

Patient: [REDACTED]
MRN: [REDACTED]

Printed by: [REDACTED]

Printed on: 10/24/2023 09:18

Name: [REDACTED]

Previous Name: [REDACTED]

American

Ethnicity: Non-Hispanic or Latino

Home Address: [REDACTED]

Alt Address: City/State: [REDACTED]

Home Phone: [REDACTED]

Employer Name: NONE

Employer Address: [REDACTED]

City/State: [REDACTED],

Zip: [REDACTED]

Employer Phone: [REDACTED]

Name: [REDACTED]

Relationship to Guarantor: Patient

Billing Address: [REDACTED]

Zip: [REDACTED]

Employer Name: NONE

Employer Address: [REDACTED]

City/State: [REDACTED],

Zip: [REDACTED]

Employer Phone: [REDACTED]

>>>>> PATIENT INFORMATION <<<<<

Sex: Female Date of Birth: [REDACTED]

Age: 39 Years MS: Single

Social Security Number: [REDACTED]

Race: Black or African

Language: English

Religion: None

City/State: [REDACTED]

Zip: [REDACTED]

Zip:

Cell Phone: [REDACTED]

Name: [REDACTED]

Relationship to Contact: [REDACTED]

Home Address: [REDACTED]

City/State: [REDACTED],

Zip: [REDACTED]

Home Phone: [REDACTED]

Employer Phone: [REDACTED]

Employment Status: Not Employed

>>>>> GUARANTOR INFORMATION <<<<<

Name: [REDACTED]

Relationship to Insured: [REDACTED]

Employer Name: NONE

Employer Address: [REDACTED]

City/State: [REDACTED],

Zip: [REDACTED]

>>>>> PRIMARY INSURED/INSURANCE INFORMATION <<<<

Sex: Female Date of Birth: [REDACTED]

Age: 39 Years

Insurance Name: BLUE CROSS COMMUNITY HEALTH PLAN MEDICAID

Phone Number: [REDACTED]

Claim's Address: BLUE CROSS MEDICAID

Auth. Number: [REDACTED]

Auth. Phone Number: [REDACTED]

PO BOX 3418

Group Number: [REDACTED]

City/State: SCRANTON, PA

Zip: 18505

>>>>> SECONDARY INSURED/INSURANCE INFORMATION <<<<

NO SECONDARY INSURED/INSURANCE INFORMATION

>>>>> VISIT INFORMATION <<<<<

Patient Type: Behavioral Health Adult

Reg Date/Time: 10/18/2023 01:12

Inpatient Admit Date/Time: 10/18/2023 01:23

OP Assign to Loc Date/Time:

Admit Type: Elective

Admit Source: Xfer from a Hospital

Admit Diagnosis: EVALUATION

Estimated Date of Arrival: 10/17/2023 23:55

Discharge Date/Time:

Discharge Disposition:

Admit Clerk: [REDACTED]

FIN: [REDACTED]

Admitting Physician Name: [REDACTED]

Attending Physician Name: [REDACTED]

Referring Physician Name: [REDACTED]

Primary Physician Name: [REDACTED]

Advance Directive: [REDACTED]

Location: [REDACTED]

Medical Service: Psychiatry

Room/Bed: [REDACTED]

Accident Date/Time:

Accident Type:

>>>>> ACCIDENT INFORMATION <<<<<

History and Physical*** Final Report ***

Result Type: History and Physical
Date: October 18, 2023 15:45 CDT
Result Status: Auth (Verified)
Result Title: H&P -M [REDACTED] FACP.
Performed By: [REDACTED] A on October 18, 2023 15:53 CDT
Verified By: [REDACTED] A on October 18, 2023 15:53 CDT
Encounter Info: [REDACTED] GLE, Behavioral Health Adult, 10/18/2023 -

*** Final Report *****H&P** [REDACTED]

Patient: [REDACTED] MRN: [REDACTED] FIN: [REDACTED]
Age: 39 years Sex: Female DOB: [REDACTED]
Associated Diagnoses: None
Author: [REDACTED]

Admission Information

Date of Admission: 10/18/2023 .

Subjective:

Chief Complaint:

Bipolar, Schizophrenia/Psychotic

History of Present Illness:**HISTORY OF PRESENT ILLNESS :**

--39 year old HOMELESS AAF admitted for severe psychosis
--she was found wandering about in the store with trespassing order against her.
--she was aggressive in the emergency room and threatening to kill the staff
--Talking without making any sense. She had flight of ideas and was very tangential.
--she was noncompliant with the medications.
--her blood sugar in the emergency room was 390 and she was given 18 units of insulin.

ASSOCIATED COMPLAINTS:

--Hallucinations=Denies AH, VH.
--Very delusional and psychotic.
--Suicidal ideations=None.
--Homicidal ideation=None.
--Appetite=Without any change from baseline.
--Recent sudden weight change=None.
--Sleep=POOR
--Medication compliance at home=As per the report, home medications are not taken as prescribed.
--Pain=Scale 0/10.
--Systemic complaint= none

--GU complaints=Denies any dysuria, hematuria, flank pain etc.

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19 CDT

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History and Physical*** Final Report ***

--GI complaints=No alarm symptoms of hematemesis,melena or weight loss reported.
--Neurological complaints=Denies any double vision,unusual headache,focal motor or sensory loss,ataxia,paresthesias etc.
--Endocrine complaints=No heat or cold intolerance or skin changes reported.
--Pulmonary complaints=No hemoptysis,unusual nocturnal cough or weight loss reported.
--Dermatologic complaints=No new rash,pruritis or pigmentation reported.
--Musculoskeletal complaints=No joint swelling,morning stiffness or decrease in ROM of the joints reported.
--Renal complaints=No history of any CKD reported.No polyuria,polydipsia,nocturia or incontinence reported.
--Cardiovascular complaints=Denies any chest pain,,dyspnea,orthopnea or PND or ankle swelling reported.

Other Problems: AS PER HPI.

Allergy Profile:

Allergy LIST:

shrimp

Medication List:

Active Scheduled Medications

amLODIPine (amLODIPine)
10 mg, TAB, PO, Daily, 10/18/23 11:13:00 CDT
doxycycline (doxycycline monohydrate)
100 mg, CAP, PO, BID (2 times a day), Other-Enter in Order Comments, 10/18/23 11:15:00 CDT, Stop date 11/28/23 9:00:00 CST
ferrous sulfate (ferrous sulfate)
325 mg, TAB, PO, Daily, 10/18/23 11:20:00 CDT
fluticasone nasal (fluticasone nasal)
100 mcg, SPRAY, Nasal, Daily, 10/18/23 11:23:00 CDT
haloperidol (Haldol Decanoate)
100 mg, INJ, IM, Q4WEEK (Every 4 weeks), 10/18/23 7:18:00 CDT
insulin glargine (insulin glargine)
50 Unit, INJ, Subcut, Daily, 10/18/23 21:00:00 CDT
Insulin lispro (insulin lispro)
18 Unit, INJ, Subcut, TIDAC (3 times a day before meals), 10/18/23 10:00:00 CDT
lisinopril (lisinopril)
10 mg, TAB, PO, Daily, 10/18/23 11:14:00 CDT
metFORMIN (metFORMIN)
1,000 mg, TAB, PO, BID (2 times a day), 10/18/23 10:00:00 CDT
OLANZapine (OLANZapine)
20 mg, TAB, PO, QHS (At bedtime), 10/18/23 21:00:00 CDT
PRN Administrations In Last 24 Hours
acetaminophen (acetaminophen)
650 mg, TAB, PO, Q6H (Every 6 hours), PRN Pain, 10/18/23 10:12:00 CDT, 10/18/23 10:12:00 CDT
LORazepam (LORazepam)
1 mg, TAB, PO, Q8H (Every 8 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT

Past Medical History:

HEALTH HISTORY

Bipolar	Patient
Diabetes mellitus	Patient
Hypertension	Patient
Schizoaffective disorder	Patient
UTI (urinary tract infection)...	Patient

Social History:

Social History:

Printed by:

Printed on: 10/24/2023 09:19 CDT

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History and Physical
*** Final Report ***

Education: High school graduate or GED

Preferred Language: English

Recent Travel: No recent travel

Signs of Abuse: No

Alcohol Use

Alcohol Use: Never

Tobacco Use

Smoking Status: Current every day smoker

Tobacco cessation Information offered: Patient refuses information

Tobacco Type: Cigarettes

Years of Use: 20

Tobacco Type: Cigarettes

Years of Use: 20

Tobacco use: Never smoked cigarettes.

Alcohol use: Never used alcohol.

Ilicit drug use: Never used illicit drugs.

Living situation: Lives with family.

Occupation: Unemployed.

Family History:

FAMILY HEALTH HISTORY

Unknown.

Review of Systems

Constitutional: Negative.

Eye: Negative except as documented in history of present illness.

Ear/Nose/Mouth/Throat: Negative except as documented in history of present illness.

Respiratory: Negative except as documented in history of present illness.

Cardiovascular: Negative except as documented in history of present illness.

Gastrointestinal: Negative except as documented in history of present illness.

Genitourinary: Negative except as documented in history of present illness.

Hematology/Lymphatics: Negative except as documented in history of present illness.

Endocrine: Negative except as documented in history of present illness.

Immunologic: Negative except as documented in history of present illness.

Musculoskeletal: Negative except as documented in history of present illness.

Integumentary: Negative except as documented in history of present illness.

Neurologic: Negative except as documented in history of present illness.

Psychiatric: Negative except as documented in history of present illness.

ROS reviewed as documented in chart

Physical Examination

VS/Measurements

VITALS:

BP: 136 / 81 **Pulse:** 101 **Temp:** 97.5

Resp Rate: 16

Tmax: 97.6 **Wt(kg):** 90.71

Printed by:

Printed on:

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History and Physical
* Final Report *

Pain Score:

O2 Sat: 98 10/18/23 01:57

O2 Status: Room air 21%

Wt(kg): 90.71 weight date: 10/18/23

Wt(kg): 90.71 weight date: 10/18/23

Wt(kg): 90.71 weight date: 10/18/23

General: Alert and oriented, No acute distress, Breath is within normal limits.

Ambulation status: With steady gait.

Appearance: Obese.

Behavior: Within normal limits.

Hydration: Within normal limits.

Skin: Within normal limits, Normal for ethnicity.

Psychiatric: Cooperative, Appropriate mood & effect, Non-suicidal, No pain behavior.

Thought process: Confused, Distractible.

Eye: Pupils are equal, round and reactive to light, Extraocular movements are intact, Normal conjunctiva, Vision unchanged.

HENT: Normocephalic, Normal hearing, Oral mucosa is moist, No pharyngeal erythema, Ear canals patent, No sinus tenderness.

Neck: Supple, Non-tender, No carotid bruit, No jugular venous distention, No lymphadenopathy, No thyromegaly.

Respiratory: Lungs are clear to auscultation, Respirations are non-labored, Breath sounds are equal, Symmetrical chest wall expansion, No chest wall tenderness.

Cardiovascular: Normal rate, Regular rhythm, No murmur, No gallop, Normal peripheral perfusion, Good pulses equal in all extremities, No edema.

Gastrointestinal: Soft, Non-tender, Non-distended, Normal bowel sounds, No organomegaly.

Musculoskeletal: Normal range of motion, Normal strength, No tenderness, No swelling, No deformity, Normal gait.

Integumentary: Warm, Dry, Moist, No pallor, No rash, Right foot there is a diabetic foot ulcer without any cellulitis or drainage.

Neurologic:

Neurological exam:

Awake alert oriented to time place and person and situation

Speech, language both are fluent and appropriate. There is no aphasia or dysarthria.

Normal fund of knowledge

Normal recent and remote memory

DTR 2 +, HMF INTACT. Babinski's downgoing bilaterally.

Normal sensory, Normal motor function, No focal deficits,

Cranial nerves: II: Optic (Intact), III/IV/VI: Oculomotor/trochlear/abducens (Intact, Pupils equal, round and reactive to light), V: Trigeminal (Bilaterally, Intact, Motor (Mouth opening (Intact), Strength (Intact)), Sensation to light touch (Normal), Sensation to pain (Normal)), VII: Facial (Bilateral, Forehead wrinkle, Eye closing, Eyebrow elevation, Smile, Intact), VIII: Acoustic (Intact), IX/X: Glossopharyngeal/Vagus (Uvula elevation (Within normal limits), Symmetric soft palate elevation), XI: Accessory (Intact, Sternocleidomastoid strength, Trapezius strength), XII: Hypoglossal (Speech (clear and coherent), Tongue strength (protruded in midline without tremor or fasciculation)).

Psychiatric: Cooperative, Appropriate mood & effect.

Glands: Bilateral, Salivary gland, Parotid gland, Submandibular gland, Sublingual glands, Within normal limits.

Objective

Lab Results:

Printed by:

Printed on: 10/24/2023 09:19 CDT

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History and Physical*** Final Report *****LABORATORY RESULTS:**

Glucose POC GLE 10/18/23 11:46
Gluc POC GLE 217 H

Glucose POC GLE 10/18/23 07:42
Gluc POC GLE 390 H

LABORATORY RESULTS:**Micro Results:**

MICROBIOLOGY STUDIES RESULTED WITHIN THE LAST 2 DAYS.
See LAB tab for older results.

No cultures resulted in the last 2 days..

Radiology results:**COMPLETED RADIOLoGY IMAGING STUDIES:**

No Imaging Results in the last 36 hours.

Diagnostic Tests: All the diagnostic blood work and radiology workup done at the referring facility has been reviewed..

Documentation review: Reviewed old records, Reviewed records from ER of KISHWAUKEE Hospital.

Review / Management**Diagnostic Impression:****Diagnosis List**

Anxiety

Bipolar disorder

Paranoia

Hypertension

Schizophrenia

Suicidal ideation

Diabetes mellitus

Atrial flutter

Psychosis

Printed by:

Printed on: 10/24/2023 09:19 CDT

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History and Physical*** Final Report *****Include Orders****Consults:**

Consult Physician (Order Processing): 10/18/2023 15:53 CDT, DIABETIC FOOT ULCER, Routine, [REDACTED] Not Done

Include Orders**Consults:**

Consult Wound Ostomy Continence Nurse (WOCN) (Order Processing): 10/18/2023 15:53 CDT, Routine

Plan**PENDING LABORATORY TESTS:**

TSH Ordered

Hemoglobin A1c

Ordered

Microalbumin Urine Random

Ordered

Lipid Panel

Ordered

Pregnancy Test Urine

Ordered

PENDING RADIOLOGY/IMAGING STUDIES:**ORDERS WITHIN THE LAST HOUR**

SHAHZAD MD, MUHAMMAD A

ASSESSMENT & PLAN:

- CHECK FLP IF NOT DONE IN 3 MONTHS. RESUME HOME MEDS. DIETARY COUNSELING DONE.
- MONITOR BP. LIFE STYLE MODIFICATIONS EXPLAINED TO THE PATIENT.
- CHECK HBA1C LEVEL IF NOT DONE IN 3 MONTHS. ADA DIET. MONITOR BLOOD SUGARS. DIETARY COUNSELING DONE. STRICT BLOOD SUGAR CONTROL SHOULD BE EXERCISED
- OBTAIN PODIATRY CONSULT FOR THE FOOT
- WEIGHT REDUCTION COUNSELING DONE
- PAIN MEDICATION USE LIMITS SET WITH THE PATIENT AND AGREED UPON. PATIENT VERBALISED UNDERSTANDING.
- SLEEP LOG TO BE INITIATED AND AVOID CAFFEINATED DRINKS AND COFFEE
- CHECK TSH LEVEL
- LOCAL CARE OF THE FOOT WOUND
- INHALERS AS NEEDED
- RESUME ANTIHYPERTENSIVES. PARAMETERS PLACED FOR BLOOD PRESSURE MEDICATION HOLDING
- THE PATIENT IS HOMELESS THE SOCIAL WORKER SHOULD BE TAKING CARE OF THAT ON DISCHARGE

Printed by:

Printed on: 10/24/2023 09:19 CDT

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History and Physical
*** Final Report ***

--CBC IS ACCEPTABLE FOLLOW AS OUTPT.
--MEDICATION COMPLIANCE COUNSELING DONE.
--CONTINUE CHOLECALCIFEROL.
--MONITOR HR AND THE RHYTHM.
--WEIGHT LOSS ADVISED.

--PSYCH MANAGEMENT & MED RECONCILIATION AS PER PSYCHIATRIC SERVICES.
--THE HOME MEDICATION HISTORY HAS BEEN REVIEWED AND RECONCILED AND THE MEDICATIONS ADJUSTED AS NEEDED.
--AFTER DISCHARGE FOLLOWUP WITH ME OR PCP WITHIN 3-4 DAYS.
--ADVISED TO REPORT TO THE PCP OF DEVELOPMENT OF ANY NEW SYMPTOMS OR ANY SIDE EFFECTS OF THE MEDICINE IMMEDIATELY UPON NOTICING IT.

Signature Line
[Electronically Signed By:]

On, 10/18/2023 03:53 PM

Completed Action List:

- * Perform by [REDACTED] on October 18, 2023 15:53 CDT
- * Sign by [REDACTED] on October 18, 2023 15:53 CDT
- * VERIFY by [REDACTED] on October 18, 2023 15:53 CDT

Psychiatric Evaluation
*** Final Report ***

Result Type: Psychiatric Evaluation
Date: October 19, 2023 08:30 CDT
Result Status: Auth (Verified)
Result Title: Psychiatric Evaluation
Performed By: [REDACTED] on October 19, 2023 08:03 CDT
Verified By: [REDACTED] on October 19, 2023 10:14 CDT
Encounter info: 50036288, GLE, Behavioral Health Adult, 10/18/2023 -
Contributor system: GLE MMODAL

*** Final Report ***

Psychiatric Evaluation
DATE: 10/18/2023

HISTORY OF PRESENT ILLNESS:

39-year-old female born on [REDACTED] was admitted on 10/18, seen on 10/18 on site. This patient came from Kishwaukee Hospital, was wandering trespassing at best by, making verbal threats at the hospital. She made verbal threats toward the staff, threatened to leave the ER, was agitated, required p.r.n. medication including Ativan and _____ Zyprexa IM. The patient does have a legal guardian.

PAST MEDICAL HISTORY:

Includes diabetes, hypertension, bipolar schizophrenia. The patient has an ulcer wound on the right leg. Left leg _____ on the big toe. UDS was negative. Pregnancy test was negative.

LEGAL STATUS:

Competent to sign in voluntarily.

MENTAL STATUS:

The patient was poorly dressed and groomed. She was showing manic-like behavior, pressured speech, poor boundaries. Intelligence and fund of knowledge average. Ability to concentrate distractible. Ability to abstract concrete. Speech was tangential and loud. Denied imminent suicidal or homicidal ideation. She was oriented x3. Memory seemed somewhat vague for remote and recent events.

DIAGNOSIS:

Bipolar disorder, mixed.

REASON FOR ADMISSION:

SEVERITY OF ILLNESS CRITERIA

1. Aggressive or homicidal ideations or threats.
2. Marked regression or intensification of significant problems or symptoms.

Printed by: [REDACTED]
Printed on: 10/24/2023 09:19 CDT

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Psychiatric Evaluation*** Final Report ***

3. Severe impairment in ability to perform ADLs.
4. Inability to comply with psychiatric medication or other prescribed treatment.
5. Clinically dangerous instability of the patient.
6. Inability to provide for personal safety, property safety.

INTENSITY OF SERVICE CRITERIA:

1. Failure to respond to treatment in an outpatient or other less restrictive milieu such that symptoms are worsened or course of illness has deteriorated.
2. Psychotropic medication administration requires monitoring available only in an inpatient setting.
3. Diagnostic evaluation or treatment planning requires 24-hour-per-day skilled observations in an inpatient setting.

SHORT-TERM GOAL:

Admit to the locked psychiatric unit. Prevent self-harm.

LONG-TERM GOAL:

Stabilize and return back to the community.

Her projected length of stay is 4 to 5 days. Routine labs were ordered. They showed an elevated glucose, POC glucose of 217 and 390. Dr. Shahzad was assigned to do the H and P and medical management. Projected length of stay is 4 to 5 days.

DISCHARGE PLAN:

Possible ICF placement.

DGB/23812791/MODL

DD: 10/19/2023 08:03:04

DT: 10/19/2023 08:30:39

Job #: [REDACTED]

Signature Line

[Electronically Signed By:]

On, 10/19/2023 10:14 AM**Completed Action List:**

- * Perform by [REDACTED] on October 19, 2023 08:03 CDT
- * Transcribe by [REDACTED] on October 19, 2023 08:30 CDT
- * Sign by [REDACTED] on October 19, 2023 10:14 CDT Requested on October 19, 2023 08:33 CDT

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19 CDT

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Psychiatric Evaluation
*** Final Report ***

* VERIFY by [REDACTED] on October 19, 2023 10:14 CDT

Printed by: [REDACTED]
Printed on: 10/24/2023 09:19 CDT

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Flowsheet Print Request

Patient: [REDACTED]
MRN: [REDACTED]

Printed by: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed on: 10/24/2023 09:19

Medications	10/25/2023 09:00	10/25/2023 07:30	10/25/2023 07:00	10/24/2023 21:00	10/24/2023 17:00
Scheduled					
amlodipine	10 mg				
10 mg, TAB, PO, Daily, 10/18/23 11:13:00 CDT	Last given:				
-- At home, patient was taking medication with ...	10 mg @				
	10/24/2023				
	08:03 CDT				
benzocaine topical					
benzocaine topical (Orajel)	1 APP			1 APP	1 APP
1 APP, GEL, TOP, 4 times a day, 10/23/23 17:00:00 CDT	Last given:			Last given:	Last given:
	1 APP @			1 APP @	1 APP @
	10/24/2023			10/24/2023	10/24/2023
	08:29 CDT			08:29 CDT	08:29 CDT
benzocaine topical					
cadexomer iodine topical (cadexomer iodine ...	0.9 %				
0.9 %, GEL, TOP, Daily, 10/21/23 9:00:00 CDT	Last given:				
Cleanse the wounds with NS, pat dry, apply Iodos...	0.9 % @				
	10/22/2023				
	09:00 CDT				
cadexomer-iodine topical					
doxycycline (doxycycline monohydrate)	100 mg			100 mg	
100 mg, CAP, PO, BID (2 times a day), Other-Enter	Last given:			Last given:	
in Order Comments, 10/18/23 11:15:00 CDT, Stop	100 mg @			100 mg @	
date 11/28/23 9:00:00 CST	10/24/2023			10/24/2023	
doxycycline	08:03 CDT			08:03 CDT	
ferrous sulfate					
325 mg, TAB, PO, Daily, 10/18/23 11:20:00 CDT	325 mg				
	Last given:				
	325 mg @				
	10/24/2023				
	08:03 CDT				
ferrous sulfate					
fluticasone nasal					
100 mcg, SPRAY, Nasal, Daily, 10/18/23 11:23:00 CDT	100 mcg				
	Last given:				
	100 mcg @				
	10/24/2023				
	08:30 CDT				
fluticasone nasal					
haloperidol (Haldol Decanoate)					
100 mg, INJ, IM, Q4WEEK (Every 4 weeks),					
10/18/23 7:18:00 CDT					
-- At home, patient was taking medication with ...					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
haloperidol (Haldol)	10 mg			10 mg	
10 mg, TAB, PO, BID (2 times a day), 10/22/23 9:00:00 CDT	Last given:			Last given:	
	10 mg @			10 mg @	
	10/24/2023			10/24/2023	
	08:03 CDT			08:03 CDT	
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					

Flowsheet Print Request

Patient: [REDACTED]

Printed by: [REDACTED]

MRN: [REDACTED]

Printed on: 10/24/2023 09:19

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Medications	10/25/2023 09:00	10/25/2023 07:30	10/25/2023 07:00	10/24/2023 21:00	10/24/2023 17:00
insulin glargine 50 Unit, INJ, Subcut, Daily, 10/18/23 21:00:00 CDT --- At home, patient was taking medication with ...				50 Unit Last given: 50 Unit @ 10/23/2023 20:41 CDT	
insulin glargine Blood Glucose, MAR 2nd Clinician Verification Before Admin				18 Unit Last given: 18 Unit @ 10/23/2023 12:13 CDT	
insulin lispro 18 Unit, INJ, Subcut, TIDAC (3 times a day before meals), 10/18/23 10:00:00 CDT --- At home, patient was taking medication with ...					
insulin lispro Blood Glucose, MAR 2nd Clinician Verification Before Admin					
lisinopril 10 mg, TAB, PO, Daily, 10/18/23 11:14:00 CDT --- At home, patient was taking medication with ...	10 mg 10/24/2023 08:03 CDT				
lisinopril			1,000 mg Last given: 1000 mg @ 10/21/2023 08:53 CDT		
metFORMIN 1,000 mg, TAB, PO, BID (2 times a day), 10/18/23 10:00:00 CDT --- At home, patient was taking medication with ...					
metFORMIN OLANZapine 20 mg, TAB, PO, QHS (At bedtime), 10/18/23 21:00:00 CDT --- At home, patient was taking medication with ...				20 mg Last given: 20 mg @ 10/23/2023 20:41 CDT	
olanzapine Richmond Agitation-Sedation Scale (RASS) Respiratory Rate					
PRN	PRN				
acetaminophen 650 mg, TAB, PO, Q6H (Every 6 hours), PRN Pain, 10/18/23 10:12:00 CDT, 10/18/23 10:12:00 CDT --- At home, patient was taking medication with ...					
acetaminophen Location of Pain Pain Site Acute Pain Score Acute Pain Goal Chronic Pain Score Chronic Pain Goal Wong-Baker FACES Pain Rating Scale Richmond Agitation-Sedation Scale (RASS) Respiratory Rate Med Responses					

Flowsheet Print Request

Patient: [REDACTED]

MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19

Medications	10/25/2023 09:00	10/25/2023 07:30	10/25/2023 07:00	10/24/2023 21:00	10/24/2023 17:00
albuterol (albuterol inhaler) 180 mcg, INHALER, Inhalation, Q4H (Every 4 hours), PRN Shortness of Breath, 10/18/23 10:12:00 CDT --- At home patient was taking medication with albuterol	PRN				
benztropine 1 mg, INJ, IM, Q8H (Every 8 hours), PRN Other (see comment), 10/18/23 1:22:00 CDT, 10/18/23 1:22:00 CDT PRN Stiffneck/Akathisia	PRN				
calcium carbonate (Tums 500) 1,250 mg, CHEW TAB, Chewed, TID (3 times a day), PRN dyspepsia. 10/18/23 10:14:00 CDT	PRN				
calcium carbonate					
docosate (Colace) 100 mg, CAP, PO, BID (2 times a day), PRN Constipation, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT	PRN				
docosate					
fluticasone nasal (fluticasone 50 mcg/inh nas... 50 mcg, 1 Spray, SPRAY, Both Nares, Daily, PRN Congestion, 10/18/23 10:13:00 CDT --- At home patient was taking medication with ...	PRN				
haloperidol 5 mg, TAB, PO, Q8H (Every 8 hours), PRN Agitation, 10/18/23 1:22:00 CDT	PRN				
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
haloperidol 10 mg, INJ, IM, Q3H (Every 3 hours), PRN Agitation, 10/18/23 1:22:00 CDT Give this medication ONLY if patient cannot toler...	PRN				
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
ibuprofen (Motrin) 400 mg, TAB, PO, Q8H (Every 8 hours), PRN Pain, Mild, 10/23/23 15:15:00 CDT, 10/23/23 15:15:00	PRN				
ibuprofen					

Flowsheet Print Request

Patient:						Printed by:		
MRN:	Date Range: 10/23/2023 09:19 - 10/25/2023 09:19					Printed on: 10/24/2023 09:19		
Medications	10/25/2023 09:00	10/25/2023 07:30	10/25/2023 07:00	10/24/2023 21:00	10/24/2023 17:00			
Location of Pain								
Pain Site								
Acute Pain Score								
Acute Pain Goal								
Chronic Pain Score								
Chronic Pain Goal								
Wong-Baker FACES Pain Rating Scale								
Richmond Agitation-Sedation Scale (RASS)								
Respiratory Rate								
Med Responses								
loperamide (Imodium A-D)	PRN							
4 mg, CAP, PO, Q6H (Every 6 hours), PRN as needed for loose stool, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT								
loperamide								
LORazepam	PRN							
1 mg, INJ, IM, Q6H (Every 6 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT								
Give this medication ONLY if patient cannot tolerate.								
LORazepam								
Richmond Agitation-Sedation Scale (RASS)								
Respiratory Rate								
Med Responses								
LORazepam	PRN							
1 mg, TAB, PO, Q8H (Every 8 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT								
LORazepam								
Richmond Agitation-Sedation Scale (RASS)								
Respiratory Rate								
Med Responses								
magnesium hydroxide	PRN							
2.4 GM, SUSP, PO, Daily, PRN Constipation, 10/18/23 1:22:00 CDT. (Milk of Magnesia)								
magnesium hydroxide								
Med Responses								
ondansetron (Zofran ODT)	PRN							
4 mg, DIS Tablet, PO, Q8H (Every 8 hours), PRN Nausea/Vomiting, 10/18/23 10:14:00 CDT, 10/18/23 10:14:00 CDT								
ondansetron								
Med Responses								

Flowsheet Print Request

Printed by [REDACTED]

Patient: [REDACTED]
MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed on: 10/24/2023 09:19

Medications	10/24/2023 16:30	10/24/2023 16:00	10/24/2023 13:00	10/24/2023 12:00	10/24/2023 09:19
Scheduled					
amLODIPine					
10 mg, TAB, PO, Daily, 10/18/23 11:13:00 CDT					
-- At home, patient was taking medication with ...					
benzocaine topical					
benzocaine topical (Orajel)					
1 APP, GEL, TOP, 4 times a day, 10/23/23 17:00:00 CDT					
Cleanse the wounds with NS, pat dry, apply todos...					
cadexomer-iodine topical					
doxycycline (doxycycline monohydrate)					
100 mg, CAP, PO, BID (2 times a day), Other-Enter in Order Comments, 10/18/23 11:15:00 CDT, Stop date 11/28/23 9:00:00 CST					
doxycycline					
ferrous sulfate					
325 mg, TAB, PO, Daily, 10/18/23 11:20:00 CDT					
ferrous sulfate					
fluticasone nasal					
100 mcg, SPRAY, Nasal, Daily, 10/18/23 11:23:00 CDT					
fluticasone nasal					
haloperidol (Haldol Decanoate)					
100 mg, INJ, IM, Q4WEEK (Every 4 weeks), 10/18/23 7:18:00 CDT					
-- At home, patient was taking medication with ...					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
haloperidol (Haldol)					
10 mg, TAB, PO, BID (2 times a day), 10/22/23 9:00:00 CDT					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					



Flowsheet Print Request

Patient:	Printed by:					
MRN	Date Range: 10/23/2023 09:19 - 10/25/2023 09:19					Printed on: 10/24/2023 09:19
Medications	10/24/2023 16:30	10/24/2023 16:00	10/24/2023 13:00	10/24/2023 12:00	10/24/2023 09:19	
Insulin glargine 50 Unit, INJ, Subcut, Daily, 10/18/23 21:00:00 CDT --- At home, patient was taking medication with ...						
Insulin glargine Blood Glucose, MAR 2nd Clinician Verification Before Admin						
Insulin lispro 18 Unit, INJ, Subcut, TIDAC (3 times a day before meals), 10/18/23 10:00:00 CDT --- At home, patient was taking medication with ...	18 Unit Last given: 18 Unit @ 10/23/2023 12:13 CDT				18 Unit Last given: 18 Unit @ 10/23/2023 12:13 CDT	
Blood Glucose, MAR 2nd Clinician Verification Before Admin						
Iisinopril 10 mg, TAB, PO, Daily, 10/18/23 11:14:00 CDT --- At home, patient was taking medication with ...						
Iisinopril						
metFORMIN 1,000 mg, TAB, PO, BID (2 times a day), 10/18/23 10:00:00 CDT --- At home, patient was taking medication with ...	1,000 mg Last given: 1000 mg @ 10/21/2023 08:53 CDT					
metFORMIN						
OLANZapine 20 mg, TAB, PO, QHS (At bedtime), 10/18/23 21:00:00 CDT --- At home, patient was taking medication with ...						
olanzapine Richmond Agitation-Sedation Scale (RASS) Respiratory Rate						
PRN						
acetaminophen 650 mg, TAB, PO, Q6H (Every 6 hours), PRN Pain, 10/18/23 10:12:00 CDT, 10/18/23 10:12:00 CDT --- At home, patient was taking medication with ...	PRN 650 mg Last given: 650 mg @ 10/23/2023 12:46 CDT					
acetaminophen Location of Pain Pain Site Acute Pain Score Acute Pain Goal Chronic Pain Score Chronic Pain Goal Wong-Baker FACES Pain Rating Scale Richmond Agitation-Sedation Scale (RASS) Respiratory Rate Med Responses						

Flowsheet Print Request

Printed by:

Printed on: 10/24/2023 09:19

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Medications	10/24/2023 PRN	10/24/2023 16:30	10/24/2023 16:00	10/24/2023 13:00	10/24/2023 12:00	10/24/2023 09:19
albuterol (albuterol inhaler) 180 mcg, INHALER, Inhalation, Q4H (Every 4 hours), PRN Shortness of Breath, 10/18/23 10:12:00 CDT --- At home, patient was taking medication with albuterol						180 mcg Not given within 5 days.
benztropine 1 mg, INJ, IM, Q8H (Every 8 hours), PRN Other (see comment), 10/18/23 1:22:00 CDT, 10/18/23 1:22:00 CDT PRN Stiffness/Akathesia benztropine		PRN				1 mg Last given: 1 mg @ 10/22/2023 12:46 CDT
calcium carbonate (Tums 500) 1,250 mg, CHEW TAB, Chewed, TID (3 times a day), PRN dyspepsia, 10/18/23 10:14:00 CDT calcium carbonate		PRN				1,250 mg Not given within 5 days.
docusate (Colace) 100 mg, CAP, PO, BID (2 times a day), PRN Constipation, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT docusate		PRN				100 mg Not given within 5 days.
fluticasone nasal (fluticasone 50 mcg/inh nas... 50 mcg, 1 Spray, SPRAY, Both Nares, Daily, PRN Congestion, 10/18/23 10:13:00 CDT --- At home, patient was taking medication with ... fluticasone nasal		PRN				50 mcg Last given: 50 mcg @ 10/20/2023 08:58 CDT
haloperidol 5 mg, TAB, PO, Q8H (Every 8 hours), PRN Agitation, 10/18/23 1:22:00 CDT haloperidol		PRN				5 mg Last given: 5 mg @ 10/22/2023 00:48 CDT
Richmond Agitation-Sedation Scale (RASS) Respiratory Rate Med Responses						
haloperidol 10 mg, INJ, IM, Q3H (Every 3 hours), PRN Agitation, 10/18/23 1:22:00 CDT Give this medication ONLY if patient cannot toler... haloperidol		PRN				10 mg Last given: 10 mg @ 10/23/2023 01:36 CDT
Richmond Agitation-Sedation Scale (RASS) Respiratory Rate Med Responses						
ibuprofen (Motrin) 400 mg, TAB, PO, Q8H (Every 8 hours), PRN Pain, Mild, 10/23/23 15:15:00 CDT, 10/23/23 15:15:00 CDT ibuprofen		PRN				400 mg Not given within 5 days.

Flowsheet Print Request

Patient [REDACTED]
MRN: [REDACTED]

Printed by: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed on: 10/24/2023 09:19

Medications	10/24/2023 16:30	10/24/2023 16:00	10/24/2023 13:00	10/24/2023 12:00	10/24/2023 09:19
Location of Pain					
Pain Site					
Acute Pain Score					
Acute Pain Goal					
Chronic Pain Score					
Chronic Pain Goal					
Wong-Baker FACES Pain Rating Scale					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
loperamide (Imodium A-D)	PRN				4 mg
4 mg, CAP, PO, Q6H (Every 6 hours), PRN as needed for loose stool, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT					Not given within 5 days.
loperamide					
LORazepam	PRN				1 mg
1 mg, INJ, IM, Q6H (Every 6 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT					Last given: 1 mg @ 10/23/2023 01:36 CDT
Give this medication ONLY if patient cannot toler...					
LORazepam					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
LORazepam	PRN				1 mg
1 mg, TAB, PO, Q8H (Every 8 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT					Last given: 1 mg @ 10/21/2023 20:52 CDT
LORazepam					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
magnesium hydroxide	PRN				2.4 GM
2.4 GM, SUSP, PO, Daily, PRN Constipation, 10/18/23 1:22:00 CDT, (Milk of Magnesia)					Not given within 5 days.
magnesium hydroxide					
Med Responses					
ondansetron (Zofran ODT)	PRN				4 mg
4 mg, DIS Tablet, PO, Q8H (Every 8 hours), PRN Nausea/Vomiting, 10/18/23 10:14:00 CDT, 10/18/23 10:14:00 CDT					Not given within 5 days.
ondansetron					
Med Responses					

Flowsheet Print Request

Patient [REDACTED]
MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed by: [REDACTED]
Printed on: 10/24/2023 09:19

Medications	10/24/2023 09:00	10/24/2023 08:30	10/24/2023 08:29	10/24/2023 08:05	10/24/2023 08:03
Scheduled					
amLODIPINE					
10 mg, TAB, PO, Daily, 10/18/23 11:13:00 CDT					
--- At home, patient was taking medication with ...					
 amlodipine					
benzocaine topical (Orajel)					
1 APP, GEL, TOP, 4 times a day, 10/23/23 17:00:00 CDT					
 benzocaine topical					
cadexomer iodine topical (cadexomer iodine ...					
0.9, GEL, TOP, Daily, 10/21/23 9:00:00 CDT					
Cleanse the wounds with NS, pat dry, apply Iodos... 0.9 % @					
10/22/2023					
09:00 CDT					
 cadexomer-iodine topical					
 doxycycline (doxycycline monohydrate)					
100 mg, CAP, PO, BID (2 times a day), Other-Enter in Order Comments, 10/18/23 11:15:00 CDT, Stop date 11/28/23 9:00:00 CST					
doxycycline					
 ferrous sulfate					
325 mg, TAB, PO, Daily, 10/18/23 11:20:00 CDT					
 ferrous sulfate					
fluticasone nasal					
100 mcg, SPRAY, Nasal, Daily, 10/18/23 11:23:00 CDT					
 fluticasone nasal					
 haloperidol (Haldol Decanoate)					
100 mg, INJ, IM, Q4WEEK (Every 4 weeks), 10/18/23 7:18:00 CDT					
--- At home, patient was taking medication with ...					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
 haloperidol (Haldol)					
10 mg, TAB, PO, BID (2 times a day), 10/22/23 9:00:00 CDT					
 haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					

Flowsheet Print Request

Patient [REDACTED]

Printed by [REDACTED]

MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed on: 10/24/2023 09:19

Medications	10/24/2023 09:00	10/24/2023 08:30	10/24/2023 08:29	10/24/2023 08:05	10/24/2023 08:03
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**Insulin glargine**

50 Unit, INU, Subcut, Daily, 10/18/23 21:00:00 CDT

--- At home, patient was taking medication with ...

insulin glargine

Blood Glucose, MAR

2nd Clinician Verification Before Admin

**Insulin lispro**

18 Unit, INU, Subcut, TIDAC (3 times a day before meals), 10/18/23 10:00:00 CDT

--- At home, patient was taking medication with ...

insulin lispro

Blood Glucose, MAR

2nd Clinician Verification Before Admin

lisinopril

10 mg, TAB, PO, Daily, 10/18/23 11:14:00 CDT

--- At home, patient was taking medication with ...

Not Given: Refu

Yes - U-200, U-:

lisinopril

10 mq Auth (Ve

**metFORMIN**

1,000 mg, TAB, PO, BID (2 times a day), 10/18/23

10:00:00 CDT

--- At home, patient was taking medication with ...

metFORMIN

OLANZapine

20 mg, TAB, PO, QHS (At bedtime), 10/18/23

21:00:00 CDT

--- At home, patient was taking medication with ...

Not Given: Refu

olanzapine

Richmond Agitation-Sedation Scale (RASS)

Respiratory Rate

PRN**PRN****acetaminophen**

650 mg, TAB, PO, Q6H (Every 6 hours), PRN Pain,

10/18/23 10:12:00 CDT, 10/18/23 10:12:00 CDT

--- At home, patient was taking medication with ...

acetaminophen

Location of Pain

Pain Site

Acute Pain Score

Acute Pain Goal

Chronic Pain Score

Chronic Pain Goal

Wong-Baker FACES Pain Rating Scale

Richmond Agitation-Sedation Scale (RASS)

Respiratory Rate

Med Responses

Flowsheet Print Request

Patient [REDACTED]

MRN: [REDACTED]

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Medications

	10/24/2023 09:00	10/24/2023 08:30	10/24/2023 08:29	10/24/2023 08:05	10/24/2023 08:03
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PRN

albuterol (albuterol inhaler)

180 mcg, INHALER, Inhalation, Q4H (Every 4 hours), PRN Shortness of Breath, 10/18/23

10:12:00 CDT

--- At home, patient was taking medication with albuterol



PRN

benztropine

1 mg, INJ, IM, Q8H (Every 8 hours), PRN Other (see comment), 10/18/23 1:22:00 CDT, 10/18/23 1:22:00 CDT

PRN Stiffness/Akathesia
benztropine

PRN

calcium carbonate (Tums 500)1,250 mg, CHEW TAB, Chewed, TID (3 times a day), PRN dyspepsia, 10/18/23 10:14:00 CDT
calcium carbonate

PRN

docosate (Colace)100 mg, CAP, PO, BID (2 times a day), PRN Constipation, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT
docosate

PRN

fluticasone nasal (fluticasone 50 mcg/inh nas..)

50 mcg, 1 Spray, SPRAY, Both Nares, Daily, PRN Congestion, 10/18/23 10:13:00 CDT

--- At home, patient was taking medication with ...
fluticasone nasal

PRN

haloperidol

5 mg, TAB, PO, Q8H (Every 8 hours), PRN Agitation, 10/18/23 1:22:00 CDT

haloperidol

Richmond Agitation-Sedation Scale (RASS)

Respiratory Rate

Med Responses



PRN

haloperidol10 mg, INJ, IM, Q3H (Every 3 hours), PRN Agitation, 10/18/23 1:22:00 CDT
Give this medication ONLY if patient cannot toler...**haloperidol**

Richmond Agitation-Sedation Scale (RASS)

Respiratory Rate

Med Responses

PRN

Ibuprofen (Motrin)400 mg, TAB, PO, Q8H (Every 8 hours), PRN Pain, Mild, 10/23/23 15:15:00 CDT, 10/23/23 15:15:00
PRN
ibuprofen

Flowsheet Print Request

Patient MRN		Printed by [REDACTED]				
	Date Range: 10/23/2023 09:19 - 10/25/2023 09:19	Printed on: 10/24/2023 09:19				
Medications	10/24/2023 09:00	10/24/2023 08:30	10/24/2023 08:29	10/24/2023 08:05	10/24/2023 08:03	
Location of Pain						
Pain Site						
Acute Pain Score						
Acute Pain Goal						
Chronic Pain Score						
Chronic Pain Goal						
Wong-Baker FACES Pain Rating Scale						
Richmond Agitation-Sedation Scale (RASS)						
Respiratory Rate						
Med Responses						
loperamide (Imodium A-D)	PRN					
4 mg, CAP, PO, Q6H (Every 6 hours), PRN as needed for loose stool, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT						
loperamide	PRN					
LORazepam	PRN					
1 mg, INJ, IM, Q6H (Every 6 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT						
Give this medication ONLY if patient cannot toler...						
LORazepam	PRN					
Richmond Agitation-Sedation Scale (RASS)						
Respiratory Rate						
Med Responses	PRN					
LORazepam	PRN					
1 mg, TAB, PO, Q8H (Every 8 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT						
LORazepam	PRN					
Richmond Agitation-Sedation Scale (RASS)						
Respiratory Rate						
Med Responses	PRN					
magnesium hydroxide	PRN					
2.4 GM, SUSP, PO, Daily, PRN Constipation, 10/18/23 1:22:00 CDT. (Milk of Magnesia)						
magnesium hydroxide						
Med Responses	PRN					
ondansetron (Zofran ODT)						
4 mg, DIS Tablet, PO, Q8H (Every 8 hours), PRN Nausea/Vomiting, 10/18/23 10:14:00 CDT, 10/18/23 10:14:00 CDT						
ondansetron						
Med Responses						

Flowsheet Print Request

Printed by:

Printed on: 10/24/2023 09:19

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Medications	10/23/2023 20:59	10/23/2023 20:41	10/23/2023 17:00	10/23/2023 16:30	10/23/2023 16:00
Scheduled					
amLODIPine					
10 mg, TAB, PO, Daily, 10/18/23 11:13:00 CDT					
--- At home, patient was taking medication with ...					
amlodipine					
benzocaine topical (Orajel)					
1 APP, GEL, TOP, 4 times a day, 10/23/23 17:00:00 CDT					
Cleanse the wounds with NS, pat dry, apply Iodos...					
benzocaine topical					
cadexomer iodine topical (cadexomer iodine ...					
0.9, GEL, TOP, Daily, 10/21/23 9:00:00 CDT					
Cleanse the wounds with NS, pat dry, apply Iodos...					
cadexomer-iodine topical					
doxycycline (doxycycline monohydrate)					
100 mg, CAP, PO, BID (2 times a day), Other-Enter in Order Comments, 10/18/23 11:15:00 CDT, Stop date 11/28/23 9:00:00 CST					
doxycycline					
100 mq Auth (V)					
ferrous sulfate					
325 mg, TAB, PO, Daily, 10/18/23 11:20:00 CDT					
ferrous sulfate					
fluticasone nasal					
100 mcg, SPRAY, Nasal, Daily, 10/18/23 11:23:00 CDT					
fluticasone nasal					
haloperidol (Haldol Decanoate)					
100 mg, INJ, IM, Q4WEEK (Every 4 weeks), 10/18/23 7:18:00 CDT					
--- At home, patient was taking medication with ...					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
haloperidol (Haldol)					
10 mg, TAB, PO, BID (2 times a day), 10/22/23 9:00:00 CDT					
haloperidol					
10 mq Auth (Ve					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					

Flowsheet Print Request

Printed by [REDACTED]

Printed on: 10/24/2023 09:19

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Medications	10/23/2023 20:59	10/23/2023 20:41	10/23/2023 17:00	10/23/2023 16:30	10/23/2023 16:00
Insulin glargine					
50 Unit, INJ, Subcut, Daily, 10/18/23 21:00:00 CDT					
--- At home, patient was taking medication with ...					
insulin glargine		50 Unit Auth (Ve)			
Blood Glucose, MAR					
2nd Clinician Verification Before Admin		N/A - U-100 Ins			
Insulin lispro					
18 Unit, INJ, Subcut, TIDAC (3 times a day before meals), 10/18/23 10:00:00 CDT					
--- At home, patient was taking medication with ...					
insulin lispro				Not Given: Refu	
Blood Glucose, MAR					
2nd Clinician Verification Before Admin				N/A - U-100 ins	
lisinopril					
lisinopril					
metFORMIN					
1,000 mg, TAB, PO, BID (2 times a day), 10/18/23 10:00:00 CDT					
--- At home, patient was taking medication with ...					
metFORMIN			Not Given: Refu		
OLANZapine					
20 mg, TAB, PO, QHS (At bedtime), 10/18/23 21:00:00 CDT					
--- At home, patient was taking medication with ...					
olanzapine		20 mq Auth (Ve)			
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
PRN					
acetaminophen					
acetaminophen					
650 mg, TAB, PO, Q6H (Every 6 hours), PRN Pain, 10/18/23 10:12:00 CDT, 10/18/23 10:12:00 CDT					
--- At home, patient was taking medication with ...					
acetaminophen					
Location of Pain					
Pain Site					
Acute Pain Score					
Acute Pain Goal					
Chronic Pain Score					
Chronic Pain Goal					
Wong-Baker FACES Pain Rating Scale					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					

Flowsheet Print Request

Patient [REDACTED]
MRN: [REDACTED]

Printed by: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed on: 10/24/2023 09:19

Medications	10/23/2023 20:59	10/23/2023 20:41	10/23/2023 17:00	10/23/2023 16:30	10/23/2023 16:00
albuterol (albuterol inhaler)					
180 mcg, INHALER, Inhalation, Q4H (Every 4 hours), PRN Shortness of Breath, 10/18/23 10:12:00 CDT					
--- At home, patient was taking medication with albuterol					
benztrapine	PRN				
1 mg, INJ, IM, Q8H (Every 8 hours), PRN Other (see comment), 10/18/23 1:22:00 CDT, 10/18/23 1:22:00 CDT					
PRN Stiffness/Akathesia					
benztrapine					
calcium carbonate (Tums 500)	PRN				
1,250 mg, CHEW TAB, Chewed, TID (3 times a day), PRN dyspepsia, 10/18/23 10:14:00 CDT					
calcium carbonate					
docusate (Colace)	PRN				
100 mg, CAP, PO, BID (2 times a day), PRN Constipation, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT					
docusate					
fluticasone nasal (fluticasone 50 mcg/inh nas...)	PRN				
50 mcg, 1 Spray, SPRAY, Both Nares, Daily, PRN Congestion, 10/18/23 10:13:00 CDT					
--- At home, patient was taking medication with ... fluticasone nasal					
haloperidol	PRN				
5 mg, TAB, PO, Q8H (Every 8 hours), PRN Agitation, 10/18/23 1:22:00 CDT					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
haloperidol	PRN				
10 mg, INJ, IM, Q3H (Every 3 hours), PRN Agitation, 10/18/23 1:22:00 CDT					
Give this medication ONLY if patient cannot toler...					
haloperidol					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
ibuprofen (Motrin)	PRN				
400 mg, TAB, PO, Q8H (Every 8 hours), PRN Pain, Mild, 10/23/23 15:15:00 CDT, 10/23/23 15:15:00 CDT					
ibuprofen					

Flowsheet Print Request

Patient: [REDACTED]

Printed by: [REDACTED]

MRN: [REDACTED]

Printed on: 10/24/2023 09:19

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Medications	10/23/2023 20:59	10/23/2023 20:41	10/23/2023 17:00	10/23/2023 16:30	10/23/2023 16:00
Location of Pain					
Pain Site					
Acute Pain Score					
Acute Pain Goal					
Chronic Pain Score					
Chronic Pain Goal					
Wong-Baker FACES Pain Rating Scale					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses					
loperamide (Imodium A-D)	PRN				
4 mg, CAP, PO, Q6H (Every 6 hours), PRN as needed for loose stool, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT					
loperamide					
LORazepam	PRN				
1 mg, INJ, IM, Q6H (Every 6 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT					
Give this medication ONLY if patient cannot tolerate.					
LORazepam					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses	PRN				
LORazepam					
1 mg, TAB, PO, Q8H (Every 8 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT					
LORazepam					
Richmond Agitation-Sedation Scale (RASS)					
Respiratory Rate					
Med Responses	PRN				
magnesium hydroxide					
2.4 GM, SUSP, PO, Daily, PRN Constipation, 10/18/23 1:22:00 CDT, (Milk of Magnesia)					
magnesium hydroxide					
Med Responses	PRN				
ondansetron (Zofran ODT)					
4 mg, DIS Tablet, PO, Q8H (Every 8 hours), PRN Nausea/Vomiting, 10/18/23 10:14:00 CDT, 10/18/23 10:14:00 CDT					
ondansetron					
Med Responses					

Patient: [REDACTED]
MRN: [REDACTED]

Flowsheet Print Request

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19

Medications	10/23/2023 13:46	10/23/2023 12:46	10/23/2023 12:13
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Scheduled

amlodipine

10 mg, TAB, PO, Daily, 10/18/23 11:13:00 CDT

--- At home, patient was taking medication with ...

amlodipine**benzocaine topical (Orajel)**

1 APP, GEL, TOP, 4 times a day, 10/23/23 17:00:00

CDT

benzocaine topical**cadexomer iodine topical (cadexomer iodine ...**

0.9, GEL, TOP, Daily, 10/21/23 9:00:00 CDT

Cleanse the wounds with NS, pat dry, apply Iodos...

cadexomer-iodine topical**doxycycline (doxycycline monohydrate)**

100 mg, CAP, PO, BID (2 times a day), Other-Enter

in Order Comments, 10/18/23 11:15:00 CDT, Stop

date 11/28/23 9:00:00 CST

doxycycline**ferrous sulfate**

325 mg, TAB, PO, Daily, 10/18/23 11:20:00 CDT

ferrous sulfate**fluticasone nasal**

100 mcg, SPRAY, Nasal, Daily, 10/18/23 11:23:00

CDT

fluticasone nasal**haloperidol (Haldol Decanoate)**

100 mg, INJ, IM, Q4WEEK (Every 4 weeks),

10/18/23 7:18:00 CDT

--- At home, patient was taking medication with ...

haloperidol**Richmond Agitation-Sedation Scale (RASS)****Respiratory Rate****haloperidol (Haldol)**

10 mg, TAB, PO, BID (2 times a day), 10/22/23

9:00:00 CDT

haloperidol**Richmond Agitation-Sedation Scale (RASS)****Respiratory Rate**

Flowsheet Print Request

Patient [REDACTED]

MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19

Medications	10/23/2023 13:46	10/23/2023 12:46	10/23/2023 12:13
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Insulin glargine

50 Unit, INJ, Subcut, Daily, 10/18/23 21:00:00 CDT

--- At home, patient was taking medication with ...

Insulin glargine

Blood Glucose, MAR

2nd Clinician Verification Before Admin

Insulin lispro

18 Unit, INJ, Subcut, TIDAC (3 times a day before meals), 10/18/23 10:00:00 CDT

--- At home, patient was taking medication with ...

18 Unit Auth (V)

insulin lispro

Blood Glucose, MAR

2nd Clinician Verification Before Admin

N/A - U-100 ins

lisinopril

10 mg, TAB, PO, Daily, 10/18/23 11:14:00 CDT

--- At home, patient was taking medication with ...

lisinopril**metFORMIN**

1,000 mg, TAB, PO, BID (2 times a day), 10/18/23

10:00:00 CDT

--- At home, patient was taking medication with ...

metFORMIN**OLANZapine**

20 mg, TAB, PO, QHS (At bedtime), 10/18/23

21:00:00 CDT

--- At home, patient was taking medication with ...

olanzapine

Richmond Agitation-Sedation Scale (RASS)

Respiratory Rate

PRN**PRN****acetaminophen**

650 mg, TAB, PO, Q6H (Every 6 hours), PRN Pain,

10/18/23 10:12:00 CDT, 10/18/23 10:12:00 CDT

--- At home, patient was taking medication with ...

* 650 mg Auth (

acetaminophen

Location of Pain

Pain Site

Acute Pain Score

9 Auth (Verified)

Acute Pain Goal

Chronic Pain Score

Chronic Pain Goal

Wong-Baker FACES Pain Rating Scale

Richmond Agitation-Sedation Scale (RASS)

Respiratory Rate

Med Responses /

Flowsheet Print Request

Patient [REDACTED]

MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed by: [REDACTED]

Printed on: 10/24/2023 09:19

Medications	10/23/2023 13:46	10/23/2023 12:46	10/23/2023 12:13
albuterol (albuterol inhaler) 180 mcg, INHALER, Inhalation, Q4H (Every 4 hours), PRN Shortness of Breath, 10/18/23 10:12:00 CDT --- At home patient was taking medication with albuterol	PRN		
benztropine 1 mg, INJ, IM, Q8H (Every 8 hours), PRN Other (see comment), 10/18/23 1:22:00 CDT, 10/18/23 1:22:00 CDT PRN Stiffness/Akathisia benztropine	PRN		
calcium carbonate (Tums 500) 1,250 mg, CHEW TAB, Chewed, TID (3 times a day), PRN dyspepsia. 10/18/23 10:14:00 CDT calcium carbonate	PRN		
docusate (Colace) 100 mg, CAP, PO, BID (2 times a day), PRN Constipation, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT docusate	PRN		
fluticasone nasal (fluticasone 50 mcg/inh nas... 50 mcg, 1 Spray, SPRAY, Both Nares, Daily, PRN Congestion, 10/18/23 10:13:00 CDT --- At home patient was taking medication with ... fluticasone nasal	PRN		
haloperidol 5 mg, TAB, PO, Q8H (Every 8 hours), PRN Agitation, 10/18/23 1:22:00 CDT	PRN		
haloperidol Richmond Agitation-Sedation Scale (RASS) Respiratory Rate Med Responses	PRN		
haloperidol 10 mg, INJ, IM, Q3H (Every 3 hours), PRN Agitation, 10/18/23 1:22:00 CDT Give this medication ONLY if patient cannot toler... haloperidol Richmond Agitation-Sedation Scale (RASS) Respiratory Rate Med Responses	PRN		
ibuprofen (Motrin) 400 mg, TAB, PO, Q8H (Every 8 hours), PRN Pain, Mild, 10/23/23 15:15:00 CDT, 10/23/23 15:15:00 CDT ibuprofen	PRN		

Flowsheet Print Request

Patient [REDACTED]

MRN: [REDACTED]

Date Range: 10/23/2023 09:19 - 10/25/2023 09:19

Printed by [REDACTED]

Printed on: 10/24/2023 09:19

Medications	10/23/2023 13:46	10/23/2023 12:46	10/23/2023 12:13
Location of Pain			
Pain Site			
Acute Pain Score			
Acute Pain Goal			
Chronic Pain Score			
Chronic Pain Goal			
Wong-Baker FACES Pain Rating Scale			
Richmond Agitation-Sedation Scale (RASS)			
Respiratory Rate			
Med Responses			
	PRN		
loperamide (Imodium A-D)			
4 mg, CAP, PO, Q6H (Every 6 hours), PRN as needed for loose stool, 10/18/23 10:13:00 CDT, 10/18/23 10:13:00 CDT			
loperamide			
	PRN		
LORazepam			
1 mg, INJ, IM, Q6H (Every 6 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT			
Give this medication ONLY if patient cannot tolerate.			
LORazepam			
Richmond Agitation-Sedation Scale (RASS)			
Respiratory Rate			
Med Responses			
	PRN		
LORazepam			
1 mg, TAB, PO, Q8H (Every 8 hours), PRN as needed for anxiety, 10/18/23 1:22:00 CDT			
LORazepam			
Richmond Agitation-Sedation Scale (RASS)			
Respiratory Rate			
Med Responses			
	PRN		
magnesium hydroxide			
2.4 GM, SUSP, PO, Daily, PRN Constipation, 10/18/23 1:22:00 CDT, (Milk of Magnesia)			
magnesium hydroxide			
Med Responses			
	PRN		
ondansetron (Zofran ODT)			
4 mg, DIS Tablet, PO, Q8H (Every 8 hours), PRN Nausea/Vomiting, 10/18/23 10:14:00 CDT, 10/18/23 10:14:00 CDT			
ondansetron			
Med Responses			

BH MTP Plan of Care Shift Assessment
10/23/23 16:31 CDT Performed by [REDACTED] RN,CPI,
Entered on 10/23/23 16:34 CDT

BH Problem 1

BH MTP Problem 1: schizophrenia and ineffective coping
 BH MTP Problem 1 Status: Active
 BH MTP Problem 1 Symptoms: Bipolar, Schizophrenia/Psychotic
 BH MTP Problem 1 Goal 1: [REDACTED] will not show any aggressive behavior once while admitted
 BH MTP Problem 1 Goal Target Date 1: 10/25/23
 BH MTP Problem 1 Goal Type 1: Short term
 BH MTP Problem 1 Goal Status 1: Not progressing
 BH MTP Problem 1 Goal 1 Grid

BH MTP Problem 1 Intervention 1	Allow patient to verbalize frustrations	Encourage patient to reframe/refute negative thoughts
BH MTP Problem 1 Discipline 1	Team	Team
BH MTP Problem 1 Frequency 1	q shift	q shift
BH MTP Problem 1 Duration 1	7 days	7 days
BH MTP Problem 1 Status 1	Done	Done

BH MTP Problem 1 Goal 2: [REDACTED] will be compliant with ordered meds here and after discharge

BH MTP Problem 1 Goal Target Date 2: 11/01/23

BH MTP Problem 1 Goal Type 2: Long term

BH MTP Problem 1 Goal Status 2: Progressing

BH MTP Problem 1 Goal 2 Grid

BH MTP Problem 1 Intervention 2	RN will explain purpose of each medication administered and	Assess patient's thought process and current level of psycho
BH MTP Problem 1 Discipline 2	Team	Team
BH MTP Problem 1 Frequency 2	q shift	q shift
BH MTP Problem 1 Duration 2	until discharge	until discharge
BH MTP Problem 1 Status 2	Done	Done

POC Shift Narrative

BH Shift Narrative: Pt has been anxious, delusional, having frequent requests, labile, paranoid and restless. Pt has been medication compliant with no complaints of medication side effects. Pt attended partial groups. Pt currently denies SI/HI or A/V hallucinations but has been responding to internal stimuli.

Patient Name: [REDACTED] DOB / AGE / SEX: [REDACTED] A) 39 Years Female
 Admitting Physician: [REDACTED]
 Admission Date / MRN / Financial Num: 10/18/23 [REDACTED]

Page 1 of 1
 Print Date: 10/24/23
 Print Time: 10:26 CDT
 Printed by: [REDACTED]

BH MTP Plan of Care Shift Assessment
10/22/23 04:57 CDT Performed by [REDACTED] RN,CPI, [REDACTED]
Entered on 10/22/23 05:00 CDT

BH Problem 1

BH MTP Problem 1: schizophrenia and ineffective coping
 BH MTP Problem 1 Status: Active
 BH MTP Problem 1 Symptoms: Bipolar, Schizophrenia/Psychotic
 BH MTP Problem 1 Goal 1: [REDACTED] will not show any aggressive behavior once while admitted
 BH MTP Problem 1 Goal Target Date 1: 10/25/23
 BH MTP Problem 1 Goal Type 1: Short term
 BH MTP Problem 1 Goal Status 1: Progressing
 BH MTP Problem 1 Goal 1 Grid

BH MTP Problem 1 Intervention 1	Allow patient to verbalize frustrations	Encourage patient to reframe/refute negative thoughts
BH MTP Problem 1 Discipline 1	Team	Team
BH MTP Problem 1 Frequency 1	q shift	q shift
BH MTP Problem 1 Duration 1	7 days	7 days
BH MTP Problem 1 Status 1	Done	Done

BH MTP Problem 1 Goal 2: [REDACTED] will be compliant with ordered meds here and after discharge

BH MTP Problem 1 Goal Target Date 2: 11/01/23

BH MTP Problem 1 Goal Type 2: Long term

BH MTP Problem 1 Goal Status 2: Progressing

BH MTP Problem 1 Goal 2 Grid

BH MTP Problem 1 Intervention 2	RN will explain purpose of each medication administered and	Assess patient's thought process and current level of psycho
BH MTP Problem 1 Discipline 2	Team	Team
BH MTP Problem 1 Frequency 2	q shift	q shift
BH MTP Problem 1 Duration 2	until discharge	until discharge
BH MTP Problem 1 Status 2	Done	Done

POC Shift Narrative

BH Shift Narrative: Pt has been isolative to her room, guarded, no group attendance, compliant with her HS meds, slept on and off during the night, attention-seeking and needy, focused on having snacks, anxious, easily irritable, given PRN meds, redirectable; monitored for acute distress and unoward behavior.

Patient Name: [REDACTED] DOB / AGE / SEX: [REDACTED] 39 Years Female
 Admitting Physician: [REDACTED]
 Admission Date / MRN / Financial Num: 10/18/23 [REDACTED]

BH MTP Plan of Care Shift Assessment
10/20/23 05:27 CDT Performed by [REDACTED] RN,CPI,
Entered on 10/20/23 05:35 CDT

BH Problem 1

BH MTP Problem 1: schizophrenia and ineffective coping

BH MTP Problem 1 Status: Active

BH MTP Problem 1 Symptoms: Bipolar, Schizophrenia/Psychotic

BH MTP Problem 1 Goal 1: [REDACTED] will not show any aggressive behavior once while admitted

BH MTP Problem 1 Goal Target Date 1: 10/25/23

BH MTP Problem 1 Goal Type 1: Short term

BH MTP Problem 1 Goal Status 1: Progressing

BH MTP Problem 1 Goal 1 Grid

BH MTP Problem 1

Intervention 1	Allow patient to verbalize frustrations	Encourage patient to reframe/refute negative thoughts
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BH MTP Problem 1

Discipline 1	Team	Team
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BH MTP Problem 1

Frequency 1	q shift	q shift
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BH MTP Problem 1

Duration 1	7 days	7 days
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BH MTP Problem 1 Goal 2: [REDACTED] will be compliant with ordered meds here and after discharge

BH MTP Problem 1 Goal Target Date 2: 11/01/23

BH MTP Problem 1 Goal Type 2: Long term

BH MTP Problem 1 Goal Status 2: Progressing

BH MTP Problem 1 Goal 2 Grid

BH MTP Problem 1

Intervention 2	RN will explain purpose of each medication administered and	Assess patient's thought process and current level of psycho
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BH MTP Problem 1

Discipline 2	Team	Team
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BH MTP Problem 1

Frequency 2	q shift	q shift
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BH MTP Problem 1

Duration 2	until discharge	until discharge
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POC Shift Narrative

BH Shift Narrative: Pt Aox3, delusional, paranoid, oppositional, defiant. Pt can become loud at times. Hesitant with insulin and accuchecks stating "I don't need it, i'm fine without it" Staff able to redirect pt into taking insulin and allow blood sugar monitoring. Wound on right foot assessed and documented. Pt observed to sit in bathroom, turn shower on and read book. Pt redirected from behavior, unstanding at that time. Woke up early morning around 4:30AM, began singing and responding to internal stimuli. Complaint with medications, denies si/hi. Monitored q15 minutes for safety and well-being.

Patient Name: [REDACTED]	DOB / AGE / SEX: [REDACTED]	39 Years Female
Admitting Physician: [REDACTED]		
Admission Date / MRN / Financial Num: 10/18/23 [REDACTED]		
