

MRSA:

GEORGETOWN COMMUNITY HOSPITAL

ADV DIR: N

VRE:

1140 Lexington Road • Georgetown, Kentucky 40324

Telephone Number: (502) 868-1100

ADMIT BY: BRB

PATIENT INFORMATION

ACCOUNT NUMBER 1190090	ADMISSION DATE & TIME 11/18/25 00:00	FINANCIAL CLASS 13	ROOM / BED /	H&V PHY	DISCHARGE DATE 407-04-9818	SOCIAL SECURITY NO. 407-04-9818	MEDICAL RECORD NUMBER 000248449			
PATIENT NAME MURPHY	(FIRST) BYRON	(INITIAL) K	BIRTHDATE 09/28/1962	AGE 63	RACE W	SEX M	MS D	MAIDEN/PREV NAME	REL U	ACC R
PATIENT ADDRESS 300 HOMESTEAD PARKWAY GEORGETOWN KY 40324					COUNTY SCOTT			OCCURRENCE CODE / DATE 35 2025-11-18		
EMPLOYER (Name, Address)										

ACCIDENT DATE	ACCIDENT HOUR 00	ACCIDENT STATE CODE	ACCIDENT DESCRIPTION				PATIENT TELEPHONE NUMBER (502) 316-4465
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CONTACT INFORMATION

CONTACT ONE (Name, Telephone Number, Work Telephone Number, Relationship)

GOINS PAULETTA	(502) 316-1101	POWER OF ATTORNEY
CONTACT TWO (Name, Telephone Number, Work Telephone Number, Relationship)		
MCGEE ROBERT	(859) 552-8074	CARE GIVER

GUARANTOR INFORMATION

GUARANTOR NAME (Name, Address)

MURPHY BYRON K	300 HOMESTEAD PARKWAY	GEORGETOWN	KY 40324
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GUARANTOR TELEPHONE NUMBER (502) 316-4465	GUARANTOR SOCIAL SECURITY NUMBER 407-04-9818	RELATIONSHIP TO PATIENT SELF
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GUARANTOR EMPLOYER (Name, Address)	TELEPHONE NUMBER
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INSURANCE INFORMATION

PRIMARY INSURANCE ANTHEM	ADDRESS PO BOX 105187	ATLANTA	TELEPHONE NUMBER GA (855) 661-2028
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INSURED'S NAME MURPHY BYRON K	SEX M	PAT REL 18	POLICY # UIK394A54556	GROUP NAME FORT VALLEY ST BOR330M105	GROUP NUMBER
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SECONDARY INSURANCE	ADDRESS	TELEPHONE NUMBER
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INSURED'S NAME	SEX M	PAT REL	POLICY #	GROUP NAME	GROUP NUMBER
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TERtiARY INSURANCE	ADDRESS	TELEPHONE NUMBER
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INSURED'S NAME	SEX M	PAT REL	POLICY #	GROUP NAME	GROUP NUMBER
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PHYSICIAN INFORMATION

ADMITTING PHYSICIAN BAILEY BAILI R	ATTENDING PHYSICIAN BAILEY BAILI R	FAMILY PHYSICIAN SMITH BRIAN DOU
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ADMITTING DIAGNOSIS

PRESSURE INJURY	PRIMARY INSURANCE TREATMENT AUTHORIZATION NUMBER NR/
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COMMENTS

GEORGETOWN COMMUNITY HOSPITAL

Name	MURPHY BYRON K	Admitted	Nov-18-2025	DOB	Sep-28-1962
Attending	BAILEY BAILI R	Discharged	-	Encounter	1190090
Primary	SMITH BRIAN DOUGLAS	Chief Complaint	PRESSURE INJURY	MRN	248449

Allergies Flagyl, FENTANYL, BACLOFEN, Penicillin, PCN, Methadone, Ocrelizumab

Do you want to document pain details?		No	KBI3953
Type of Wound		Pressure Ulcer	KBI3953
Stage of Wound - Please describe in Comments		Stage 2	KBI3953
*PUSH Tool 3.0 (Standard)			
Length x Width (in cm2) 3 (Corresponds with Site on the Anatomical Man)		(07) 4.1 to 8.0 Entire red area is 6x7 cm 2 Small "raw" open wound scattered throughout	KBI3953
Exudate Amount 3		(00) None	KBI3953
Tissue Type 3		(02) Granulation Tissue	KBI3953
PUSH Score Total 3		Score Total: 2	KBI3953
PUSH Score Total - Site 1		Score Total: 9	KBI3953
Is there granulation of the wound?		Yes*	KBI3953
Granulation %		100 after debridement	KBI3953
Patient Goals		heal wound completely	KBI3953
Problem List		DM MS WC for community outing	KBI3953
Comments		Measures approximately 6x7 cm2 Small "raw" open areas, fully epithelialized Dried skin/slough adherent in small patches throughout	KBI3953
Is the Patient Being Seen for Non-Wound Physical Therapy?		No	KBI3953
Short Term Goals		1) Patient will have 100% granulation tissue in open wound 2) Decrease of wound surface area by at least 50%. 3) Patient will maintain clean environment to promote wound healing	KBI3953
Long Term Goals		1) Patient will demonstrate full wound closure 2) Patient will be independent with dressing changes in preparation for discharge home.	KBI3953
Assessment Patient Would Benefit from Skilled Physical Therapy to address-(Check all that Apply)		Dressing Changes; Non Selective Debridement; Wound Cleansing; Selective Debridement; Physical Agents Modalities; Other* unna boot	KBI3953
Patients Response to Treatment		Pain is not the focus of Treatment session	KBI3953
Planned Treatment Frequency		1-3 times per week	KBI3953