

David Sacks Male Age 50 (1974-10-07) ID 998991

Language

English

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Authors

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David Sacks Patient Name Patient ID 998991 Date of birth October 7, 1974 Male Legal Authenticator

Race Ethnicity

Marital Status Address Home

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Medical Summary Document Document ID f442bb91-fe05-40c9-b5c7-2cf184e047b2

October 15, 2024 Generated On

Sign On/Status Not signed Custodian CareEvolution, LLC.

Patient Data

Q Encounters

Allergies and adverse reactions

Туре	Substance	Status	Allergy Severity	Reported Date	Reactions	Comments	Data Source
Propensity to adverse reactions to drug	aspirin	active	Mild to moderate	05/01/2008	Wheal		LA Central Hospital, Gill MD Ava
Propensity to adverse reactions to drug	ALLERGENIC EXTRACT, PENICILLIN	active	Moderate to severe	05/01/2007	Nausea		LA Central Hospital, Gill MD Ava
Propensity to adverse reactions to drug	codeine	active	Moderate	05/01/2006	Wheezing		LA Central Hospital, Gill MD Ava

Discharge Date Admit Date Location Identifier Data Source Problems Providers 10/15/2024 10:29:13 10/15/2024 10:29:13 Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter. 9937012 LA Central Hospital, Gill MD Ava 08/15/2012 10:00:00 Office outpatient visit Costal chondritis: Encounter Diagnosis Khan, Samir : Allopathic & Osteopathic Physicians; Internal Medicine Get Well Clinic LA Central Hospital, Gill MD Ava

lo History of Medication use Date of Visit Last Reported On Stop Date Description Order Text Frequency Route Status Provider Instructions Disposition Data Source 0.09 MG/ACTUAT inhalant solution, 2 puffs QID PRN wheezing; Proventil 0.09 MG/ACTUAT inhalant solution albuterol 0.09 MG/ACTUAT [Proventil] 01/03/2007 05/15/2012 10/15/2024 10:29:13 LA Central Hospital, Gill MD Inhalation Route of label in spanish; Proventil 0.09 MG/ACTUAT inhalant solution 1 mg/actuat completed Seven, Henry Administered Administration albuterol 0.09 MG/ACTUAT [Proventil] 01/03/2007 completed Prescribed 10/15/2024 10:29:13

Problem list

Date	Problem	Description	Status	Resolved Date	Date of Visit Last Reported On	Comments	Data Source
01/03/2008	Pneumonia	Pneumonia : Status - Resolved	completed		10/15/2024 10:29:13		LA Central Hospital, Gill MD Ava
01/03/2007	Asthma	Asthma : Status - Active	completed		10/15/2024 10:29:13		LA Central Hospital, Gill MD Ava

Social History

2.2 Camilla Linkson

Date	Social History Item	Description	value	Stop Date	Comments	Data Source
09/10/2012	72166-2	Tobacco smoking status NHIS	Ex-smoker			Community Health and Hospitals, Seven Henry
05/01/2005	74013-4	Alcoholic drinks per day	0			Community Health and Hospitals, Seven Henry
05/01/2005	10159-2	History of industrial exposure	5 years of working with asbestos			Community Health and Hospitals, Seven Henry

Family History			
father			DataSource: LA Central Hospital, Gill MD Ava
OnsetDate	Problem	Description	Note
1/1/1967 12:00:00 AM -08:00	Myocardial infarction	Myocardial infarction	
1/1/1950 12:00:00 AM -08:00	Diabetes mellitus type 1	Diabetes mellitus type 1	

-√- Vitals

Name	Date	Value	Data Source
Patient Body Weight - Measured	04/07/2000	88 kg	Community Health and Hospitals, Seven Henry
Body height	04/07/2000	177 cm	Community Health and Hospitals, Seven Henry
Systolic blood pressure	04/07/2000	145 mm[Hg]	Community Health and Hospitals, Seven Henry
Patient Body Weight - Measured	11/14/1999	86 kg	Community Health and Hospitals, Seven Henry
Body height	11/14/1999	177 cm	Community Health and Hospitals, Seven Henry
Systolic blood pressure	11/14/1999	132 mm[Hg]	Community Health and Hospitals, Seven Henry

Labs

Complete blood count without differential	03/23/2000 14:30:00	Status: completed	Comments:	DataSource: LA Central Hospital, Gill MD Ava		
Test	Date	Value	Acuity	Normal Range	Performed At	Comments
PLT	03/23/2000 14:30:00	123 10+3/ul	L	150 10+3/ul - 350 10+3/ul		
WBC	03/23/2000 14:30:00	6.7 10+3/ul	N	4.3 10+3/ul - 10.8 10+3/ul		
HGB	03/23/2000 14:30:00	13.2 g/dL	N	12.0-15.5 g/dl		

History of Immunization

Vaccine	Date	Site	Adverse Reactions	Status	Instructions	Date of Visit Last Reported On	Data Source
influenza virus vaccine, unspecified formulation	11/01/1999			completed		10/15/2024 10:29:13	LA Central Hospital, Gill MD Ava
meningococcal C conjugate vaccine	12/15/1998			completed		10/15/2024 10:29:13	LA Central Hospital, Gill MD Ava
influenza virus vaccine, unspecified formulation	12/15/1998			completed		10/15/2024 10:29:13	LA Central Hospital, Gill MD Ava
pneumococcal polysaccharide vaccine, 23 valent	12/15/1998			completed		10/15/2024 10:29:13	LA Central Hospital, Gill MD Ava

(H) History of Procedures

Date	Procedure	Description	Туре	Performer	Date of Visit Last Reported On	Data Source
05/12/2012	Colonoscopy	Colonic polypectomy			10/15/2024 10:29:13	LA Central Hospital, Gill MD Ava
02/03/2011	Colonic polypectomy	Colonic polypectomy			10/15/2024 10:29:13	LA Central Hospital, Gill MD Ava
	Colonic polypectomy	Colonic polypectomy				LA Central Hospital, Gill MD Ava

Phys find

PHYSICAL EXAMINATION, Date: 10/15/2024 10:29:13, Data Source: LA Central Hospital, Gill MD Ava

• PHYSICAL EXAMINATIONHEENT: All normal to examination. Heart: RRR, no murmur. THORAX & Description among the sum of the

Review of systems

REVIEW OF SYSTEMS, Date: 10/15/2024 10:29:13, Data Source: LA Central Hospital, Gill MD Ava

REVIEW OF SYSTEMS

Patient denies recent history of fever or malaise. Positive for weakness and shortness of breath. One episode of melena. No recent headaches. Positive for osteoarthritis in hips, knees and hands.

Hx of Pres illness

HISTORY OF PRESENT ILLNESS, Date: 10/15/2024 10:29:13, Data Source: LA Central Hospital, Gill MD Ava

• HISTORY OF PRESENT ILLNESS

This patient was only recently discharged for a recurrent GI bleed as described below.

He presented to the ER today c/o a dark stool yesterday but a normal brown stool today. On exam he was hypotensive in the 80?s resolved after

Lab at discharge: Glucose 112, BUN 16, creatinine 1.1, electrolytes normal. H. pylori antibody pending. Admission hematocrit 16%, discharge hematocrit 29%. WBC 7300, platelet count 256,000. Urinalysis normal. Urine culture: No growth. INR 1.1, PTT 40.

He was transfused with 6 units of packed red blood cells with

GI evaluation 12 September: Colonoscopy showed single red clot in $\dots \dots \dots$

Eval note

ASSESSMENT, Date: 10/15/2024 10:29:13, Data Source: LA Central Hospital, Gill MD Ava

• ASSESSMENTRecurrent GI bleed of unknown etiology; hypotension perhaps secondary to this but as likely secondary to polypharmacy. Acute on chronic anemia secondary to #1. Azotemia, acute renal failure with volume loss secondary to #1. Hyperkalemia secondary to #3 and on ACE and K+ supplement. Other chronic diagnoses as noted above, currently stable.

Chief complaint+Reason for visit

REASON FOR VISIT/CHIEF COMPLAINT, Date: 10/15/2024 10:29:13, Data Source: LA Central Hospital, Gill MD Ava

• REASON FOR VISIT/CHIEF COMPLAINT

Dark stools.

Phys find General status

GENERAL STATUS, Date: 10/15/2024 10:29:13, Data Source: LA Central Hospital, Gill MD Ava

. GENERAL STATUS

Alert and in good spirits, no acute distress.

Treatment Plan

Creation Date	Due Date	Plan Item	Plan Description	Author	Performer	Note	Data Source
10/15/2024 14:29:13	05/12/2012	Colonoscopy	Colonoscopy				Community Health and Hospitals, Seven Henry
10/15/2024 14:29:13	05/12/2012	Colonoscopy Study observation	Colonoscopy Study observation				Community Health and Hospitals, Seven Henry
10/15/2024 14:29:13		Encounter for check up (procedure)	Encounter for check up (procedure)				Community Health and Hospitals, Seven Henry

Advance Directives

No advance directive information available.

Authors

 Author:
 Authoring Device:
 Address:

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@ Caregivers

Caregiver: Specialty: Organization:

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