

SHOEMAKE, MICHAEL R Sex: M DOB: 07/5/1986

Continuity of Care Document

Summarization of Episode Note | 07/2/2020 to 07/2/2020

Source: ST LUKES HOSPITAL

Created: 07/5/2020

Demographics

Contact Information:

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Tel: (913) 915-0062

Tel: (913) 915-0062

Mail: mshoemake@live.com

Marital Status: Married

Religion: --

Race: White

Previous Name(s): --

Ethnic Group: Not Hispanic or Latino

Language: --

IDs: 1290119, URN:CERNER:IDENTITY-FEDERATION:REALM:CE02D798-0DF3-49B1-B868-83BABAB6D7E6-

CH:PRINCIPAL:XG8H92NJ6PC7MP5D, 500045762

Care Team

Type	Name	Represented Organization	Address	Phone
primary care physician	Marion, Daniel M	--	Work:121 ST LUKE'S CENTERDRSUITE 402CHESTERFIELD, MO 63017 , US	Work Tel: (314)205-6160
--	Blackman, Andrew J	--	Work:121 ST. LUKE'S CENTERDR.SUITE 302CHESTERFIELD, MO 63017 , US	Work Tel: (314)523-2595

Relationships

No Data to Display

Document Details

Source Contact Info

232 S Woods Mill RoadChesterfield, MO 630173417, US

Tel: (314)434-1500

Author Contact Info

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Recipient Contact Info

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Healthcare Professionals

No Data to Display

IDs & Code Type Data

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Primary Encounter

Encounter Information

Registration Date: 07/2/2020

Discharge Date: 07/2/2020

Visit ID: --

Location Information

ST LUKES HOSPITAL

Work:232 S Woods Mill RoadChesterfield, MO 630173417, US

Providers

Type	Name	Address	Phone
Admitting	Marion, Daniel M	Work:121 ST LUKE'S CENTER DRSUITE 402CHESTERFIELD, MO 63017 , US	Work Tel: (314)205-6160
Attending	Marion, Daniel M	Work:121 ST LUKE'S CENTER DRSUITE 402CHESTERFIELD, MO 63017 , US	Work Tel: (314)205-6160
Referring	Marion, Daniel M	Work:121 ST LUKE'S CENTER DRSUITE 402CHESTERFIELD, MO 63017 , US	Work Tel: (314)205-6160

Encounter

SLH Financial Number 2037241905 Date(s): 7/2/20 - 7/2/20

ST LUKES HOSPITAL 232 S Woods Mill Road Chesterfield, MO 630173417 US (314) 434-1500

Discharge Disposition: Home or Self Care

Attending Physician: Marion, Daniel M.M.D.

Admitting Physician: Marion, Daniel M.M.D.

Referring Physician: Marion, Daniel M.M.D.

Reason for Visit

wheezing

Allergies, Adverse Reactions, Alerts

No Known Allergies

Assessment and Plan

No data available for this section

Immunizations

Given and Recorded

Vaccine	Date	Status	Refusal Reason
Tetanus, Diphtheria, acel Pertussis Tdap	2/12/20	Given	
influenza virus vaccine, inactivated	10/8/19	Recorded	

Medications

albuterol (albuterol 90 mcg/inh inhaler) 2 puff(s) Inhalation every 4 hours as needed wheezing for 30 day(s).	
finasteride (finasteride 1 mg oral tablet) 1 tablet(s) By mouth daily for 30 day(s). Refills: 11. Ordering provider: Marion, Daniel M.M.D.	
fluticasone-salmeterol (Advair Diskus 250 mcg-50 mcg inhalation powder) 1 puff(s) Inhalation 2 times a day for 30 day(s).	
loratadine-pseudoephedrine (Claritin-D 24 Hour oral tablet, extended release) 1 tablet(s) By mouth daily for 30 day(s). Refills: 5. Ordering provider: Marion, Daniel M.M.D.	
montelukast (montelukast 10 mg oral tablet) 1 tablet(s) By mouth once a day (in the evening) for 30 day(s). Refills: 5. Ordering provider: Marion, Daniel M.M.D.	

Problem List

No data available for this section

Procedures

Procedure	Date	Related Diagnosis	Body Site	Status
Anaesthesia for endoscopy				Completed
Arthroscopy of knee1, 2				Completed

1left knee

2and right knee

Results

No data available for this section

Vital Signs

No data available for this section

Social History

Social History Type	Response
Substance Abuse	Never drug user
Alcohol	Alcohol User: current status unknown
Smoking Status	Never smoker; Never; Cessation Counseling N/A entered on: 4/29/20
Birth Sex	

Goals

No data available for this section

Hospital Discharge Instructions

No data available for this section

Reason for Referral

No data available for this section

Health Concerns

No data available for this section

Medical Equipment

Implanted Date: 3/22/19 Target Site: Unknown

Description	Quantity	MRI	Company	Model
STL-ANCHOR CINCHLOCK SS KNOTLESS	3	Unknown	Stryker Corporation	Unknown
UDI: {01}07613252633228{17}200725{10}19025AE2		Assigning Authority: FDA		
STL-ANCHOR CINCHLOCK SS KNOTLESS	1	Unknown	Stryker Corporation	Unknown
UDI: {01}07613252633228{17}200723{10}19023AE2		Assigning Authority: FDA		