

Continuity Of Care Document

for 87820070-e7f6-4b4b-b74a-c2d5c45febe1
OID: 2.16.840.1.113883.3.1110

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Patient Info

Patient Name
JAZMYNE MARRUJO

Patient Identifiers
Q174002
OID: 2.16.840.1.113883.3.1110.6.1.2.1.8.1

Patient Contact
Home:
155 GIFFORD AVE APT 2
SAN JOSE, CA 95110
US
Tel:
+1-(408)569-4325

Date Of Birth
03/19/1991

Sex
Female

Preferred Language
en

Race
White

Ethnicity
Hispanic or Latino

Related Visits

CARE TEAM SEEN

INDIAN HEALTH CENTER O'CONNOR

performer (primary care physician)

O'CONNOR INDIAN HEALTH CENTER

performer (primary care physician)

Parveen Rafia

performer (primary care physician)

Parveen Rafia MD

performer (primary care physician)

NO PRIMARY OR FAMILY PHYSICIAN

performer (primary care physician)

PHYSICIAN NO PRIMARY OR FAMILY

performer (primary care physician)

MD Santhi S Lingamneni

performer (primary care physician)

Lingamneni Santhi S MD

performer (primary care physician)

Childs Keona V MD

performer

Deeth Jonathan MD

performer

HOAAL

performer

Al-Ali Bayan K PA-C

performer

Darr Jason T DO

performer

Wang Chris PA

performer

Volk Bryce AMD

performer

Phan Huy AMD

performer

Klochkov Anton DO

performer

Wythe Evan T MD

performer

Joiner Kimberly M NP

performer

Butterworth Megan PA

performer

Li William T PA

performer

Wu Olivia X PA

performer

Saldinger Todd M MD

performer

Tanquary Sarah J PA-C

performer

Gonzalez Teresa NP

performer

MSE -MSE- ED Doc/PA Initiated

performer

REFERRED SELF

performer

KNOW DOES NOT

performer

EDM EDDOC-Generic For MD

performer

QLABADM

performer

QNURYV

performer

Reason For Referral



- Patient Requested

Problems

Intrauterine pregnancy	Onset: 28-Feb-2024 Childs Keona V MD
Acute cystitis	Onset: 28-Feb-2024 Childs Keona V MD
Abdominal pain in pregnancy	Onset: 18-Dec-2023 Al-Ali Bayan K PA-C
Gestation period, 8 weeks	Onset: 16-Dec-2023 Darr Jason T DO
Pregnancy test positive	Onset: 11-Dec-2023
Infection of tooth	Onset: 16-Aug-2023 Wang Chris PA
Dental caries	Onset: 15-Aug-2023
Cough	Onset: 20-Apr-2023 Volk Bryce AMD
Nausea and vomiting	Onset: 20-Apr-2023
Fetal death	Onset: 20-Apr-2023
Acute viral disease	Onset: 22-Sep-2022 Al-Ali Bayan K PA-C
Headache	Onset: 19-Sep-2022
Otalgia	Onset: 27-Mar-2022
Motor vehicle accident	Onset: 27-Mar-2022
Abnormal uterine bleeding	Onset: 6-Jan-2022

Labor finding	Onset: 6-Oct-2021 Phan HuyAMD
Rectal pain	Onset: 17-Sep-2021
Pregnancy	Onset: 17-Sep-2021
Bacteriuria	Onset: 20-Aug-2021 KlochkovAnton DO
Abdominal pain - cause unknown	Onset: 20-Aug-2021 Wythe Evan T MD
Swelling of eyelid	Onset: 11-Jul-2021 Joiner Kimberly MNP
Dental abscess	Onset: 2-Oct-2020
Fracture of tooth	Onset: 2-Oct-2020
Patient encounter status	Onset: 28-Jun-2020 Butterworth Megan PA
Hemorrhoids	Onset: 24-Jun-2020 Li William T PA
First trimester pregnancy	Onset: 1-Feb-2020 Wu Olivia X PA
Vaginal discharge	Onset: 22-Oct-2019
Methamphetamine abuse	Onset: 22-Oct-2019
Diarrhea	Onset: 14-Aug-2019
Epigastric pain	Onset: 14-Aug-2019
Pregnancy	Onset: 14-Aug-2019
Chronic abdominal pain	Onset: 29-May-2017

Muscle strain	Onset: 19-Dec-2016
Muscle strain	Onset: 19-Dec-2016
Urinary tract infectious disease	Onset: 27-Nov-2016
Urinary tract infectious disease	Onset: 27-Nov-2016
Abdominal pain	Onset: 25-Oct-2016
Abdominal pain	Onset: 25-Oct-2016
Abdominal pain	Onset: 25-Oct-2016
Abdominal pain	Onset: 3-Sep-2016 Saldinger Todd MMD
Abdominal pain	Onset: 22-Jan-2016
Abdominal pain	Onset: 22-Jan-2016
Abdominal bloating	Onset: 14-Nov-2015 Tanquary Sarah J PA-C
Abdominal bloating	Onset: 14-Nov-2015 Tanquary Sarah J PA-C
Bronchitis	Onset: 14-Nov-2015 Tanquary Sarah J PA-C
Bronchitis	Onset: 14-Nov-2015 Tanquary Sarah J PA-C
Toothache	Onset: 30-Jul-2014
Toothache	Onset: 30-Jul-2014
Viral bronchitis	Onset: 22-Jun-2014
Viral bronchitis	Onset: 22-Jun-2014

Contusion of face	Onset: 15-Jun-2014
Contusion of face	Onset: 15-Jun-2014
Medication Refill	Onset: 27-Feb-2014
Asthma	Onset: 27-Feb-2014
Anxiety	Onset: 27-Feb-2014
LNMP - Last Normal Menstrual Period	Onset: 27-Feb-2014
Jaw pain	Onset: 27-Feb-2014
Chest pain	Onset: 27-Feb-2014
Cardiovascular event risk	Onset: 27-Feb-2014
Upper respiratory infection	Onset: 27-Feb-2014
Herpes simplex	Onset: 27-Feb-2014
Immunizations	Onset: 27-Feb-2014
Tetanus Status	Onset: 27-Feb-2014
Contusion	Onset: 27-Feb-2014
Temporomandibular joint disorder	Onset: 18-Feb-2014

Allergies And Adverse Reactions

tramadol TRAMADOL (Allergy)	Onset: 22-Dec-2022	Reaction: HIVES
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Medications

acetaminophen 500 MG Oral Tablet ; 1000 MILLIGRAM X1ED
Quantity: 2

Childs Keona V MD

Start: 28-Feb-2024 End: 28-Feb-2024

Comments: 11111110 Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented. NOT TO EXCEED 4 GRAMS OF ACETAMINOPHEN/24HR. Limit total dose to 2 gram daily for patients with

cefTRIAxone 350 MG/ML Injectable Solution [Rocephin] ; 1 GRAM X1ED
Quantity: 1

Childs Keona V MD

Start: 28-Feb-2024 End: 28-Feb-2024

Comments: 11111110 Provider Administration Instructions: Mix EACH 1G with 9.6mL SWFI (or NS). IVP over 3-5min

diphenhydramine hydrochloride 50 MG/ML Injectable Solution ; 12.5 MILLIGRAM X1ED
Quantity: 1

Childs Keona V MD

Start: 28-Feb-2024 End: 28-Feb-2024

Comments: 11111110

pantoprazole 40 MG Injection [Protonix] ; 40 MILLIGRAM X1ED
Quantity: 1

Childs Keona V MD

Start: 28-Feb-2024 End: 28-Feb-2024

Comments: 11111110 Provider Administration Instructions: Mix EACH vial in 10 mL NS. IVP at least over 2 min * PHARMACY WILL AUTOMATICALLY SWITCH TO FAMOTIDINE IF CRITERIA FOR PPI USE IS NOT MET.

Metoclopramide 5 MG/ML Injectable Solution [Reglan] ; 10 MILLIGRAM X1ED
Quantity: 1

Childs Keona V MD

Start: 28-Feb-2024 End: 28-Feb-2024

Comments: 11111110 Provider Administration Instructions: ** PROTECT FROM LIGHT ** **BLACKBOX WARNING** Increased risk of tardive dyskinesia that is increase with duration of treatment total cumulative dose

sodium chloride 9 MG/ML Injectable Solution ; 1000 MILLILITER X1ED
Quantity: 1

Childs Keona V MD

Start: 28-Feb-2024 End: 28-Feb-2024

Comments: 11111110

ketorolac tromethamine 30 MG/ML Injectable Solution ; Provider Administration Instructions: **BLACKBOX WARNING** Indicated for short term (5 day) in adults for manangement of moderate-severe pain. *CONTRAINDICATED in pts with Peptic Ulcer Disease, GI bleed or perforation, hx of GI bleed, advance renal impairment, at risk for renal failure due to volume depletion, previous allergy to ketorolac, aspirin or other NSAIDS. symptoms range from bronchospasms to anaphylatic shock. Quantity: 1	Deeth Jonathan MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: **BLACKBOX WARNING** Indicated for short term (5 day) in adults for manangement of moderate-severe pain. *CONTRAINDICATED in pts with Peptic Ulcer Disease, GI bleed or perforation, hx of GI bleed, advance renal impairment, at risk for renal failure due to volume depletion, previous allergy to ketorolac, aspirin or other NSAIDS. symptoms range from bronchospasms to anaphylatic shock.
ceFAZolin 330 MG/ML Injectable Solution ; Provider Administration Instructions: Mix each 1GM in 10mL Sterile Water (or NS) IVP over 3-5 minutes. Quantity: 1	Deeth Jonathan MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: Mix each 1GM in 10mL Sterile Water (or NS) IVP over 3-5 minutes.
phenylephrine hydrochloride 10 MG/ML Injectable Solution ; Provider Administration Instructions: Beyond use date: 30 hr Room Temp. PROTECT FROM LIGHT Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: Beyond use date: 30 hr Room Temp. PROTECT FROM LIGHT
1 ML morphine sulfate 2 MG/ML Prefilled Syringe ; Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented. Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented.
morphine sulfate 10 MG/ML Injectable Solution ; Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented. Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented.
2 ML fentaNYL 0.05 MG/ML Injection ; Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented. Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented.

2 ML fentaNYL 0.05 MG/ML Injection ; Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented. Quantity: 1	HOAAL	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: If both PO and IV analgesics are ordered for the same level of pain, use PO meds first, unless reason for using IV first is clearly documented.
oxytocin 10 UNT/ML Injectable Solution [Pitocin] Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued
oxytocin 10 UNT/ML Injectable Solution [Pitocin] Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued
Methylegonovine Maleate 0.2 MG/ML Injectable Solution [Methergine] ; Provider Administration Instructions: If ordered as PO, dilute in 5 mL water prior administer. Refrigerated med. Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued Comments: Provider Administration Instructions: If ordered as PO, dilute in 5 mL water prior administer. Refrigerated med.
Magnesium Sulfate 0.325 MEQ/ML Injectable Solution Quantity: 1	Childs Keona V MD	Start: 6-Oct-2021 Status: Discontinued
NO HOME MEDS		Start: 26-Jun-2020
albuterol 0.83 MG/ML Inhalation Solution ; As Needed for RESPIRATORY		Start: 14-Nov-2015 Status: Discontinued Comments: As Needed for RESPIRATORY
Klonopin ; 0.5 mg Oral DAILY		Start: 27-Feb-2014
Naprosyn ; 250 mg Oral 2x a day		Start: 27-Feb-2014
Ipratropium-Albuterol Inhalation		Start: 27-Feb-2014
Advair Diskus		Start: 27-Feb-2014
Phenergan as needed		Start: 24-Feb-2014
acetaminophen 325 MG / HYDROcodone bitartrate 10 MG Oral Tablet [Norco] ; 10-325 Oral .		Start: 24-Feb-2014
Percocet 7.5/325		Start: 18-Feb-2014

naproxen

Start: 18-Feb-2014

Procedures

US OB LIMITED

Date: 28-Feb-2024

Status: Completed

Result: DIAGNOSTIC IMAGING REPORT REGIONAL MEDICAL CTR. - 225 N. Jackson Ave. - San Jose, CA95116 PHONE #: 408-259-5000 FAX #: 408-729-2878 -----

----- Name: MARRUJO,JAZMYNE JOSEPHIN Loc: Q.ED Radiology No: DOB: 03/19/1991 Age: 32 Sex: F Status: REG ER Unit No: Q000331812 Phys: CHIKE - Childs,Keona V MD Acct: Q00860054837 Reason For Exam: ? Exam Date:02/28/2024 -----

----- EXAMS: CPT: 002575071 US OB LIMITED 76815 OB SONOGRAM INDICATIONS: Uncertain size and dates COMPARISON: December 16, 2023. TECHNIQUE: Transabdominal imaging. FINDINGS: A single intrauterine gestation is identified in the breech presentation. Fetal heart rate is detected at 163 beats per minute. A normal appearing anteriorly located placenta is identified. The cervical os is closed and measures 4.3 cm in length. There is a normal amount of amniotic fluid with a total AFI of 18.8 cm. Fetal somatic measurements yielded an ultrasound estimated gestational age of 19 weeks and 1 days, +/- 9 days, with an estimated delivery date of July 23, 2024. The estimated fetal weight is 0 lbs 10 ounces or 284 grams. EFW Percentile: Not calculated. Maternal ovaries are not visualized on the current study likely due to overlying bowel gas. IMPRESSION: 1. Single viable intrauterine gestation estimated at 19 weeks and 1 days. 2. There appears to be normal interval growth since the December 16, 2023 exam. Loc: 33 ** Electronically Signed by M.D. Jerel Saito on 02/28/2024 at 1832 ** Reported and signed by: Jerel Saito, M.D. PAGE 1 Signed Report (CONTINUED) DIAGNOSTIC IMAGING REPORT REGIONAL MEDICAL CTR. - 225 N. Jackson Ave. - San Jose, CA95116 PHONE #: 408-259-5000 FAX #: 408-729-2878 -----

----- Name: MARRUJO,JAZMYNE JOSEPHIN Loc: Q.ED Radiology No: DOB: 03/19/1991 Age: 32 Sex: F Status: REG ER Unit No: Q000331812 Phys: CHIKE - Childs,Keona V MD Acct: Q00860054837 Reason For Exam: ? Exam Date:02/28/2024 -----

----- EXAMS: CPT: 002575071 US OB LIMITED 76815 CC: Keona V Childs MD; Santhi S Lingamneni MD Dictated Date/Time: 02/28/2024 (1815) Technologist: Salguero, Hector Transcribed Date/Time: 02/28/2024 (1815) Transcriptionist: QRAD.VR Electronic Signature Date/Time: 02/28/2024 (1832) Printed Date/Time: 02/28/2024 (1834) BATCH NO: N/A PAGE 2 Signed Report

Social History

Smoking Status

Never smoked tobacco	Recorded: 28-Feb-2024
Occasional tobacco smoker	Recorded: 18-Dec-2023
Smokes tobacco daily	Recorded: 16-Dec-2023
Smokes tobacco daily	Recorded: 11-Dec-2023
Never smoked tobacco	Recorded: 16-Aug-2023
Never smoked tobacco	Recorded: 15-Aug-2023
Occasional tobacco smoker	Recorded: 19-Apr-2023
Smokes tobacco daily	Recorded: 22-Dec-2022
Smokes tobacco daily	Recorded: 22-Sep-2022
Never smoked tobacco	Recorded: 19-Sep-2022
Smokes tobacco daily	Recorded: 27-Mar-2022
Never smoked tobacco	Recorded: 6-Jan-2022
Tobacco smoking consumption unknown	Recorded: 6-Oct-2021
Never smoked tobacco	Recorded: 17-Sep-2021
Smokes tobacco daily	Recorded: 20-Aug-2021
Never smoked tobacco	Recorded: 11-Jul-2021
Smokes tobacco daily	Recorded: 2-Oct-2020
Never smoked tobacco	Recorded: 27-Jun-2020

Never smoked tobacco	Recorded: 26-Jun-2020
Never smoked tobacco	Recorded: 24-Jun-2020
Smokes tobacco daily	Recorded: 1-Feb-2020
Smokes tobacco daily	Recorded: 22-Oct-2019
Occasional tobacco smoker	Recorded: 14-Aug-2019
Smokes tobacco daily	Recorded: 10-Nov-2017
Smokes tobacco daily	Recorded: 29-May-2017
Smokes tobacco daily	Recorded: 29-Jan-2017
Smokes tobacco daily	Recorded: 3-Jan-2017
Never smoked tobacco	Recorded: 19-Dec-2016
Smokes tobacco daily	Recorded: 26-Nov-2016
Smokes tobacco daily	Recorded: 25-Oct-2016
Smokes tobacco daily	Recorded: 7-Oct-2016
Smokes tobacco daily	Recorded: 1-Sep-2016
Smokes tobacco daily	Recorded: 22-Jan-2016

Results

PROTHROMBIN TIME	Ordered On: 28-Feb-2024	
28-Feb-2024 14:27	INTERNATIONAL NORMAL RATIO <0.93	Comments: Recommended Therapeutic Ranges for Oral Anticoagulant Therapy (CHEST/119/1 January,2001 SUPPLEMENT): TARGET INR VALUE ----- Prophylaxis of venous thrombosis 2.0 to 3.0 (high risk surgery) Treatment of venous thrombosis Treatment of PE Bileaflet mechanical valve in aortic position Prevention of systemic embolism 2.0 to 3.0 * Tissue heart valves * AMI- To prevent systemic embolism * Valvular heart disease 2.0 to 3.0 * Atrial fibrillation Mechanical prosthetic valves (high risk) To prevent recurrent MI 2.5 to 3.5
	PROTHROMBIN TIME PATIENT 9.9 s (Normal)	Range: 9.6 s - 11.5 s
PARTIAL THROMBOPLASTIN TIME	Ordered On: 28-Feb-2024	
28-Feb-2024 14:27	PARTIAL THROMBOPLASTIN TIME 32 s (Normal)	Range: 25 s - 35 s Comments: Suggested Heparin Therapeutic Range: 37-48 seconds * Specific patient conditions/indicators may require an alternative therapeutic range.
CBC W/AUTO DIFFERENTIAL	Ordered On: 28-Feb-2024	
28-Feb-2024 14:32	BASOPHIL % 0.4 % (Normal)	Range: 0 % - 2 %
	EOSINOPHIL % 2.0 % (Normal)	Range: 0 % - 5 %
	HEMATOCRIT 31.1 % (Low)	Range: 37 % - 47 %
	HEMOGLOBIN 10.5 g/dL (Low)	Range: 12 g/dL - 16 g/dL
	LYMPHOCYTE % 17.6 % (Low)	Range: 20 % - 40 %
	MEAN CELL HGB 30.8 pg (Normal)	Range: 27 pg - 32 pg
	MEAN CELL HGB CONCENTRATION 33.8 g/dL (Normal)	Range: 30 g/dL - 37 g/dL

MEAN CELL VOLUME 91.2 fL (Normal)	Range: 80 fL - 99 fL
MONOCYTE % 6.4 % (Normal)	Range: 0 % - 8 %
MEAN PLATELET VOLUME 9.3 fL (Normal)	Range: 7.4 fL - 10.4 fL
NEUTROPHIL % 73.2 % (High)	Range: 50 % - 70 %
PLATELET COUNT 341 10 ³ /uL (Normal)	Range: 150 10 ³ /uL - 350 10 ³ /uL
RED BLOOD CELLS 3.41 {M/mm ³ } (Low)	Range: 4.2 {M/mm ³ } - 5.4 {M/mm ³ }
RED CELL DISTRIBUTION WIDTH 12.9 % (Normal)	Range: 11 % - 16 %
WHITE BLOOD CELL COUNT - BLOOD 11.4 10 ³ /uL (High)	Range: 4.5 10 ³ /uL - 11 10 ³ /uL

COMPREHENSIVE METABOLIC
PANEL

Ordered On: 28-Feb-2024

28-Feb-2024 14:44

ALBUMIN/GLOBULIN RATIO 1.9 (Normal)	Range: 1 - 2
ALBUMIN 4.0 g/dL (Normal)	Range: 3.2 g/dL - 4.8 g/dL
ALKALINE PHOSPHATASE TOTAL 69 (Normal)	Range: 46 - 116
SGPT/ALT <7 U/L (Low)	Range: 10 U/L - 49 U/L
SGOT/AST 9 U/L (Normal)	Range: 0 - 34 U/L
BILIRUBIN TOTAL 0.7 mg/dL (Normal)	Range: 0.3 mg/dL - 1.2 mg/dL
BLOOD UREANITROGEN 6 mg/dL (Low)	Range: 9 mg/dL - 23 mg/dL
CALCIUM 8.5 mg/dL (Low)	Range: 8.7 mg/dL - 10.4 mg/dL
CHLORIDE, SERUM 106 mmol/L (Normal)	Range: 98 mmol/L - 107 mmol/L
CARBON DIOXIDE 26 mmol/L (Normal)	Range: 20 mmol/L - 31 mmol/L
CREATININE, SERUM 0.47 mg/dL (Low)	Range: 0.55 mg/dL - 1.02 mg/dL

	ESTIMATED GFR(MDRD) 130 {*}	Comments: The estimated GFR was calculated using the CKD-EPI 2021CR equation, which provides a non-race-based estimate of GFR, based on creatinine, age, and sex. GFR INTERPRETATIVE GUIDELINES: Chronic Kidney Disease: Less than 60 ml/min/1.73m2. Kidney Failure: Less than 15 ml/min/1.73m2.
	ANION GAP 9 mmol/L (Low)	Range: 10 mmol/L - 20 mmol/L
	GLOBULIN 2.1 g/dL (Normal)	Range: 2.1 g/dL - 4.1 g/dL
	GLUCOSE, SERUM 81 mg/dL (Normal)	Range: 74 mg/dL - 106 mg/dL
	POTASSIUM, SERUM 3.4 mmol/L (Low)	Range: 3.5 mmol/L - 5.1 mmol/L
	SODIUM, SERUM 138 mmol/L (Normal)	Range: 136 mmol/L - 145 mmol/L
	TOTAL PROTEIN, SERUM 6.1 g/dL (Normal)	Range: 5.7 g/dL - 8.2 g/dL
LIPASE	Ordered On: 28-Feb-2024	
28-Feb-2024 14:44	LIPASE 35 U/L (Normal)	Range: 12 U/L - 53 U/L
HCG SERUM QUANTITATIVE	Ordered On: 28-Feb-2024	
28-Feb-2024 15:07	HCG SERUM QUANTITATIVE 28725 {*} (High)	Range: 1 {*} - 3 {*} Comments: EXPECTED HCG VALUES/GESTATIONAL AGE (micro Int'l Units/mL) <1 wk: 5-50 4-5 wks: 1,000-50,000 1-2 wks: 50-500 5-6 wks: 10,000-100,000 2-3 wks: 100-5,000 6-8 wks: 15,000-200,000 3-4 wks: 500-10,000 2-3 mon: 10,000-100,000 * micro International Units/mL
MICROSCOPIC	Ordered On: 28-Feb-2024	Comments: Indication for culture: Flank Pain SPECIMEN DESCRIPTION: CV
28-Feb-2024 14:19	BACTERIA MANY /[HPF] (Abnormal)	Range: NONE /hpf
	RED BLOOD CELLS URINE 5-10 /[HPF] (Abnormal)	Range: 0 /[HPF] - 2 /[HPF]
	WHITE BLOOD CELLS URINE 10-20 /[HPF] (Abnormal)	Range: 0 /[HPF] - 5 /[HPF]
	AMORPHOUS CRYSTALS MODERATE /[LPF] (Abnormal)	Range: NONE /lpf

UAHOLD FOR POSSIBLE CULTURE	EPITHELIAL CELLS MODERATE /[LPF] (Abnormal)	Range: NONE /lpf
	MUCOUS MANY /[LPF] (Abnormal)	Range: NONE /lpf
28-Feb-2024 14:19	Ordered On: 28-Feb-2024	Comments: Indication for culture: Flank Pain SPECIMEN DESCRIPTION: CV
	UABILIRUBIN DIPSTICK Negative	Range: NEGATIVE
	UABLOOD DIPSTICK Negative	Range: NEGATIVE
	URINE CLARITY Cloudy (Abnormal)	Range: CLEAR
	UACOLOR Yellow (Normal)	Range: YELLOW
	UAGLUCOSE DIPSTICK Negative mg/dL	Range: NEGATIVE mg/dL
	UAKETONE DIPSTICK Negative mg/dL	Range: NEGATIVE mg/dL
	LEUKOCYTE ESTERASE URINE Small (Abnormal)	Range: NEGATIVE
	UANITRITE DIPSTICK Negative	Range: NEGATIVE
	UAPH DIPSTICK 7.5	Range: 5 - 8
	UAPROTEIN DIPSTICK Negative mg/dL	Range: NEGATIVE mg/dL
	UASPECIFIC GRAVITY 1.022 (Normal)	Range: 1.005 - 1.03
	UROBILINOGEN URINE QUAL 0.2 mg/dL	Range: 0.2 mg/dL - 1 mg/dL
	HOLD URINE-POSSIBLE CULTURE CULTURE INDICATED (Abnormal)	Comments: Culture indicated and in progress.

Vital Signs

28-Feb-2024 13:23

Temperature 98.3 f	Comments: 98.3
Pulse 101	Comments: 101
Respiratory Rate 18	Comments: 18
O2 SAT 99 %	Comments: 99
BP Systolic 121 mm[Hg]	Comments: 121
BP Diastolic 71 mm[Hg]	Comments: 71
Height 5.5 [ft_us]	Comments: 5
Weight 62 kg	Comments: 62.000

28-Feb-2024 13:23

BMI 22 kg/m2	Comments: 22.0
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Encounters

Emergency Encounter Reason: ABD PAIN Encounter Diagnosis: Infections of bladder in pregnancy, second trimester , 19 weeks gestation of pregnancy , Acute cystitis without hematuria	28-Feb-2024 12:52 To 28-Feb-2024 20:20 MSE -MSE- ED Doc/PA Initiated (Attending) Regional Med Ctr	Discharge Disposition: Discharged to home or self care (routine discharge)
pre-admission Encounter Reason: DELIVERY	31-Mar-2020 14:20 St. David's South Austin Medical Center	
pre-admission Encounter Reason: ABD PAIN	1-Sep-2016 23:05 EDMEDDOC-Generic for MD (Attending) Regional Med Ctr	
pre-admission Encounter Reason: CHEST PAIN	14-Nov-2015 05:21 Regional Med Ctr	

About This Document

AUTHORS

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INFORMATION RECIPIENTS

Recipient ID

1
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DOCUMENT INFORMATION

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03/27/2024, 04:55

Document Maintained By

HCAHealthCare. If additional information is needed, contact Health Information Management at (844) 481-0278 or at PARA.HSC.MEDRECROIFAX@PARALLON.COM

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