

000#MT000671

Portsmouth Medic Transport LLC

855-854-4100

P1

1930 1-12-2020

Unit #

Date

Crew Members

Certification

(Legal Name as printed on EMT Card)

Rick Little

I

Cheryl Little

P

Run Type: ☐ Emergency ☐ Transport

TIME	B/P	P	R	SPO2	ETCO2	GLUC	TEMP
0800	138/74	92	22	96	—	—	W/D

TIME	PROCEDURE / RX	DOSE	ROUTE

COPIY

Other Insurance

Policy Number

Name of Insured

Military Time	TIME	MILEAGE
DISPATCHED		
ENROUTE SCENE	0738	0.0
ARRIVE SCENE	0744	1.9
PATIENT CONTACT		
ENROUTE FACILITY	0802	1.9
ARRIVE FACILITY	0816	7.9
RETURN TO SERVICE		

IV ☐ Yes ☒ No

Gauge/Cath

Location

Started By:

Cardiac Monitor ☐ Yes ☒ No ☐ Regular ☐ Irregular

☐ 12 Lead

☐ 4 Lead Interpretation:

☒ Transmitted to

Allergies NISDA

PMH: Heart Failure, ASHD

Upper Respiratory Infection, HTN

PMH: Weakness, Severe Anxiety

Spinal Stenosis, Arterio

Bartlett's esophagus Dysplasia GERD, MI, Depression, Anxiety

Chief Complaint/Reason for Stretcher: Swollen Tongue, burning feeling, red top of tongue

Narrative: Upon arrival found pt sitting in his w/c ATO res easy/fully staff nurse reports pt has been vomiting and had diarrhea (stomach virus) that began yesterday with last emesis at approximately 0300 hrs, reports no new meds/foods, pt says he noticed burn/cr/tingling on top of tongue last pm along with swelling feeling. It has continue to swell during the night doesn't eat. He denies any other symptoms. Pt assisted to cot-secured, transferred into medic unit. Pt has slight difficulty. Continued

Signed: Cheryl Little EMT-P
Printed: Cheryl Little EMT-P

RECEIVING FACILITY SIGNATURES
Please sign and print your last name and as per facility your signature must contain a legible first name.
Signed: [Signature] [Signature]

Equipment left with Drop off Facility:

☐ Vent ☐ BiPAP ☐ CPAP ☐ Other

N/A

Printed:

Copy of PCR left with facility: ☐ Yes ☐ No

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Incident Date
1-12-2020

Driver

Page #

LITTLE RICK ENTI

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[illegible]

With swelling and saying some words, no drooling, pt tongue very red to top of tongue appear very thick due to swelling pt is unable to shut mouth completely. Pt vls as per report resting on cat with no sign or c/o distress pt continually monitored, handled trip well and without substantial change. Pt transferred from cat to ER bed #5 with pt care, verbal report, all written medical info to staff nurse at pt bedside. With no further pt contact.

Cheryl Birch
EmTP

COPY

TAPE STRIP HERE