

Medication Administration Record
10/28/2023 11:00 - 10/30/2023 12:37

Name: John Doe

Name: John Doe Sex: M
 Location: [REDACTED]
 Physician: [REDACTED]

[REDACTED]
 Admit Date: 10/28/2023
 DOB: 12/12/9999

D Blood Glucose Monitoring NOW	Start: 11:42 10/28 Stop: 12:07 10/28	Admin	Sched	
		10/28 12:07	11:42	Not Administered/Nc agarin
				Other - See Notes n/a
D Care Profile and Crisis Plan EVERY 4 HOURS - UNTIL COMPLETE	Start: 11:42 10/28 Stop: 12:04 10/28	Admin	Sched	
		10/28 12:04	11:42	Complete agarin
D CBC W/O DIFFERENTIAL EVERY MORNING UNTIL COMPLETE	Start: 10:00 10/29 Stop: 0:47 10/30	Admin	Sched	
		10/29 16:01	10:00	Not Administered/Nc kslupek
				Other - See Notes
D COMPREHENSIVE METABOLIC EVERY MORNING UNTIL COMPLETE	Start: 10:00 10/29 Stop: 0:47 10/30	Admin	Sched	
		10/29 16:01	10:00	Not Administered/Nc kslupek
				Other - See Notes
D Consent and Declimation of Seasonal Influenza Vaccine EVERY 12 HOURS UNTIL COMPLETE	Start: 11:42 10/28 Stop: 12:01 10/28	Admin	Sched	
		10/28 12:01	11:42	Complete agarin
A COWS Scale Every 4 hours - COWS If initial score >10 assess vitals per protocol Verify with MD the initiation of the medical detox protocol.	Start: 17:00 10/28 Stop: 23:59 12/31	Admin	Sched	
		10/28 17:03	17:00	Complete kslupek
		10/28 21:10	21:00	Complete mbree
		10/29 9:56	9:00	Complete kslupek
		10/29 12:56	13:00	Complete kslupek
		10/29 16:02	17:00	Complete kslupek
		10/29 21:14	21:00	Complete sjohn
		10/30 8:15	9:00	Complete rsoriano
A Daily Nursing Progress Note Twice a Day Assessments	Start: 16:00 10/28 Stop: 23:59 12/31	Admin	Sched	
		10/28 12:07	16:00	Not Administered/Nc agarin
				Other - See Notes see admission assessment
		10/29 1:32	4:00	Complete mbree
		10/29 14:55	16:00	Complete kslupek
		10/29 23:22	4:00	Complete sjohn
		10/30 10:30	16:00	Complete jlundang
A Environment Patient Safety Checklist Twice a Day Assessments	Start: 16:00 10/28 Stop: 23:59 12/31	Admin	Sched	
		10/28 12:07	16:00	Complete agarin
		10/28 21:08	4:00	Complete mbree
		10/29 14:55	16:00	Complete kslupek
		10/29 23:18	4:00	Complete sjohn
D Initial Nursing Assessment EVERY 4 HOURS - UNTIL COMPLETE	Start: 11:42 10/28 Stop: 12:37 10/28	Admin	Sched	
		10/28 12:36	11:42	Complete agarin
D Initial Treatment Plan EVERY 4 HOURS - UNTIL COMPLETE	Start: 11:42 10/28 Stop: 12:10 10/28	Admin	Sched	
		10/28 12:10	11:42	Complete agarin
D Initiate Treatment Plan for Patient EVERY 4 HOURS - UNTIL COMPLETE	Start: 11:42 10/28 Stop: 13:52 10/28	Admin	Sched	
		10/28 13:52	11:42	Complete agarin
D LIPID PANEL W/HDL EVERY MORNING UNTIL COMPLETE	Start: 10:00 10/29 Stop: 10:19 10/30	Admin	Sched	
		10/29 16:01	10:00	Not Administered/Nc kslupek
				Other - See Notes
		10/30 10:19	10:00	Complete rsoriano
D Patient Unit Orientation Checklist EVERY 4 HOURS - UNTIL COMPLETE	Start: 11:42 10/28 Stop: 12:02 10/28	Admin	Sched	
		10/28 12:02	11:42	Complete agarin
D Safety and Health Evaluation One time for ancillary orders	Start: 11:42 10/28 Stop: 12:09 10/28	Admin	Sched	
		10/28 12:09	11:42	Complete agarin
A buprenorphine TABLET 2 mg (*Subutex) Sublingual TWICE DAILY 0900 & 1700 for Maintenance	Start: 10:00 10/30 Stop: 23:59 12/31	Admin	Sched	
		10/30 10:12	10:00	Complete rsoriano

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D	buprenorphine TABLET	8 mg (*Subutex) Sublingual DAILY AT 1700 (1 Day) for Maintenance	Start: 17:00 10/28 Stop: 23:59 10/28	Admin Sched 10/28 17:32 17:00 Complete	kslupek
D	buprenorphine TABLET	8 mg (*Subutex) Sublingual NOW for Maintenance	Start: 12:20 10/29 Stop: 12:56 10/29	Admin Sched 10/29 12:56 12:20 Complete	kslupek
A	gabapentin TABLET	1,200 mg (Neurontin) Oral THREE TIMES DAILY 0900 1300 2100 To give 1,200 mg use 2 of 600 mg for Anxiety	Start: 17:00 10/28 Stop: 23:59 12/31	Admin Sched 10/28 17:32 17:00 Complete 10/28 20:44 21:00 Complete 10/29 9:21 9:00 Complete 10/29 12:55 13:00 Complete 10/29 20:36 21:00 Complete 10/30 8:14 9:00 Complete	kslupek mehreo kslupek kslupek sjohn rsoriano
A	mirtazapine TABLET	15 mg (Remeron) Oral AT BEDTIME for Sleep	Start: 21:00 10/28 Stop: 23:59 12/31	Admin Sched 10/28 20:44 21:00 Complete 10/29 20:37 21:00 Complete	mehreo sjohn
A	multivitamin TABLET	1 tab (Daily Multiple Vitamins) Oral ONCE A DAY for Nutritional Support	Start: 9:00 10/29 Stop: 23:59 12/31	Admin Sched 10/29 9:21 9:00 Complete 10/30 8:14 9:00 Complete	kslupek rsoriano
A	omeprazole DR CAP	20 mg (Prilosec) Oral ONCE A DAY for GERD	Start: 9:00 10/29 Stop: 23:59 12/31	Admin Sched 10/29 9:20 9:00 Complete 10/30 8:14 9:00 Complete	kslupek rsoriano
A	prazosin CAPSULE	1 mg (Minipress) Oral AT BEDTIME for nightmares	Start: 21:00 10/28 Stop: 23:59 12/31	Admin Sched 10/28 20:45 21:00 Complete 10/29 20:37 21:00 Complete	mehreo sjohn
D	quetiapine TABLET	300 mg (Seroquel) Oral AT BEDTIME for Mood	Start: 21:00 10/28 Stop: 16:56 10/29	Admin Sched 10/28 20:45 21:00 Complete	mehreo
A	quetiapine TABLET	600 mg (Seroquel) Oral AT BEDTIME To give 600 mg use 2 of 300 mg for Mood	Start: 21:00 10/29 Stop: 23:59 12/31	Admin Sched 10/29 20:37 21:00 Complete	sjohn
A	Suicidal Ideation Severity Assessment	DAILY AT 1600	Start: 16:00 10/28 Stop: 23:59 12/31	Admin Sched 10/28 12:06 16:00 Complete 10/29 14:55 16:00 Complete 10/30 10:14 16:00 Complete	agarin kslupek jhundang
D	TSH ONLY, ULTRA SENSITIVE 3RD GEN	EVERY MORNING UNTIL COMPLETE	Start: 10:00 10/29 Stop: 10:19 10/30	Admin Sched 10/29 16:01 10:00 Not Administered/N Other - See Notes 10/30 10:19 10:00 Complete	kslupek rsoriano
D	Urine Drug Screen	EVERY MORNING UNTIL COMPLETE Nurse Collect	Start: 10:00 10/29 Stop: 0:47 10/30	Admin Sched 10/29 16:01 10:00 Not Administered/N Other - See Notes	kslupek rsoriano
A	Vital Signs	TWICE A DAY	Start: 21:00 10/28 Stop: 23:59 12/31	Admin Sched 10/28 21:09 21:00 Complete 10/29 8:37 9:00 Complete 10/29 19:57 21:00 Complete 10/30 10:19 9:00 Complete	mehreo agarin sjohn rsoriano

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D	Weight NOW	Start: 11:42 10/28 Stop: 12:08 10/28	Admin 10/28 12:08	Sched 11:42	Complete	agarin
A	rivaroxaban TABLET 10 mg (*Xarelto) Oral ONCE A DAY for dtv	Start: 9:00 10/29 Stop: 23:59 12/31	Admin 10/29 9:21 10/30 8:14	Sched 9:00 9:00	Complete	kslupek rsoriano
A	sertraline TABLET (Zoloft) 50 mg Oral ONCE A DAY for Mood Simultaneous with sertraline TABLET (Zoloft) 25 mg	Start: 9:00 10/29 Stop: 23:59 12/31	Admin 10/29 9:20 10/30 8:14	Sched 9:00 9:00	Complete	kslupek rsoriano
A	sertraline TABLET (Zoloft) 25 mg Oral ONCE A DAY for Depression take with 50mg (total 75mg) Simultaneous with sertraline TABLET (Zoloft) 50 mg	Start: 9:00 10/31 Stop: 23:59 12/31	Admin	Sched		
P	buprenorphine TABLET 8 mg (*Subutex) PRN Sublingual TWICE DAILY 0900 & 2100 PRN for Maintenance Max Daily Doses: 2	Start: 18:47 10/29 Stop: 9:55 10/30	Admin	Sched		
A	dicyclomine TABLET 20 mg (Bentyl) PRN Oral THREE TIMES DAILY 0900 1300 1700 PRN for Stomach Cramps Max Daily Doses: 3	Start: 13:59 10/28 Stop: 23:59 12/31	Admin	Sched		
A	LORazepam TABLET (*Ativan) 1 mg PRN Oral EVERY 6 HOURS PRN for Anxiety Max Daily Doses: 4	Start: 14:29 10/28 Stop: 23:59 12/31	Admin 10/28 14:56 10/29 1:24 10/29 9:20 10/29 17:46 10/30 0:12 10/30 8:16	Sched Complete Complete Complete Complete Complete Complete		kslupek mebreo kslupek kslupek sjohn rsoriano
A	melatonin TABLET 5 mg PRN Oral AT BEDTIME PRN for Insomnia Max Daily Doses: 1	Start: 13:59 10/28 Stop: 23:59 12/31	Admin 10/28 20:49	Sched Complete		mebreo
A	methocarbamol TABLET 500 mg (Robaxin) PRN Oral THREE TIMES DAILY 0900 1300 2100 PRN for muscle spasm	Start: 21:00 10/28 Stop: 23:59 12/31	Admin 10/29 5:57 10/29 20:38 10/30 11:08	Sched Complete Complete Complete		mebreo sjohn rsoriano
A	nicotine GUM (Nicorette) 2 mg PRN Oral Transmucosal EVERY 2 HOURS PRN for Smoking Cessation Max Daily Doses: 12	Start: 14:11 10/28 Stop: 23:59 12/31	Admin 10/28 16:17 10/28 19:58 10/29 7:26 10/29 9:22 10/29 13:04	Sched Complete Complete Complete Complete Complete		agarin mebreo mebreo kslupek kslupek
A	tramadol TABLET (Ultram) 100 mg PRN Oral THREE TIMES DAILY 0900 1300 2100 PRN To give 100 mg use 2 of 50 mg for Pain	Start: 21:00 10/28 Stop: 23:59 12/31	Admin 10/28 21:08 10/29 10:34 10/29 16:50 10/30 2:54 10/30 11:08	Sched Complete Complete Complete Complete Complete		mebreo kslupek kslupek sjohn rsoriano



Facesheet (Scanned)



Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/28/23 12:32

Facesheet

pdf

CHICAGO BEHAVIORAL HOSPITAL

556 Wilson Lane • Des Plaines, Illinois 60016

Telephone Number: (844) 733-8690

ADMISSION / DISCHARGE RECORD

MEDICAL RECORD NO.	FINANCIAL CLASS	ROOM / BED	HSV			
001026567	DM	419 / B	IAD	INPATIENT ADULT DUAL DIAGNOSIS		
PATIENT Name, Address, Phone		BIRTH DATE	AGE	SEX	RACE	LANGUAGE
Name: John Doe		12/12/9999	43	M	X	[REDACTED]
		MENTAL STATUS		RELIGION		LEGAL STATUS
		S		UNKNOWN		V
		ADMISSION DATE & TIME			DISCHARGE DATE & TIME	
		10/28/23 11:00				
		EMPLOYER / SCHOOL			REFERRAL SOURCE	
SSN: 123-45-6789 PHONE: 000-0000 CELL:						
EMERGENCY CONTACT 1 (Name, Address, Phone, Rel)			EMERGENCY CONTACT 2 (Name, Address, Phone, Rel)			
NONE			DOB: 12/12/9999			
PHONE: 000-0000 REL: UNKNOWN WRK: (000)000-0000 CELL:			PHONE: REL: WRK: (000) - CELL:			
GUARANTOR number, name, Address, Phone, Rel		ADMITTING PHYSICIAN (Name, Number)				
[REDACTED]		[REDACTED]				
PHONE: REL: SELF WRK:		ATTENDING PHYSICIAN (Name, Number) [REDACTED]				
[REDACTED]		ADMITTED BY CBH				
PRIMARY INSURANCE	SECONDARY INSURANCE			TERTIARY INSURANCE		
MERIDIAN 222 N LASALLE ST CHICAGO IL PHONE: (866)606-3700	PHONE: POLICY#: A12345 GROUP #: GRP NAME: [REDACTED]			PHONE: POLICY#: GROUP #: GRP NAME: AUTH#: SEX: DOB: REL:		
REL: SELF	[REDACTED]			[REDACTED]		
DIAGNOSIS CODES		LAST INPATIENT DATE				
MAJOR DEPRESSIVE DISORDER, RECURRENT, UNSPECIFIED		F339				
10/28/23 11:01		CB1000/011915				




**Medical History and Physical
Examination (H&P)**

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Date/Time

10/29/2023 10:21

Medical Diagnosis

Diagnosis Code	System	Class	Type	Priority	Date
-----	-----	-----	-----	-----	-----
-----	-----	-----	-----	-----	-----
Acute embolism and thrombosis I82.401	ICD-10	Medical	Working	Secondary Diagnosis	10/29/2023
of unspecified deep veins of right lower extremity					
Alcoholic hepatitis without K70.10	ICD-10	Medical	Working	Secondary Diagnosis	10/29/2023
ascites					
Gastro-esophageal reflux K21.00	ICD-10	Medical	Working	Secondary Diagnosis	10/29/2023
disease with esophagitis, without bleeding					
Other pulmonary embolism I26.99	ICD-10	Medical	Working	Secondary Diagnosis	10/29/2023
without acute cor pulmonale					
Unspecified convulsions R56.9	ICD-10	Medical	Working	Secondary Diagnosis	10/29/2023
		Medical	Working		

Psychiatric Diagnoses

Diagnosis Code	System	Class	Type	Priority	Date
-----	-----	-----	-----	-----	-----
-----	-----	-----	-----	-----	-----
MAJOR DEPRESSIVE DISORDER, F33.9	ICD10	Psychiatric	Admitting	Primary Diagnosis	10/28/2023
RECURRENT, UNSPECIFIED					

Reason for admission

SI with plan to OD on prescription meds

Gender

Male

Preferred Pronouns

He/Him/His

Informant

Patient chart

Reliable

Yes

Past Medical History

LLE DVT, PE, GERD, Congenital spondylosis, left hip
avascular necrosis. hx hip replacement, hx back surgery,
hx seizures from withdrawal,

HOME MED LIST AND ADMISSION MED REC



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Home Meds:

Description Indication	Brand	Dose	Route	Frequency	PRN
-----	-----	-----	-----	-----	---
clindamycin Oral 300 mg capsule	Cleocin HCl				
gabapentin oral 300 mg capsule	Neurontin				
gabapentin Oral 400 mg capsule	Neurontin	1,200 mg	PO	TID91317	Anxiety
gabapentin Oral 800 mg TAB 1 ea	Neurontin				
hydrOXYzine hydrochloride Oral 50 mg TAB 1 ea	Atarax				
lamotRIGine Oral 25 mg tablet	LaMICtal	25 mg	PO	DAILY	
Seizures					
methocarbamol Oral 500 mg tablet	Robaxin	500 mg	PO	TID91321	P muscle
spasm					
mirtazapine Oral 15 mg tablet	Remeron	15 mg	PO	HS	Sleep
nicotine 21 mg/24 hr TERF	Habitrol				
omeprazole Oral 20 mg delayed release capsule	PriLOSEC	20 mg	PO	DAILY	GERD
prazosin Oral 1 mg capsule	Minipress	1 mg	PO	HS	
nightmares					
QUEtiapine Oral 100 mg tablet	SEROquel				
QUEtiapine Oral 300 mg tablet	SEROquel	300 mg	PO	HS	Mood
sertraline oral 50 mg tablet	Zoloft	50 mg	PO	DAILY	Mood
traMADol 50 mg TAB	Ultram	100 mg	PO	TID91321	P Pain

Admission Meds:

Description Indication	Brand	Dose	Route	Frequency	PRN
-----	-----	-----	-----	-----	---
gabapentin Oral 400 mg capsule	Neurontin	1,200 mg	PO	TID91317	Anxiety
methocarbamol Oral 500 mg tablet	Robaxin	500 mg	PO	TID91321	P muscle
spasm					
mirtazapine Oral 15 mg tablet	Remeron	15 mg	PO	HS	Sleep
omeprazole Oral 20 mg delayed release capsule	PriLOSEC	20 mg	PO	DAILY	GERD
prazosin Oral 1 mg capsule	Minipress	1 mg	PO	HS	
nightmares					
QUEtiapine Oral 300 mg tablet	SEROquel	300 mg	PO	HS	Mood
sertraline Oral 50 mg tablet	Zoloft	50 mg	PO	DAILY	Mood
traMADol Oral 50 mg tablet	Ultram	100 mg	PO	TID91321	P Pain

Allergy Comments	Type	Reaction	Severity	Date	Code	System
-----	----	-----	-----	----	----	-----
-----	----	-----	-----	----	----	-----



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ARIPIPRAZOLE	Drug Allergy	Severe	7704567	RB Alg ID
blurred vision				
BEE STING	Drug Allergy	Swelling	7708918	RB Alg ID
DUST MITE	Drug Allergy	Mild	7708910	RB Alg ID
KETOROLAC	Drug Allergy	Swelling	7700739	RB Alg ID
PENICILLIN	Drug Allergy	Hives	7702923	RB Alg ID

Dietary Restrictions No

Activity Restrictions No

Height 67 in

Weight 151 lb

Body Mass Index 23.6

Systolic 106 mmHg

Diastolic 66 mmHg

Blood Pressure 119 / 70

Heart Rate 82 beats/min

Temperature 97.6 °F

Respirations 20 Resp/Min

SPO2 99 %

Past Medical History

Last Dental Exam 2 yrs ago

Last Eye Exam 2 yrs ago

Immunizations UTD

Last PPD Neg

Recent Illnesses/Injuries pt denies

Past Hospitalizations/Psych Yes

Substance Use

Does patient admit to Substance Use? Yes and Positive Drug Screen

SUBSTANCE USE.

Substance	Does pt have Rx?	Route	Amount/Freq	Age of 1st Use	Last Used	Current/His torical
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1	Alcohol	No	Oral	1/2 gallon teen of alcohol / daily	10/26/2023	Current
2	Cannabis	No	Smoke/Vap	sporadicall teen y	10/26/2023	Current
3	Cocaine/Cra ck	No	Snort/Inhal	\$40 / daily 20's e	10/26/2023	Current
4	Opiates (heroin/Oxy etc.)	No	Injects	\$80 / heroin	10/26/2023	Current

Substance Use

Does patient admit to Tobacco Use? Yes

TOBACCO USE

Row	Type	Amount/Frequency
1	Cigarettes	1 ppd

Substance Use

Other Addictive Behaviors No

Education

Currently in School? No

Highest level of Education? Some College

Social/Family HistoryFamily/Living Situation

Current living situation?	Pt reported that he is currently homeless.
Can patient return?	Yes
Patient raised by?	adopted parents
Number of Siblings?	2
Describe Relationship	1 twin brother, only close with twin brother
Number of Children?	0
Describe Relationship	N/a

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Social/Family History

FAMILY PSYCH/SUBSTANCE ABUSE HISTORY

Row Relationship History of mental health/chemical dependency issues
1 Sibling depression, drug addiction

Social/Family History

Family Medical History

pt denies

Legal History

Any Legal Issues?	Yes
Number of arrests	multiple
Current/Pending Charges	No
Arrest Details	drug possession
Time incarcerated	1 month in jail
Probation/Parole	No

Social/Family History

Military Service

Military Service?	No
History of Service?	No

Review of Systems

RESPIRATORY	No History of Problems
Have you been vaccinated for COVID-19? (Corona)	No
Do you want to be vaccinated?	No
Date of last TB Test	UNK
SKIN	No History of Problems



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CENTRAL NERVOUS SYSTEM**No History of Problems**

Tics

No**GENITOURINARY****No History of Problems****GASTROINTESTINAL****GERD****CARDIOVASCULAR:****"history of DVT and PE"****MUSCULOSKELETAL****No History of Problems****ADDITIONAL****seizures****SURGICAL HISTORY****Yes**

Lumbar fusion, back surgery and total left hip arthroplasty

Sexual History

Sexual History	N/A
Recent contraception	N/A
STI	None
Sexual activity in last five days	No

Assessment

Reviewed Lab Results	Yes
UDS-Benzos/cocaine/fentanyl+/-	

Physical Assessment

General/Mental Status	WNL
Skin	WNL
Head	WNL
Eyes	WNL
ENT	WNL
Neck	WNL
Lungs	WNL
Heart	WNL
Abdomen	WNL
Extremities	WNL

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Back	WNL
Neuro	WNL
GU	Deferred
Tanner stage	WNL

Cranial Nerves

CN I:	WNL
How was CN I tested?	"Sniff and Identify"
CN II:	WNL
How was CN II tested?	Confrontation Test
CN III, IV, VI:	WNL
How was CN III, IV, VI tested?	Finger Tracking
CN V:	WNL
How was CN V tested?	Light touch forehead
CN VII:	WNL
How was this CN VII tested?	Eyebrow raise
CN VIII:	WNL
How was this CN VIII tested?	Finger rub near ear
CN IX, X:	WNL
How was CN IX, X tested?	Palate elevation
CN X:	WNL
How was CN X tested?	Palate elevation
CN XI:	WNL
How was this CN XI tested?	Shoulder Shrug
CN XII:	WNL
How was CN XII tested?	Extend tongue side to side

Plan Of Care

**Medical History and Physical
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Impression

1. Major depression
2. SI w/plan to OD
3. Polysubstance abuse
4. Seizure-d/t alcohol withdrawal
5. LLE DVT/PE-Xarelto
6. GERD-omeprazole
7. Alcoholic hepatitis
8. left hip avascular necrosis/pain- Tramadol
9. Nicotine dependence-patch
10. Medical consultation-pmh, labs & meds reviewed

Inpatient Meds:

Description	Brand	Dose	Route	Frequency	PRN
Indication	-----	-----	-----	-----	---
-----	-----	-----	-----	-----	---
-----	-----	-----	-----	-----	---


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acetaminophen Oral 325 mg tablet	APAP	650 mg	PO	Q4H	P	Pain
LORazepam Oral 1 mg tablet	*Ativan	1 mg	PO	Q6H	P	Anxiety
dicyclomine Oral 20 mg tablet	Bentyl	20 mg	PO	TID91317	P	Stomach
Cramps						
gabapentin Oral 600 mg tablet	Neurontin	1,200 mg	PO	TID91321		Anxiety
loperamide Oral 2 mg capsule	Imodium	2 mg	PO	Q2H	P	
Diarrhea						
Notes: Not more than 16mg per day						
LORazepam Injectable 2 mg/mL	Ativan	2 mg	IM	Q4H	P	FOR
SEIZURE ONLY						
solution						
melatonin Oral 5 mg TAB 1 ea		5 mg	PO	HS	P	
Insomnia						
methocarbamol Oral 500 mg tablet	Robaxin	500 mg	PO	TID91321	P	muscle
spasm						
mirtazapine Oral 15 mg tablet	Remeron	15 mg	PO	HS		Sleep
multivitamin Oral tablet	Daily	1 tab	PO	DAILY		
Nutritional Support						
	Multiple Vitamins					
nicotine Oral Transmucosal 2 mg	Nicorette	2 mg	OM	Q2H	P	Smoking
Cessation						
gum						
omeprazole Oral 20 mg delayed	PriLOSEC	20 mg	PO	DAILY		GERD
release capsule						
ondansetron Oral 4 mg tablet,	Zofran	4 mg	PO	Q6H	P	
Nausea/Vomiting						
disintegrating	ODT					
Patient Own Medication - Stored in	POM	1 ea	NA	UD	P	Patient
Own Med						
Notes: Patient Own Medications						
"Stored in the Pharmacy"						
Pharmacy						
prazosin Oral 1 mg capsule	Minipress	1 mg	PO	HS		
nightmares						
QUetiapine Oral 300 mg tablet	SEROquel	600 mg	PO	HS		Mood
sertraline Oral 50 mg tablet	Zoloft	50 mg	PO	DAILY		Mood
buprenorphine Sublingual 8 mg	*Subutex	8 mg	SL	BID921	P	
Maintenance						
tablet						
tramadol Oral 50 mg tablet	Ultram	100 mg	PO	TID91321	P	Pain
rivaroxaban Oral 10 mg tablet	*Xarelto	10 mg	PO	DAILY		dvt

Ancillary Orders:**Description****Frequency****PRN**

-Admit to: 4N, Dual Diagnosis - Substance Abuse and Detox
 -Environment Patient Safety Checklist

-Patient/Family Education
 -Daily Nursing Progress Note

BID -

Assessmen

ts

Q4H

P

-Psychotropic Medication Notice and Consent Form
 -LIPID PANEL W/HDL

BID -

Assessmen

ts

Q4H

P

IN AM-UC

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Admit Date: 10/28/2023
DOB: 12/12/9999

Observation Date/Time: 10/29/23 18:53

-Suicidal Ideation Severity Assessment 1600
-TSH ONLY, ULTRA SENSITIVE 3RD GEN IN AM-UC
-COMPREHENSIVE METABOLIC IN AM-UC
-CBC W/O DIFFERENTIAL IN AM-UC
-Special Diet Heart Healthy: Finger Foods: No Consult Needed?
Yes Reason: VS_BID
-Vital Signs
-Level Of Observation: Q10 minutes (Q10) Reason: SI with plan to OD on prescription meds LOS Rational;
-Precautions SUICIDAL Precaution, HIGH RISK Precaution and DETOK
-Provisional Diagnosis SI with plan to OD on prescription meds
-Legal Status Voluntary IN AM-UC
-Urine Drug Screen Notes:Nurse Collect
-COWS Scale Q4H-COWS
Notes:If initial score >10 assess vitals per protocol Verify with MD the initiation of the medical detox protocol.

Telehealth

This visit was conducted with the use of interactive audio and video telecommunication that permits real time communication between the patient and the provider. No

The patient consent for virtual visit obtained on

Originating Site: Chicago Behavioral Hospital

Distant Site: Provider Home

Plan Of Care

Documented by Scribe No
APN Signature e-Signed by [REDACTED] at 10/29/2023 10:22
Medical Provider Signature e-Signed by [REDACTED] at 10/30/2023 00:28

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

Date/Time	10/29/2023 10:43
Legal status	Voluntary
Gender	Male
Reason for Admission from Intake	SI with plan to OD on prescription meds
Identifying Data	43-year-old male with past psychiatric history of bipolar disorder, PTSD, and polysubstance abuse
Chief complaint from Intake	"im depressed"
Chief Complaint in patient's own words	"I'm dealing with a lot of trauma"
History of Present Illness	Patient is a 43-year-old male with past psychiatric history of bipolar disorder, PTSD, and polysubstance abuse who presents as a transfer from Illinois Masonic for suicidal ideation with plan to overdose. Reports he has been feeling increasingly depressed and hopeless since his fiancé passed away in June. Prior to presentation to the ED, he reports taking "a bunch of pills" combined with cocaine and alcohol to try to end life. In addition he feels like he has poor support system and is homeless. He states he is "dealing with a lot of trauma" and that he has been coping with heroin, reports using \$80-100 worth daily. He states he is currently on quetiapine 600mg and suboxone 8mg twice daily. Utox +benzos, cocaine, fentanyl. Patient presents depressed, anxious, hopeless, helpless, with avolition, anhedonia, racing ruminating thought process, poor sleep, poor insight and poor self care. Patient is unable to contract for safety and requires immediate hospitalization for safety and stabilization.
Detox Status	Detox Monitoring
COWS Total	2.00000

Risk of Harm to self and others

Risk of harm to SELF	Inability to care for self, Thoughts to harm self, Active suicidal ideation/intention, Active suicide plan and Unable to contract for safety
SI with plan to OD	
C-SSRS Score from Intake	18
Note: A score of 15 or more indicates "high risk".	
Recent suicidal Intent Notes	plan to OD
Risk of Harm to OTHERS	"Denies thought, plan or ideation to harm others"
History of assaultive thoughts or behaviors?	No

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time:

IF ANY ABOVE ARE AFFIRMATIVE, RN MUST BE INFORMED
TO INITIATE ASSESSMENT

Evidence of failure at, or inability to benefit from a less intensive
outpatient setting yes

Medical History (current, recent, chronic, disabilities)
hx blood clot disorder, hx hip replacement, hx back
surgery, hx seizures from withdrawal, sciatica, hx bipolar

Surgical History Yes

Lumbar fusion, back surgery and total left hip arthroplasty

Does any of the patient's medical or surgical history contribute
to current psychiatric presentation? No

Allergies and Home Meds

Allergies reviewed in banner Yes

Home Meds:

Description	Brand	Dose	Route	Frequency	PRN
Indication	-----	----	-----	-----	---
-----	-----	----	-----	-----	---
-----	-----	----	-----	-----	---

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

clindamycin Oral 300 mg capsule	Cleocin HCl					
gabapentin Oral 300 mg capsule	Neurontin					
gabapentin Oral 400 mg capsule	Neurontin	1,200 mg	PO	TID91317		Anxiety
gabapentin Oral 800 mg TAB 1 ea	Neurontin					
hydroOXYzine hydrochloride Oral 50 mg TAB 1 ea	Atarax					
lamotrigine Oral 25 mg tablet	LaMICtal	25 mg	PO	DAILY		
Seizures						
methocarbamol Oral 500 mg tablet	Robaxin	500 mg	PO	TID91321	P	muscle spasm
mirtazapine Oral 15 mg tablet	Remeron	15 mg	PO	HS		Sleep
nicotine 21 mg/24 hr TERP	Habitrol					
omeprazole Oral 20 mg delayed release capsule	PriLOSEC	20 mg	PO	DAILY		GERD
prazosin Oral 1 mg capsule	Minipress	1 mg	PO	HS		
nightmares						
QUEtiapine Oral 100 mg tablet	SEROquel					
QUEtiapine Oral 300 mg tablet	SEROquel	300 mg	PO	HS		Mood
sertraline Oral 50 mg tablet	Zoloft	50 mg	PO	DAILY	P	Mood
tramadol 50 mg TAB	Ultram	100 mg	PO	TID91321		Pain
Admission Meds:						
Description	Brand	Dose	Route	Frequency	PRN	
Indication	-----	-----	-----	-----	---	
-----	-----	-----	-----	-----	---	
gabapentin Oral 400 mg capsule	Neurontin	1,200 mg	PO	TID91317		Anxiety
methocarbamol Oral 500 mg tablet	Robaxin	500 mg	PO	TID91321	P	muscle spasm
mirtazapine Oral 15 mg tablet	Remeron	15 mg	PO	HS		Sleep
omeprazole Oral 20 mg delayed release capsule	PriLOSEC	20 mg	PO	DAILY		GERD
prazosin Oral 1 mg capsule	Minipress	1 mg	PO	HS		
nightmares						
QUEtiapine Oral 300 mg tablet	SEROquel	300 mg	PO	HS		Mood
sertraline Oral 50 mg tablet	Zoloft	50 mg	PO	DAILY	P	Mood
tramadol Oral 50 mg tablet	Ultram	100 mg	PO	TID91321		Pain

Treatment History

History of Inpatient Treatment	Yes
Number of hospitalizations	16+
Most recent admission: date and location	Swedish Covenant 2 weeks ago
Age of first hospitalization	20
Reason for admission	suicidal ideation, detox

TRAUMA AND ABUSE

Row	Type of abuse	Age of abuse	By whom	Details	DCFS/APS Involvement	DCFS/APS Report Filed

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

1	Sexual Assault	18	stranger	pt reported was raped and drugged by a man as a teenager. Pt denies legal action.	N/A	N/A
2	Neglect	childhood	biological parents	pt reported was adopted when he was very young and was neglected by his biological parents.	N/A	N/A

Substance Use

Does patient admit to Substance Use?

Yes and Positive Drug Screen

SUBSTANCE USE.

Row	Substance	Does pt have Rx?	Route	Amount/Freq	Age of 1st Use	Last Used	Current/Bis
1	Alcohol	No	Oral	1/2 gallon / daily	teen of alcohol	10/26/2023	Current
2	Cannabis	No	Smoke/Vap	sporadicall y	teen	10/26/2023	Current
3	Cocaine/Crack	No	Snort/Inhal e	\$40 / daily	20's	10/26/2023	Current
4	Opiates (heroin/Oxy etc.)	No	Injects	\$80 / heroin	18	10/26/2023	Current

Substance Use

Does patient admit to Tobacco Use?

Yes

TOBACCO USE

Row	Type	Amount/Frequency
1	Cigarettes	1 ppd

Substance Use

Other Addictive Behaviors

No

**Psychiatric Evaluation**Name: John Doe
[REDACTED]

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

SUBSTANCE ABUSE TREATMENT

Row	Type of Treatment	Location of Treatment	Dates of Treatment
1	RTC	LSSI	2020
2	RTC	ECS - Joliet, IL	"a few months ago"
3	dual diagnosis	CBH - Des Plaines, IL	2018

Family/Living Situation

Current living situation?	Pt reported that he is currently homeless.
Can patient return?	Yes
Patient raised by?	adopted parents
Number of Siblings?	2
Describe Relationship	1 twin brother, only close with twin brother
Number of Children?	0
Describe Relationship	N/a

Legal History

Any Legal Issues?	Yes
Number of arrests	multiple
Current/Pending Charges	No
Arrest Details	drug possession
Time incarcerated	1 month in jail
Probation/Parole	No

Military Service

Military Service?	No
History of Service?	No

ADL's

Sleep disturbance(s)	Yes
	"I get about 4 hours a night."
Sleep disturbance type	difficulty falling asleep and frequent awakening
Normal hours of sleep	8

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

Activities of Daily Living Comments

none

Family History

Known Family History

Yes

FAMILY PSYCH/SUBSTANCE ABUSE HISTORY

Row	Relationship	History of mental health/chemical dependency issues
1	Sibling	depression, drug addiction

Education

Currently in School?

No

Highest level of Education?

Some College

Employment

Currently employed?

No

Receives Disability?

No

Mental Status Exam

Orientation: Place, Person and Situation

Appearance: Disheveled, Malodorous and Poor hygiene

Behavior: Anxious, Isolated and Withdrawn

Eye Contact: Avoidant

Speech: Slow and Soft

Psychomotor: Sedated

Mood: Anxious, Depressed, Dysphoric and Sad

Affect: Dysphoric and Restricted

Thought Process: Perseveration and Ruminating

Thought Content: Anhedonia, Avolition and Hopelessness

What is the year, date, day, month, and season? assessed

What is the name of the hospital, city, and state? assessed

Perceptual Disturbance: Denies

Hallucinations: None

JUDGEMENT

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

Judgement abilities

Difficulty predicting results of choices, inability to maintain safety of self/others and "inability to utilize food, shelter and/or clothing"

Overall estimate of Judgement from patient response

Poor

INSIGHT

Insight ability

Patient inability to understand: Nature of illness, Patient inability to understand: Need for medication and Patient inability to understand: Need for treatment

Overall estimate of Insight from patient response

Poor

GENERAL INTELLECTUAL FUNCTIONING

ATTENTION SPAN

Intact

How tested?

Spelling backwards

RECENT MEMORY

Not Impaired

How tested?

Current Medications

REMOTE MEMORY

Not Impaired

How tested?

Recollection of childhood history

ABSTRACT REASONING

Not Impaired

How tested?

Perceptiveness

INTELLIGENCE

Average

How tested?

Fund of knowledge

Is there a need for further testing?

No

Plan Of Care

Problem: Danger to Self (SI with plan to OD on prescription meds)
 Problem: High Risk (SI with plan to OD on prescription meds)

Special Program Services

Individual Therapy, Group Therapy and Expressive Therapy

Indications for Inpatient Hospitalization

Severity of Illness Criteria

"a) Suicidal, self-injurious threats, gestures or behaviors", e) Marked regression or intensification of significant symptoms and f) Severe impairment in ability to perform ADLs

Intensity of Service Criteria

a) Failure to respond to treatment in an outpatient or other less restrictive milieu such that symptoms are worsened or course of illness has deteriorated

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time:

Communication

Is there a reasonable expectation that this patient will make timely and significant practical improvement in the presenting acute symptoms as a result of inpatient hospitalization services?

Yes**MEDICATION AND ANCILLARY ORDERS**

Inpatient Meds:

Description	Brand	Dose	Route	Frequency	PRN
-----	-----	-----	-----	-----	---

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

acetaminophen Oral 325 mg tablet LORazepam Oral 1 mg tablet dicyclomine Oral 20 mg tablet Cramps	APAP *Ativan Bentyl	650 mg 1 mg 20 mg	PO	Q4H Q6H TID91317	P	Pain Anxiety Stomach
gabapentin Oral 600 mg tablet	Neurontin	1,200 mg	PO	TID91321		Anxiety
loperamide Oral 2 mg capsule Diarrhea	Imodium	2 mg	PO	Q2H	P	
Notes: Not more than 16mg per day LORazepam Injectable 2 mg/mL SEIZURE ONLY solution	Ativan	2 mg	IM	Q4H	P	FOR
melatonin Oral 5 mg TAB 1 ea Insomnia		5 mg	PO	HS	P	
methocarbamol Oral 500 mg tablet spasm	Robaxin	500 mg	PO	TID91321	P	muscle
mirtazapine Oral 15 mg tablet multivitamin Oral tablet Nutritional Support	Remeron Daily	15 mg 1 tab	PO	HS DAILY		Sleep
nicotine Oral Transmucosal 2 mg cessation gum	Multiple Vitamins Nicorette	2 mg	QM	Q2H	P	Smoking
omeprazole Oral 20 mg delayed release capsule	PriLOSEC	20 mg	PO	DAILY		GERD
ondansetron Oral 4 mg tablet, Nausea/Vomiting disintegrating	Zofran	4 mg	PO	Q6H	P	
Patient Own Medication - Stored in Own Med	PCM	1 ea	NA	UD	P	Patient

Notes: Patient Own Medications
"Stored in the Pharmacy"

Pharmacy

prazosin Oral 1 mg capsule nightmares	Minipress	1 mg	PO	HS	
QUetiapine Oral 300 mg tablet	SEROquel	300 mg	PO	HS	Mood
sertraline Oral 50 mg tablet	Zoloft	50 mg	PO	DAILY	Mood
tramadol Oral 50 mg tablet	Ultram	100 mg	PO	TID91321	Pain
rivaroxaban Oral 10 mg tablet	*Xarelto	10 mg	PO	DAILY	dvt

Ancillary Orders:

Description

-Admit to: 4N, Dual Diagnosis - Substance Abuse and Detox
-Environment Patient Safety Checklist

-Patient/Family Education
-Daily Nursing Progress Note

-Psychotropic Medication Notice and Consent Form
-LIPID PANEL W/HDL
-Suicidal Ideation Severity Assessment
-TSH ONLY, ULTRA SENSITIVE 3RD GEN
-COMPREHENSIVE METABOLIC

Frequency PRN

BID -
Assessmen
ts
Q4H P
BID -
Assessmen
ts
Q4H P
IN AM-UC
1600
IN AM-UC
IN AM-UC

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

-CBC W/O DIFFERENTIAL
 -Special Diet Heart Healthy: Finger Foods: No Consult Needed?
 Yes Reason:
 -Vital Signs
 -Level Of Observation: Q10 minutes (Q10) Reason: SI with plan to OD on prescription meds LOS Rational:
 -Precautions SUICIDAL Precaution, HIGH RISK Precaution and DETOX
 -Provisional Diagnosis SI with plan to OD on prescription meds
 -Legal Status Voluntary
 -Urine Drug Screen Notes:Nurse Collect
 -COWS Scale Notes:If initial score >10 assess vitals per protocol Verify with MD the initiation of the medical detox protocol.

Estimated Length of Stay **8 Days**

IN AM-UC

VS_BID

IN AM-UC

Q4H-COWS

Strengths

Who do you call for when you need support? **Yes**
 Pt reported that his brother, mother, and "NA people" are supportive of him.

Do you have an outpatient treatment team that supports you? **Yes**
 Dr. Dalawari - Christ Hospital

Tell me one goal you have for yourself for the future. **Yes**
 Pt reported that he would like to

Liabilities

How has your living situation changed or impacted your stress levels? **Yes**
 Pt is currently homeless.

Patient has been engaging in using the following substances: **Yes**
 Pt abuses alcohol, heroin, and cocaine.

Patient is currently involved with the following legal issues. **Yes**
 Pt has a history of legal issues.

Discharge

Diagnosis - Must have at least one ACTIVE and one PRIMARY
 Diagnosis

Diagnosis Code	System	Class	Type	Priority	Date
-----	-----	-----	-----	-----	-----
----	-----				

**Psychiatric Evaluation**

Name: John Doe

Admit Date: 10/28/2023

DOB: 12/12/9999

Observation Date/Time: 10/29/23 16:56

MAJOR DEPRESSIVE DISORDER,
F33.9 ICD10
RECURRENT, UNSPECIFIED
Major depressive disorder,
F33.2 ICD-10
recurrent severe without
psychotic features

Psychiatric Admitting Primary Diagnosis 10/28/2023
Provisional
1

Initial Aftercare Plan

Living/Placement	Home/Independent Living, Residential Treatment Center and Halfway House/Shelter
Programs/Follow-Up	Partial Hospitalization Program and Individual Therapy/Medication Management
Discharge Goals and Criteria	"Establish and maintain safety (no SI/HI, self harm, aggression)", "Improvement in signs and symptoms of mood disorder and/or psychosis" and Build insight into condition
Treatment has been explained to	Patient

Telehealth

This visit was conducted with the use of interactive audio and video telecommunication that permits real time communication between the patient and the provider.

No

The patient consent for virtual visit obtained on

Originating Site: Chicago Behavioral Hospital

Distant Site: Provider Home

Discharge

Documented by Scribe No

I have discussed with the patient the use of anti psychotic drugs as part of the treatment plan including the risks and benefits of the medications including but not limited to possible adverse effects such as possible weight gain, increased serum glucose, sedation, movement disorders, and cardiac reactions; likely symptoms and risk and benefits of the medication not being taking, and alternative treatments along with the risks and benefits of those alternative treatments.

Provider Signature

e-Signed by [redacted] at 10/29/2023 16:56