her right upper quadrant. This will be follow on wound rounds with treatment in place as per skin and wound program protocol. She also is noted to MASD at her breast skin fold, also on wound rounds with treatment orders in place. Resident was seen to be alert, in her wheelchair, appeared calm and comfortable. Color normal, resps easy and regular.

Ongoing CDM. Minor skin concerns as described, to be followed by nursing staff. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/05/2025 19:02 Type: Family/Resident Involvement

Data : Broken glasses

Action : Informed Melissa Cottreau who stated she will pick them up tomorrow morning. Writer informed incoming nurse.

Response :

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	SAMPSON, HAYDEE (001144)	Location :	3 East E301 2	Admission	07/15/2025
Medical Record # :	8799 634 285 TJ	Gender :	F	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	10/25/1928
Allergies :	Penicillin, Nitrofurantoin Derivatives, Quinolones, Sulfa Antibiotics				
Diagnoses :	Other specified intervertebral disc degeneration(M51.3), Fibromyalgia(M79.7), Benign hypertension(I10.0), Hypothyroidism, unspecified (E03.9), Traumatic subdural haemorrhage(S06.5), Primary gonarthrosis, bilateral(M17.0)				

Effective Date: 10/02/2025 13:14 Type: Family/Resident Involvement

Data : POA was in the home visiting his wife,

Action : Writer approached the POA to discuss the flu and COVID-19 vaccine,
Resident POA provided informed consent for both FLU and COVID -19 vaccine.

Response : Documented accordingly

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : SAMUELS, STUART (001069) Location : 3 East E313 2 Admission 05/23/2024
Medical Record # : 1397 401 413 YB Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 02/26/1945
Allergies : No Known Allergies
Diagnoses : Parkinson's disease(G20), Unspecified dementia(F03), Hereditary and idiopathic neuropathy, unspecified(G60.9), Other sleep apnoea(G47.38), Old myocardial infarction(I25.2), Spinal stenosis, lumbar region(M48.06)

Effective Date: 10/02/2025 09:51 Type: Family/Resident Involvement

Data : POA approached resident during the visit to provide consent for vaccine

Action : Consent for both COVID-19 and flu vaccine obtained

Response : documented accordingly

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:05 Type: Physician Note

Note Text : Resident sustained a fall on September 28th at approximately 4 in the morning, when he was found on the floor. Minor skin tear to his forehead. Monitor on head injury routine with no concerns. Skin tear to be monitored on wound rounds as per protocol. Ongoing measures for falls prevention with no changes to medical management at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	SANDERS, CAROLANNE (001147)	Location :	3 West W318 1	Admission Date :	07/29/2025
Medical Record # :	9281 032 798 NP	Gender :	F	Date of Birth :	08/11/1943
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Diovan HCT				
Diagnoses :	Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Type 2 diabetes mellitus without (mention of) complications(E11.9), Depressive episode, unspecified(F32.9), Abnormal findings on diagnostic imaging of lung(R91), Dementia in Alzheimer's disease, unspecified(F00.9), Atherosclerosis of other arteries(I70.8), Fracture of thoracic vertebra T7- T12, closed(S22.010), Anaemia, unspecified(D64.9), Other senile cataract(H25.8), Osteoporosis, unspecified(M81.9), Ulcerative (chronic) proctitis(K51.2)				

Effective Date: 10/08/2025 10:20 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported. Resident reports feeling well, denies pain or respiratory symptoms at the time of rounds. She has been on Lasix 40 mg po daily due to edema, query CHF. She is also being followed regarding hypertension, as well as poor glycemic control.

Resident recently out for consultation with vascular surgery regarding mesenteric occlusion/stenosis. Due to no active symptoms of mesenteric ischemia, vascular surgery recommends no interventions at this time, and no changes to medical management.

Recent weights reviewed, stable. Most recent weight 61.2 kg, systolic BP between 150 and 170. Glycemic control reviewed, blood sugars remain elevated at lunch and supertime. Resident appears alert, seated in chair, appears calm and comfortable. Color okay, slightly pale. Resps easy and regular. Chest clear, pulse regular, rate controlled, extremities okay, minimal edema.

Signs of CHF improved. Continue current management. For BP increase Enalapril to 7.5 mg po daily and follow. For glycemic control, increase Aspart at breakfast and lunch from 6 to 8 units. Weekly bloodwork to follow regarding anemia, as well as renal function/electrolytes, pending. Of note, last Hb was 71.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:11 Type: Physician Note

Note Text : Assessed on medical rounds. Due to concerns regarding CHF, resident has been monitored over the past week. She was also noted to have anemia with Hb last week of 76. Lasix was initiated due to edema and CHF concerns, with 40 mg po bid times three days, followed by 40 mg po once daily. Urine R&M was ordered to rule out GU blood loss, and follow-up bloodwork was ordered including weekly CBC, lytes, urea, and creatinine. At the time of rounds, resident denied complaints, she specifically denied SOB, dizziness, or pain.

Recent weight and VS stable. Glycemic control reviewed, blood sugars remaining elevated, particularly lunch/supper. Resident seen seated in her wheelchair, alert, pleasant, calm and interactive. Color pale. Radial pulse good, regular, rate normal. Resps easy and regular, chest clear. Tubi grip stockings in place on lower extremities with reduced edema noted. Most recent bloodwork showed Hb of 71. Urine R&M clear. Chest x-ray showed no signs of CHF.

Continue current management with ongoing Lasix. Anemia of unclear etiology. Follow CBC and LUC weekly. PNP previously ordered due to concerns regarding CHF, not yet completed. Increase PPI to bid in case of possible upper GI blood loss. Weekly weights have been ordered. Continue to monitor.

Dictated by Dr. Lee Andersen dictated but not read

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : SANDERS, CAROLANNE (001147)

Location : 3 West W318 1

Admission 07/29/2025

Medical Record # : 9281 032 798 NP

Gender : F

Date :

Date of Birth : 08/11/1943

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Diovan HCT

Diagnoses : Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Type 2 diabetes mellitus without (mention of complications(E11.9), Depressive episode, unspecified(F32.9), Abnormal findings on diagnostic imaging of lung(R91), Dementia in Alzheimer's disease, unspecified(F00.9), Atherosclerosis of other arteries(I70.8), Fracture of thoracic vertebra T7- T12, closed(S22.010), Anaemia, unspecified(D64.9), Other senile cataract(H25.8), Osteoporosis, unspecified(M81.9), Ulcerative (chronic) proctitis(K51.2)

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	SCOTT, NORMAN (001041)	Location :	3 West W304 1	Admission Date :	12/28/2023
Medical Record # :	3358 859 514 PY	Gender :	M	Date of Birth :	08/19/1936
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Norvasc				
Diagnoses :	Vascular dementia, unspecified(F01.9), Hyperplasia of prostate(N40), Gout, unspecified, unspecified site(M10.99), Chronic kidney disease, unspecified(N18.9), Male erectile dysfunction, unspecified(N48.49), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Pure hypercholesterolaemia(E78.0), Benign hypertension(I10.0), Constipation(K59.0)				

Effective Date: 10/08/2025 10:21 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident has been on behaviour tracking due to concerns expressed last week by resident's wife. Further tracking is required and documentation has not been fully completed. On October 2nd, resident received physical aggression from coresident with no significant injury, and demonstrated responsive aggression in return. No subsequent pain or health concerns. On October 7th resident did have some aggressive behaviours toward staff during cares. Current medications include Abilify 2 mg po daily.

At the time of rounds he was alert, seated in chair, calm and comfortable.

Ongoing CDM. Follow regarding dementia/BPSD, behaviour tracking ongoing. Behaviour management coordinator aware and following. Based on Canadian guidelines for BPSD, Citalopram will be added at 5 mg po daily and increase to 10 mg po daily after one week. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/07/2025 09:56 Type: Behaviour - Responsive Behaviour

Type of Behaviour : physical aggression towards staff

Antecedent/Triggers : during care

Describe the behaviour : Res was soaking wet and when the staff began to change his clothes he got agitated and kicked and hit the staff

Disruptiveness (Data)/Consequences to the behaviour : at risk for physical injury (bruises, pain)

Interventions (review/update care plan) (Action) : review

Change in medication : none

What are the risks and causes : high risks for skin injury d/t aggression secondary to noncompliance with care

Outcome(s)(Result) : no skin injury noted at this time

Substitute Decision Maker notified (if not, explain) : yes. She requested if the Abilify medications for agitation can increase in dosage. She was informed that the medication is given only when needed. Medication was not given at this time as he calmed down after the care.

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 08:58 Type: Family/Resident Involvement

Data : to update POA re. Resident's behaviour

Action : POA called back this AM as POA has a VM from NM-MB regarding to update for resident's physical aggression received and initiated oct 2. writer gave detailed update to POA. POA raised no concern and was thankful for the update.

Response :

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : SCOTT, NORMAN (001041)

Location : 3 West W304 1

Admission 12/28/2023

Medical Record # : 3358 859 514 PY

Gender : M

Date :

Date of Birth : 08/19/1936

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Norvasc

Diagnoses : Vascular dementia, unspecified(F01.9), Hyperplasia of prostate(N40), Gout, unspecified, unspecified site(M10.99), Chronic kidney disease, unspecified(N18.9), Male erectile dysfunction, unspecified(N48.49), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Pure hypercholesterolaemia(E78.0), Benign hypertension(I10.0), Constipation(K59.0)

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 00:51 Type: Behaviour - Responsive Behaviour

Type of Behaviour :

Antecedent/Triggers :

Describe the behaviour :

Disruptiveness (Data)/Consequences to the behaviour :

Interventions (review/update care plan) (Action) :

Change in medication :

What are the risks and causes :

Outcome(s)(Result) :

Substitute Decision Maker notified (if not, explain) : (Draft)

Author:Truelove Nwachukwu RESP - Nursing - RN - Unit Supervisor

Signature: _____

Effective Date: 10/01/2025 10:12 Type: Physician Note

Note Text : Assessed on medical rounds. No new health concerns reported or recently documented, but POA has voiced concerns regarding changes in resident's personality/behaviour. Of such, behaviour tracking with DOS will be initiated to assess for ongoing concerns. His activity and function have been as per his usual. No new health concerns noted. Resident was seen to be alert, in wheelchair, calm and self-propelling. Color okay, resps easy and regular.

Continue current management. Monitor for any further concerns regarding BPSD.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	SEAMAN, ARTHUR THOMAS (00342)	Location :	2 West W202 1	Admission Date :	05/28/2013
Medical Record # :	9890 675 359 YT	Gender :	M	Date of Birth :	10/08/1931
Physician :	Mossman, Kerstin	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Adalat, Shell Fish				
Diagnoses :	Gout, unspecified, unspecified site(M10.99), Deficiency of other vitamins(E56.8), Benign hypertension(I10.0), Osteoporosis, unspecified (M81.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremities(I80.2)				

Effective Date: 10/14/2025 15:11 Type: Physician Note

Note Text : LTC visit, Pt seen, chart reviewed for weight, medications, lab orders or other pending orders. Pt reports skin lesion at back of neck has resolved, wishes to cancel appmt for excision later in Oct.

Due for Flu vaccine, has rec'd Covid in June and RSV last year. O/E: NAD, neck lesion resolved, no new lesions. A/P: Advanced age, HTN, resolved skin lesion, plan:

- cont current care
- MD office to cancel pending booking for Oct re skin lesion
- F/U as needed and for routine visit

Author:Dr.Kerstin Mossman RESP - Medical Services - MD - Physician [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : SMITH, HARRY (001082) Location : 2 East E213 2 Admission : 08/01/2024
Medical Record # : 4364 553 679 NE Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 08/06/1944
Allergies : Crestor, Statins
Diagnoses : Abdominal aortic aneurysm, without mention of rupture(I71.4), Hemiplegia of unspecified type of non-dominant side(G81.91), Fracture of
rib, closed(S22.300), Cerebral infarction, unspecified(I63.9), Person injured in unspecified traffic motor-vehicle accident(V89.2), Benign
hypertension(I10.0), Chronic obstructive pulmonary disease, unspecified(J44.9)

Effective Date: 10/07/2025 17:51 Type: Family/Resident Involvement

Data : Received the msg this evening form POA providing us with the consent for FLU and COVID vaccine

Action : documented accordingly

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 14:22 Type: Family/Resident Involvement

Data : The writer received an order from NP to flush resident's ear and before do an assessment that resident is not having perforation or swelling.

Action : The writer called POA Munden at 1420 and received consent.

Response :

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 14:09 Type: Family/Resident Involvement

Data : The writer received a call from the resident's son (POA)

Action : The POA informed the writer that " My dad needs to be set up for the hair dresser and I am okay with payment. I will set up the credit card at the front desk for the payment and also he has an appointment on Monday October 6, 2025 and I will pick him up at 1500 and I want his ears need to be clean up before appointment" The writer informed the nurse manager regarding the hairdresser.

Response : Continue to monitor resident with a current plan of care

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : SPAGNUOLO, ROSARIA (001097)

Location : Ground W123 1

Admission 11/06/2024

Medical Record # : 9915 480 678 JG

Gender : F

Date :

Date of Birth : 01/02/1947

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Benign hypertension(I10.0), Hallucinations, unspecified(R44.3), Type 2 diabetes mellitus with poor control, so described(E11.64), Hyperlipidaemia, unspecified(E78.5), Seizure disorder, so described(R56.80), Chronic kidney disease, unspecified(N18.9), Spinal stenosis, unspecified site(M48.09), Conductive hearing loss, unspecified(H90.2), Atherosclerotic heart disease of native coronary artery(I25.10), Depressive episode, unspecified(F32.9), Polyneuropathy, unspecified(G62.9), Fall involving other specified walking devices(W05.08), Unspecified dementia(F03)

Effective Date: 10/04/2025 17:27 Type: Family/Resident Involvement

Data : POA (Sal) called writer, stated his mom was crying on phone and stated she don't want anything from here, no cups, no foods.

- Sun stated she was really upset and crying over the phone and he can't listen her properly as she was crying.

- POA (Sal) stated might be because of medication Gabapentin res is taking, s there s reason.

- POA (Sal) wanted to reassess the medication gabapentin.

- Res refused to have any fluids at supper time.

Action : Writer did tell the POA Med res is taking Gabapentin 100mg twice daily.

- Added to MD round.

- Writer did speak to res. as res refused supper. Writer told the staff that res is agree to send her food in her room.

- Writer and staff did multiple approach to have fluids.

Response : Res ate her food in her room however res refused fluids at supper time.

Author:Feny Patel RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 11:24 Type: Physician Note

Note Text : Resident hasn't been adjusting well in the Long Term Care setting. Earlier in the year, Sertraline (SSRI) for anxiety and depression was recommended. The resident was okay with the treatment, however, the POA didn't agree with the suggestion as he felt the behaviors were part of her personality. He suggested conservative measures. The resident has been very Tearful and she is not showing any improvement with behaviors. A care conference with the POA will be booked in a few weeks to discuss options.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 15:40 Type: Family/Resident Involvement

Data : Resident expressed upset this morning to staff regarding last evening when resident felt she was ignored.

Action : All information communicated by night nurse present to IC nurse. Writer also relayed complaint to unit manager AJ this morning to ensure follow up.

Support provided to resident but she remained in her room for BR and lunch as she often will when upset.

Response : Took medications and treatments without concern and received tray service to her room for meals. Writer will strongly encouraged coming to dining hall for dinner if resident is agreeable.

Plan of care ongoing

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : SPAGNUOLO, ROSARIA (001097)

Location : Ground W123 1

Admission 11/06/2024

Medical Record # : 9915 480 678 JG

Gender : F

Date :

Date of Birth : 01/02/1947

Physician : Charette, Yannick

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Benign hypertension(I10.0), Hallucinations, unspecified(R44.3), Type 2 diabetes mellitus with poor control, so described(E11.64), Hyperlipidaemia, unspecified(E78.5), Seizure disorder, so described(R56.80), Chronic kidney disease, unspecified(N18.9), Spinal stenosis, unspecified site(M48.09), Conductive hearing loss, unspecified(H90.2), Atherosclerotic heart disease of native coronary artery(I25.10), Depressive episode, unspecified(F32.9), Polyneuropathy, unspecified(G62.9), Fall involving other specified walking devices(W05.08), Unspecified dementia(F03)

Author:Maloree Hughes RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 04:21 Type: Behaviour - Responsive Behaviour

Type of Behaviour : yelling

Antecedent/Triggers : call bell unanswered

Describe the behaviour : staff came to report to writer that the resident was yelling and has refused to go to bed. writer check on resident. resident was sitting on the chair. resident refused to go to bed because she feels unhappy that no one answered her call bell. she said she was calling for a long time and nobody answered. writer tried to calm her down but she continued to yell saying nobody cares about her and she will inform the management in the morning. writer left and later came back, found the resident sleeping on her couch. writer tried waking up resident to go to bed but she refused. writer left the room. nurse in-charge aware.

Disruptiveness (Data)/Consequences to the behaviour : no

Interventions (review/update care plan) (Action) : n/a

Change in medication : n/a

What are the risks and causes : resident said her call bell was unanswered.

Outcome(s)(Result) : n/a

Substitute Decision Maker notified (if not, explain) : no. happened at midnight. nurse incharge aware.

Author:Adaeeze Anyanwu RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : STELLA, GERALDINE LOUISE (00727) Location : 2 East E222 1 Admission : 03/29/2018
Medical Record # : 4715 721 876 NX Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 03/26/1938
Allergies : No Known Allergies
Diagnoses : Unspecified dementia(F03), Benign hypertension(I10.0), Hypothyroidism, unspecified(E03.9), Other sleep apnoea(G47.38), Arthritis, unspecified, unspecified site(M13.99), Atrial Fibrillation, Unspecified(I48.90), Other retinal detachments(H33.5), Urinary tract infection, site not specified(N39.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Blindness, monocular(H54.4), Depressive episode, unspecified(F32.9), Anaemia, unspecified(D64.9), Pure hypercholesterolaemia(E78.0), Conductive hearing loss, unspecified(H90.2), Fracture of other part of upper end of humerus, closed(S42.280), Fracture of medial malleolus, closed(S82.500)

Effective Date: 10/07/2025 17:47 Type: Family/Resident Involvement

Data : Phone call received from resident sPOA to provide consent for FLU and COVID-19 vaccine

Action : Documented accordingly

Response :

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 23:04 Type: Behaviour - Responsive Behaviour

Type of Behaviour : Resident hit staff in stomach during care.

Antecedent/Triggers : Peri care being provided

Describe the behaviour : Resident hit staff in the stomach

Disruptiveness (Data)/Consequences to the behaviour : Staff stop care and alerted writer.

Interventions (review/update care plan) (Action) : Educated resident and re approach applied and care completed with no further incident

Change in medication : none

What are the risks and causes : staff can get hurt from resident action.

Outcome(s)(Result) : Care completed after education provided.

Substitute Decision Maker notified (if not, explain) : to be notified.

Author: Staceyann Grant RESP - Nursing - Agency - RPN - Unit Supervisor
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : STEPHENS, BRENDA (001021) Location : 2 West W223 1 Admission 06/27/2023
Medical Record # : 1310 528 094 PF Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 02/10/1947
Allergies : Demerol, ELASTOPLAST TAPE, Environmental/Seasonal Allergies
Diagnoses : Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Gout, unspecified, other site(M10.98), Chronic kidney disease, unspecified(N18.9), Anaemia, unspecified(D64.9), Atrial Fibrillation, Unspecified(I48.90), Urinary tract infection, site not specified(N59.0), Pneumonia, unspecified(J18.9), Unspecified diabetes mellitus with poor control, so described(E14.64), Acquired absence of other organs (Z90.8), Flaccid neuropathic bladder, not elsewhere classified(N31.2), Osteomyelitis, unspecified, ankle and foot(M86.97)

Effective Date: 10/06/2025 10:16 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident reports some ongoing discomfort related to urinary catheter. Catheter was changed as per schedule on October 1st. Resident described some discomfort in the peri urethral region, with certain positions, movement, manipulation of the catheter. She had previously seen urology and suprapubic catheter was suggested. Resident is indicating that she is considering suprapubic catheter and will discuss further with urology at the time of her next appointment. She is otherwise feeling well. Vitals reviewed, BP in the 140's to 150's systolic. HR normal, weight stable. Glycemic control reviewed, okay with blood sugars between 6 and 12. Resident alert, pleasant, conversational. Color okay, resps easy and regular. Abdomen soft and benign. Recent bloodwork reviewed, CBC and LUC okay. CRP 8.1.

Discomfort related to chronic indwelling Foley catheter, trial topical Lidocaine gel to periurethral bid.

Discomfort related to indwelling urinary catheter. Trial topical Lidocaine gel to periurethral bid and bid prn. For hypertension, increase Amlodipine to 7.5 mg po daily. Follow blood pressures and reassess in one month or sooner if concern.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : SURMAN, ERNEST (001152)

Location : 2 West W206 1

Admission 09/08/2025

Medical Record # : 9120 751 277 HT

Gender : M

Date :

Date of Birth : 04/19/1944

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : NKD allergies

Diagnoses : Type 1 diabetes mellitus with poor control, so described(E10.64), Other hyperlipidaemia(E78.4), Gastro-oesophageal reflux disease with oesophagitis(K21.0), Glaucoma, unspecified(H40.9), Degeneration of macula and posterior pole(H35.3), Benign hypertension(I10.0), Dementia in Alzheimer's disease, atypical or mixed type(F00.2), Calculus of ureter(N20.1), Obsessive-compulsive disorder, unspecified (F42.9)

Effective Date: 10/06/2025 15:07 Type: Physician Note

Note Text : Assessment and foot care provided by Professional Foot care. Skin intact, nails all appear healthy.

Bilateral lower legs are good.

Feet cleaned with wet wipes.

Detritus removed.

Nails trimmed and filed. Callous care completed.

Lotion applied to lowerlegs and feet.

Treatment tolerated well.

Author:Yvonne Durham RESP - Nursing - Footcare Nurse [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	SWAIN, FIONA (001133)	Location :	Ground W111 1	Admission Date :	05/28/2025
Medical Record # :	7825 549 954 BP	Gender :	F	Date of Birth :	05/27/1940
Physician :	Charette, Yannick	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Codeine, Sulfamethizole				
Diagnoses :	Pulmonary embolism without mention of acute cor pulmonale(I26.9), Benign hypertension(I10.0), Urinary tract infection, site not specified (N39.0), Stroke, not specified as haemorrhage or infarction(I64), Primary generalized (osteo)arthrosis(M15.0), Cerebral amyloid angiopathy (I68.0), Anaemia, unspecified(D64.9), Hypothyroidism, unspecified(E03.9), Acquired absence of genital organ(s)(Z90.7), Acquired absence of other organs(Z90.8)				

Effective Date: 10/12/2025 15:06 Type: Family/Resident Involvement

Data : Resident on droplet precautions. Resident has runny nose and sneeze. Resident remains afebrile. No respiratory adventitious sounds.

Action : MD aware. Order in place. EVELYN THOMPSON made aware. A voice message left to FIONA COLANGELO to call back for an update.

Response :

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/03/2025 09:15 Type: Physician Note

Note Text : Resident has crusting, itchy and pain a few weeks ago, Tobramycin 0.3% 1 drop in bilateral eyes was done x 7 days, it helped with crusting, however, resident still complaining of itchiness and pain, reviewed her medications and no obvious cause, most likely allergic conjunctivitis, will start pataday 0.2% opht instill 1 drop into affected eyes x 2 months, will reassess afterwards.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	SWARTZ, PAUL (001042)	Location :	2 East E213 1	Admission	01/04/2024
Medical Record # :	6760 794 476 WD	Gender :	M	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	12/13/1947
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03), Polymyalgia rheumatica(M35.3), Delusional disorder(F22.0)				

Effective Date: 10/06/2025 10:15 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork reviewed, electrolytes normal.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : SYMES, SANDRA (001156)

Location : 2 West W201 1

Admission 10/14/2025

Medical Record # : 8515 034 976 YJ

Gender : F

Date :

Date of Birth : 04/28/1970

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : seasonal

Diagnoses : Other seasonal allergic rhinitis(J30.2), Alzheimer's disease with early onset(G30.0), Depressive episode, unspecified(F32.9), Other
specified disorders of bladder(N32.8), Abnormal glucose tolerance test(R73.0)

Effective Date: 10/14/2025 15:08 Type: Family/Resident Involvement

Data : Immunization consent:

Action : POA agreed to the following

- 1) Influenza
- 2) Tdap
- 3) TB skin test

Response : POA refused:

- 1) Shingles
- 2) COVID
- 3) RSV

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/14/2025 14:58 Type: Family/Resident Involvement

Data : Sandra has a wanderguard in place (applied to the right wrist). S/N #: 64465790 and Wandermate Tag #: 02F1C4

Action :

Response :

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : TEVELMAN, VALENTINA (001062) Location : 2 East E218 1 Admission Date : 04/24/2024
Medical Record # : 6242 267 307 KM Gender : F Date of Birth : 09/23/1929
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Fusidate Na/Hc Ace, Fusidic Acid, Penicillins
Diagnoses : Benign hypertension(I10.0), Other subarachnoid haemorrhage(I60.8), Arthritis, unspecified, other site(M13.98), Embolism and thrombosis of unspecified artery(I74.9), Unspecified fall(W19), Personal history of COVID-19(U07.5), Cardiomegaly(I51.7), Carcinoma in situ of bladder (D09.0), Malignant neoplasm of urethra(C68.0), Bradycardia, unspecified(R00.1), Unspecified dementia(F03), Liver disease, unspecified (K76.9), Constipation(K59.0)

Effective Date: 10/11/2025 17:56 Type: Family/Resident Involvement

Data : Residents son was in visiting at lunch time and found resident sitting by the patio door. Son was upset that resident was sitting by the patio door and not the dining room.

Action : prior to son's arrival resident was sitting in her designated spot in the dining room however resident was noisy and crying writer approached resident trying to figure out why resident was upset. Writer asked resident pain to which resident shook her head no. Writer sat with resident trying to feed her resident refused. PSW asked resident toilet? to which resident said no. PSW removed resident to the area to try and calm resident also because other resident was becoming upset in the dining room. Writer approached resident again and pointed to area that has surgery and again asked pain to which resident shook head no. Writer offered pain medication resident refused. All this was explain to son who was becoming loud in the dining room demanding to know which PSW put his mother by the door. After explaining numerous times son calmed down staying he knows it's hard d/t language barrier. According to son resident stated her stomach hurt and wanted to go to the washroom. Resident transferred to toilet and settled with son. Son later approached writer and apologized.

Response : Writer asked son to write two simple words, to help us if needed. Pain and toilet, son wrote words on a paper. paper was placed in nursing station and staff informed. In-charge aware at that time.

Author:Alecia Lewis RESP - Nursing - Agency - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:16 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident was out on October 3rd for excision of scalp lesion with Dr. Hekkenberg. Pathology results pending. Scalp wound to be entered on wound rounds, with treatment orders as per skin and wound protocol.

Abdominal x-rayreviewed, findings consistent with mild constipation. She is currently on Lactulose 30 ml po bid, polyethylene glycol 3350, 17 grams daily, Senokot daily plus two tabs prn for constipation. At this time, increase routine Senokot to three tabs daily and follow bowel pattern.

Due to BPSD, with agitation, emotional distress, Quetiapine was recently changed to Risperdal. Follow regarding BPSD. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : THOMPSON, EVELYN (001003) Location : Ground W105 2 Admission Date : 03/08/2023
Medical Record # : 8935 617 277 JB Gender : F Date of Birth : 06/30/1930
Physician : Charette, Yannick Pharmacy : Medisystem Barrie IMM
Allergies : Ibuprofen, Dilantin, Dilaudid, Sulfa Antibiotics, Advil, Environmental, perfumes
Diagnoses : Other specified intervertebral disc degeneration(M51.3), Other chronic pain(R52.2), Mild cognitive disorder(F06.7), Transitory neonatal hyperthyroidism(P72.1), Osteoporosis, unspecified(M81.9), Arthritis, unspecified, unspecified site(M13.99), Benign hypertension(I10.0), Meniere's disease(H81.0), Cardiovascular disease, unspecified(I51.6), Congenital malformation of ear causing impairment of hearing, unspecified(Q16.9), Chronic kidney disease, unspecified(N18.9), Cataract, unspecified(H26.9), Solitary cyst of breast(N60.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Malignant neoplasm cervix uteri, unspecified(C53.9), Hypothyroidism, unspecified (E03.9)

Effective Date: 10/07/2025 15:16 Type: Family/Resident Involvement

Data : Lesion to right lower lip. Resident c/o pain to her lower lip. Resident has bruise to her right hand middle finger.

Action : Jo Buck made aware.

Response : (Draft)

Author:Nazanin Naddaf RESP - Nursing - RN - Unit Supervisor

Signature: _____

Effective Date: 10/03/2025 10:53 Type: Physician Note

Note Text : Resident sustained laceration to left index finger, no longer bleeding, will monitor and if bleeding continues, will hold blood thinner.

Author:Dr. Yannick Charette RESP - Medical Services - Physician [e-SIGNED]

Signature: _____

Effective Date: 10/02/2025 17:39 Type: Family/Resident Involvement

Data : Poa (Jo buck) requesting if MD can see mole that present on lips.

Action : Added to MD round.

Response :

Author:Feny Patel RESP - Nursing - RN [e-SIGNED]

Signature: _____

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	THORNTON, MONIQUE (00868)	Location :	3 East E324 1	Admission Date :	01/12/2021
Medical Record # :	1159 209 319 DD	Gender :	F	Date of Birth :	10/22/1937
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Benign hypertension(I10.0), Other specified arthritis, other site(M13.88), Atrial Fibrillation, Unspecified(I48.90), Fractures involving other combinations of body regions, closed(T02.80), Hyperlipidaemia, unspecified(E78.5), Unspecified dementia(F03), Congestive heart failure (I50.0)				

Effective Date: 10/15/2025 15:28 Type: Family/Resident Involvement

Data : The Writer had connected with the resident's POA (Karen) regarding the residents current health status and end of life support since readmission from the hospital last evening. Palliative Performance Scale complete with a score of 10%.

Action : The Writer did complete the End of Life Pathway with Karen (please see assessment), expressed primary concern is keeping the resident comfortable and pain free. Education was provided to Karen regarding services offered and how support would look like for the resident, ie. repositioning, oral care, etc., as well as for the family, ie. palliative care cart w snacks and fluids, cot for overnight stays if they'd like, etc. The Writer did also update the resident's care plan with ADL support as she requires total dependence from staff members; additionally the resident had a bed alarm in place which has now been removed from the care plan in discussion with Karen as no longer required.

Response : Karen voiced she was thankful for Writer's update and encouraged to ask questions if needed.

Author: Ashline Johnstone RESP - Nursing - Behaviour Support Manager [e-SIGNED]

Signature: _____

Effective Date: 10/14/2025 20:13 Type: Family/Resident Involvement

Data : Resident returned home from RVH at approximately 1830 today. Writer was informed by RVH nurse that resident had not taken any medications or food/fluid intakes today. Output was 300cc as per RVH nurse. Writer received RVH orders, once MD gave approved the medication reconciliation writer contacted after hours pharmacy.

Action : Resident was asleep and unable to wake up on arrival, resident had medication that was to be given by mouth, however resident could not safely take by mouth. Writer spoke with daughter Karen and informed her that the after hours pharmacy could send some of the medication, however resident was not safe to take the medications due to being lethargic and somewhat unresponsive. Writer did inform POA that resident has SC ports in and the nurse could administer pain medication along with the scopolamine via port.

Response : POA agreed that it was unsafe to try to give resident the medication by mouth and wanted to ensure that resident was comfortable and in no pain. POA also stated that she was to be called if resident becomes less stable. Residents PPS is 10%.

Author: Melissa Brown RESP - Nursing - RPN - Associate Nurse Manager [e-SIGNED]

Signature: _____

Effective Date: 10/11/2025 16:10 Type: Family/Resident Involvement

LATE ENTRY

Data : Writer spoke with the resident's daughter Karen (POA) in the resident's room, as per her request, regarding the palliative approach. writer and IC JP both spoke with POA as the family is planning to discharge the resident from the hospital. The resident is currently palliative with a PPS score of 10-20% in the hospital.

Action : POA asked the writer what kind of care is provided under the palliative approach. Writer explained that it depends on each resident's individual needs. Writer informed POA that palliative care focuses on pain and symptom management, ensuring the resident's comfort during the end stage of life. Medications will administered regularly as per the physician's orders and based on the resident's needs.

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : THORNTON, MONIQUE (00868)

Location : 3 East E324 1

Admission 01/12/2021

Medical Record # : 1159 209 319 DD

Gender : F

Date :

Date of Birth : 10/22/1937

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Benign hypertension(I10.0), Other specified arthritis, other site(M13.88), Atrial Fibrillation, Unspecified(I48.90), Fractures involving other combinations of body regions, closed(T02.80), Hyperlipidaemia, unspecified(E78.5), Unspecified dementia(F03), Congestive heart failure (I50.0)

Staff also provide mouth care every 2 hours and reposition the resident every 2 hours.

POA expressed concern that the bed is too small for her mother and requested bed rails, as the resident is at risk for falls. Writer explained that bed rails are considered restraints and are not used for fall prevention. However, a bed safety assessment will be completed when the resident returns.

Response : POA was appreciative of the discussion and expressed gratitude for the information provided. She stated they will wait until Tuesday to proceed with the resident's discharge from the hospital. (Draft)

Author:Gulshanpreet Kaur Bal RESP - Nursing - RPN - Unit Supervisor

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : TOLLEY, DENNIS John (001033) Location : 3 East E305 1 Admission Date : 10/25/2023
Medical Record # : 5793 970 145 NA Gender : M Date of Birth : 07/25/1935
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Penicillins
Diagnoses : Old myocardial infarction(I25.2), Carcinoma in situ of prostate(D07.5), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified(H40.9), Other and unspecified intestinal obstruction(K56.6), Left bundle-branch block, unspecified(I44.7), Unspecified dementia(F03)

Effective Date: 10/13/2025 13:11 Type: Family/Resident Involvement

Data : Resident's son visited and reported that Dennis' voice sounded different.

Action : Writer assessed the resident and the resident had a hoarse voice as well as occasional cough. v/s monitored, BP 131/78, RR 18, P 78, RR 18, T 36.6. Chest assessment completed. Chest was clear. No concerns were noted r/t crackles and wheezing sounds.

No SOB and sore throat noted. No concerns noted r/t Pain and discomfort. Resident was placed on Isolation due to respiratory symptoms. IC SP notified. POA son Dough notified. Added into MD rounds for review.

Response : Resident is resting in his room at this time. Plan of care is ongoing.

Author:Gulshanpreet Kaur Bal RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:12 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new health concerns reported. Activity and function stable with gradual decline in cognition/function related to dementia. No pain or problematic symptoms reported. Resident was seen to be alert, seated quietly in chair, appeared calm and comfortable. Color okay, resps easy and regular. Recent bloodwork reviewed, CBC, LUC, calcium and magnesium and TSH normal.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Effective Date: 10/07/2025 15:31 Type: Family/Resident Involvement

Data : POA called and gave consent for both Influenza and COVID-19 vaccination.

Action :

Response :

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 11:31 Type: Family/Resident Involvement

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : TOLLEY, DENNIS John (001033)

Location : 3 East E305 1

Admission 10/25/2023

Medical Record # : 5793 970 145 NA

Gender : M

Date :

Date of Birth : 07/25/1935

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Penicillins

Diagnoses : Old myocardial infarction(I25.2), Carcinoma in situ of prostate(D07.5), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5),
Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified(H40.9), Other
and unspecified intestinal obstruction(K56.6), Left bundle-branch block, unspecified(I44.7), Unspecified dementia(F03)

Data : to update POA

Action : writer informed to granddaughter - sarah regarding resident's current health status when granddaughter came into visit today (POA is
on vacation and will be contacted granddaughter in POA's absence as per PCC profile) .

- Granddaughter-Sarah raised no concern and was thankful for the update.

Response :

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	TUCK, GERALD (001015)	Location :	3 East E309 1	Admission Date :	12/05/2023
Medical Record # :	8657 949 791 CD	Gender :	M	Date of Birth :	12/28/1960
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Aspirin, Penicillin, Tylenol				
Diagnoses :	Anaemia, unspecified(D64.9), Liver disease, unspecified(K76.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Old myocardial infarction(I25.2), Other disorders of lung(J98.4), Acute cholecystitis(K81.0), Other cholelithiasis without mention of obstruction(K80.80), Cyst of kidney, acquired(N28.1), Aortic (valve) stenosis(I35.0), Plantar fascial fibromatosis(M72.2), Gastritis, unspecified(K29.7), Chondromalacia, unspecified site(M94.29), Cataract, unspecified(H26.9), Liver transplant status(Z94.4), Osteoporosis, unspecified(M81.9), Carrier of drug-resistant Clostridium difficile(Z22.303), Unspecified diabetes mellitus with established or advanced kidney disease(E14.23)				

Effective Date: 10/01/2025 10:06 Type: Physician Note

Note Text : Assessed on medical rounds. On September 26th while out at hospital for imaging, resident sustained a fall due to losing his balance while changing in to a hospital gown. There were no apparent injuries at the time. Two days ago, resident reports that he experienced left lower quadrant pain during the night, approximately 5/10. He reports that it had improved by day time, and at present is in the range of 1/2. He reports that it is worse with certain movements or when he is up and active. He wonders if it is a muscle strain. No nausea, vomiting, no abdominal cramps. Bowels regular, intakes good. Documentation indicates that bowel movements are regular, stools soft to formed. O/E resident was alert, pleasant, independently ambulatory. Color okay, slightly pale. Mucus membranes moist, resps easy and regular. Abdominal exam was benign, with variable/occasional tenderness with palpation on the left abdomen. No mass detected. Skin appears normal. Recent VS have been stable. Recent bloodwork reviewed, from September 24th neutrophil count 0.4, INR, LUC and liver enzymes okay.

Due to concerns regarding blood pressure control, BP were specifically reviewed, with systolic BP ranging between 104 and 153.

Recent fall with no significant injuries. Query abdominal wall pain, improving. Monitor, and resident is encourage to report to nursing staff immediately if pain worsens or other symptoms develop. No changes to medical management at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	TURNBULL, ANN SHIRLEY (00827)	Location :	3 East E322 1	Admission Date :	10/10/2022
Medical Record # :	9515 799 717 DY	Gender :	F	Date of Birth :	06/10/1943
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	No Known Allergies				
Diagnoses :	Unspecified dementia(F03), Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery (I25.10), Chronic obstructive pulmonary disease, unspecified(J44.9), Dysphasia and aphasia(R47.0), Osteoporosis, unspecified(M81.9), Type 2 diabetes mellitus without (mention of) complications(E11.9), Arthritis, unspecified, unspecified site(M13.99), Elevated blood-pressure reading, without diagnosis of hypertension(R03.0), Ehlers-Danlos syndrome(Q79.6), Mitral (valve) prolapse(I34.1), Hearing loss, unspecified(H91.9)				

Effective Date: 10/08/2025 19:24 Type: Family/Resident Involvement

Data : Residents daughter is requesting to hold Apixaban for 24 hrs Post surgical procedure.

Action : Writer has called MD to give orders to hold Apixaban but unable to reach her on Phone. Have endorse to oncoming nurse.

Response :

Author:Synthia Njayo Ebalá RESP - Nursing - Agency - RPN - Unit
Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : TURNER, DOROTHY (00320)

Location : 3 West W306 1

Admission 01/02/2013

Medical Record # : 1365 686 235 FG

Gender : F

Date :

Date of Birth : 02/27/1927

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Benign hypertension(I10.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Gastro-oesophageal reflux disease with oesophagitis(K21.0), Hearing loss, unspecified (H91.9), Senile cataract, unspecified(H25.9), Presence of cardiac pacemaker(Z95.0), Zoster with other complications(B02.8), Oedema, unspecified(R60.9), Other hallucinations(R44.2), Unspecified dementia(F03), Postmenopausal osteoporosis(M81.0), Arthrosis, unspecified (M19.9), Other depressive episodes(F32.8)

Effective Date: 10/08/2025 10:22 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported. No pain or problematic symptoms noted. Resident seated in chair, appeared calm and comfortable. Bloodwork reviewed, calcium and albumin levels normal.

Ongoing CDM, advanced dementia, palliative approach to care. Calcium and albumin levels okay to proceed with Denosumab when due. Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : VAN ALSTYNE, ORMOND (001085) Location : 2 East E201 1 Admission 09/10/2024
Medical Record # : 8922 713 949 EN Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 03/15/1937
Allergies : Honey bee, angiogram dye
Diagnoses : Mild cognitive disorder(F06.7), Benign hypertension(I10.0), Chronic obstructive pulmonary disease, unspecified(J44.9), Atherosclerotic heart disease of native coronary artery(I25.10), Calculus of gallbladder without cholecystitis without mention of obstruction(K80.20), Gout, unspecified, unspecified site(M10.99), Abdominal aortic aneurysm, without mention of rupture(I71.4), Pure hypercholesterolaemia(E78.0)

Effective Date: 10/07/2025 17:41 Type: Family/Resident Involvement

Data : Received the phone call for Resident daughter /POA to provide consent to FLU and COVID vaccine

Action : documented accordingly under immunization tab

Response :

Author:Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 14:52 Type: Family/Resident Involvement

Data : The writer called POA regarding the physical aggression initiated by the resident towards the co-resident B.H.

Action : The POA informed the writer that " he was taking the medication for agitation earlier but now they stop it, I am just letting you know that this is his nature and it is going to escalate him and I don't want anybody to hurt it" The writer reassured the POA and informed that will monitor the resident. POA was grateful for the information.

Response : Continue to monitor the resident with a current plan of care

Author:Janvi Nayee RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:17 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. No new issues or health concerns reported or recently documented. Activity and function as per his usual. No pain or problematic symptoms. Resident seen to be alert, seated in chair, appeared calm and comfortable. Color okay, resps easy and regular.

Ongoing CDM with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : VAN DAM, MARIA (001053)

Location : 3 West W307 1

Admission 03/14/2024

Medical Record # : 8113 278 256 AP

Gender : F

Date :

Date of Birth : 08/25/1932

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Benign hypertension(I10.0), Presence of prosthetic heart valve(Z95.2), Presence of cardiac pacemaker(Z95.00), Hyperlipidaemia, unspecified(E78.5), Malignant neoplasm cervix uteri, unspecified(C53.9), Malignant neoplasm of skin, unspecified(C44.9), Depressive episode, unspecified(F32.9), Other and unspecified intestinal obstruction(K56.6), Acquired absence of other parts of digestive tract(Z90.4), Multiple fractures of lumbar spine and pelvis, closed(S32.700), Hypothyroidism, unspecified(E03.9), Osteoporosis, unspecified(M81.9), Respiratory arrest(R09.2)

Effective Date: 10/08/2025 10:23 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork reviewed, INR 2.7, therapeutic. No changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:13 Type: Physician Note

Note Text : Assessed on medical rounds. Due to previous constipation, Senokot was increased to four tabs daily. Subsequently, resident developed loose stools, with resultant incontinence dermatitis. Senokot has been reduced to two tabs daily, to be held if stools loose. Image of incontinence dermatitis reviewed, showing significant erythema with areas of erosion. INR therapeutic at 3.0. Hb stable at 93.

Monitor bowel pattern on reduced Senokot. For incontinence dermatitis, Betaderm 1% cream bid followed by Calmoseptine bid and prn has been ordered. Affected area will be monitored on wound rounds. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	Van Der Linde, Johannes (001079)	Location :	2 East E215 1	Admission	07/23/2024
Medical Record # :	4365 401 415 LR	Gender :	M	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	09/13/1933
Allergies :	Penicillin				
Diagnoses :	Unspecified dementia(F03), Other specified disorders of prostate(N42.88), Abdominal aortic aneurysm, without mention of rupture(I71.4), Malignant neoplasm of rectum(C20)				

Effective Date: 10/13/2025 10:41 Type: Family/Resident Involvement

LATE ENTRY

Data : resident had choking on Sunday Oct/12

Action : writer called POA, Bonnie, and informed her. POA was thankful for information provided and no concern verbalized.

Response : n/a

Author:Maryam Dolatabady RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:18 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Resident noted to have a bruise to his left hand, uncertain etiology, no new health concerns reported or recently documented. No pain or problematic symptoms. Resident seen to be seated in wheelchair, alert, appears calm and comfortable. Color okay, slightly pale. Resps easy and regular.

Ongoing palliative approach to care with no changes at this time.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : VANIN, LOUIS (00801) Location : 3 East E325 1 Admission Date : 10/06/2024
Medical Record # : 4023 815 238 LL Gender : M Date of Birth : 08/09/1963
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Sunflower Seed, Ragweed
Diagnoses : Other specified injuries of head(S09.8), Other specified arthritis, multiple sites(M13.80), Epilepsy, unspecified, not stated as intractable(G40.90), Visual hallucinations(R44.1), Blindness, monocular(H54.4), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Presence of cerebrospinal fluid drainage device(Z98.2), Other specified intervertebral disc degeneration(M51.3), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disorder(F06.7), Pneumonia, unspecified(J18.9), Dysphasia and aphasia(R47.0), Sepsis due to Escherichia coli [E.coli](A41.50)

Effective Date: 10/14/2025 09:37 Type: Family/Resident Involvement

Data : staff called writer that poa mother is on face time and wanted to talk to you.

Action : Writer went to res room. Resident was in chair and personal caregiver was there too. POA mother was call mentioned that someone put it the paper on the camera of the tablet. Personal care giver showed that there was paper on the camera when she came in tothe room.

Response : Writer reassured that will pass it on psw staff to make sure that the camera is not covered with anything. (Draft)

Author:Roshni Chaudhari RESP - Nursing - RN

Signature: _____

Effective Date: 10/08/2025 10:13 Type: Physician Note

LATE ENTRY

Note Text : Bloodwork reviewed, CBC, LUC, calcium, magnesium, phosphate, TSH and CRP unremarkable.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 13:42 Type: Family/Resident Involvement

Data : Writer called POA to give an update about the resident oral hygiene

Action : POA brought resident new proxabrush, as per POA resident teeth has to be flossed with a proxabrush after brushing teeth following dinner. Input on care plan. Inservice record in progress.

Response : No other concern noted, plan of care ongoing

Author:Joebelyn Cureg RESP - Nursing - Resident Care Manager [e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:07 Type: Physician Note

Note Text : Concerns expressed by resident's mother that resident seems more drowsy at times when she expects him to be awake. She wonders if his sleep is disturbed, for example by people coming in to his room at times when she expects he would be sleeping. She is also concern about his nutrition(on GT tube feeds as per RD recommendations), and wonders if nutrition is contributing to his drowsiness. No other specific symptoms have been noted. Recent weight

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : VANIN, LOUIS (00801)

Location : 3 East E325 1

Admission 10/06/2024

Medical Record # : 4023 815 238 LL

Gender : M

Date :

Date of Birth : 08/09/1963

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Sunflower Seed, Ragweed

Diagnoses : Other specified injuries of head(S09.8), Other specified arthritis, multiple sites(M13.80), Epilepsy, unspecified, not stated as intractable(G40.90), Visual hallucinations(R44.1), Blindness, monocular(H54.4), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Presence of cerebrospinal fluid drainage device(Z98.2), Other specified intervertebral disc degeneration(M51.3), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disorder(F06.7), Pneumonia, unspecified(J18.9), Dysphasia and aphasia(R47.0), Sepsis due to Escherichia coli [E.coli](A41.50)

and VS have been stable. Due to voice concerns, I have requested RD review regarding resident's nutrition and G-tube feeds and bloodwork has been ordered regarding nutrition/fatigue. Follow.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : WALKER, GWEN-ANNE (00970) Location : 3 West W303 1 Admission : 10/06/2022
Medical Record # : 4165 847 890 DT Gender : F Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 06/18/1937
Allergies : Codeine, Morphine
Diagnoses : Parkinson's disease(G20), Fibromyalgia(M79.7), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Fracture of ilium, closed(S32.300), Other and unspecified irritable bowel syndrome(K58.8), Dementia in other specified diseases classified elsewhere(F02.8), Dementia in Parkinson's disease(F02.3), Urinary tract infection, site not specified(N39.0), Delirium, unspecified (F05.9), Orthostatic hypotension(I95.1), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Irritable bowel syndrome(K58)

Effective Date: 10/14/2025 14:57 Type: Family/Resident Involvement

Data : POA Sarah came to see writer and request I see Gwens urine in the commode.

Action : Urine was clear and yellow but some white stringy sediment noted in commode chair. POA believed there to be a foul odour but writer cannot confirm same.

Response : Resident is being monitored for UTI symptoms xmany months. None noted today and pain denied but POA insisted resident was in pain and requested to go to the bathroom. Sat on commode for over 45min before voiding.

Same to be noted for MD rounds tomorrow. Writer does not have acute concerns for UTI at this time.

Author:Maloree Hughes RESP - Nursing - RN [e-SIGNED]

Signature: _____

Effective Date: 10/14/2025 05:47 Type: Family/Resident Involvement

Data : No vaginal discharge observed. No redness, swelling, odor, or signs of irritation noted. Resident denies discomfort.

Action :

Response : Plan of care ongoing

Author:Obianuju Nebo RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/13/2025 15:02 Type: Family/Resident Involvement

Data : POA mentioned that she noticed a white discharge in the resident's brief with odour. Also, POA voiced that the res is having a new allergy to chocolate. While the writer was in the room, she said, "Mom, what are you gonna tell to - (she mentioned the writer's name) about your new allergy?". Writer didn't answer but the POA mentioned that the res is having an allergy with chocolate.

Action : -Res appears calm and relaxed. No verbal and nonverbal cues of pain observed.

-No s/s of redness/swelling. No itchiness observed.

Response : Staff were informed of not giving any chocolate-containing food and to push more fluids.

Author:Bernadette Cabarlo RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : WALKER, GWEN-ANNE (00970)

Location : 3 West W303 1

Admission 10/06/2022

Medical Record # : 4165 847 890 DT

Gender : F

Date :

Date of Birth : 06/18/1937

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Codeine, Morphine

Diagnoses : Parkinson's disease(G20), Fibromyalgia(M79.7), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Fracture of ilium, closed(S32.300), Other and unspecified irritable bowel syndrome(K58.8), Dementia in other specified diseases classified elsewhere(F02.8), Dementia in Parkinson's disease(F02.3), Urinary tract infection, site not specified(N39.0), Delirium, unspecified (F05.9), Orthostatic hypotension(I95.1), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Irritable bowel syndrome(K58)

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : WALSH, ELSIE (00972) Location : 3 East E308 1 Admission Date : 10/18/2022

Medical Record # : 5325 760 253 PG

Gender : F

Date of Birth : 11/06/1931

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Occlusion and stenosis of carotid artery(I65.2), Presence of cardiac pacemaker(Z95.00), Abdominal aortic aneurysm, ruptured(I71.3), Cataract, unspecified(H26.9), Stroke, not specified as haemorrhage or infarction(I64), Arthritis, unspecified, unspecified site(M13.99), Carcinoma in situ of bronchus and lung(D02.2), Benign hypertension(I10.0), Aneurysmal bone cyst, lower leg(M85.56), Personal history of COVID-19(U07.5), Peripheral vascular disease, unspecified(I73.9), Hypothyroidism, unspecified(E03.9), Transient cerebral ischaemic attack, unspecified(G45.9), Sensorineural hearing loss, unspecified(H90.5), Fracture of anatomical neck of humerus, closed(S42.210), Fracture of ankle NOS, closed(S82.890), Zoster without complication(B02.9), Calculus of kidney(N20.0), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Other hypotension(I95.8)

Effective Date: 10/08/2025 10:14 Type: Physician Note

LATE ENTRY

Note Text : Seen on medical rounds. On October 5th, at 5 a.m. resident noted to have SOB and cough. O2 sats noted to be in the range of 89 to 90% at that time, and supplemental oxygen was provided. She was monitored, symptoms resolved, with no further respiratory symptoms noted. She does have a history of occasional respiratory symptoms, often at night and has known history of non small cell cancer which likely contributes to these symptoms. Resident reports feeling well today, denies any ongoing respiratory concerns. O/E she appeared alert, pleasant and interactive. Color normal, no pallor or cyanosis. Mucus membranes moist. Resps easy and regular with no cough observed. Good air entry bilaterally.

Transient respiratory symptoms, possibly related to chronic lung disease/NSCLC. Ongoing CDM with no changes at this time. Follow.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Effective Date: 10/01/2025 10:08 Type: Physician Note

Note Text : No new issues or health concerns reported on medical rounds today. Resident had an episode of hemorrhagic cystitis approximately one to two months ago at which point ASA was placed on hold. She received treatment with antibiotics, and there are no ongoing symptoms or hematuria. Aspirin will be resume at this time. No changes to medical management at this time. Follow.
Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name : WARD, ANN MARIE (00971)

Location : 3 East E315 1

Admission 10/17/2022

Medical Record # : 9786 399 114 EP

Gender : F

Date :

Date of Birth : 08/30/1953

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : No Known Allergies

Diagnoses : Intracerebral haemorrhage, unspecified(I61.9), Benign hypertension(I10.0), Fibromyalgia(M79.7), Bladder disorder, unspecified(N32.9), Resistance to methicillin(U82.1), Multiple sclerosis(G35), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Disorders of initiating and maintaining sleep [insomnias](G47.0), Depressive episode, unspecified(F32.9), Obesity, unspecified(E66.9), Mild cognitive disorder(F06.7), Pure motor lacunar syndrome(G46.5), Other and unspecified abnormalities of gait and mobility(R26.88), Low back pain (M54.5), Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Other specified intervertebral disc degeneration(M51.3)

Effective Date: 10/09/2025 13:16 Type: Family/Resident Involvement

Data : SDM Pearl Astoforoff gave consent for influenza and COVID-19 vaccinations.

Action :

Response :

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician
Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All
Department: All

Resident Name :	WATSON, ALAN (00874)	Location :	3 East E316 2	Admission	03/18/2021
Medical Record # :	2416 656 615 HB	Gender :	M	Date :	
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM	Date of Birth :	04/13/1950
Allergies :	No Known Allergies				
Diagnoses :	Congestive heart failure(I50.0), Type 2 diabetes mellitus with poor control, so described(E11.64), Disorders of initiating and maintaining sleep [insomnias](G47.0), Benign hypertension(I10.0), Obesity, unspecified(E66.9), Atherosclerotic heart disease of native coronary artery (I25.10)				

Effective Date: 10/05/2025 16:08 Type: Family/Resident Involvement

Data : Writer placed the phone call to resident POA to get consent for FLU and COVID-19 vaccine

Action : Informed consent received for both vaccine FLU and COVID vaccine

Response : documented accordingly

Author: Jasna Rudic RESP - Nursing - Infection Prevention and Control
Manager [e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : WELLS, SAMUEL (001127) Location : 3 East E312 1 Admission : 05/07/2025
Medical Record # : 9821 658 672 WM Gender : M Date :
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM Date of Birth : 01/07/1948
Allergies : Penicillin, CONTRAST DYE
Diagnoses : Frontal lobe dementia(G31.02), Other specified degenerative disorders of nervous system in diseases classified elsewhere(G32.8), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified injury of head(S09.9), Other specified arthritis, unspecified site (M13.89), Abnormal cardiovascular function studies (biomarkers or ECG) suggestive of non ST segment elevation myocardial infarction [NSTEMI](R94.31)

Effective Date: 10/10/2025 10:32 Type: Family/Resident Involvement

Data : to update POA regarding the behaviour incident on Oct 10 at 0400H (inappropriate behaviour initiated by Resident)

Action : Writer called POA- Jane on Oct 10 at 1034H to Give update regarding he behaviour incident on Oct 10 at 0400H (inappropriate behaviour initiated by resident towards co-resident-JB-More detailed into Risk management).

- POA raised no concern and was thankful for the update

Response : ongoing monitoring

Author:Riya Patel RESP - Nursing - RN - In charge [e-SIGNED]

Signature: _____

Effective Date: 10/10/2025 04:00 Type: Behaviour - Follow up

LATE ENTRY

Note Text : The resident is noted to be sleeping around 0415 till morning. The night staff were checking up on both residents; both sleeping till morning.

Author:Prancy Patel RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/10/2025 03:59 Type: Behaviour - Responsive Behaviour

LATE ENTRY

Type of Behaviour : Inappropriate behaviour

Antecedent/Triggers : dementia, ongoing wandering behavior

Describe the behaviour : Around 0400 hr, co-resident J.B. told the PSW that there is someone lying in my bed. PSW found S.W. in co-resident J.B.'s room without a shirt which was lying on the floor.

Disruptiveness (Data)/Consequences to the behaviour : disrupted co-resident J.B.'s privacy.

Interventions (review/update care plan) (Action) : did not voice out any concerns. As per J.B. statement S.W. did not do anything except removing the shirt and lying down in the co-resident J.B.'s bed.

Change in medication : no

What are the risks and causes : risks: could make co-resident uncomfortable and invaded co-resident personal space
causes: dementia

Outcome(s)(Result) : Resident S.W. was settled on his own bed around 0415

Substitute Decision Maker notified (if not, explain) : to be notified by morning nurse

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : WELLS, SAMUEL (001127)

Location : 3 East E312 1

Admission Date : 05/07/2025

Medical Record # : 9821 658 672 WM

Gender : M

Date of Birth : 01/07/1948

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Penicillin, CONTRAST DYE

Diagnoses : Frontal lobe dementia(G31.02), Other specified degenerative disorders of nervous system in diseases classified elsewhere(G32.8), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified injury of head(S09.9), Other specified arthritis, unspecified site (M13.89), Abnormal cardiovascular function studies (biomarkers or ECG) suggestive of non ST segment elevation myocardial infarction [NSTEMI](R94.31)

Author:Prancy Patel RESP - Nursing - RN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/08/2025 10:15 Type: Physician Note

LATE ENTRY

Note Text : Resident seen on medical rounds. POA has requested discontinuation of Lactulose which resident has been receiving 15 ml daily, over the past month. Bowel pattern reviewed, generally regular, with stools documented ranging from soft to hard. No other new health concerns on rounds today. Activity and function as per his usual, and he continues to be independently ambulatory.

As per POA request, Lactulose will be discontinued. I have requested RD referral to consider addition of fibre/prunes to promote bowel regularity. Bowel pattern will be reassessed in a couple of weeks time or sooner if concern.

Dictated by Dr. Lee Andersen dictated but not read

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : WILSON, IRENE (001128) Location : 2 West W209 1 Admission Date : 05/08/2025
Medical Record # : 9173 904 294 RL Gender : F Date of Birth : 01/17/1948
Physician : Andersen, Lee Pharmacy : Medisystem Barrie IMM
Allergies : Etoposide, Cat Scan dye
Diagnoses : Anxiety disorder, unspecified(F41.9), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm endocrine gland unspecified(C75.9), Postprocedural hypoinsulinaemia(E89.1), Acquired absence of other organs(Z90.8), Hyperlipidaemia, unspecified(E78.5), Acquired absence of left breast(Z90.11), Acquired absence of right breast(Z90.10), Secondary hypertension, benign or unspecified(I15.90), Exposure to tobacco smoke(Z58.7)

Effective Date: 10/11/2025 14:27 Type: Behaviour - Responsive Behaviour

Type of Behaviour :
Antecedent/Triggers :
Describe the behaviour :
Disruptiveness (Data)/Consequences to the behaviour :
Interventions (review/update care plan) (Action) :
Change in medication :
What are the risks and causes :
Outcome(s)(Result) :
Substitute Decision Maker notified (if not, explain) : POA aware , in charge reported

Author:Amanpreet Tung RESP - Nursing - RPN - Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/11/2025 06:52 Type: Behaviour - Responsive Behaviour

Type of Behaviour : Physical Agression
Antecedent/Triggers : The resident became agitated after being asked not to enter a co-resident's room.
Describe the behaviour : The resident exhibited physical aggression towards staff. According to staff reports, the resident hold her at her neck c, in addition to yelling, screaming, and hitting. Co-resident W.C. reported to the writer that, when the writer came to administer medication, the resident (I.W.) entered her room, followed by staff. During this interaction, the resident pulled down the co-resident's call bell, and when staff attempted to retrieve it, the resident (I.W.) grabbed her by the neck. Staff also reported thatwhen they asked the resident to refrain from entering other residents' rooms?since they were sleeping?resident I.W. became agitated
Disruptiveness (Data)/Consequences to the behaviour : Disrupting co-resident sleep, trying to harm the staff
Interventions (review/update care plan) (Action) :
Change in medication : No
What are the risks and causes : The resident's behavior posed a risk of harm to herself, co-residents, and staff.
Outcome(s)(Result) : The resident eventually settled in bed and fell asleep.
Substitute Decision Maker notified (if not, explain) : Day Staff to inform the POA

Author:Obianuju Nebo RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/09/2025 14:32 Type: Family/Resident Involvement

Data : POA asked writer if he could start providing residents with all vitamins. Pharmacy was called and notified as well as written in her chart

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name : WILSON, IRENE (001128)

Location : 2 West W209 1

Admission 05/08/2025

Medical Record # : 9173 904 294 RL

Gender : F

Date :

Date of Birth : 01/17/1948

Physician : Andersen, Lee

Pharmacy : Medisystem Barrie IMM

Allergies : Etoposide, Cat Scan dye

Diagnoses : Anxiety disorder, unspecified(F41.9), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm endocrine gland unspecified(C75.9), Postprocedural hypoinsulinaemia(E89.1), Acquired absence of other organs(Z90.8), Hyperlipidaemia, unspecified(E78.5), Acquired absence of left breast(Z90.11), Acquired absence of right breast(Z90.10), Secondary hypertension, benign or unspecified(I15.90), Exposure to tobacco smoke(Z58.7)

on the digipaper.

Action : It will be starting next week when the new medication strips come in.

Response :

Author:Timothy Simpson RESP - Nursing - RPN [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 23:13 Type: Behaviour - Responsive Behaviour

Type of Behaviour : Physical aggression initiated

Antecedent/Triggers : Unknown

Describe the behaviour : Resident pushed a co-resident (J.B.) because she tried to redirect res to stop entering her room and allow her sleep

Disruptiveness (Data)/Consequences to the behaviour : Resident pushed J.B. who became very upset, agitated and started having difficulty breathing

Interventions (review/update care plan) (Action) : PSW intervened by removing I.W. from the room, notifying the Nurse Manager of the incident, and a 1:1 staff monitoring was initiated to watch res for the night.

Change in medication : N/A

What are the risks and causes : Resident is getting other residents upset by encroaching in their personal spaces. Other residents and their families are complaining of I.W.'s behaviours because she continued to obstruct their sleep and quiet times.

Outcome(s)(Result) : Ongoing monitoring with 1:1 staff in place.

Substitute Decision Maker notified (if not, explain) : To be notified.

Author:Racheal Joseph-Nwala Comfy Care RESP - Nursing - Agency - RPN
- Unit Supervisor [e-SIGNED]

Signature: _____

Effective Date: 10/06/2025 10:17 Type: Physician Note

LATE ENTRY

Note Text : Assessed on medical rounds. Olanzapine recently increased to 7.5 mg po daily. Since then, no problematic/high risk BPSD have been noted. Today resident as per her usual, alert, ambulatory, confused as per usual. Pleasant, no agitation or irritability noted. Color okay, resps easy and regular.

Continue to monitor BPSD, which seem to be improved on increase Olanzapine 7.5 mg po daily. Continue with palliative approach to care.

Author:Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____

Facility #: 54716

MILL CREEK CARE CENTRE

Facility Code:

Date: Oct 15, 2025

Progress Notes *NEW*

User: Ayaan Esmail

Time: 15:57:22 ET

Primary Physician: All Progress Note Type: Behaviour - Follow up, Behaviour - Responsive Behaviour, Family/Resident Involvement, Physician Note Effective Date Range: 10/01/2025 to 10/15/2025 Effective Time Range: All Created Date Range: All Created Time Range: All Author: All Department: All

Resident Name :	WILSON, IRENE (001128)	Location :	2 West W209 1	Admission Date :	05/08/2025
Medical Record # :	9173 904 294 RL	Gender :	F	Date of Birth :	01/17/1948
Physician :	Andersen, Lee	Pharmacy :	Medisystem Barrie IMM		
Allergies :	Etoposide, Cat Scan dye				
Diagnoses :	Anxiety disorder, unspecified(F41.9), Alzheimer's disease, unspecified(G30.9), Malignant neoplasm endocrine gland unspecified(C75.9), Postprocedural hypoinsulinaemia(E89.1), Acquired absence of other organs(Z90.8), Hyperlipidaemia, unspecified(E78.5), Acquired absence of left breast(Z90.11), Acquired absence of right breast(Z90.10), Secondary hypertension, benign or unspecified(I15.90), Exposure to tobacco smoke(Z58.7)				

Effective Date: 10/01/2025 10:14 Type: Physician Note

Note Text : Family meeting held today with resident's POA/husband David. Reason for meeting to discuss resident's health condition, goals of care, recent test results. David indicates that he notices changes in resident, such as less smiling, less interactive with others, often does not recognize husband. Due to BPSD with restlessness, exit seeking, anxiety/agitation at times David continues to visit frequently in an effort to assist with her behavior. He expressed concern that she may end up physically restrained. Education provided, physical restraints will not be used in the home. Goals are to minimize behaviours of risk and to minimize symptoms that have a negative impact for quality of life for the resident. Recent consultation with Dr. Daniel reviewed, with changes from Risperidone to Olanzapine. David acknowledges some improvement seems to be noted but he is concerned that resident had agitation with aggression over the weekend. Subsequently, Olanzapine was increased to 7.5 mg daily and Dr. Daniel indicated possible titration up to 10 mg po daily. Education provided about dementia, BPSD, dynamic symptoms, need for adjustments to medications, etc.

After much reflection, discussion with resident's sister and discussion with his spiritual counsellor, as well as the care team at Sunnybrook Hospital, David has decided to cancel any further follow-up with Sunnybrook (regarding malignancy). We discussed dementia as a terminal illness as well as cancer as a terminal illness, and the likelihood that resident would not tolerate many appointments, investigations, treatment etc, and she may not gain any quality of life. Recent U/S shows increase in size of liver lesion, as well as possible increase in size of pancreatic head. David acknowledges that this may represent progression of metastatic disease. Wishes for a palliative approach to care with no further follow-up or workup by Sunnybrook are confirmed. Goals of care at this point will be for quality of life, comfort and symptom management. Meeting took place between 1125 and 1150. Dictated by Dr. Lee Andersen dictated but not read

Author: Transcriptionist RESP - Medical Services - Medical Transcriptionist
[e-SIGNED]

Signature: _____