



Mercy Hospital

1567 Broadway, Ruston, Major

To: Defendant Attorney/Plaintiff Attorney
From: Rose Gadfly
Mercy Hospital
1567 Broadway
Ruston, Major

Records
Department

October 1, 20XX

Dear Attorneys:

As per your mutual request, I am enclosing the hospital records of Mr. Bruno Summers.
The documents requested include:

1. Emergency Department Records – 1 page
2. Nursing Record – 5 pages

Sincerely,

A handwritten signature in cursive script that reads "Rose Gadfly".

Rose Gadfly
Chief Records Clerk
Mercy Hospital

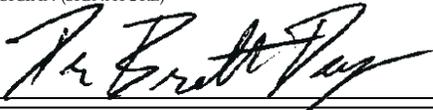
Entry 11: Letter and Hospital Records of Bruno Summers-2 of 7

DESCRIBE INJURY (WHEN, WHERE, & HOW) OR ILLNESS:

9/3/20XX Gunshot Wound (GSW) at close range. Entered chest (abdomen). Shot at approx. 9:00 p.m.

ALLERGIES:

NA

PREV. TETANUS DATE		NA		GIVEN THIS VISIT?		NO		HEIGHT	WEIGHT	LMP	
								6' 4"	219	—	
TIME	TEMP.	PULSE	RESP.	BLOOD PRESSURE	I.V.S.						
22:20	—	124	40/ Labored	40/ Unobtained	Ringers lactate at 5 amps						
MEDICATIONS TAKEN: None											
MEDICATIONS GIVEN: None											
HISTORY & PHYSICAL FINDINGS: (1) This 30 year old 20:20 ♂ sustained a .22 caliber GSW to his thoracic area. The bullet penetrated the lower chest cavity and may have struck the liver; other abdominal traumas may be found. No bullet exit. (2) Pt. conscious and in extreme pain. (3) Respiration labored (4) Pt. says he was in "perfect" health. (5) Pt. has alcohol smell on his breath. (6) Pt. states, "I should have left when I saw him."											
TREATMENT & ORDERS: * Surgery recommended ___ Procedure and rules explained to Pt. and he understands and agrees to proceed ___ Immediate surgery for removal of bullet ordered											
BROUGHT TO HOSPITAL BY: Ambulance				ACCOUNT NO. 1717		ADMIT DATE 9/3/20XX		ADMIT TIME 22:15			
DISPOSITION & CONDITION ON DISCHARGE: Transfer to IC				ADMIT DIAGNOSIS GSW of Chest				RM - BED 201			
PATIENT NAME (LAST, FIRST, MI) Summers, Bruno E.											
DIAGNOSTIC IMPRESSION: GSW Trauma causing thoracic and abdominal distress				STREET ADDRESS 1962 N.E. 64th							
				CITY, STATE Ruston, Major			ZIP 98139	PHONE 433-1112			
NURSE (SIGNATURE) Betty Frank, R.N.				RELIGION —		PHYSICIAN —					
				DIET 3	COND. 3	AGE 30	SEX M	BIRTH DATE 7/16/20XX-34			
PHYSICIAN (SIGNATURE) 				NEAREST RELATIVE Mrs. Deborah Summers							
				STREET ADDRESS Same							
				CITY, STATE, ZIP Same				PHONE Same			
				GUARANTOR NAME Hans Summers				PHONE 756-3560			
				EMPLOYER & CITY Retired							

EMERGENCY ROOM
REPORT
MERCY HOSPITAL



DATE	TIME	PROBLEM	PATIENT PROGRESS NOTES
9/4/20xx	00:45	NEW TRANSFER	Pt. White male 30 year old
			transferred from ER
			G SWT post-surgery <u>N.F.</u>
		P#1	Please see doctor's summary (incl.)
			for appropriate details of ER +
			Surgery report.
			MEDS-NONE ENT-NORM <u>N.F.</u>
		VS BP 40/? HR 110 R 18	No Volume Overload = IV of ringers
			Lactate Continued ($\frac{\text{Samples}}{\text{Xopen}}$)
9/4/20xx	04:30	P#1	G SN
			1. VS's returning to normal
		VS BP 80/60 HR 80 R 20	2. Blood Volume replacing adequately
			3. Pt.'s Arterial Blood Gases
			Improving
			PCO2 = 31
			PO2 of 50 with 90% saturation
			<u>N.F.</u>
PATIENT NAME: ADDRESS: PHYSICIAN ADMIT DATE: ADMIT TIME:			NURSING CARE RECORD Mercy Hospital Ruston, Major 

DATE	TIME	PROBLEM	PATIENT PROGRESS NOTES
9-4	10:36	P#1	$US = \frac{HR}{30} \quad \frac{BP}{140/80} \quad \frac{R}{Norm} \quad \frac{T}{99^{\circ}F}$ ① Pt. complains of pain ② Pt. neuro = alert, O ₂ 3 ③ Renal = clear, > 150 cc/hr
	OK		A/P ① No painkillers allowed at this time to stabilize respiration. ② Pt. is looking better ③ No volume overload LA six 40mg. N x 2 for urine < 150 cc/hr
9/4/20xx	17:10	P#1	
		VS	$\frac{HR}{30}$ $BP/130/80$ $T^m 38^{\circ}$
			$\frac{R}{labored to norm}$ $\frac{T}{99^{\circ}F}$ $\frac{6200}{3700}$
			looks great % extreme
		OK	discomfort/pain.
			Pt. neuro-oriented x3, Follows commands + cooperative
			— Pt. Pulm. Clear upper BS ↓ BSFT
			— A/C 7.46/38/89 40% MA S/P ∅ SPUTUM
			— CxR = no volume overload GI -
			A B d - soft BS (+), tube feeds c 250 cc/hr 1/2 strength renal → 200 cc/hr clear
			* no lasix now
			A/P overall, looks great
PATIENT NAME: ADDRESS: PHYSICIAN ADMIT DATE: ADMIT TIME:			NURSING CARE RECORD Mercy Hospital Ruston, Major



DATE	TIME	PROBLEM	PATIENT PROGRESS NOTES
9/5/20XX	00:30	P#1 vs BP 130/70 HR 24 T 98°F R labored	Hemo -28 N.F. c/o still in Pain
9/5	11:45	vs BP 22/60 HR 25 T 102° R labored	T is spiking Pt. c/o extreme pain in chest.
		N.F.	x-ray shows re-expanded lung.
			hemothorax reduced to insign size
			P. NERO-AWERT, OX3 distracted
			by pain. COV-HSR 5 Ectopy
OK			Renal OK LA Six Pro Urine C 200 ^u /hr metabolic 142/2.6 178 T.B. -0.7 clear 97/35 15 MET 31
		A/P	overall doing well, T problem
			still showing evidence of distress
			2. volume excess, will force distress
9/6/20XX	00:30	P#1 N.F.	vs BP 100/50 HR 30 R labored T/101°F
			*Increasing (20 ^u 40 mg/hr) SERSANG
			Drain from Drain Tubes (thoracic)
			NOTIFIED DR. DAY
			N.F.
PATIENT NAME: ADDRESS: PHYSICIAN ADMIT DATE: ADMIT TIME:			NURSING CARE RECORD Mercy Hospital Ruston, Major 

DATE	TIME	PROBLEM	PATIENT PROGRESS NOTES
9/6/ 20XX	07: 00	P# 1	<p>VS/BP $\frac{HR}{30}$ $\frac{TC}{22}$ labored $T/100^{\circ}F$ $110/50$</p>
			Some increasing consolidation
			In right lower lobe.
			- extends to right middle lobe.
			Etiology - Unknown at this time.
			① Preliminary Diagnosis of PNEUMONITES (P#2)
			② work-up of SPUTUM + B cultures IMMEDIATELY
			③ CEPHALOTHIN - 1g 4th GENTAMICIN
			④ Culture of Serous Drain NOW
			VS/BP $100/50$ $\frac{HR}{32}$ $\frac{R/20}{labored}$ $T/105^{\circ}F$
9/6/ 20XX	20: 35	N.F.	* T SPIKE
		Pt. #1 Pt. #2	P. NEURO-LETHARGIC, ODIENT ^{POOR} +2
			<u>DEMON TOXICITY</u>
			X-ray reveals consolidation in right lung
			middle lobe entirely involved
			RIGHT - UPPER - INVOLVED
			- SAME LEFT LOWER
			IAB SPUTUM : 6 cultures are
			∅ growth in 24 hrs.
			{NEXPG.}
PATIENT NAME: ADDRESS: PHYSICIAN ADMIT DATE: ADMIT TIME:			NURSING CARE RECORD Mercy Hospital Ruston, Major 

DATE	TIME	PROBLEM	PATIENT PROGRESS NOTES
9/6/ 20XX	20: 35	P#1	A/P
		P#2	Diffen Diag-Staph Pneumonia ① Probably NOT Stress lung SXN ② Consultation request + infections disease consult ③ NAFCILLIN IV 2gm q 4h ④ <u>IMMEDIATELY</u> Blood & IV. to Stable
9/7/20XX	00: 30	P#1	VS/HR BP R T 32 100/40 labored 104°F
		P#2	PE. NOT RESPONDING TO MEDS.
9/7/20XX	01:30	P#1	VS/BP/N/A HR/N/A R/N/A T/N/A
		P#2	A/P
			- Pt. EXPIRED
			- Autopsy ORDERED
			(N.F.)
PATIENT NAME: ADDRESS: PHYSICIAN ADMIT DATE: ADMIT TIME:			NURSING CARE RECORD Mercy Hospital Ruston, Major

