

Midland Park Ambulance Corps Patient Care Report

2012-100

Date: 03/06/2012 Unit: 589 Patient # 1 of 1 End Mileage: 31597 ☐ Mutual Aid To:

Patient Information	Age: 90	DOB: 01/14/1922	Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Times (Military):
Name: Maloney, Frank				Dispatched: 09:24
Address: 187 Paterson Ave #232				In Service: 09:33
Town: Midland Park, NJ				On Scene: 09:35
Call Information				In Route: 10:00
Behavioral		ambulatory		Arrived: 10:08
Call Type:		Location of PT At Scene:		Available: 10:20
Location of Call:				Out Svc: 10:32

☒ PT's Home ☐ Other
 PT's Physician: Dr. Beauchamps

Clinical Information	altered mental status	this a.m.
Patient History: Depression, AFIB, high cholesterol, constipation, dehydration	Chief Complaint:	Time of Symptom Onset:
	Aid Given: _____ Given By: <input type="checkbox"/> PD <input type="checkbox"/> Family <input type="checkbox"/> Bystander <input type="checkbox"/> Other:	
	Allergies: NKA	
	Medications: Dogoxin, Diavan, Flomax, Sertralite, Simvastatin, Metamocil, Miralax, Colace	
	Call came through as altered mental status. At our arrival the pt was ambulatory, naked from the waste down and was vomiting onto the kitchen island. The pt was non-communicative and combative. The pt's son and daughter were present and stated the pt had suffered from extreme constipation lately. They suspected that he had taken too much medicine to cure the constipation. The son and daughter stated that the pt's mental status had been normal prior to today. There was feces around the apartment. ALS arrived and assessed the patient. The daughter stated that her mother was scheduled to come home from re-hab today and the father was very stressed over this. The trip to Valley with medics on board was without incident.	

Remarks:

Vitals							
Time	BP	Pulse	Respirations	Lung Sounds	Consciousness	Pupils	SKIN
0940	150/110	100			Verbal		Warm, Dry

Treatment/Interventions Given	Injured Area:	Loss of Consciousness
Regular Stretcher, Elevate Head	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Head <input type="checkbox"/> Back <input type="checkbox"/> Face <input type="checkbox"/> Neck </div> <div> <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen </div> <div> Arm <input type="checkbox"/> Hand <input type="checkbox"/> Foot </div> <div> Hip <input type="checkbox"/> Leg <input type="checkbox"/> </div> </div>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Call Outcome	CREW	ALS
<input type="checkbox"/> BLS Transport <input checked="" type="checkbox"/> BLS/ALS Transport <input type="checkbox"/> Air Transport <input type="checkbox"/> Refusal (Attach RMA Form) <input type="checkbox"/> D.O.A. <input type="checkbox"/> Cancelled <input type="checkbox"/> Other / Non-Emergency <input type="checkbox"/> Unable to fill rig / No Crew	<input checked="" type="checkbox"/> Duty <input type="checkbox"/> 2nd Rig <input type="checkbox"/> General Driver ID# to scene <u>72</u> to hospital <u>63</u> to garage <u>72</u> Crew: _____ On Scene: _____ Patient Transferred To: <input type="checkbox"/> None <input checked="" type="checkbox"/> Valley <input type="checkbox"/> Other Passengers: _____ Equipment Left: _____	Unit # <u>402</u> <input type="checkbox"/> Not Called <input type="checkbox"/> Unavailable <input type="checkbox"/> Cancelled by PD <input type="checkbox"/> Cancelled by BLS <input type="checkbox"/> Cancelled by MD <input type="checkbox"/> Responded & Released <input checked="" type="checkbox"/> Responded ALS Transport <input type="checkbox"/> Responded No Transport
Preparer's Signature: _____ ID#: <u>63</u>		<input type="checkbox"/> RMA Attached