



PARKVIEW
CARE & REHABILITATION
CENTER

5353 Merrick Road
Massapequa, NY 11758
(P) 516-798-1800
(F) 516-798-1821

fax

TO: Melinda FROM: Sharon Leach
FAX: 718-475-1001 PAGES: _____
PHONE: _____ DATE: 2/8/24
RE: Dana Caragol CC: _____

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments:

Resident Face Sheet**Parkview Care and Rehabilitation Center**

5353 Merrick Rd

Massapequa, NY 11758

(516) 798-1800

**Resident:** Caragol, Dona E**Unit-Room-Bed:** CT-Unspecified Room-
Unspecified Bed**DOB:** 11/09/1946 (77 y)**System/Facility ID:** 17131/-**Home Address:** 73 Lewis Rd**Gender:** Female**Language:**

Merrick, NY 11566

Marital: Married**Religion:** Methodist**Phone (h):** (516) 379-5895**Race:** White**Medicare Number:** 8DJ9N54RT39**Admission****Attending Physician:** Fink, Yuri**Phone:** (516) 778-8490**First Admission:** 11/14/2023 2:30 pm**Last Admission:** 11/14/2023 2:30 pm**Last Admission Source:** Acute care hospital: Nassau
University Medical Center**Insurance****Plan:** Medicare Part A**ID#:** 8DJ9N54RT39**Coverage:** Medical**Expiration:****Diagnoses**

W19.XXXD - Unspecified fall, subsequent encounter; Z11.1 - Encounter for screening for respiratory tuberculosis; R52 - Pain, unspecified; F51.01 - Primary insomnia; F33.9 - Major depressive disorder, recurrent, unspecified; I10 - Essential (primary) hypertension; E78.49 - Other hyperlipidemia; S32.059A - Unspecified fracture of fifth lumbar vertebra, initial encounter for closed fracture; S32.110A - Nondisplaced Zone I fracture of sacrum, initial encounter for closed fracture; I80.10 - Phlebitis and thrombophlebitis of unspecified femoral vein; Z41.8 - Encounter for other procedures for purposes other than remedying health state; E54 - Ascorbic acid deficiency; E56.8 - Deficiency of other vitamins; K59.00 - Constipation, unspecified; D51.8 - Other vitamin B12 deficiency anemias; E56.9 - Vitamin deficiency, unspecified; E60 - Dietary zinc deficiency; S82.891D - Other fracture of right lower leg, subsequent encounter for closed fracture with routine healing; R11.0 - Nausea; S80.811D - Abrasion, right lower leg, subsequent encounter; R05.3 - Chronic cough; E03.9 - Hypothyroidism, unspecified

Allergies

NKA

Advanced Directives**Contacts****Name:** Caragol, Edward (Primary)
73 Lewis Rd
Merrick, NY 11566**Phone (h):** (516) 853-1646**Relationship:** Other**Phone (w):****PHI?:** Not specified**Phone (m):****Role:****Name:** Caragol, Erin**Phone (h):** (516) 641-7394**Relationship:** Other**Phone (w):****PHI?:** Not specified

Levittown, NY 11756

Phone (m):**Role:****Referral Source**

11/14/2023 Admission Referral:

Facility: Nassau University Medical Center**Admit:****Discharge:****Notes**

Progress Notes**Parkview Care and Rehabilitation Center****Resident:** Caragol, Dona E**Current Location:** PCRC-CT--**DOB:** 11/09/1946 (77 y)**System/Facility ID:** 17131 /**Selection:** Resident: Caragol, Dona E

Started On: 2/7/2024 8:50 am	Discipline: Medical	Status: Complete
Note Facility: Parkview Care and Rehabilitation Center		

Entered By: O'Neill, Eoin on 2/7/2024 8:50 am
 Electronically Signed By: O'Neill, Eoin on 2/7/2024 8:50 am
 Type: Standard

Medicine NP:

Asked to see patient for follow up; pharmacy recommendations reviewed.

This is a 77-year-old female who Presented to the ED at NUMC sp fall at home. Pt found to have right L5 transverse process fracture, right-sided sacral fracture, right-sided superior and inferior pubic Rami fractures, right distal tibial fracture with dislocation. Pt sp ORIF right ankle. Patient had a new onset of paroxysmal A-fib postop, started on blood thinners. Pt was stabilized and transferred to Parkview for restorative rehabilitation.

Past Medical History:

Breast cancer sp lumpectomy, Hypertension, Hyperlipidemia

Review of Systems:

Pt denies CP, palpitations, lightheadedness, dizziness, SOB, cough, fever, chills, NVD.

Physical Exam:

BP 146/78; HR 80; RR 14; SpO2 97%; Temp 98.3

77-year-old female seen sitting in chair, in no distress.

General: Awake, alert.

CV: S1, S2. RRR.

Pulmonary: lungs CTA

Abdomen: soft, ND, NT, +BSx4

Extremities: trace edema.

Plan:

Per pharmacy, pt has not utilized Zofran >30 days

Will discontinue PRN Zofran.

Continue to monitor pt per protocol.

CV - Losartan, Eliquis, pravastatin

GI - Colace, Senna, Zofran

Psych - fluoxetine

Insomnia - zolpidem

Pain - acetaminophen, oxycodone

Supplementation - B12, MVI

Activity as tolerated, fall precautions.

Monitor VS per unit protocol.

Full Code

Eoin O'Neill, AGNP-BC

Medical - Admitting Physician History And Physical

Parkview Care and Rehabilitation Center

**Resident:** Caragol, Dona E**Unit-Room-Bed:** CT - C354 - B**DOB:** 11/09/1946 (77 y)**System/Facility ID:** 17131/-

Created On: 11/14/2023

Completed On: 11/15/2023

Admitting Physician History And Physical**Chief Complaint and History of the Present Illness**

77 years old female admitted from NUMC. Patient is status post fall at home resulted in right L5 transverse process fracture, right-sided sacral fracture, right-sided superior and inferior pubic Ramey fractures, right distal tibial fracture with dislocation.

Patient had all ORIF of right ankle done. Improved.

Patient had a new onset of paroxysmal A-fib postop .started on blood thinners .improved .transfer to rehab

Past Medical History

Breast cancer(lumpectomy)

Hypertension

Lipids

Current Medication

see mar

Social History

Married

lives at home

Family History

Noncontributory

Review of systems

General: Right foot pain

Respiratory: no SOB

Cardiac: no chest pain

Musculoskeletal: s/p ankle sx

Psychiatric: calm

Physical Examination

HEENT: no JVD

Neck: supple

Lungs: CTA BL

Heart: S1S2+

Abdomen: soft, + BS, non tender

Skin: no rash

Extremities: R ankle in cast, s/p sx

Pain Management

Medical - Admitting Physician History And Physical

Parkview Care and Rehabilitation Center

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tylenol

Nutrition**Psychosocial****Immunization Status****Advanced Directives**

DNR: full code

Diagnosis

R tib fx, s/p orif

Pelvic fx

A fib

Lipids

Plan of Care

1. Right tib fracture , status post ORIF-pain medication

At oxy as needed for better pain control

Fall precautions

Ortho follow-up

2. Pelvic fracture-PT OT fall precautions

3. Hypertension-losartan 100 mg

4. New A-fib -heart rate controlled, anticoagulation with Eliquis.

Patient will need outpatient follow-up with cardiology

5. Insomnia-continue with zolpidem as needed

Discussed with patient's husband at the bedside

We will check labs

.d/w pts husband Edward at bedside, 516-853-1646

>35 min spent

>25 min adv care

Dr Y Fink, MD

Section Completed By:

Fink, Yuri

Contributors:

Fink, Yuri

Substance Use Disorder

Does the resident have a history of, or active diagnosis of substance use disorder that would increase their risk for potential overdose. Provide the

Medical - Admitting Physician History And Physical**Parkview Care and Rehabilitation Center****Resident:** Caragol, Dona E**Unit-Room-Bed:** CT - C354 - B**DOB:** 11/09/1946 (77 y)**System/Facility ID:** 17131/-

Created On: 11/14/2023

Completed On: 11/15/2023

plan of care below:

none

Section Completed By:

Fink, Yuri

Contributors:

Fink, Yuri

IDT - Discharge Planning Instructions

Parkview Care and Rehabilitation Center

Resident: Caragol, Dona E
DOB: 11/09/1946 (77 y)

Unit-Room-Bed: CT - C354 - B
System/Facility ID: 17131/-

Created On: 02/05/2024

Completed On: 02/07/2024

General**General Questions**

Discharge Date: 02/07/2024

Discharged To:

Home

Designated Representative: Donna Caragol

Relationship: self

Phone: (516) 853-1646

Advance Directives:

None

Section Completed By:
 Leach, Sharon
 Contribution:
 Leach, Sharon

Medical**Check all current diagnoses:**

Depression

Hyperlipidemia

Hypertension (HTN)

Other

Specify: fx of right lower leg , r sacrum fx, Ankle ORF

Physician Instructions**The attached Medication's list has been reviewed with the:**

Patient

Additional Instructions☐ You are taking a medication called Coumadin (or Warfarin), so please contact your community physician as☒ Please schedule an appointment with your community physician in __ days

:

: 7

☐ Other

☐ Please fill the enclosed prescriptions as soon as possible, and contact you community physician for refills when needed. If you have managed care insurance, continuation of supplies and services may require new physician's orders and prior approval by your insurance company. Be sure to contact your insurance case manager about these matters.

IDT - Discharge Planning Instructions

Parkview Care and Rehabilitation Center

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Created On: 02/05/2024

Completed On: 02/07/2024

Section Completed By:

Leach, Sharon

Contributors:

Leach, Sharon

Dietary**Diet Recommendations:**

No Added Salt

Education

Comments: Continue to follow a diet low in salt. Follow up with outside physician for any changes

Section Completed By:

Gerard, Stephanie

Contributors:

Gerard, Stephanie

Nursing**Present Activities of Daily Living / Level of Functioning**

	Independent	One person assistance	Two person assistance	With Supervision	With Setup	Other
Getting in/out of bed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ambulating	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eating	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using the toilet	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Hygiene	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Taking Medications	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Making needs known	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Dentures:

Not Applicable

Hearing Aid:

Not Applicable

Glasses:

Yes

Skin Condition:

Intact

IDT - Discharge Planning Instructions**Parkview Care and Rehabilitation Center****Resident:** Caragol, Dona E**Unit-Room-Bed:** CT - C354 - B**DOB:** 11/09/1946 (77 y)**System/Facility ID:** 17131/-

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Immunizations:**Pneumovax**

Not Applicable

Flu

Not Applicable

Medications Given to Resident/Designated Representative:

Yes

Prescriptions Given to Resident/Designated Representative:

Yes

Section Completed By:

Marcelin Carlin

Contributors:

Marcelin Carlin

Rehabilitation**Physical Therapy Discharge Instructions****Physical Therapy**

☐ Congratulations! You have completed your Physical Therapy Program and will be discharged home soon. The following information will assist you and ensure your safety at home and the community

While Getting up from Chairs/Beds, Please use the following:

☒ Rolling Walker ☐ Standing Walker ☐ Cane ☐ Other ☐ Physical assistance (1 Person) ☐ Physical assistance (2 People) ☒ Supervision
☐ By yourself

While Walking Indoors, Please use the following:

☒ Rolling Walker ☐ Standing Walker ☐ Cane ☐ Other ☐ Physical assistance (1 Person) ☐ Physical assistance (2 People) ☒ Supervision
☐ By yourself

While Walking Outdoors, Please use the following:

☒ Wheelchair ☒ Rolling Walker ☐ Standing Walker ☐ Cane ☐ Other ☒ Physical assistance (1 Person) ☐ Physical assistance (2 People)
☐ Supervision ☐ By yourself

While Negotiating stairs, Please use the following:

☐ Right sided Banister
☐ Left sided Banister
☒ Both Banisters
☐ Cane
☐ Other
☒ Physical assistance (1 Person)
☐ Physical assistance (2 People)
☐ Supervision

IDT - Discharge Planning Instructions

Parkview Care and Rehabilitation Center

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☐ By yourself

Home Exercise Program was provided/educated to:

☐ Resident☐ Other☐ Not Applicable**Occupational Therapy Discharge Instructions**☐ Not Applicable☒ Occupational Therapy☐ Based on your current abilities, your therapist offers the following suggestions for safety. These suggestions should help make your transition to home, safer and easier! ☐

***** In the Living Room, try to sit in chairs with arms to help push when you stand up. Avoid low seats like couches. To stand up, you need:

☐ No help☒ Supervision☐ Physical help☐ Other

***** In the Living Room, loose rugs should be removed from floors so you don't trip on them. You can get around the house with:

☐ A wheelchair☐ A cane☒ A walker☐ Your own two feet☐ Other

***** In the Kitchen, try to keep items you use often on the countertop or in easily reached cabinets. For meal preparation:

☐ You can cook on your own☐ You should make only cold meals, or reheat simple meals☒ You need somebody else to do the cooking for you☐ Other

***** In the Kitchen, to eat:

☒ You can feed yourself☐ You need help for feeding☐ Other

***** In the Bedroom it's a good idea to have a lamp and phone beside the bed, with emergency phone numbers handy. Keep a clear path to the bathroom, or have your commode right beside the bed. You can get in and out of bed:

☐ All by yourself☒ With supervision for safety☐ With physical assistance☐ Other

***** In the Bedroom, you can get dressed:

☒ All by yourself

IDT - Discharge Planning Instructions

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☐ With the help of another person☐ With supervision☐ Other****** In the Bathroom, to shower or bathe safely you should:**☐ Sponge bathe only☒ Have grab bars installed in the tub or shower☐ Use a shower chair☐ Use a tub transfer bench☐ Nothing extra is needed☐ Other******* In the Bathroom, you can bathe:**☐ Independently☒ With supervision☐ With assistance☐ Other****** In the Bathroom, to use the toilet:**☐ You need supervision☐ You need physical help☒ You can do it yourself☐ Other****** In the Bathroom, we recommend:**☐ A raised toilet seat☒ A wall-mounted grab bar☐ A "versa-frame" over the toilet☐ A commode☐ Nothing extra☐ Other**Speech Therapist Discharge Instructions**☐ Not Applicable☐ Speech Therapy

Section Completed By:
 Gilberto J. Torres
 Contributors:
 Perkins, Janice
 Gilberto J. Torres
 Zepel, Judith

Medical Equipment**Medical Equipment**

IDT - Discharge Planning Instructions

Parkview Care and Rehabilitation Center

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Completed On: 02/07/2024

Resident has the following equipment at home:

- ☒ Walker
- ☒ Wheelchair
- ☒ Other

Specify: shower chair, chair lift

Section Completed By:

Leach, Sharon

Contributors:

Leach, Sharon

Social Services

Home Health Care Agency:

Agency Name: Royal

Contact Person: Melissa

Phone #: 718-475-1000

Services Arranged:

Skilled Nursing Assessment After Discharge

Home Health Aid Services As Per Agency Determination

Physical Therapy Evaluation

Insurance Coverage:

Medicare

: 8DJ9N54RT39

Comments

Resident is alert and oriented with cognition intact. Resident has reached level in rehab therapy to enable a safe return home with her husband. Resident and family supportive of discharge.

Social Work Department Contact Information

Any questions, please contact: Sharon Leach

Social Work

516-798-1800 EXT 229

Section Completed By:

Leach, Sharon

Contributors:

Leach, Sharon

Signatures

Signatures

[Signature]
Dona Caragol

IDT - Discharge Planning Instructions**Parkview Care and Rehabilitation Center****Resident:** Caragol, Dona E
DOB: 11/09/1946 (77 y)**Unit-Room-Bed:** CT - C354 - B
System/Facility ID: 17131/-**Created On:** 02/05/2024**Completed On:** 02/07/2024

ACKNOWLEDGEMENT OF RECEIPT I have received a copy of the Interdisciplinary Discharge Planning Instructions and have had the opportunity to review it with the Physician, Nurse, Social Worker, and Therapists and understand the information it contains

Resident's Signature: _____

Section Completed By:

Leach, Sharon

Contributors:

Leach, Sharon

Community Transportation Resources**Community Transportation Resources**

Nassau County offers a unique service that has been a great help to individuals with disabilities who cannot utilize line-haul transit buses. The Able-Ride / Paratransit Program provides public curb-to-curb transportation through the MTA-Long Island Bus service. Individuals with disabilities are evaluated and approved under federal standards contained in the Americans with Disabilities Act (ADA). The service is available only within Nassau County. AbleRide will pick up the person with a physical disability outside the home and take the individual to visit the doctor, go shopping, commute to work, or even attend social events. Many people with disabilities are now holding productive jobs as a result of the Paratransit Program.

In some cases, Medicaid coverage may be applied. Contact Nassau Inter-County Express (NICE) Bus at 516-228-4028 for an application.

City of Glen Cove:

Food shopping transportation for seniors is available through the Glen Cove Senior Community Service Center.

Call: (516) 676-6182

Town of North Hempstead:

Food shopping buses serve most communities. Seniors must complete a transportation application and have a Town of North Hempstead Senior ID Card.

Call: (516) 869-6311

Town of Oyster Bay:

Shopping bus to malls and food stores is available in some communities.

Contact the Department of Community Services for Information: (516) 797-7900

LONG ISLAND RAILROAD

Senior citizens age 65 and over may use their Medicare card, drivers license or birth certificate at any ticket office or aboard a train to receive half fare on the Long Island Railroad except for trains arriving in N.Y.C. between 6 a.m. and 10 a.m. on weekdays. For information, call: LIRR (516) 822-LIRR

MEDICAID-MEDICAL TRANSPORTATION

Medicaid recipients may be eligible for transportation for medical purposes, depending upon their physical condition. For further information, call:

LogistiCare Solutions, LLC Consumer Line: 1-844-678-1103

IDT - Discharge Planning Instructions**Parkview Care and Rehabilitation Center****Resident:** Caragol, Dona E**Unit-Room-Bed:** CT - C354 - B**DOB:** 11/09/1946 (77 y)**System/Facility ID:** 17131/-

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Completed On: 02/07/2024

Deaf or Hearing Impaired (TTY):1-866-288-3133**Assistance after 6:00 PM or on the weekend - call the "Where's My Ride" line at 1-844-678-1104 24 hours a day / 7 days a week.**

Section Completed By:

Leach, Sharon