#### **Document info**

Result type: ED Clinical Summary
Result date: Jun 09, 2023, 06:00 p.m.

Result status: altered

Performed by:

Verified by:

Alana Went

Modified by:

Alana Went

# **ED Clinical Summary**

Patient: RAKESH DOB: Oct 31, 1972 KUKATLA

**ED Clinical Summary** 

Lourdes Emergency Department 169 Riverside Drive Binghamton, NY 13905 1-607-798-5231

# **Clinical Discharge Summary**

#### **PERSON INFORMATION**

Name: KUKATLA, RAKESH	Age: 50 Years	<b>PCP</b> : ROSEVEAR, VANETTA	
Visit Reason: Eye pain/genralized bodyaches; BODY PAIN MOSTLY IN THE EYES	<b>DOB:</b> 10/31/1972	Sex: Male	
MRN: 89-11-43	Acct#:		
Phone: (607)999-9999			
Address: 7 ELM STREET BINGHAMTON NY 13905			

#### Comment:

**Acuity: 4- Less Urgent** 

**Patient Location:** 

Arrival	<b>Nurse Unit</b>	Room	Bed
06/09/23 16:09:00	ER OLL	EDWR	
06/09/23 16:26:52	ER OLL	FT	06
06/09/23 18:00:18	ER OLL	CHKT	

## **EVENTS**

<b>Event Name</b>	<b>Event Status</b>	Request Date/Time	<b>Start Date/Time</b>	Complete Date/Time
Arrive	Complete	06/09/23 16:09:00	06/09/23 16:09:00	06/09/23 16:09:00
Document Home Meds	Request	06/09/23 16:09:00		
FT Timer	Request	06/09/23 16:09:00		
Patient Pharmacy	Request	06/09/23 16:09:00		
Registration	Complete	06/09/23 16:09:00	06/09/23 16:26:37	06/09/23 16:26:37
Timer	Request	06/09/23 16:09:00		
Triage	Complete	06/09/23 16:09:00	06/09/23 16:25:29	06/09/23 16:25:29
High Utilizer ED	Request	06/09/23 16:11:02		
RN Exam	Request	06/09/23 16:25:29		
Vital Signs	Request	06/09/23 16:25:29		
RN Exam	Complete	06/09/23 16:25:30	06/09/23 17:44:28	06/09/23 17:44:28
Bed Assign	Complete	06/09/23 16:26:52	06/09/23 16:26:52	06/09/23 16:26:52
Dr Exam	Complete	06/09/23 16:26:52	06/09/23 16:28:18	06/09/23 16:28:18
RN Re-assess	Complete	06/09/23 17:19:36	06/09/23 17:19:36	06/09/23 17:19:36
RN Re-assess	Request	06/09/23 17:19:36		
WPV Risk Moderate	Request	06/09/23 17:33:15		
RN Re-assess	Complete	06/09/23 17:44:29	06/09/23 17:59:26	06/09/23 17:59:26
Dr Exam	Complete	06/09/23 17:50:41	06/09/23 17:50:41	06/09/23 17:50:41
Discharge	Complete	06/09/23 17:51:37	06/09/23 18:00:18	06/09/23 18:00:18
Ready Bed	Complete	06/09/23 18:00:18	06/09/23 18:00:18	06/09/23 18:00:18

## **PROVIDER INFORMATION**

Provider	Role	Assigned	Unassigned
Scharf, Nicholas D, NP	ED Provider	06/09/23 16:28:19	06/09/23 17:41:30
Huanca-torres, Yasmine	ED Tech	06/09/23 16:33:32	

Went, Alana, RN ED Nurse 06/09/23 16:53:25 Hill, Ryan D, DO ED Provider 06/09/23 17:50:42

#### VITALS INFORMATION

Vital Signs	Triage	Latest
Temp Oral	97.7 DegF	97.7 DegF
Temp		
Temporal		
Artery		
Temp		
Rectal		
02 Sat	100 %	100 %
Respirator	18 br/min	18 br/min
y Rate		
Peripheral	105 bpm	105 bpm
Pulse Rate		
Apical		
Heart Rate		
Blood	153 mmHg/97 mmHg	153 mmHg/97 mmHg
Pressure		

#### **Comment:**

#### **ORDERS INFORMATION**

**ED High Utilizer** Start Date 06/09/23 16:11:02 EDT, Stop Date 06/09/23 16:11:02 EDT

**ED Initial Assessment Adult OLL** Start Date 06/09/23 16:25:30 EDT, Stop Date 06/09/23 16:25:30 EDT

**ED Reassessment L** 06/09/23 17:44:29 EDT

**Travel and IDOC Reassessment ED** 06/09/23 16:25:30 EDT, 06/11/23 16:25:30 EDT, Constant Indicator

#### **MEDICAL INFORMATION**

Allergy Info: NKA

**Discharge Medications:** 

#### **Other Meds**

ofloxacin otic (ofloxacin 0.3% otic solution) 5 Drops Left ear 2 times a day for 10 Days.

Refills: 0.

Diagnosis: Left otitis media [H66.92]

## **Comment:**

## **DISCHARGE INFORMATION**

**Discharge Disposition:** Discharged

## **DEPART REASON INCOMPLETE INFORMATION**

ven,

patient education materi		•
	ble person verbalizes understan nd understands how to access t	
PATIENT EDUCATION INF	FORMATION	
Instructions: Medical Scre	ening Exam, Nonemergent	
Follow up: With:	Address:	When:
Return to Emergency Department Comments: If not improving in 48 hour	rs or if worse at anytime.	Within As needed, only if needed
With:	Address:	When:
Follow up with primary car provider  Comments: Obtain your finalized medi	re cal records and review them with you	Within 1 to 2 days
Cottain your imanzed medi	car records and review them with you	11110.
With:	Address:	When:
VANETTA ROSEVEAR	160 Robinson St Binghamton, NY 13904 (607) 296-2300 Business (1)	Within 5 to 7 days

## **DIAGNOSIS**

Toxic effect of pepper spray

**Comment:**