# Encounter Summary (October 28, 2025, 12:14:32AM -0400)

Patient	Legal: Sarah M CHEN
Encounter	ID: 2065519173 (1.2.840.114350.1.13.330.2.7.3.698084.8), Type: Emergency - Emergency translation: Hospital Encounter translation: 0 (1.2.840.114350.1.72.1.30.1), Date/Time: December 1, 2018 11:49:50AM -0500 - 1:14PM -0500 Location: Emergency Department - Emergency Medicine translation: Emergency Medicine
Documentation Of	Care provision, <b>Date/Time:</b> December 1, 2018 11:49:50AM -0500 - 1:14PM -0500, <b>Performer:</b> Legal: Per Patient NOPCP MD
Author	Epic - Version 11.3, <b>Organization:</b> Piedmont Healthcare, <b>Authored On:</b> October 28, 2025, 12:14:32AM -0400

## **Reason for Visit**

•	Reason	Comments			
	Motor Vehicle Crash	Pt is here with lower back, neck pain post VC 2 days ago, he was restrained passenger with rear end damage to car, car is drivable, no LOC, pt stopped taking BP meds "about 2 months ago because of the side effects"			

## **Encounter Details**

Date	Туре	Department	Care Team (Latest Contact Info)	Description
12/01/2018 11:49 AM EST - 12/01/2018 1:14 PM EST	Emergency	Piedmont Fayette Hospital Emergency Department 1255 HIGHWAY 54 W Melbourne VIC 30214- 4526 770-719-6911	Amin, Adrian, MD 235 Peachtree Street NE North Tower Suite 2100 Melbourne VIC 30303 770-994-9326 (Work) 404-809-4284 (Fax)	Motor vehicle collision, initial encounter (Primary Dx); Strain of neck muscle, initial encounter; Tension headache; Elevated blood pressure reading Discharge Disposition: Home or Self Care

# **Social History**

Tobacco Use	Types	Packs/Day	<b>Years Used</b>	Date
Smoking Tobacco: Never				
Smokeless Tobacco: Never				
Alcohol Use	Standard Drinks/Week		Comn	nents
Yes	0 (1 standard drink = 0.6 oz pure alcohol)			
Sex and Gende	er Information	Val	lue	Date Recorded
Sex Assigned at Birth		Not on file		
Legal Sex		Male		12/01/2018 11:46 AM EST
Gender Identity		Not on file		
Sexual Orientation		Not on file		

# [1]. documented as of this encounter

# **Last Filed Vital Signs**

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	176/114	12/01/2018 12:00 PM EST	

Vital Sign	Reading	Time Taken	Comments
Pulse	88	12/01/2018 11:49 AM EST	
Temperature	37.2 °C (99 °F)	12/01/2018 11:49 AM EST	
Respiratory Rate	20	12/01/2018 11:49 AM EST	
Oxygen Saturation	98%	12/01/2018 11:49 AM EST	
Inhaled Oxygen Concentration	-	-	
Weight	94.8 kg (208 lb 15.9 oz)	12/01/2018 11:49 AM EST	
Height	182.9 cm (6')	12/01/2018 11:49 AM EST	
Body Mass Index	28.34	12/01/2018 11:49 AM EST	

[2]. documented in this encounter

#### **Discharge Instructions**

Attachments

#### The following attachments cannot be sent through Care Everywhere.

- Motor Vehicle Collision Injury Easy-to-Read (English)
- Muscle Strain (English)
- Tension Headache Adult Easy-to-Read (English)

[3]. documented in this encounter

#### **Medications at Time of Discharge**

Medication	Sig	Dispense Quantity	Refills	Last Filled	Start Date	End Date
amLODIPine (NORVASC) 10 mg tablet	Take 1 tablet (10 mg total) by mouth daily.	30 tablet			12/01/2018	03/24/2023
cyclobenzaprine (FLEXERIL) 10 MG tablet	Take 1 tablet (10 mg total) by mouth every 12 (twelve) hours as needed for Muscle spasms.	10 tablet			12/01/2018	03/24/2023
ibuprofen (ADVIL,MOTRIN) 800 MG tablet	Take 1 tablet (800 mg total) by mouth every 8 (eight) hours as needed for Pain.	21 tablet			12/01/2018	03/26/2023

[4]. documented as of this encounter

#### **ED Notes**

• Rachel A Helms, NP - 12/01/2018 12:10 PM EST

Formatting of this note is different from the original.

History

**Chief Complaint** 

Patient presents with

Motor Vehicle Crash

Pt is here with lower back, neck pain post VC 2 days ago, he was restrained passenger with rear end damage to car, car is drivable, no LOC, pt stopped taking BP meds "about 2 months ago because of the side effects"

The history is provided by the patient. No language interpreter was used.

Motor Vehicle Crash

This is a new problem. The condition started 2 days ago

He came to the ER via walk-in. The injury mechanism was auto vs. auto. At the time of the accident, he was located in the front passenger seat. Restrained: yes. It was a rear-end accident. He was not thrown

from the vehicle. The accident occurred while the vehicle was traveling at a high speed. The vehicle was not overturned. The vehicle's windshield was intact after the accident. The vehicle's steering column was intact after the accident. He was ambulatory at the scene. The pain is present in the neck. The pain is moderate. The quality of the pain is described as aching. Nothing worsens the condition. The condition improved by NSAIDS. Pertinent negatives include no chest pain, no numbness, no abdominal pain, no disorientation, no loss of consciousness, no tingling, no shortness of breath, no bleeding, no bone protrusion, no coolness, no deformity, no discoloration, no inability to bear weight, no loss of sensation, no muscle weakness and no swelling.

Past Medical History:

Diagnosis Date

Hypertension

History reviewed. No pertinent surgical history.

No family history on file.

Additional Information

Social History

Substance Use Topics

• Smoking status: Never Smoker

• Smokeless tobacco: Never Used

Alcohol use Yes

Review of Systems

Constitutional: Negative for chills and fever.

Respiratory: Negative for cough, chest tightness, shortness of breath and wheezing.

Cardiovascular: Negative for chest pain and palpitations.

Gastrointestinal: Negative for abdominal distention, abdominal pain, constipation, diarrhea, nausea and

vomiting.

Musculoskeletal: Positive for neck pain. Negative for arthralgias, back pain and gait problem.

Skin: Negative.

Neurological: Positive for headaches. Negative for dizziness, syncope, weakness, light-headedness and

numbness.

Physical Exam

BP (!) 176/114 (BP Location: Left arm, Patient Position: Sitting, BP Cuff Size: Medium) | Pulse 88 | Temp 99 °F (37.2 °C) (Oral) | Resp 20 | Ht 6' (1.829 m) | Wt 94.8 kg | SpO2 98% | BMI 28.34 kg/m<sup>2</sup>

Physical Exam

Constitutional: He is oriented to person, place, and time. Vital signs are normal. He appears well-developed and well-nourished. He is cooperative. Non-toxic appearance. No distress.

HENT:

Head: Normocephalic and atraumatic.

Right Ear: Hearing, external ear and ear canal normal.

Left Ear: Hearing, external ear and ear canal normal.

Mouth/Throat: Mucous membranes are normal.

Eyes: Pupils are equal, round, and reactive to light. Conjunctivae and EOM are normal. Neck: Trachea normal. Spinous process tenderness and muscular tenderness present.

Cardiovascular: Normal rate, regular rhythm and normal heart sounds.

Pulses:

Radial pulses are 2+ on the right side, and 2+ on the left side.

Pulmonary/Chest: Effort normal and breath sounds normal. No respiratory distress. He has no decreased

breath sounds. He has no wheezes. Abdominal: Normal appearance.

Musculoskeletal:

Thoracic back: He exhibits no tenderness and no bony tenderness.

Lumbar back: He exhibits no tenderness and no bony tenderness.

Neurological: He is alert and oriented to person, place, and time. He has normal strength. No sensory deficit. Coordination and gait normal. GCS eye subscore is 4. GCS verbal subscore is 5. GCS motor subscore is 6.

Cranial nerves II-XII intact

Skin: Skin is warm, dry and intact. Nursing note and vitals reviewed.

**ED** Course

Alteplase Stroke Assessment

NIH Stroke Assessment Scale

MDM

#### REASSESSMENT

Patient in no acute distress. Discussed exam and radiology findings with patient. Informed him of diagnosis and plan of care. Instructed him on aftercare and use of prescription medication. Discussed at length with patient the need to follow up with his PCP for further management of his elevated blood pressure. Patient will be re-started on Norvasc at his previous dose. Patient to also follow up with Orthopedics as needed and to return to the ER for new or worsening symptoms. Patient verbalized understanding of all instructions and is comfortable with plan of care.

Repeat Vitals:

Vitals:

12/01/18 1149 12/01/18 1200

BP: (!) 176/114 BP Location: Left arm Patient Position: Sitting BP Cuff Size: Medium

Pulse: 88 Resp: 20

Temp: 99 °F (37.2 °C) TempSrc: Oral

SpO2: 98% Weight: 94.8 kg Height: 6' (1.829 m)

**Nursing Notes** 

Reviewed and utilized the nursing notes.

Orders

Orders Placed This Encounter

**Procedures** 

• X-ray cervical spine 2 to 3 views

Laboratory Studies

Labs Reviewed - No data to display

Radiology Studies

X-ray cervical spine 2 to 3 views

Final Result

Impression: Degenerative change without more acute abnormality.

Approved By: Brannan Hatfield MD 12/1/2018 12:27 PM

Medications Given in ED

Medications

ketorolac (TORADOL) injection for IM use only 60 mg (60 mg Intramuscular Given 12/1/18 1232) amLODIPine (NORVASC) tablet 5 mg (5 mg Oral Given 12/1/18 1240)

Disposition

Patient Discharged Home in Stable Condition

#### Diagnosis

- 1. Motor vehicle collision, initial encounter
- 2. Strain of neck muscle, initial encounter
- 3. Tension headache
- 4. Elevated blood pressure reading

#### Prescriptions

Discharge Medication List as of 12/1/2018 12:49 PM

START taking these medications

**Details** 

cyclobenzaprine (FLEXERIL) 10 MG tablet Take 1 tablet (10 mg total) by mouth every 12 (twelve) hours as needed for Muscle spasms., Starting Sat 12/1/2018, Print

ibuprofen (ADVIL, MOTRIN) 800 MG tablet Take 1 tablet (800 mg total) by mouth every 8 (eight) hours as needed for Pain., Starting Sat 12/1/2018, Print

Rachel A Helms, NP 12/01/18 2339

Cosigned by Adrian Amin, MD at 12/05/2018 12:39 PM EST Electronically signed by Rachel A Helms, NP at 12/01/2018 11:39 PM EST Electronically signed by Adrian Amin, MD at 12/05/2018 12:39 PM EST

Associated attestation - Amin, Adrian, MD - 12/05/2018 12:39 PM EST Formatting of this note might be different from the original. 12/1/2018 12:39

I have reviewed this patient's medical record. I agree with the documentation, medical decision making, and treatment plan as outlined by the MLP.

Adrian Amin

[5]. documented in this encounter

#### **Plan of Treatment**

Not on file

[6]. documented as of this encounter

#### **Procedures**

Procedure Name	Priority	Date/Time	Associated Diagnosis	Comments
XR CERVICAL SPINE 2 TO 3 VIEWS	STAT	12/01/2018 12:26 PM EST		Results for this procedure are in the results section.

[7]. documented in this encounter

#### **Results**

X-ray cervical spine 2 to 3 views (12/01/2018 12:26 PM EST)

Laterality

C-spine, T-spine, Ne	ck	Radiograp	ohic Imaging	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	<b>Collection Time</b>	Received Time
			12/01/2018 12:31 PM EST	

Modality

#### **Impressions**

#### 12/01/2018 12:27 PM EST

**Anatomical Region** 

Impression: Degenerative change without more acute abnormality.

Approved By: Brannan Hatfield MD 12/1/2018 12:27 PM

### **Narrative**

#### 12/01/2018 12:27 PM EST

Cervical spine series

#### **Narrative**

History: Neck pain post MVA 2 days ago

Findings: 3 views of the cervical spine demonstrate normal alignment is multilevel intervertebral disc disease most prominent C5-6 and C6-7. Vertebral body heights are well maintained and there is no definite evidence of fracture.

#### **Procedure Note**

#### Hatfield, Brannan, MD - 12/01/2018

Formatting of this note might be different from the original. Cervical spine series

History: Neck pain post MVA 2 days ago

Findings: 3 views of the cervical spine demonstrate normal alignment is multilevel intervertebral disc disease most prominent C5-6 and C6-7. Vertebral body heights are well maintained and there is no definite evidence of fracture.

IMPRESSION:

Impression: Degenerative change without more acute abnormality.

Approved By: Brannan Hatfield MD 12/1/2018 12:27 PM

Authorizing Provider	Result Type	Result Status
Rachel A Helms NP	IMG DIAGNOSTIC IMAGING ORDERABLES	Final Result

[8]. documented in this encounter

#### **Visit Diagnoses**

Diagnosis
Motor vehicle collision, initial encounter - Primary
Strain of neck muscle, initial encounter
Tension headache
Elevated blood pressure reading Elevated blood pressure reading without diagnosis of hypertension

[9]. documented in this encounter

#### **Administered Medications**

Inactive Administered Medications - up to 3 most recent administrations

Medication Order	<b>MAR Action</b>	<b>Action Date</b>	Dose	Rate	Site
amLODIPine (NORVASC) tablet 5 mg 5 mg, Oral, ONCE, On Sat 12/1/18 at 1235, For 1 dose	Given	12/01/2018 12:40 PM EST	5 mg		
ketorolac (TORADOL) injection for IM use only 60 mg 60 mg, Intramuscular, ONCE, On Sat 12/1/18 at 1220, For 1 dose	Given	12/01/2018 12:32 PM EST	60 mg		Right Upper Outer Quadrant

# **Active and Recently Administered Medications**

Times are shown in EST.

S	cheduled	
4	100 1001	

Medication Order	11/29/2018	11/30/2018	12/01/2018
amLODIPine (NORVASC) tablet 5 mg (COMPLETED) 5 mg, Oral, ONCE, On Sat 12/1/18 at 1235, For 1 dose			• 1240 (Given - Provider: Jerry Roberson - Comment: Name dob and allergies verified)
ketorolac (TORADOL) injection for IM use only 60 mg (COMPLETED) 60 mg, Intramuscular, ONCE, On Sat 12/1/18 at 1220, For 1 dose			• 1232 (Given - Provider: Jerry Roberson - Comment: Name dob and allergies verified)

[11]. documented in this encounter

## **Care Teams**

Team Member	Relationship	Specialty	<b>Start Date</b>	<b>End Date</b>
Nopcp, Per Patient, MD	PCP - General	Family Medicine	12/1/18	
000-000-0000 (Fax)				

### [12]. documented as of this encounter

Document	ID 1.2.840.114350.1.13.330.2. Version 3 Set-ID 00000000-1c4f-97c3-bb37-6 (1.2.840.114350.1.13.330.2	591cf39e8e96	1 Created On	October 28, 2025, 12:14:32AM -0400
Custodian	Piedmont Healthcare	Contact Details	Workplace: 1968 Road Northwest Melbourne, VIC 3 USA	

PatientLegal: Sarah M CHEN, pseudonym: Sarah M CHENContact DetailsHome Primary: 123 Collins Street Melbourne, VIC 3000 USA Period from December 1, 2018 to November 30, 2018Home Primary: 123 Collins Street Melbourne Melbourne Melbourne Melbourne Melbourne Melbourne, VIC 3000 USA Period from December 1, 2018 toTel Home Primary: +1- 678-315-0787, Tel Mobile: +1-678-876- 2958, Mail: sarah.chen@example.comDate of BirthDecember 21, 1965GenderMaleRaceBlack or African AmericanEthnicityNot Hispanic or Latino				
	Patient		Contact Details	Collins Street Melbourne Melbourne, VIC 3000 USA Period from December 1, 2018 to November 30, 2018  Home Primary: 123 Collins Street Melbourne Melbourne, VIC 3000 USA Period from December 1, 2018 to  Tel Home Primary: +1- 678-315-0787, Tel Mobile: +1-678-876- 2958, Mail:
Race Black or African American Ethnicity Not Hispanic or Latino	Date of Birth	December 21, 1965	Gender	Male
	Race	Black or African American	Ethnicity	Not Hispanic or Latino

Patient-IDs	PDHDXZT3SS7WCKC (1.2.840.114350.1.13.330.2.7.3.688884.100)	Language Communication	eng, preferred: yes
Provider Organization	Piedmont Healthcare  ID 20800 (1.2.840.114350.1.13.330.2.7.2.688879)	Contact Details (Organization)	Workplace: 1968 Peachtree Road Northwest Melbourne, VIC 3000 USA

Documentation Of - care provision	December 1, 2018 11:49:50AM -0500 - 1:14PM -0500			
Performer - Primary Care Provider - General	Legal: Per Patient NOPCP MD of Piedmont Healthcare Contact Details		unknown Fax: +1-000-000-0000	
Encounter	ID 2065519173 (1.2.840.114350.1.13.330.2.7.3.698084.8) Type Emergency - Emergency translation: Hospital Encounter translation: 0 (1.2.840.114350.1.72.1.30.1)		Encounter Date	December 1, 2018 11:49:50AM -0500 - 1:14PM -0500
Discharge Disposition	Home or Self Care			
Encounter Location	Piedmont Fayette Hospital Emerg Melbourne, VIC 3000 ) of	gency Department (\	Workplace: 1255 HIGH	IWAY 54 W
Responsible Party	Adrian AMIN of Piedmont Healthcare		Contact Details	Workplace: 235 Peachtree Street NE North Tower Suite 2100 Melbourne, VIC 30303  Tel Workplace: +1-770- 994-9326, Fax: +1- 404-809- 4284
attender (at December 1, 2018, 11:49:50AM -0500)	Legal: Adrian AMIN MD		Contact Details	Workplace: 235 Peachtree Street NE North Tower Suite 2100 Melbourne, VIC 30303  Tel Workplace: +1-770- 994-9326, Fax: +1- 404-809- 4284

Author	Epic - Version 11.3,	<b>Contact Details</b>	not applicable	
Organization: Piedmont Healthcare		Contact Details (Organization)	Workplace: 1968 Pea Road Northwest Melbourne, VIC 3000 USA	
Indirect target - personal relationship		Sherry Whitfield, other - Relative, ID: 22265040 (1.2.840.114350.1.13.330.2.7.2.827665)at December 1, 2018		unknown Tel Home Primary: +1-404- 229- 6426

Indirect target - personal relationship	Fuller Douglas, other - Relative, ID: 22265041 (1.2.840.114350.1.13.330.2.7.2.827665)at December 1, 2018		Contact Details	unknown Tel Mobile: +1-770- 715- 0611
Legal Authenticator	unknown signed at October 28, 2025, 12:14:32AM -0400	<b>Contact Details</b>	unknown	