Med card Example (all fabricated data):

**Doe, John**

52 y/o man presenting with acute ischemic left middle cerebral artery stroke; no tPA or thrombectomy due to being outside time window *(taken from physician History and Physical Note)*.

**History**:

* Tobacco use, hypertension, hyperlipidemia *(taken from physician notes or nurse history input)*

**Vital Signs:** *(taken from vitals section in EMR)*

* BP 160/91-142/73; HR 62-99; O2 97-99%

**NIHSS:** *(taken from neurologist notes)*

* 12 today 14 yesterday

**Stroke labs**: *(taken from labs)*

* HgBA1C: 6.8.%
* TSH: 1.2
* Total Cholesterol 221
* LDL: 123
* RPR: negative

**Studies:**

MRI Brain w/o contrast: Left MCA M2 segement acute ischemic cortical infarction

TTE (trans thoracic echocardiogram- information would be taken from interpretation summary) : EF 55-60%, Patent foramen ovale present based on bubble study

RoPE score: 4 points: 38% chance that stroke is due to PFO. 12% risk of 2 year recurrence of stroke/TIA

In the above example the bare minimum pertinent information necessary to make clinical decisions is presented blue items indicate commentary explanation, Underlined commentary is used to generate the RoPE score (<https://www.mdcalc.com/risk-paradoxical-embolism-rope-score>), while laboratory values are often flagged red. It will also be important for scores like the RoPE that if there are aspects of the data used for the calculation, they can be easily accessible.