

NAME: Sample Patient, Nichole (Gir)  
ADMITTED: 4/3/04  
DISCHARGED: 6/6/04

ADMISSION ID: 1234567  
MED REC ID: 6033433

**PREGNANCY & LABOR**

G/P: G3 P3.

PRENATAL LABS: BLOOD TYPE A pos. SYPHILIS SCREEN: Nonreactive on 11/4/03. HEPATITIS SCREEN: Negative on 11/4/03. HIV SCREEN: Negative on 11/4/03. RUBELLA SCREEN: Immune on 11/4/03.

ESTIMATED DATE OF DELIVERY: 4/9/02. ESTIMATED GESTATION BY OB: 27 weeks. PRENATAL CARE Adequate. PREGNANCY COMPLICATIONS: Bleeding and pregnancy-induced hypertension. PREGNANCY MEDICATIONS: Antihypertensive medication. ANTENATAL STEROID DOSES: 4.

LABOR: Spontaneous. TOCOLYSIS: Terbutaline. BIRTH HOSPITAL: Jefferson Regional Medical Center. LABOR & DELIVERY COMPLICATIONS: Premature onset of labor and partial abruption.

Mother was admitted on the morning of delivery with bleeding. Ultrasound showed a partial abruption and an emergency cesarean section was done.

**BIRTH**

DATE: 4/3/04 TIME: 09:23 hours

WEIGHT: 0.852kg LENGTH: 34.0cm HC: 25.0cm

GEST AGE: 27 weeks GROWTH: AGA

RUPTURE OF MEMBRANES: At delivery. AMNIOTIC FLUID: Clear. PRESENTATION: Vertex DELIVERY:

Emergency cesarean section. INDICATION: Suspected abruption. SITE: In the delivery room. ANESTHESIA: General

APGARS: 8 at 1 minute, 8 at 5 minutes. CORD pH: 7.29. CONDITION AT DELIVERY: Active, cyanotic and responsive.

TREATMENT AT DELIVERY: Stimulation, oral suctioning and endotracheal tube ventilation.

The infant was vigorous at birth with good spontaneous activity and respiratory effort, but air exchange was poor. She was suctioned and given free-flow O2, then intubated with a 2.5 ETT.

**ADMISSION**

ADMISSION DATE 4/3/04 TIME: 09:30 hours

ADMISSION TYPE: Immediately following delivery. FOLLOW-UP PHYSICIAN: Dr. Smith. ADMISSION

INDICATIONS: Prematurity and respiratory distress.

On admission to the NICU, the patient was pink with mild respiratory distress. She was placed on a ventilator.

**ADMISSION PHYSICAL EXAM**

WEIGHT: 0.852kg LENGTH: 34.0cm HC: 25.0cm

TEMP: 97.2. HR: 160. RR: 44. BP: 39/24. GLUCOSE SCREENING: 40-80mg%.

CONDITION: Pink and quiet in mild.

HEENT: Soft and flat fontanelle, opposed sutures, ET tube in place, red reflex bilaterally and patent nares.

RESPIRATORY: Mild-moderate retractions, good air exchange bilaterally and moderate scattered rales.

CARDIAC: Normal sinus rhythm, good perfusion, strong and equal pulses and no murmur.

ABDOMEN: Soft and nondistended abdomen and no organomegaly.

GU: Normal preterm female features and patent anus.

NEUROLOGIC: Responsive mental status, normal muscle tone for gestational age, fair Moro reflex and good grasp reflex.

EXTREMITIES: No hip click.

**ADMISSION LABORATORY STUDIES**

4/3/04 09:50h: WBC: 9.0X10<sup>3</sup> Hgb: 14.3 Hct: 43.4 Plt: 274X10<sup>3</sup> S: 19 B: 4 L: 52 M: 7 Eo: 4 AL: 4 NRBCs

4/3/04 22:00h: WBC: 10.9X10<sup>3</sup> Hgb: 13.4 Hct: 40.4 Plt: 285X10<sup>3</sup> S: 52 B: 0 L: 41 M: 4 Eo: 2 Ba: 1 NRBCs

4/3/04 22:00h: Na: 134 K: 4.3 Ca: 8.5

4/3/04 22:00h: TBil: 3.0 DBil: 0.1

4/3/04 09:50h: RPR: nonreactive

4/3/04 09:50h: Direct Coombs: negative

4/3/04 09:50h: Blood Type: A pos

**RESOLVED DIAGNOSES**

**RESPIRATORY DISTRESS SYNDROME MODERATE**

ONSET: 4/3/04 RESOLVED: 4/9/04

PROCEDURES: UAC placement from 4/3/04 to 4/6/04; Surfactant therapy from 4/3/04 to 4/4/04 (4 doses).