an. 24. 2 <u>020</u>	2:40PM Created with a trial version of Syncfusion Essential-	<u> </u>	<u>8201_</u>	P.	1/7	!
----------------------	--	----------	--------------	----	-----	---

## CHEMOTHERAPY ORDERS

Cynn Killiam 5/20156 Patient Label

TO BE COMPLETED BY PHYSICIAN:	Patient Name:	( 1/3 m	DOB: a=1	20156	
D-18/	Date of Administrati			20136	
Diagnosis: NSCLC	TNM Stage:		<u> 1120 20</u>		
Protocol / Regimen - :	11111	Aí	lergies; 🔃	NKDA	
Carbo Ttaxol	Cycle 1 of 6	-7			
w ( RT	Day 1				
Venous Access: Peripheral Central				l	
Height Weight Actual		etic Level			
ft (6) in 90, kg D Adjusted	Area (m²)	Minimal Moderate			
① Dosing	1.44 10	High		}	,
Lab Orders: CBC/DIFF X BMP X I	Viagnesium UA	TO be do	2000)CE	zitc.	•
Hold Parameters:		10 10 100			
ANC less than: WBC less than: PLT less	than: (CO Hgb/Hctle	ss than:	Cr greater t	han:	
Non-chemotherapy orders:		R	<u>h initials / N</u>	lurse initials	
IV Fluids: NS @ KVO (20 mL/hr)			}		
premeds: Dexamel	asone (2 mg=	τV			
, ——	CZSmg IN				
Pepcia	20 Ma IV				
264:5840	Le ma IV				
	3-20		•		
				<del></del>	
		<del></del>			
Solution, volume and infusion rate are per manufactures					
agents will be rounded down to nearest vial size if within	n 5% of calculated dose.	Biological agent	ts will be rour	nded down to	
the nearest vial size if within 10% of calculated dos		emotnerapy <u>in se</u> ose	equence_nsted	g below.	
Dose per Dose Chemotherapy Unit Reduction*	Calculated Dispe	ensed	Infusion	RPh/	
(m² ka AUC) (mg/m)	Dose he con	ding to Route npleted	Rate	Nurse initials	
mg/kg, AUC	by F	RPh)			
Parlity a Usmalmz	(25 100 0)	- I=U	1 1		
Paclitanel. 45mg/m² Carpopidin AUCZ	65 mg			<del>-  </del>	
Carbopladin AUCZ	185mg	₽V			
•	٦				
	· -	<u>-</u>	<del> </del>		
		<u> </u>			
*if using a dose reduction, please provide rationale: MD Name (Print) (Londagonta MD Signat	, W, L			, , , , , , , , , , , , , , , , , , ,	
MD Name (Print) - (Co~აბც გს ააჭა, - MD Signat	ture V	Date/1	ime <u>112</u> 4	(1 <u>2020</u> 8,73)	Dan
RN Name (Print) RN Signal RPh Name (Print) RPh Signal	ture		Time Time	•	

Crystal Run Healthcare Physicians LLP

Killan, Lynn
PO Box 704
Liberty, NY, 127540704
Person #: 397245
Sex: F
DOB: 05/20/1956

Order Date: 01/22/2020

Ordering: Kondagunta MD, Gnanamba Varuni

Location: Rock Hill

Tests Ordered: CBCA XT (CBCA XT), CBC With Auto Diff (CBCA), Complete Metabolic Profile (CMP) (CMP)

## CMP (Collection Date: 01/22/2020 16:44, Status: Final)

Component	Result	<u>Units</u>	Fi a g	Range	Comment
Albumin ALP ALT AST BUN Calcium Chloride CO2 Creatinine eGFR	3.6 88 44 30 7 8.9 101 26 0.4 160.9	g/dL U/L U/L U/L mg/dL mg/dL mmol/L mmol/L mg/dL mL/min/1.73m2	L	3.5-5.0 28-109 3-60 4-60 7-17 8.5-10.4 98-109 22-30 0.5-1.1 >=60.0	eGFR NON AFRICAN AMERICAN
eGFRAA	195.0	ML/MIN/1.73m2		>=60.0	eGFR AFRICAN AMERICAN
Glucose Potassium Sodium Total Bili Total Protein	114 3.8 134 0.5 6.4	mmol/L	L	65-105 3.5-5.2 136- 145 <1.3 6.2-8.2	

## CBCA XT (Collection Date: 01/22/2020 16:44, Status: Final)

Component	Result	Units Flag	Range Comment
XT Baso#	0.02	K/uL	0.00-0.20
XT Baso%	0.3	%	0.0-1.5
XT Eo#	0.13	K/uL	0.00-1.10
XT E0%	2.1	%	1.0-10.0
XT HCT	33.2	% L	35.0-47.0
XT HGB	10.9	g/dL L	<b>11.7-15</b> .7
XT IG#	0.01	K/uL	<=0,10
XT IG%	0.2	%	<=1.0
XT Lymph#	0.87	K/uL	0.60-4.00

Patient: Killian, Lynn, DOB: 05/20/1956

Page 2 of 2

XT Lymph%	14.0	%	L	15.0-45.0
XT MCH	33.2	pg	Н	26.0-33.0
XT MCHC	32.8	g/dL		32.0-36.0
XT MCV	101.2	fL	Н	80.0-97.0
XT Mono#	0.9	K/uL		0.1-1.2
XT Mono%	13.7	%	Н	1.5-9.0
XT MPV	8.7	fL		7.0-11.0
XT Neut#	4.3	K/uL		1.5-8.1
XT Neut%	69.7	%		41.0-74.0
XT PLT	343	K/uL		140-440
XT RBC	3.28	m/uL	L	3.80-5.20
XT RDW-SD	49.9	fL		
XT WBC	6.2	K/uL		3.5-11.0



155 Crystal Run Road Middletown, NY 10941

-845-703-6999 -www.crystairunhealthcare.com

Patient:

Lynn Killian

Hara da Hara

Date of Birth:

05/20/1956

Date:

01/22/2020 5:00 PM

Encounter Type:

Office Visit

This 63 year old female presents for NSCLC.

History of Present Illness:

NSCLC

Pt has been fatigued and overall has improved though with better appetite; some weight gain and improved breathing status and no significant pain

had an episode where she felt her HR up to 160 but no SOB at that time daughter reports she has a monitor of this

PROBLEM LIST: Problem List reviewed.

The state of the s	
Problem Description Onset Date Chronic Clinical Status Notes	
Malignant neoplasm of 12/16/2019 N	
unspecified part of	
unspecified bronchus	
or lung	
Cachexia 12/16/2019 N	
Medical marijuana use 12/16/2019 N	

Allergies:

Ingredient	Reaction (Severity)	 Medication	Comment	
l No Mariana	'. '	 Name		!

NO KNOWN ALLERGIES

Review of Systems

The state of byote,	<b>'</b>		
System	Neg/Pos	Details	. ī
Constitutional	Positive	Fatigue, Weight loss.	
Constitutional	Negative	Fever and Night sweats.	. ;
ENMT	Negative	Nasal drainage.	

Killian, Lynn 000000157449 05/20/1956 01/22/2020 05:00 PM 1/4

Eyes	Negative	Vision changes.
Respiratory	Positive	Dyspnea.
Respiratory	Negative	Cough,
Cardio	Negative	Claudication and Irregular heartbeat/palpitations.
GI	Negative	Abdominal pain, Constipation, Decreased appetite, Diarrhea and Vomiting.
GU	Negative	Dysuria and Hematuria.
Endocrine	Negative	Cold intolerance and Heat intolerance.
Neuro	Positive	Extremity weakness, Gait disturbance.
Neuro	Negative	Headache,
Integumentary	Negative	Pruritus and Rash.
MS ,	Negative	Back pain.
Hema/Lymph	Negative	Easy bleeding and Easy bruising.
Allergic/Immuno	Negative	Environmental allergies and Food allergies.

	1.57	 :,	
Medications (activ			

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere	ı
· · · · · · · · · · · · · · · · · · ·	inhale 1 puff by inhalation	//			Y	
	route 4 times every day;	"			•	
solution for inhalation	may take additional puffs as					
	needed not to exceed 6 puffs in 24hrs					
Symbicort 160 mcg-4.5	inhale 2 puff by inhalation	//			Υ	:
mcg/actuation HFA	route 2 times every day in					
aerosol inhaler	the morning and evening					
Spiriva Respimat 2.5	inhale 2 puff by inhalation	//		•	Υ	
mcg/actuation solution	route every day at the same					
for inhalation	time each day					
Atrovent HFA 17	inhale 2 puff by inhalation	//			Υ	
mcg/actuation aerosol inhaler	route 4 times every day					
Medical Marijuana	Dispense as per pharmacist	12/16/2019			N .	•
MISCELL	at medical marijuana					
	dispensary					
doxycycline hyclate 100	take 1 tablet by oral route 2	12/27/2019			N	
mg tablet	times every day x 10 days					

Physical Exam:	.,	:	e projektiva	
----------------	----	---	--------------	--

Exam	Findings	Details
Constitutional	*	Overall appearance - chronically ill-appearing,
Eyes	Normal	Conjunctiva - Right: Normal, Left: Normal.
Ears	Normal	Inspection - Right: Normal, Left: Normal.
Nose/Mouth/Throat	Normal	External nose - Normal. Lips/teeth/gums - Normal. Oropharynx - Normal.
Neck Exam	Normal	Inspection - Normal.
Lymph Detaîl	Normal	No cervical or supraclavicular adenopathy,
Respiratory	Normal	Auscultation - Normal, Effort - Normal,
Cardiovascular	Normal	Regular rate and rhythm. No murmurs, gallops, or rubs.
Abdomen	Normal	No abdominal tenderness.
Skin	Normal	Inspection - Normal,
Musculoskeletal	Normal.	Visual overview of all four extremities is normal.

Killian, Lynn 000000157449 05/20/1956 01/22/2020 05:00 PM 2/4

Extremity Psychlatric Normal

...No. edema.

Orientation - Oriented to time, place, person & situation. Appropriate mood and affect. Normal insight. Normal judgment.

The patient's functional status score is at 1 and is restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature, e.g., light house work, office work

Assessment/Plan

	sament Lian	
#	Detail Type	Description
1,	Assessment	Non-small cell lung cancer, unspecified laterality (C34.90).
	Impression	Pt is a 63 yo former smoker with now new onset increased SOB, DOE; weight loss; found to have a large right lung mass 5.9 cm with bulky hilar, mediastinal, subcarinal LAN and secondary mass in right lung. Pt has had a bronchoscopy + non small cell lung cancer,
•	- ',	poorly differentiated adenocarcinoma.
· •.		Pt has completed 12 fractions of urgent radiation to the chest with significant improvement in respiratory status.
	*	PET/CT with large known mass; mediastinal/hilar LAN; no distant disease MRI Brain was negative for malignancy
		Foundation One testing is pending
٠.,.	Z	
,	in the second se	Plan weekly chemotherapy with carboplatin AUC2 with paclitaxel 45-50 mg/m2 with radiation to complete definitive course of tx  Thereafter re-image and if no POD then maintenance durvalumab
	• • • •	Plan education tomorrow
		I have spoken with Dr Gonzales who will need to see her asap
٠.		start thereafter at ORMC
	4.	will need cardiology eval for tachycardia and HR she states was up at 160's
, =	· :	Due to unforeseen due to her insurance etc delays with her work up, will need expedited
,		initiation of tx next week
		Ov pre chemo appt with me.

Medications (added, continued, or stopped today):

Started	Medication ***	Directions	*** ·	Instruction	Stopped
	Atrovent HFA 17	inhale 2 puff by i	inhalation		
		, route 4 times eve	ery day		
	aerosol inhaler				
	Combivent	inhale 1 puff by i	inhalation		
	Respimat 20	route 4 times eve	ery day ; may		
	mcg-100	take additional p	uffs as needed	l	
	_mcg/actuation	not to exceed 6 p	puffs in 24hrs		
	solution for	Market grand			
	inhalation	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
12/27/2019	doxycycline hyclate	take 1 tablet by o	oral route 2		
	100 mg tablet	times every day >			
L2/16/2019	Medical Marijuana				
Cillian, Lynn	000000157449 05/20/1	.956 01/22/2020 (	05:00 PM 3/4		

MISCELL medical marijuana dispensary Spiriva Respirat inhale 2 puff by inhalation 2.5 mcg/actuation route every day at the same solution for time each day inhalation

Symbicort 160 inhale 2 puff by inhalation mcg-4.5 route 2 times every day in the mcg/actuation HFA morning and evening

aerosol inhaler

Provider:

Kondagunta MD, Gnanamba Varuni 01/22/2020 10:54 PM Document generated by: Gnanamba Kondagunta MD 01/22/2020 10:53 PM

Crystal Run Healthcare, LLP

Electronically signed by Gnanamba V. Kondagunta MD on 01/22/2020 11:40 PM