NEWMAN, Alice Jones;
DEB6S1AMB_NEWMAN, Alicia (BR);
DEB6S1AMB_NEWMAN, Alice Jones;
NEWMAN, Alice Jones;
DEB6S1AMB_NEWMAN, Alice Jones

| May 1, 1970 Born | Female Sex | Payers excluded/not available | 103888 Patient Id |
|--|--|--|----------------------|
| 1357 Amber Dr, BEAVERTON, Oregon 97006 Address | (555) 723-1544 Home Phone (555) 777-1234 Mobile Phone | English (preferred) Language White Race | |
| | | Not Hispanic or Latino Ethnicity | |

Continuity of Care Document

Reason for Referral

· Reason For Referral excluded/not available

Assessments

MU3D_Assement_FreeText: The patient was found to have fever and Dr Davis is suspecting Anemia based on the
patient history. So Dr Davis asked the patient to closely monitor the temperature and blood pressure and get
admitted to Community Health Hospitals if the fever does not subside within a day

Problems

| Mild essential hypertension(401.9) | Onset: 5-Oct-2011 | |
|---|--------------------|---|
| Severe hypothyroidism(244.8) | Onset: 31-Dec-2006 | |
| Chronic rejection of renal transplant(996.81) | Onset: 31-Dec-2011 | |
| Overweight(278.02) | Onset: 31-Dec-2006 | Status: Resolved as of 6-Jul-2016 14:47 |
| Fever(780.60) (R50.9) | Onset: 22-Jun-2015 | |

Mental Status

MU3D_Cognitive_Status_MultiSelect: 1-May-2005 Amnesia

Functional Status

Dependence on Cane 11-Jul-2016

Allergies and Adverse Reactions

| Penicillin G (drug allergy) | Onset: 10-May-1980 | Reaction: Hives (Moderate) |
|-----------------------------|--------------------|----------------------------|
| Ampicillin (drug allergy) | Onset: 10-May-1980 | Reaction: Hives (Moderate) |

Medications

| Medications | | |
|--|------------------------------------|---|
| cefTRIAXone 10 g injection 1 unit(s) injectable 2 times a day Quantity: 1 Refills: 0 | Ordered: 8-Jul-2016 Config, SCM | Start: 22-Jun-2015 End: 30-Jun-2015 Generic Substitution Allowed |
| Tylenol Cool Caplet Extra Strength 500 mg oral tablet 1 unit(s) orally once a day, As Needed Quantity: 10 Refills: 0 | Ordered: 8-Jul-2016 Config, SCM | Start: 22-Jun-2015 End: 2-Jul-2015 Generic Substitution Allowed Comments: This product contains acetaminophen. Do not use with any other product containing acetaminophen to prevent possible liver damage. |
| Aranesp SingleJect 500 mcg/mL injectable solution 1 unit(s) injectable once a week Quantity: 1 Refills: 0 | Ordered: 8-Jul-2016 Config, SCM | Start: 22-Jun-2015 Generic Substitution Allowed Comments: It is very important that you take or use this exactly as directed. Do not skip doses or discontinue unless directed by your doctor. Keep in refrigerator. Do not freeze. |
| Procedures | | |
| Nebulizer therapy | Date: 22-Jun-2015 | Status: Completed |
| Introduction of cardiac pacemaker system via vein | Date: 5-Oct-2011 | Status: Completed |
| Immunizations | | |
| Influenza Virus vaccine Lot #: 1 | On: 10-May-2014 | |
| Tetanus and diphtheria toxoids Lot #: 2 | On: 4-Jan-2012 | |
| Influenza,intradermal,quadrivalent,preservativeVot Administered free | | Comments: Not Administered Reason: Immunization was not given - Patient rejected Immunization |
| Family History | | |
| Unknown Family Member | | |
| Family History excluded/not available | | |
| Social History | | |
| Smoking Status | | |
| Current every day smoker | Recorded: 22-Jun-2015 | |
| Tobacco Use | | |
| Heavy tobacco smoker (finding) | Recorded: 1-May-2005 | |
| Birth Sex Female | | |
| remale | | |

Foreign Travel

Foreign Travel excluded/not available

Health Concerns

| Concerns | | |
|---|---|---|
| Overweight | 31-Dec-2006 <i>To</i> 1-Jun-2007 | Status: Completed Provider Concern |
| Related To: | | |
| Overweight | 31-Dec-2006 <i>To</i> 6-Jul-2016 14:47 | Status: Complete |
| Chronic rejection of renal transplant | 31-Dec-2011 | Status: Active Provider Concern |
| Related To: | | |
| Chronic rejection of renal transplant | 31-Dec-2011 | Status: Complete |
| Severe hypothyroidism | 31-Dec-2006 | Status: Active Provider Concern |
| Related To: | | |
| Severe hypothyroidism | 31-Dec-2006 | Status: Complete |
| Essential hypertension | 5-Oct-2011 | Status: Active Provider Concern |
| Related To: | | |
| Mild essential hypertension | 5-Oct-2011 | Status: Complete |
| Allergy to penicillin antibiotics | 10-May-1980 | Status: Active Provider Concern |
| Related To: | | |
| • Allergy: Ampicillin | Onset: 10-May-1980 Status: Complete | drug allergy Reaction: Hives (Moderate) |
| • Allergy: Penicillin G | Onset: 10-May-1980 Status: Complete | drug allergy <i>Reaction</i> : Hives (Moderate) |
| Fever | 22-Jun-2015 | Status: Active Provider Concern |
| Related To: | | |
| • Encounter Diagnosis: Fever | 22-Jun-2015 Status: Complete | |

· Health Concern

Goals

| Need to gain more energy to do regular activities | Goal Set: 31-Dec-2006 | Provider Goal |
|---|--------------------------|---------------|
| Related To | | |
| Overweight | | |
| Get rid of intermittent fever that is occurring every few weeks | Goal Set: 22-Jun-2015 | Provider Goal |
| Related To | | |

Related To

• Fever

Nutrition

Nutrition Status:

Nutrition excluded/not available

Hospital Discharge Instructions

Hospital Discharge Instructions excluded/not available

Medical Equipment

Cardiac resynchronization therapy

implantable pacemaker

Date: 9-Jul-2016 Status: Completed

Plan of Treatment

clindamycin Capsule...Give 300 milliGRAM(s) Oral 3 times per day

PRN for If Pain does not subside

Start: 23-Jun-2015

Ordered: 29-Jul-2016

Snow, John

Planned Encounters

MU3D_Planning_Future_Visit_FreeText:

Follow Up Visit

Start: 1-Jul-2015

0:00

Planned Observations

Urinalysis macro (dipstick) panel

Start: 29-Jun-2015

0:00

EKG

Start: 23-Jul-2015

0:00

Chest X-ray Lower Respiratory Tract

Structure

Start: 23-Jul-2015

0:00

Request

Request

Request

Intent

Intent

Results

Urinalysis macro

Ordered On: 22-Jun-2015

(dipstick) panel

15:00

Laboratory: LabSanguine 976 Transylvania Philadelphia PA tel:+1-(215)246-3630

22-Jun-2015 15:00

Urine Appearance CLEAR

Range: CLEAR

Color YELLOW

Range: YELLOW

Urine Glucose 50 mg/dL

Range: Neg mg/dL

Ketones Negative

Range: Negative

Urine Specific Gravity 1.015

Range: 1.005 - 1.030

Office opeoing Gravity 1:0

Range: 5.0 - 8.0 [pH]

Urine pH 5.0 [pH]
Protein 100 mg/dL

Range: negative mg/dL

Vital Signs

11-Jul-2016 1:03

Heart Rate 80 /min

Resipration Rate 18

/min

O2 SAT 95 %

BP Systolic 145

mm[Hg]

BP Diastolic 88

mm[Hg]

Temperature 38 c

Height 177 cm

Weight 88 kg

Advance Directives

Advance Directives excluded/not available

Encounters

Ambulatory 22-Jun-2015 11:36

Encounter Diagnosis: Fever Davis, Albert
Get Well Clinic

Payers

Insurance Providers

Payers excluded/not available

Guarantors

Alice Jones Newman

1357 Amber Dr, BEAVERTON 97006 US

tel:+1-(555)723-1544

Health Care Providers

| Allopathic & (| Osteopatnic | Physicians |
|----------------|-------------|------------|
|----------------|-------------|------------|

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