

DATE: 2-23-02 SERVICE PROVIDER: AMERICAN MEDICAL RESPONSE MASTER # (PHONE): 07 PROVIDER # (UNIT #): B
 EST. INCIDENT: EST. DEPT: EST. ARRIVE: EST. ASSESSMENT TIME: EST. TRANSFER TIME: TRANSFER CODE: PRIORITY: APPROX. DEST. TIME: AVAILABLE EQUIPMENT: 501285464
 CALL LOCATION: SAME AS PATIENT'S ADDRESS: FIRST RESPONDER/MEDIC NAME#: TRANSFER OF CARE YES NO
 PATIENT NAME (LAST, FIRST): AGE: 81 MOS. D.O.B.: 2-11-27 MALE FEMALE
 PATIENT'S ADDRESS (STREET): EDUCATION: AUBURN CITY: STATE: ZIP: PHONE: (888) 888-8887

SYNCOPE VS MECHANICAL FALL - HEAD INJ
 MEDICAL HISTORY: ANGINA ASTHMA CANCER CHF COPD DVA DENIED DIABETES ESRD HIGH BP ILM PSYCHIATRIC SEIZURES
 CURRENT MEDICATIONS: UNKNOWN DENIED ALLERGIES (MED): DENIED WEIGHT: KG

TIME	GCS	BP	PULSE	RESP.	CO2	PAIN	EKG	BY	TIME	GCS	BP	PULSE	RESP.	CO2	PAIN	EKG	BY
	E V M									E V M							
0644	4/6	NT	72/10	-	/10	-	-	SK							/10		
0844	4/6	57/91	66/14		/10	SINUS BR									/10		
0844	4/6	63/76	64/15		/10	SINUS BR									/10		

CHEST PAIN CARDIAC SYMPTOMS STEMI PAIN RELIEVED TRANSMITTED MONA GIVEN

HEAD: Hematoma forehead, forehead/back neck, G500 non tender, PUPILS: RT > LF RT=4 L=2.5
 CHEST: CCP = EXPANSION, LUNG SOUNDS: C72 =
 ABDOMEN: Soft non tender, BACK: PAIN
 PELVIS: INCONTINENT BOWEL/URINE, EXTREMITIES: STATES CANNOT MOVE BUT MOVES 1/4 =
 SKIN: N-2 P, NEUROLOGIC: NORMAL, COORDINATION: 2 SF

Called to ALZHEIMERS UNIT of RETIREMENT CENTER FOR 81 YOM FALL OUT OF CHAIR - UNWITNESSED UNK. MECHANICAL VS SYNCOPE. PT FOUND PRONE ON FLOOR NEAR CHAIR. AWAKE CONFUSED (NORMAL PER STAFF) (PAIN on PALP. 106 ROLL TO FALL SPINAL PRECAUTIONS. INCONTINENT URINE/BOWEL. HAS HEMATOMAS TO RT FOREHEAD RT LAT ORBIT, LEFT ZYGOMAT. STATES CANNOT MOVE

TIME: 2025 OXYGEN/T: BY: MASK CANNULA BAG VALVE CPAP HHN NEB MASK PULSE OX: before O2, after O2
 AIRWAY: GAG YES NO ASPIRATION YES NO OPA NPA NIT OTI NEEDLE CRIC COMBURESCUE
 TIME: ET SECURED AT CM AT THE (ANATOMY) USING BY: TUBE SIZE: NUMBER ATTEMPTS: SUCCESSFUL YES NO
 = LUNG SOUNDS ET/CO2 WAVEFORM = CHEST RISE EPIGASTRIC AUSCULTATION EDD
 SELLICK/VELM BAAM GORDS VISUALIZED FLEXGUIDE M.D. VERIFICATION SIGNATURE:

TIME	FLUIDS	SOLUTIONS	GAUGE	LOCATION	RATE	TOTAL VOLUME	# OF ATTEMPTS	SUCCESSFUL	BY
08	NS	20		LF F.A	OK	1000	2	YES	SK

IMMOBILIZATION: NECK BACK LIMB(S) EXTREMITY POSITION: SUPINE LATERAL PRONE SITTING HEAD ELEV. FEET ELEV.

TIME	MEDICATION, DOSE, ROUTE, TREATMENT AND RESPONSE	BY	TIME	MEDICATION, DOSE, ROUTE, TREATMENT AND RESPONSE	BY
	ASPIRIN, BUT DOES SO (NOT TO COMMAND THOUGH), EQUALLY - WEAK GRIPS, 3 PUSH PULL, BLOW O2, BSC - COAD C-2 - SAFET 1U ASPIRIN				

HOSPITAL CONTACTED: SRMC SAFH SDH WMH PHONE MICH #/NAME M.D. FORM LEFT W/PT? YES NO
 SGH MSJ MHS UCDMG NONE RADIO CONT. ATTACHED? YES NO
 DESTINATION: SAFH RAS CARA TRANSFERRED TO: PVT M.D. PT FAMILY REQUEST LAW TRAUMA CRITERIA CLOSEST
 AMA DIVISION DCF SPECIALTY CENTER TYPE: SH ORDER
 STANDING ORDERS COMMUNICATION FAILURE ORDERS E.D. DIAGNOSIS/COMMENTS DEAD AFTER RESUS. EXPIRED E.D. ADMIT HOME TRANSFER

PRIMARY ATTENDANT SIGNATURE: MCP EMT SECONDARY ATTENDANT SIGNATURE/NAME: MCP EMT PRECEPTOR SIGNATURE: MCP EMT

K:He
 EXHIBIT NO. 27
 4-6-11
 C. RANSOM