

1
2 IN THE SUPREME COURT OF THE STATE OF NEVADA

3 Electronically Filed
4 Feb 24 2022 12:15 p.m.
Elizabeth A. Brown
Clerk of Supreme Court

5 DARWYN ROSS YOWELL,

6 Appellant,

7 vs.

CASE NO.83577

8 THE STATE OF NEVADA,

9 Respondent.

10
11 APPENDIX TO RESPONDENT'S BRIEF
12 Appeal From The Fourth Judicial District Court
Of The State of Nevada
In And For The County Of Elko

13 THE HONORABLE AARON D. FORD
14 ATTORNEY GENERAL OF NEVADA
100 N. CARSON STREET
15 CARSON CITY, NV 89701

16 TYLER J. INGRAM Matthew Pennell
Elko County District Attorney's Office State Bar Number: 13298
540 Court Street, 2nd Floor 569 Court Street
17 Elko, NV 89801 Elko, NV 89801

By: Chad B. Thompson
18 State Bar No. 10248

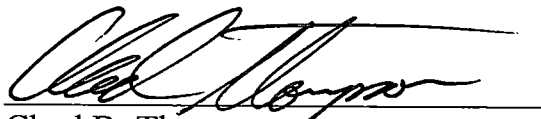
ATTORNEYS FOR RESPONDENT ATTORNEY FOR APPELLANT
19
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8 Dated this 24 day of February, 2022.

10 TYLER J. INGRAM
11 Elko County District Attorney
 540 Court Street, 2nd Floor
 Elko, NV 89801
 (775) 738-3101

12 By: 
13 Chad B. Thompson
 Deputy District Attorney
14 Nevada Bar Number: 10248

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CERTIFICATION OF MEDICAL RECORDS

RE: Jean Ortega

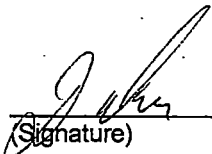
MRN: 22256727

As custodian of medical records, I hereby certify that to the best of our knowledge:

- The attached records are true and accurate copies of the medical records in our custody
- The attached records were prepared in the course of the hospital's regular business practices
- The attached records were kept as part of the hospital's regular business practices
- The attached records were made at or near the time of the matters contained therein and per the hospital's policies and procedures
- The attached records were made by, or from information transmitted by, a person with direct knowledge of the matters contained therein

This certification is made under penalty of law.

Signed on June 30, 2020


(Signature)

Jennifer Rhoads



UH HOSPITALS AND CLINICS
50 North Medical Drive
Salt Lake City UT 84132-0001

Ortega, Jean
MRN: 22256727, DOB: 10/17/1977, Sex: F
Acct #: 91073325
Adm: 6/6/2020, D/C: 6/8/2020

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care

Reason for Visit

Visit diagnoses:

- Trauma
 - Radiological examination, not elsewhere classified
 - **Victim of assault (primary)**
 - Subdural hematoma (HCC)
 - Closed fracture of nasal bone, initial encounter
- Hospital problem: Subdural hematoma (HCC)

Visit Information

Admission Information

Arrival Date/Time:	06/06/2020 0344	Admit Date/Time:	06/06/2020 0344	IP Adm. Date/Time:	06/06/2020 0740
Admission Type:	Emergency	Point of Origin:	Transfer From A Hospital (Different Facility)	Admit Category:	
Means of Arrival:	Air Ambulance	Primary Service:	Neurosurgery	Secondary Service:	N/A
Transfer Source:		Service Area:	UNIVERSITY OF UTAH HEALTH CARE	Unit:	University of Utah Neuro Acute Care
Admit Provider:	Craig Hinson Rabb, MD	Attending Provider:	Holbrook Stoecklein, MD	Referring Provider:	Northeastern Nevada Regional Hospital

Discharge Information

Discharge Date/Time	Discharge Disposition	Discharge Destination	Discharge Provider	Unit
06/08/2020 2214	Home Or Self Care	None	None	University of Utah Neuro Acute Care

Follow-up Information

Follow-up With	Details	Why	Contact Info
Craig Hinson Rabb, MD	Schedule an appointment as soon as possible for a visit in 1 month(s)	Please follow up in 1 month. You will need a non-contrast CT head at follow up.	175 MEDICAL PLZ Salt Lake City UT 84112-1505 801-581-6908
University Hospital Surgery	Schedule an appointment as soon as possible for a visit in 1 week(s)	Please follow up in 1 week to re-evaluate your nasal bone fracture.	50 N Medical Dr Salt Lake City Utah 84132-0001 801-581-7719

Vitals

Date/Time	Temp	Pulse	Resp	BP	SpO2	Weight
06/08/20 20:05:45	36.5 °C (97.7 °F)	92	16	129/74	95 %	—
06/08/20 1508	36.3 °C (97.3 °F)	78	14	126/71	97 %	—
06/08/20 1203	36.6 °C (97.9 °F)	94	18	142/91	91 %	—
06/08/20 0732	36.7 °C (98.1 °F)	81	18	121/68	98 %	—
06/08/20 0400	—	—	—	—	—	106.4 kg (234 lb 9.1 oz)
06/08/20 03:32:51	36.8 °C (98.2 °F)	91	18	134/76	96 %	—
06/07/20 23:53:06	36.5 °C (97.7 °F)	96	18	104/56	95 %	—
06/07/20 19:43:35	36.9 °C (98.4 °F)	95	16	112/70	—	—
06/07/20 1503	36.3 °C (97.3 °F)	85	18	117/61	95 %	—
06/07/20 1332	36.7 °C (98.1 °F)	—	20	131/72	93 %	106 kg (233 lb 11 oz)



HEALTH
UNIVERSITY OF UTAH

UH HOSPITALS AND CLINICS
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Adm: 6/6/2020, D/C: 6/8/2020

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Vitals (continued)

Date/Time	Temp	Pulse	Resp	BP	SpO2	Weight
06/07/20 07:43:40	36.9 °C (98.4 °F)	101	18	120/62	96 %	—
06/07/20 0332	—	—	—	—	—	103.6 kg (228 lb 6.3 oz)
06/07/20 0324	36.6 °C (97.9 °F)	93	16	120/70	96 %	—
06/06/20 2353	36.8 °C (98.2 °F)	96	16	106/62	94 %	—
06/06/20 2034	—	—	—	—	—	102.9 kg (226 lb 12.8 oz)
06/06/20 19:11:51	36.3 °C (97.3 °F)	107	16	115/60	94 %	—
06/06/20-15:11:04	37.6 °C (99.7 °F)	103	16	115/66	94 %	—
06/06/20 11:05:29	36.3 °C (97.3 °F)	100	14	124/100	93 %	—
06/06/20 09:28:11	36.6 °C (97.9 °F)	100	14	123/84	98 %	—

Discharge Summary Note

Discharge Summary by Jessiann Andrus, PA-C at 6/8/2020 11:00 AM

Admission Date: 6/6/2020 **Discharge Date:** 6/8/20
Attending: Craig Hinson Rabb, MD

Discharge Diagnosis:

Diagnoses at Discharge:

Patient Active Problem List

Diagnosis

- Subdural hematoma (HCC)

Procedures Performed:

na

History of Present Illness:

Identifying Information: Jean Ortega is a 42 year old female s/p domestic assault resulting in left SDH and right nasal bone fracture and facial swelling. Transported to University Hospital by Air Ambulance: Med Air One from North Eastern Nevada Regional Hospital (Elko, NV). Per report she was allegedly assaulted at home with fists. Did not lose consciousness. GCS 14 at scene and during transit.

History reviewed. No pertinent past medical history.

No past surgical history on file.

Social History

Social History Narrative

- Not on file



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

Allergies

	Reactions	Type	Severity
• Penicillins	Rash	Allergy	Low
<i>Reaction occurred as a child</i>			

Hospital Course:

Patient was admitted on 6/6/2020 with left SDH and right nasal bone fracture and facial swelling. Repeat CT head was stable. She was placed on keppra x7 days for sz ppx. The patient's vital signs were stable. Neuro exam remained intact. The patient was able to tolerate a regular diet, ambulate without difficulty (was able to work with PT and OT), and pain was well tolerated on oral medications. On 6/8 she was felt to be stable for discharge to home. She reported that she felt safe returning to home, SW reported that her ex was in custody and they also gave her resources for shelters. At the time of discharge, the patient was discharged in good condition with plans for close followup. Plan to f/u with plastics in 1 week for nasal fx.

Objective:

Vital Signs:

Temp: [36.3 °C (97.3 °F)-36.9 °C (98.4 °F)] 36.7 °C (98.1 °F)
HR: [81-96] 81
Resp: [16-20] 18
BP: (104-134)/(56-76) 121/68
SpO2: [93 %-98 %] 98 %
Body mass index is 39.03 kg/m².
5' 5", 234 lbs 9.11 oz

Physical Exam:

Alert and oriented to person, time, place, location
CN2-12 grossly intact
Facial swelling, b/l periorbital edema and swelling over nose/lip - improving
CN 2-12 grossly intact
5/5 in the upper and lower extremities
FCX4
SILT

Labs:

Recent Results (from the past 36 hour(s))

Basic Metabolic Panel

Collection Time: 06/07/20 3:20 AM

Result	Value	Ref Range
SODIUM	139	136 - 144 mmol/L
POTASSIUM	3.9	3.3 - 5.0 mmol/L
Chloride, S/P	112 (H)	102 - 110 mmol/L
Carbon Dioxide, S/P	22	20 - 26 mmol/L

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

BUN, S/P	9	8 - 24 mg/dL
Creatinine S/P	0.61	0.57 - 1.11 mg/dL
Glucose S/P	103	64 - 128 mg/dL
Anion Gap	5 (L)	8 - 14 mmol/L
Calcium, S/P	7.8 (L)	8.4 - 10.5 mg/dL

CBC With Plt Count And Auto Diff

Collection Time: 06/07/20 3:20 AM

Result	Value	Ref Range
WBC	6.68	4.30 - 11.30 k/uL
RBC	3.59 (L)	4.08 - 5.47 M/uL
HGB	9.3 (L)	12.6 - 15.9 g/dL
HCT	30.4 (L)	36.0 - 49.0 %
MCV	84.7	81.9 - 101.0 fL
MCH	25.9	25.8 - 33.1 pg
MCHC	30.6 (L)	31.2 - 34.5 g/dL
RDW	16.2 (H)	11.5 - 15.3 %
Platelet	308	159 - 439 k/uL
MPV	8.9	8.6 - 12.3 fL
Granulocyte %	59.2	39.4 - 72.5 %
Lymphocyte %	26.8	17.6 - 49.6 %
Monocyte %	7.9	4.1 - 12.4 %
Eosinophil %	4.8	0.4 - 6.7 %
Basophil %	0.6	0.3 - 1.4 %
Granulocyte #	3.95	2.00 - 7.40 k/uL
Lymphocyte #	1.79	1.30 - 3.60 k/uL
Monocyte #	0.53	0.30 - 1.00 k/uL
Eosinophil #	0.32	0.00 - 0.50 k/uL
Basophil #	0.04	0.00 - 0.10 k/uL
Nucleated RBCs %	0.0	<=0.0 %
Nucleated RBC #	<0.01	<=0.00 K/uL
Immature Granulocytes %	0.7	0.2 - 0.9 %
Immature Granulocytes #	0.05	0.01 - 0.09 K/uL

D-Dimer, Quantitative

Collection Time: 06/07/20 3:20 AM

Result	Value	Ref Range
D-Dimer	0.6 (H)	0.0 - 0.4 ug/mL

Basic Metabolic Panel

Collection Time: 06/08/20 3:23 AM

Result	Value	Ref Range
SODIUM	140	136 - 144 mmol/L
POTASSIUM	4.2	3.3 - 5.0 mmol/L
Chloride, S/P	110	102 - 110 mmol/L
Carbon Dioxide, S/P	24	20 - 26 mmol/L
BUN, S/P	8	8 - 24 mg/dL
Creatinine S/P	0.66	0.57 - 1.11 mg/dL



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

Glucose, S/P	95	64 - 128 mg/dL
Anion Gap	6 (L)	8 - 14 mmol/L
Calcium, S/P	8.1 (L)	8.4 - 10.5 mg/dL

CBC With Plt Count And Auto Diff

Collection Time: 06/08/20 3:23 AM

Result	Value	Ref Range
WBC	5.97	4.30 - 11.30 k/uL
RBC	3.82 (L)	4.08 - 5.47 M/uL
HGB	9.7 (L)	12.6 - 15.9 g/dL
HCT	32.0 (L)	36.0 - 49.0 %
MCV	83.8	81.9 - 101.0 fL
MCH	25.4 (L)	25.8 - 33.1 pg
MCHC	30.3 (L)	31.2 - 34.5 g/dL
RDW	15.9 (H)	11.5 - 15.3 %
Platelet	303	159 - 439 k/uL
MPV	8.7	8.6 - 12.3 fL
Granulocyte %	54.7	39.4 - 72.5 %
Lymphocyte %	31.0	17.6 - 49.6 %
Monocyte %	8.0	4.1 - 12.4 %
Eosinophil %	5.0	0.4 - 6.7 %
Basophil %	0.8	0.3 - 1.4 %
Granulocyte #	3.26	2.00 - 7.40 k/uL
Lymphocyte #	1.85	1.30 - 3.60 k/uL
Monocyte #	0.48	0.30 - 1.00 k/uL
Eosinophil #	0.30	0.00 - 0.50 k/uL
Basophil #	0.05	0.00 - 0.10 k/uL
Nucleated RBCs %	0.0	<=0.0 %
Nucleated RBC #	<0.01	<=0.00 K/uL
Immature Granulocytes %	0.5	0.2 - 0.9 %
Immature Granulocytes #	0.03	0.01 - 0.09 K/uL

Diagnostic Studies (last 72 hours): Xr Chest 1 View

Result Date: 6/6/2020

No radiographic findings for acute cardiopulmonary process. No displaced rib fracture. Cat 1: Concordant with preliminary report. Transcriptional errors or minor alterations to the preliminary report have been made.

Ct Head Wo Iv Cont

Result Date: 6/6/2020

Unchanged, small left posterior temporal subdural hemorrhage. pQr@1.

Ct.T Spine Wo Iv Cont



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

Result Date: 6/6/2020

No acute trauma to the thoracic spine. pQr!#

Ct L Spine Wo Iv Cont

Result Date: 6/6/2020

No evidence of acute trauma to the lumbar spine. pQr!#

Xr Pelvis 1 To 2 Views

Result Date: 6/6/2020

No acute fracture or dislocation. Cat 1: Concordant with preliminary report. Transcriptional errors or minor alterations to the preliminary report have been made.

Os Ct Neuro Rpt

Result Date: 6/6/2020

Mildly displaced right nasal bone fracture. Right greater than left periorbital soft tissue swelling. Orbits and globes are intact. pQr@1 Agree with the following clarifications: The right nasal fracture involves the frontal process of the maxilla with 3 mm depression. There is also right greater than left preseptal soft tissue hematoma extending along the premaxillary soft tissues as well as the nasal bridge.

Os Ct Neuro Rpt

Result Date: 6/6/2020

1. Small acute left temporal extra-axial fluid collection, most likely a subdural hematoma. 2. Mildly displaced right nasal bone fracture. Right greater than left periorbital soft tissue swelling. Globes are intact. Findings were discussed with Dr. Stoecklein by Christian Koegel at the time of the scan. pQr@1 1. Voice recognition errors on preliminary report were corrected with regard to the acute left posterior temporal subdural hematoma. 2. Right greater than left preseptal hematomas extend along the cheeks/premaxillary soft tissues. The right nasal fracture involves the frontal process of the maxilla. 3. There is severe right TMJ arthritis with bone-on-bone

Os Ct Spine Rpt

Result Date: 6/6/2020

No acute trauma to the cervical spine. pQr!#

Discharge Medications/Nutrition:

Medication List



UH HOSPITALS AND CLINICS
50 North Medical Drive
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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

START taking these medications

acetaminophen 325 mg tablet

Commonly known as: **TYLENOL**

Take 1-2 tablets (325-650 mg) by mouth every 4 hours as needed (pain).

cephalexin 500 MG capsule

Commonly known as: **KEFLEX**

Take 1 capsule (500 mg) by mouth 4 times daily for 5 days.

Levetiracetam 1000 mg tablet

Take 1 tablet (1,000 mg) by mouth 2 times a day for 5 days.

oxyCODONE 5 mg immediate release tablet

Commonly known as: **ROXICODONE**

Take 1 tablet (5 mg) by mouth every 6 hours as needed for severe pain. Taper off medication as your pain improves.

polyethylene glycol 3350 17 g pack

Commonly known as: **MIRALAX**

Take 17 grams by mouth at bedtime as needed (No bowel movement in last 24 hours.).

senna 8.6 mg per tab tablet

Take 2 tablets by mouth 2 times a day. May hold for loose stool.

CONTINUE taking these medications

buPROPion XL 150 mg 24 hr tablet

Commonly known as: **WELLBUTRIN XL**

Take 150 mg by mouth at bedtime.

busPIRone 5 mg tablet

Commonly known as: **BUSPAR**

Take 10 mg by mouth 2 times a day.

citalopram 20 mg tablet

Commonly known as: **CeleXA**

Take 20 mg by mouth at bedtime.

ergocalciferol 1.25 MG (50000 UT) capsule

Commonly known as: **Vitamin D2**

Take 50,000 Units by mouth once a week Indications: Vitamin D Deficiency.



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

OLANzapine 10 mg tablet

Commonly known as: ZYPREXA

Take 10 mg by mouth daily.

Where to Get Your Medications

These medications were sent to U of U Hospital Pharmacy - Salt Lake City, UT - 50 N Medical Dr 50 North Medical Drive, SALT LAKE CITY UT 84132

Hours: 8 AM to 9 PM Sun-Sat

Phone: 801-581-2276

- acetaminophen 325 mg tablet
- cephalexin 500 MG capsule
- Levetiracetam 1000 mg tablet
- oxyCODONE 5 mg immediate release tablet
- polyethylene glycol 3350 17 g pack
- senna 8.6 mg per tab tablet

Discharge Diet: regular

Discharge Instructions:

**Concussion/Closed Head Injury
Discharge Instructions**

Please follow instructions carefully to aid a healthy recovery.

You should not be left alone for the first 12 to 24 hours. For the first 12 hours, someone should wake you up every 2-3 hours and ask you a simple question, such as your name, and then look for any other changes in the way you look or act. For your nose fracture, please continue the antibiotics (keflex), ice and tylenol. You will need to schedule an appointment with plastic surgery to re-evaluate your nose.

Common Symptoms

- **Physical**
 - Headache, nausea/vomiting, dizziness, balance problems, visual problems, fatigue/feeling tired, sensitivity to light or noise, and numbness.
- **Cognitive/Mental**
 - Feeling mentally foggy, feeling slowed down, difficulty remembering or concentrating.
- **Emotional**
 - Irritability, sadness, more emotional, and nervousness
- **Sleep**
 - Drowsiness, sleeping more or less than usual, or trouble falling asleep.

Do's and Don't's

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)**Discharge Summary Note (continued)**

- It is OK to do the following:
 - Take Tylenol or medicine your doctor has prescribed or recommended
 - Use an ice pack on head/neck for comfort
 - Go to sleep
 - Rest
 - Light activity around the house for the first 3 days you are home then gradually increase as tolerated.
 - Take short walks 1-2 times per day
- DO NOT:
 - Drive or operate machinery while you have symptoms
 - Take medicine containing aspirin or anti-inflammatory medications, such as ibuprofen (Motrin, Advil), Naprosyn, etc. unless directed by your provider
 - Take sedatives, tranquilizers or other medicine that make you sleepy
 - Exercise, strain or lift heavy weights
 - Drink alcohol, including beer and wine until you have fully recovered. Alcohol may slow down how quickly you recover and increase your chance of another injury. It can also make it harder to make decisions
 - Participate in sports or high-risk activities
 - Stay in bed

Daily Activities

- **Avoid:**
 - Physical activities and lengthy mental activities that require concentration (i.e., job related work, texting, reading, computer use or extended video game playing) as these activities worsen symptoms and prolong recovery.
- **Sleep:**
 - Get good sleep and take naps if tired.

Call us Immediately
or

Return to the Emergency Department if any Problems Develop, Including the Following:

- Worsening or severe headache
- Seizures
- Unusual behavior change
- Very drowsy, can't be awakened
- Repeated vomiting
- Slurred speech
- Significant irritability
- Unable to recognize people or places
- Increasing confusion
- Weakness/numbness in arms/legs



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Discharge Summary Note (continued)

- Less responsive than usual
- Changes in vision or differently sized pupils
- Dizziness or fainting
- Stiff neck or fever

MONDAY – FRIDAY 8-5 CNC Department of Neurosurgery
801-581-6908
AFTER HOURS or WEEKENDS
801-581-2121
Ask to speak to On-call Neurosurgeon

Discharge Disposition: home

Condition at Discharge: improved

Appointments Scheduled in the Next 30 Days:

Craig H	NEUROSURGERY	801-	801-	Clinical
Rabb, MD	CRITICAL CARE	581-	581-	Neurosciences
	MEDICINE	6908	4385	Center
				175 MEDICAL PLZ
				SALT LAKE CITY
				UT 84112-1505

Next Steps: Schedule an appointment as soon as possible for a visit in 1 month(s)

Instructions: Please follow up in 1 month. You will need a non-contrast CT head at follow up.

University		801-	801-	50 N Medical Dr
Hospital	SURGERY - PLASTIC	581-	581-	Salt Lake City UT
Surgery		7719	5794	84132-0001

Next Steps: Schedule an appointment as soon as possible for a visit in 1 week(s)

Instructions: Please follow up in 1 week to re-evaluate your nasal bone fracture.

CNC Neurosurgery
175 North Medical Drive East
Salt Lake City UT 84132-0001

Greater than 30 minutes was spent on hospital day discharge planning.

Jessiann Andrus, PA-C
Department of Neurosurgery
University of Utah Medical Center



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Discharge Summary Note (continued)

Electronically signed by Jessiann Andrus, PA-C at 06/14/20 1024
Electronically signed by Craig Hinson Rabb, MD at 06/15/20 1654

Treatment Team

Provider	Service	Role	Specialty	From	To
Plastic Surgery	—	Consulting Physician	—	06/06/20 0438	—
Neurosurgery White	—	Consulting Physician	—	06/06/20 0422	—
SURGERY UTES B	—	Consulting Physician	GENERAL SURGERY	06/06/20 0407	06/06/20 1608
Craig Hinson Rabb, MD	Neurosurgery	Admitting Provider	NEUROSURGERY	—	—
Craig Hinson Rabb, MD	Neurosurgery	Attending Provider	NEUROSURGERY	06/06/20 1103	06/08/20 2214
Holbrook Stoecklein, MD	Emergency	Attending Provider	EMERGENCY MEDICINE - GENERAL	06/06/20 0345	06/06/20 1103
Sierra Yarbrough	—	Health Care Assistant	—	06/08/20 1948	—
Levilyn Rubin	—	Health Care Assistant	—	06/08/20 1910	—
Buddavaram	—	Registered Nurse	NURSE - GENERAL	06/08/20 1854	—
Cerissa Nicole Heth, RN	—	Utilization Review	CASE MANAGEMENT	06/08/20 0752	—
Kathleen Archibald, CM	—	Registered Nurse	NURSE - GENERAL	06/08/20 0729	06/08/20 2129
Mary C Sinden, RN	—	Health Care Assistant	—	06/08/20 0650	06/08/20 2049
Erika Gee	—	Health Care Assistant	—	06/07/20 2159	06/08/20 1159
Justin Ly	—	Health Care Assistant	—	06/07/20 1856	06/08/20 0856
Whitlea Elizabeth Lamb	—	Registered Nurse	NURSE - GENERAL	06/07/20 1843	06/08/20 0843
Robin Holberg, RN	—	Care Coordinator	—	06/07/20 1800	06/08/20 0830
Samantha Sandoval	—	Registered Nurse	NURSE - GENERAL	06/07/20 0812	06/07/20 2212
Mary C Sinden, RN	—	Physical Therapist	PHYSICAL THERAPY	06/07/20 0739	06/07/20 1649
Danica Rae	—	Physical Therapist	PHYSICAL THERAPY	06/07/20 0734	06/07/20 1702
Dummer, PT	—	Technician	—	06/07/20 0623	06/07/20 2100
Laurie Forsberg, PT	—	Health Care Assistant	—	06/07/20 0413	06/07/20 1316
Alfredo Macabio	—	Registered Nurse	NURSE - GENERAL	06/06/20 1843	06/07/20 0843
Kimberly Campbell	—	Health Care Assistant	—	06/06/20 1839	06/07/20 0342
Robin Holberg, RN	—	Care Coordinator	—	06/06/20 1800	06/07/20 0830
Kimberly Campbell	—	Health Care Assistant	—	06/06/20 1149	06/06/20 2038
Samantha Sandoval	—	Occupational Therapist	OCCUPATIONAL THERAPY	06/06/20 1147	06/06/20 1653
Makayla Galindo	—	Registered Nurse	CARDIOLOGY	06/06/20 1021	06/06/20 1915
Tyson Field, OT	—	Registered Nurse	EMERGENCY MEDICINE - GENERAL	06/06/20 0713	06/06/20 1053
Trask Daniel Verbos, RN	—	Technician	EMERGENCY MEDICINE - GENERAL	06/06/20 0712	06/06/20 1103
Kasi Ostrander, RN	—				
Ryan Smythe	—				



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Adm: 6/6/2020, D/C: 6/8/2020

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Treatment Team (continued)

Provider	Service	Role	Specialty	From	To
Michael D Baird, RN	—	Registered Nurse	NURSE - GENERAL	06/06/20 0551	06/06/20 0713
Breanna Gabrielle Owens	—	Technician	EMERGENCY MEDICINE - GENERAL	06/06/20 0534	06/06/20 0656
Steven Michael Kelsey, RN	—	Registered Nurse	EMERGENCY MEDICINE - GENERAL	06/06/20 0508	06/06/20 0551
Mark Timmel, MD	—	Resident	EMERGENCY MEDICINE - GENERAL	06/06/20 0409	06/06/20 1103

Events

Admission at 6/6/2020 0344

Unit: Emergency Department Room: 0004 Bed: 04
Patient class: Emergency

ED Arrival at 6/6/2020 0344

Unit: Emergency Department

ED Roomed at 6/6/2020 0344

Unit: Emergency Department Room: 0004 Bed: 04
Patient class: Emergency

Patient Update at 6/6/2020 0740

Unit: Emergency Department Room: 0004 Bed: 04
Patient class: Inpatient

Transfer In at 6/6/2020 0856

Unit: Emergency Department Room: 0015 Bed: 15
Patient class: Inpatient

ED Transfer at 6/6/2020 0856

Unit: Emergency Department Room: 0004 Bed: 04
Patient class: Emergency

Transfer In at 6/6/2020 1054

Unit: Emergency Department Room: OTF Bed: NONE
Patient class: Inpatient

ED Transfer at 6/6/2020 1054

Unit: Emergency Department Room: 0004 Bed: 04
Patient class: Emergency

Transfer In at 6/6/2020 1103

Unit: University of Utah Neuro Acute Care Room: 3118 Bed: 01
Patient class: Inpatient

Admit from ED at 6/6/2020 1103

Unit: Emergency Department Room: 0004 Bed: 04
Patient class: Emergency

Discharge at 6/8/2020 2214

Unit: University of Utah Neuro Acute Care Room: 3118 Bed: 01
Patient class: Inpatient



06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued).

Medication List

Medication List

This report is for documentation purposes only. The patient should not follow medication instructions within.
For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

Prior To Admission

VITAMIN D2 (ERGOCALCIFEROL) 50,000 units capsule

Instructions: Take 50,000 Units by mouth once a week Indications: Vitamin D Deficiency.
Authorized by: HISTORICAL ORDERS Ordered on: 6/6/2020

buPROPion XL (WELLBUTRIN XL) 150 mg 24 hr tablet

Instructions: Take 150 mg by mouth at bedtime.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

citalopram (CELEXA) 20 mg tablet

Instructions: Take 20 mg by mouth at bedtime.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

OLANzapine (ZYPREXA) 10 mg tablet

Instructions: Take 10 mg by mouth daily.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

busPIRone (BUSPAR) 5 mg tablet

Instructions: Take 10 mg by mouth 2 times a day.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

Discharge Medication List

VITAMIN D2 (ERGOCALCIFEROL) 50,000 units capsule

Instructions: Take 50,000 Units by mouth once a week Indications: Vitamin D Deficiency.
Authorized by: HISTORICAL ORDERS Ordered on: 6/6/2020

buPROPion XL (WELLBUTRIN XL) 150 mg 24 hr tablet

Instructions: Take 150 mg by mouth at bedtime.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

citalopram (CELEXA) 20 mg tablet

Instructions: Take 20 mg by mouth at bedtime.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

OLANzapine (ZYPREXA) 10 mg tablet

Instructions: Take 10 mg by mouth daily.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

busPIRone (BUSPAR) 5 mg tablet

Instructions: Take 10 mg by mouth 2 times a day.
Authorized by: HISTORICAL ORDERS Ordered on: 6/8/2020

acetaminophen (TYLENOL) 325 mg tablet

Authorized by: Jessiann Andrus, PA-C Ordered on: 6/8/2020
Start date: 6/8/2020 Quantity: 45 tablet
Refill: 1 refill by 6/8/2021

cephalexin (KEFLEX) 500 MG capsule

Instructions: Take 1 capsule (500 mg) by mouth 4 times daily for 5 days.
Authorized by: Jessiann Andrus, PA-C Ordered on: 6/8/2020



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

Medication List (continued)

Start date: 6/8/2020
Quantity: 20 capsule

End date: 6/13/2020
Refill: 1 refill by 6/8/2021

Levetiracetam 1000 mg tablet

Instructions: Take 1 tablet (1,000 mg) by mouth 2 times a day for 5 days.

Authorized by: Jessiann Andrus, PA-C

Ordered on: 6/8/2020

Start date: 6/8/2020

End date: 6/13/2020

Quantity: 10 tablet

Refill: 1 refill by 6/8/2021

oxyCODONE (ROXICODONE) 5 mg immediate release tablet

Instructions: Take 1 tablet (5 mg) by mouth every 6 hours as needed for severe pain. Taper off medication as your pain improves.

Authorized by: Jessiann Andrus, PA-C

Ordered on: 6/8/2020

Start date: 6/8/2020

Quantity: 20 tablet

Refill: 1 refill by 7/8/2020

Polyethylene Glycol 3350 (PEG 3350) 17 GM/SCOOP powder

Authorized by: Jessiann Andrus, PA-C

Ordered on: 6/8/2020

Start date: 6/8/2020

Quantity: 238 gram

Refill: 1 refill by 6/8/2021

Sennosides (SENNA) 8.6 mg per tab tablet

Instructions: Take 2 tablets by-mouth 2 times a day. May hold for loose stool.

Authorized by: Jessiann Andrus, PA-C

Ordered on: 6/8/2020

Start date: 6/8/2020

Quantity: 40 each

Refill: 1.refill by 6/8/2021

Stopped in Visit

None

ED Provider Note

ED Provider Notes by Holbrook Stoecklein, MD at 6/6/2020 4:11 AM

History

No chief complaint on file.

Per Pre arrival note: 42 yo F with small 5mm subarachnoid vs epidural after being assaulted earlier tonight. Nasal fractures but nothing else on CT face. CT c spine negative. Two small facial lacerations that have not been repaired. BP reportedly normal. I recommended giving 1g keppra prior to transfer.

Patient History: Patient is a 43-year-old female presenting to the emergency department via EMS as a trauma 2 transfer from outside hospital for battery resulting in ICH, nasal fractures and extensive soft tissue swelling to face. Per report, patient was on reservation when she got assaulted. And then lost consciousness. Patient was evaluated at outside hospital at Elko. ICH concerning for subarachnoid versus epidural found on CT head as well as nasal bone fractures. CT C-spine negative. Patient given 1 g Keppra prior to transfer and transferred to University Hospital for further management. Patient arrived in stable condition with uneventful transfer. Initial GCS 14 improved to GCS 15 during assessment. Endorses smoking history. Denies any alcohol use. Denies any medications.

No past medical history on file.

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

No past surgical history on file.

Social History

Tobacco Use

- Smoking status: Not on file

Substance Use Topics

- Alcohol use: Not on file
- Drug use: Not on file

No family history on file.

Allergies not on file

A 12 point review of systems was obtained. This ROS was negative with the exception of findings noted in the HPI.

There were no vitals filed for this visit.

Physical Exam

Gen: Awake, alert, lying on a stretcher with cervical spine immobilization in place.

Head: Scalp is atraumatic but with generalized tenderness, extensive soft tissue swelling on bilateral eyes, pupils are equal and reactive, no hemotympanum or otorrhea.

Midface: Stable to palpation. Swelling of right upper lip as well as 2 cm laceration below right eye and 1 cm laceration below left eye, hemodynamically stable.

Nose: Nasal swelling with small right-sided laceration.

Neck: Supple, with cervical spine tenderness, cervical collar in place

Back: T-spine tenderness without L-spine tenderness. No deformities or step-offs.

Trachea: Midline.

Chest: Clear to auscultation bilaterally. Anterior chest wall tenderness without crepitus.

CV: Regular rate and rhythm without murmur

Abdomen: Non-distended, no ecchymosis.

Extremities: Moving all four extremities spontaneously.

Circulation: Appears well-perfused.

Neuro: GCS 15, responding appropriately to questioning and direction.

Results for orders placed or performed during the hospital encounter of 06/06/20

TYPE & SCREEN (ABO/RH)

Result	Value	Ref Range
ABORh Manual	O Positive	
Specimen Expiration Date	06/09/2020 04:00	



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

Antibody Screen	Negative	
CBC With Plt Count And Auto Diff		
Result	Value	Ref Range
WBC	11.35 (H)	4.30 - 11.30 k/uL
RBC	4.28	4.08 - 5.47 M/uL
HGB	11.2 (L)	12.6 - 15.9 g/dL
HCT	35.0 (L)	36.0 - 49.0 %
MCV	81.8 (L)	81.9 - 101.0 fL
MCH	26.2	25.8 - 33.1 pg
MCHC	32.0	31.2 - 34.5 g/dL
RDW	16.6 (H)	11.5 - 15.3 %
Platelet	396	159 - 439 k/uL
MPV	8.8	8.6 - 12.3 fL
Granulocyte %	81.8 (H)	39.4 - 72.5 %
Lymphocyte %	10.9 (L)	17.6 - 49.6 %
Monocyte %	5.8	4.1 - 12.4 %
Eosinophil %	0.6	0.4 - 6.7 %
Basophil %	0.4	0.3 - 1.4 %
Granulocyte #	9.28 (H)	2.00 - 7.40 k/uL
Lymphocyte #	1.24 (L)	1.30 - 3.60 k/uL
Monocyte #	0.66	0.30 - 1.00 k/uL
Eosinophil #	0.07	0.00 - 0.50 k/uL
Basophil #	0.04	0.00 - 0.10 k/uL
Nucleated RBCs %	0.0	<=0.0 %
Nucleated RBC #	<0.01	<=0.00 K/uL
Immature Granulocytes %	0.5	0.2 - 0.9 %
Immature Granulocytes #	0.06	0.01 - 0.09 K/uL
PTT		
Result	Value	Ref Range
PTT	28	24 - 35 sec
PT, International Normalized Ratio		
Result	Value	Ref Range
Prothrombin Time	12.1	12.0 - 15.5 sec
INR	0.9	ratio
Acetaminophen Level		
Result	Value	Ref Range
Acetaminophen, Level	<3 (L)	10 - 30 ug/mL
Salicylate Assay		
Result	Value	Ref Range
Salicylate	<5	2 - 10 mg/dL
Tricyclic Antidep Detection		
Result	Value	Ref Range
Tricyclic Antidepressant Detection	Negative	Negative
Benzodiazepines Detection		
Result	Value	Ref Range



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

Benzodiazepines Detection	Negative	Negative
Ethanol STAT		
Result	Value	Ref Range
ETOH STAT	<10	mg/dL
Comprehensive Metabolic Panel		
Result	Value	Ref Range
SODIUM	141	136 - 144 mmol/L
POTASSIUM	3.9	3.3 - 5.0 mmol/L
Chloride, S/P	111 (H)	102 - 110 mmol/L
Carbon Dioxide, S/P	23	20 - 26 mmol/L
BUN, S/P	11	8 - 24 mg/dL
Creatinine S/P	0.73	0.57 - 1.11 mg/dL
Glucose S/P	127	64 - 128 mg/dL
Calcium, S/P	8.5	8.4 - 10.5 mg/dL
Protein, Total, S/P	6.9	6.5 - 8.4 g/dL
Albumin S/P	3.9	3.5 - 5.0 g/dL
Bilirubin, Total, S/P	0.4	0.2 - 1.4 mg/dL
Alkaline Phosphatase	103	38 - 126 U/L
AST	22	16 - 40 U/L
ALT	22	5 - 60 U/L
Anion Gap	7 (L)	8 - 14 mmol/L
Pregnancy Serum Quant Nontumor		
Result	Value	Ref Range
Beta-hCG, Serum Quantitative	<1	0 - 4 IU/L
POC ROTEM Once- Routine		
Result	Value	Ref Range
Extem CT	64	43 - 82
Extem CFT	78	48 - 127
Extem Alpha Angle	75	65 - 80
Extem A10	64 (A)	40 - 60
Extem A20	70	
Extem MCF	69	52 - 70
Extem ML		
Intem CT	182	122 - 208
Intem CFT	62	45 - 110
Intem Alpha Angle	77	70 - 81
Intem A10	64 (A)	40 - 60
Intem A20	70	
Intem MCF	68	51 - 72
Intem ML	0	
Fibtem CT	57	
Fibtem CFT	175	
Fibtem Alpha Angle	77	
Fibtem A10	21	
Fibtem MCF	22	7 - 24

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)**ED Provider Note (continued)**

Fibtem ML
Aptem CT
APTEM CFT
Aptem Alpha Angle
Aptem A10
Aptem A20
Aptem MCF
Aptem ML
Heptem CT
Heptem CFT
Heptem Alpha Angle
Heptem A10
Heptem A20
Heptem MCF
Heptem ML

No results found for this visit on 06/06/20.

Imaging Results

CT Head WO IV Cont (Final result)

Result time 06/06/20 06:28:00

Final result by Joseph Scott McNally, MD (06/06/20 06:28:00)

Impression:

Unchanged, small left posterior temporal subdural hemorrhage.

pQr@1.

Narrative:

EXAM: CT HEAD WO IV CONT

INDICATION: Assault.

TECHNIQUE: Helical images were obtained through the head without contrast. Sagittal and coronal reformats are provided.

COMPARISON: CT head from outside facility dated 6/5/2020.

FINDINGS:

Parenchyma: The cerebral parenchyma demonstrates a normal volume and contour. There is no intraparenchymal hemorrhage. The grey-white interface is maintained.

Extra-axial spaces: Small left posterior temporal extra-axial fluid collection measures 4 mm in maximum thickness, unchanged. No new intracranial hemorrhage. The basilar cisterns appear



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

patent.

Ventricles: The ventricles are normal in size and position.

Orbits: The orbits appear normal.

Sinuses: The paranasal sinuses are well-aerated.

Calvarium, facial bones: The mastoid air cells are well-aerated. Severe right TMJ arthritis. The skull base otherwise appears normal. No calvarial lesions demonstrated. Partially imaged right displaced right frontal process of the maxilla fracture.

Scalp, superficial soft tissues: Right greater than left periorbital soft tissue swelling.

OS CT Spine RPT (Final result)

Result time 06/06/20 06:31:00

Final result by Joseph Scott McNally, MD (06/06/20 06:31:00)

Impression:

No acute trauma to the cervical spine.

pQr!#.

Narrative:

INDICATION: Assault. Requested Overread.

STUDY: CT of the cervical spine without contrast.

TECHNIQUE: Axial images were obtained through the cervical spine. Bone and soft tissue algorithms were utilized. Sagittal and coronal reformats were performed.

COMPARISON: None.

FINDINGS:

Trauma / Alignment: The prevertebral soft tissues appear normal. There is normal alignment of the cervical spine. No vertebral body wedge compression deformities. The facet joints are well aligned. The spinous processes are intact.

Soft Tissues: There is no cervical adenopathy. Visualized portions of the thyroid appear normal. Visualized portions of the lung apices appear normal.

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

Brain: Intracranial findings are described separately.

Degenerative: No significant degenerative changes.

OS CT Neuro RPT (Final result)

Result time 06/06/20 06:24:00

Final result by Joseph Scott McNally, MD (06/06/20 06:24:00)

Impression:

1. Small acute left temporal extra-axial fluid collection, most likely a subdural hematoma.
2. Mildly displaced right nasal bone fracture. Right greater than left periorbital soft tissue swelling. Globes are intact.

Findings were discussed with Dr. Stoecklein by Christian Koegel at the time of the scan.

pQr@1

1. Voice recognition errors on preliminary report were corrected with regard to the acute left posterior temporal subdural hematoma.
2. Right greater than left preseptal hematomas extend along the cheeks/premaxillary soft tissues. The right nasal fracture involves the frontal process of the maxilla.
3. There is severe right TMJ arthritis with bone-on-bone

Narrative:

EXAM: OS CT NEURO RPT

INDICATION: Trauma.

TECHNIQUE: Helical images were obtained through the head without contrast. Sagittal and coronal reformats are provided.

COMPARISON: None.

FINDINGS:

Parenchyma: The cerebral parenchyma demonstrates a normal volume and contour. There is no intraparenchymal hemorrhage. The grey-white interface is maintained.

Extra-axial spaces: Small extra-axial, hyperdense fluid collection over the posterior left temporal lobe (series 2 image 27), measuring 5 mm in maximum thickness, most compatible with an acute



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

subdural hematoma. The basilar cisterns appear patent.

Ventricles: The ventricles are normal in size and position.

Orbits: The orbits appear normal.

Sinuses: The paranasal sinuses are well-aerated.

Calvarium: The mastoid air cells are well-aerated. The skull base appears normal. No calvarial lesions demonstrated. There is a nondisplaced right nasal bone fracture.

Superficial soft tissues, scalp: Normal skull. There is right greater than left periorbital soft tissue swelling.

OS CT Neuro RPT (Final result)

Result time 06/06/20 06:27:00

Final result by Joseph Scott McNally, MD (06/06/20 06:27:00)

Impression:

Mildly displaced right nasal bone fracture. Right greater than left periorbital soft tissue swelling. Orbits and globes are intact.

pQr@1

Agree with the following clarifications: The right nasal fracture involves the frontal process of the maxilla with 3 mm depression. There is also right greater than left preseptal soft tissue hematoma extending along the premaxillary soft tissues as well as the nasal bridge.

Narrative:

EXAM: OS CT NEURO RPT

INDICATION: Assault.

TECHNIQUE: Axial images were obtained through the facial bones. Coronal and sagittal reformats are provided in bone algorithm.

COMPARISON: None.

FINDINGS:

Facial Bones: Mildly displaced right nasal bone fracture. No further facial bone fractures are



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

identified. Orbital walls are intact. There is right temporomandibular osteoarthritis.

Sinuses: The paranasal sinuses are clear. The mastoid air cells are normally aerated.

Orbits: The orbits appear normal.

Teeth: There is normal dentition.

Brain: Intracranial findings are described separately.

Cervical Spine: Visualized portions of the cervical spine appear normal.

Soft Tissues:

CT T Spine WO IV Cont (Final result)

Result time 06/06/20 06:29:00

Final result by Joseph Scott McNally, MD (06/06/20 06:29:00)

Impression:

No acute trauma to the thoracic spine.

pQr!#

Narrative:

EXAM: CT T SPINE WO IV CONT

INDICATION: Assault.

TECHNIQUE: Axial images were obtained through the thoracic spine without contrast. Sagittal and coronal reformats are provided.

COMPARISON: None.

FINDINGS:

Alignment/Fractures: There is normal alignment of the thoracic spine. No vertebral body wedge compression deformities. The facet joints are well aligned. The spinous processes are intact. No fractures involving the visualized portions of the posterior ribs.

Degenerative Changes: No significant degenerative changes.



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro-Acute Care (continued)

ED Provider Note (continued)

Other: Visualized portions of the lungs and mediastinal structures appear normal, except for cholecystectomy clips.

CT L Spine WO IV Cont (Final result)

Result time 06/06/20 06:32:00

Final result by Joseph Scott McNally, MD (06/06/20 06:32:00)

Impression:

No evidence of acute trauma to the lumbar spine.

pQr!#.

Narrative:

EXAM: CT L SPINE WO IV CONT

INDICATION: Assault.

TECHNIQUE: Axial images were obtained through the lumbar spine without contrast. Sagittal and coronal reformats are provided.

COMPARISON: None.

FINDINGS:

5 nonrib-bearing lumbar type vertebral bodies are present.

Alignment/Fractures: There is normal alignment of the lumbar spine. No vertebral body wedge compression deformities. The facet joints are well aligned. The spinous processes are intact. The transverse processes are intact.

Other: The paraspinal musculature appears normal. Cholecystectomy clips noted.

Degenerative: No high-grade spinal canal or neuroforaminal narrowing.

XR Pelvis 1 To 2 Views (Preliminary result)

Result time 06/06/20 05:36:51

Preliminary result by Christian Koegel, MD (06/06/20 05:36:51)



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

Impression:

No acute fracture or dislocation.

Narrative:

EXAM: XR PELVIS 1 TO 2 VIEWS

TECHNIQUE: XR PELVIS 1 TO 2 VIEWS

INDICATIONS: trauma.

COMPARISON: None

FINDINGS:

No acute fracture or dislocation. Joint spaces are preserved. Soft tissues are unremarkable.

XR Chest 1 View (Preliminary result)

Result time 06/06/20 05:36:00

Preliminary result by Christian Koegel, MD (06/06/20 05:36:00)

Impression:

No radiographic findings for acute cardiopulmonary process. No displaced rib fracture.

Narrative:

XR CHEST 1 VIEW

HISTORY: Trauma. Assault.

COMPARISON: None.

TECHNIQUE: Supine frontal chest radiograph

FINDINGS:

The lungs are well-inflated and clear. No consolidation, pneumothorax or pleural effusion.
Cardiomediastinal silhouette is within normal limits. No displaced rib fracture.



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Adm: 6/6/2020, D/C: 6/8/2020

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

ED Course
Procedures

BEDSIDE FAST ULTRASOUND

Indication: trauma

Technique: A limited abdominal ultrasound and limited cardiac ultrasound was performed using the phased array and/or curvilinear probes. Standard FAST exam views of the abdomen and heart were obtained and images were recorded and saved in PACS.

Limitations: none

Impression: normal fast: no abdominal free fluid and no pericardial effusion

Performed by: Trauma Resident supervised by ED Attending: Stoecklein

MDM: Patient is a 43-year-old female presenting to the emergency department as a trauma 2 transfer from outside hospital in Elko, Nevada after assault with facial and head trauma. Upon arrival, patient ABCs were confirmed and IV access confirmed as well. Initial vitals stable including stable blood pressure. Initial FAST exam was negative. Patient was placed in c-collar in trauma bay. Following secondary exam, chest x-ray and pelvis x-ray, patient stable for additional CT imaging. Plastic surgery was consulted for known facial trauma and nasal fractures and neurosurgery was consulted for known ICH. Plastic surgery evaluated patient at bedside, cleaned patient's face and evaluated imaging. At this time, they recommended not management of nasal bone fractures and will be following along. Patient care was signed out to oncoming day team in the emergency department. Plan for follow-up with trauma surgery and neurosurgery for final recommendations. Repeat CT head here shows no change in size of subdural. Has had a stable GCS of 14 since report from OSH. Trauma felt that Neurosurgery could be primary team. Plastics evaluated in ED without plans for acute intervention. Admitted to floor in stable condition.

Attending Attestation: Patient seen and examined with the resident. I personally participated in the history, physical and medical decision making for this patient. Case was discussed with resident and I agree with the results interpretation and disposition of this patient. All labs and imaging reports were reviewed by the ED Attending. Holbrook Stoecklein, MD

Procedural Attestation: I was present for the key portions of the ED procedure, see separate procedure note



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Provider Note (continued)

Consult: Yes, Trauma surgery, plastic surgery, neurosurgery

Pulse Ox: Interpretation: Normal

Final diagnoses:

Victim of assault

Subdural hematoma (HCC)

Closed fracture of nasal bone, initial encounter

Discharge Information

ED Disposition: Admit

Follow up Information:

No follow-up provider specified.

Prescription:

Patient's Medications

No medications on file

Holbrook Stoecklein, MD

06/06/20 0732

Electronically signed by Holbrook Stoecklein, MD at 06/06/20 0732

ED Notes

ED Notes by Holbrook Stoecklein, MD at 6/6/2020 12:58 AM

42 yo F with small 5mm subarachnoid vs epidural after being assaulted earlier tonight. Nasal fractures but nothing else on CT face. CT c spine negative. Two small facial lacerations that have not been repaired. BP reportedly normal. I recommended giving 1g keppra prior to transfer.

Holbrook Stoecklein, MD

06/06/20 0100

Electronically signed by Holbrook Stoecklein, MD at 06/06/20 0100

ED Notes by Brian A Black, RN at 6/6/2020 1:08 AM

Pt coming in with significant facial trauma and brain bleed due to domestic violence.



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Notes (continued)

131/71
132 HR
20 RR
97% RA
GCS 15

TDAP, Morphine,
Forearm XR

Brian A Black, RN
06/06/20 0109

Electronically signed by Brian A Black, RN at 06/06/20 0109

ED Notes by Kasi Ostrander, RN at 6/6/2020 7:41 AM

Nursing one to one care, critical care time, needed for patient due to: Frequent vital signs to evaluate for change in hemodynamic stability and Frequent continual neurological checks to assess for mental status changes. Nurse at clinical bedside performing one to one nursing care from 0356 to 0740 as documented in the Critical Care documentation in summary of clinical course. MD notified and made aware of any hemodynamic and neurological changes. Treated per MD orders.

Kasi Ostrander, RN
06/06/20 0741

Electronically signed by Kasi Ostrander, RN at 06/06/20 0741

ED Notes by Kasi Ostrander, RN at 6/6/2020 9:31 AM

Patient transferred to hospital bed maintaining full spine precautions. Patient medicated per MAR for pain. Patient sleeping at this time. No further needs.

Kasi Ostrander, RN
06/06/20 0932

Electronically signed by Kasi Ostrander, RN at 06/06/20 0932

ED Notes by Kasi Ostrander, RN at 6/6/2020 10:44 AM

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Notes (continued)

Admission discussed with patient and pt. Verbalized understanding. Patient taken to floor in hospital bed with all belongings. VSS prior to DC from ED

Kasi Ostrander, RN
06/06/20 1047

Electronically signed by Kasi Ostrander, RN at 06/06/20 1047

ED Care Timeline

Patient Care Timeline (6/6/2020 03:44 to 6/6/2020 11:03:12)

6/6/2020	Event	Details	User
03:44	Patient arrived in ED		Fawn Kim-Ann Heiner
03:44:03	Temporary patient is identified		Fawn Kim-Ann Heiner
03:44:31	Arrival Complaint	Trauma 2	
03:44:47	Patient roomed in ED	To room 0004	Fawn Kim-Ann Heiner
03:45	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
03:45	Triage Completed		Brian A Black, RN
03:45	Triage Complete	Triage Complete	Brian A Black, RN
		Triage Complete: Triage complete	
03:45	ED Clinical Course	Summary of Clinical Course	Brian A Black, RN
		Summary of Clinical Course: Trauma 2 activation; 1:1 RN	
03:45:24	Assign Attending	Holbrook Stoecklein, MD assigned as Attending	Holbrook Stoecklein, MD
03:45:24	Assign Physician		Holbrook Stoecklein, MD
03:47:20	Imaging Exam Ordered		Victoria Silver
03:47:20	XR Ordered	XR PELVIS 1 TO 2 VIEWS, XR CHEST 1 VIEW	Victoria Silver
03:47:20	Orders Placed	XR Chest 1 View ; XR Pelvis 1 To 2 Views	Jason Bryan Young, MD
04:00	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
04:02:07	Imaging Exam Ended	XR Chest 1 View	Dicom, Background User
04:03:45	Imaging Exam Ended	XR Pelvis 1 To 2 Views	Dicom, Background User
04:04:51	Orders Placed	POC ROTEM Once- Routine	Holbrook Stoecklein, MD
04:07:34	Team Member Assigned	SURGERY UTES B assigned as Consulting Physician	Aislinn Lewis, MD

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

04:09:31	Assign Resident	Mark Timmel, MD assigned as Resident	Mark Timmel, MD
04:09:31	Assign Physician		Mark Timmel, MD
04:12:23	Orders Placed	CT T Spine WO IV Cont ; CT L Spine WO IV Cont	Jason Bryan Young, MD
04:12:23	CT Ordered	CT L SPINE WO IV CONT, CT T SPINE WO IV CONT	Matthew Barnes
04:12:23	Imaging Exam Ordered		Matthew Barnes
04:14:12	Orders Placed	XR Shoulder 2 or More Views RT ; XR Humerus 2 or More Views RT ; XR Forearm 2 Views RT ; XR Wrist 3 or More Views RT ; XR Hand 3 or More Views RT	Jason Bryan Young, MD
04:14:12	XR Ordered	XR HAND 3 OR MORE VIEWS RT, XR WRIST 3 OR MORE VIEWS RT, XR FOREARM 2 VIEWS RT, XR HUMERUS 2 OR MORE VIEWS RT, XR SHOULDER 2 OR MORE VIEWS RT	Erin R Michelle
04:14:12	Imaging Exam Ordered		Erin R Michelle
04:14:27	Imaging Exam Started	CT T Spine WO IV Cont	Matthew Barnes
04:14:27	Imaging Exam Started	CT L Spine WO IV Cont	Matthew Barnes
04:15	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract
04:20:12	Imaging Exam Ended	CT T Spine WO IV Cont	Matthew Barnes
04:20:12	Imaging Exam Ended	CT L Spine WO IV Cont	Matthew Barnes
04:22:13	Team Member Assigned	Neurosurgery White assigned as Consulting Physician	Samantha Sachiko Colby, MD



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

04:23:07	CBC With Plt Count And Auto Diff Resulted	Abnormal Result Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:23 Status: Final result WBC: 11.35 k/uL ^ [Ref Range: 4.30 - 11.30] RBC: 4.28 M/uL [Ref Range: 4.08 - 5.47] HGB: 11.2 g/dL v [Ref Range: 12.6 - 15.9] HCT: 35.0 % v [Ref Range: 36.0 - 49.0] MCV: 81.8 fL v [Ref Range: 81.9 - 101.0] MCH: 26.2 pg [Ref Range: 25.8 - 33.1] MCHC: 32.0 g/dL [Ref Range: 31.2 - 34.5] RDW: 16.6 % ^ [Ref Range: 11.5 - 15.3] Platelet: 396 k/uL [Ref Range: 159 - 439] MPV: 8.8 fL [Ref Range: 8.6 - 12.3] Granulocyte %: 81.8 % ^ [Ref Range: 39.4 - 72.5] Lymphocyte %: 10.9 % v [Ref Range: 17.6 - 49.6] Monocyte %: 5.8 % [Ref Range: 4.1 - 12.4] Eosinophil %: 0.6 % [Ref Range: 0.4 - 6.7] Basophil %: 0.4 % [Ref Range: 0.3 - 1.4] Granulocyte #: 9.28 k/uL ^ [Ref Range: 2.00 - 7.40] Lymphocyte #: 1.24 k/uL v [Ref Range: 1.30 - 3.60] Monocyte #: 0.66 k/uL [Ref Range: 0.30 - 1.00] Eosinophil #: 0.07 k/uL [Ref Range: 0.00 - 0.50] Basophil #: 0.04 k/uL [Ref Range: 0.00 - 0.10] Nucleated RBCs %: 0.0 % [Ref Range: <=0.0] Nucleated RBC #: <0.01 K/uL [Ref Range: <=0.00] Immature Granulocytes %: 0.5 % [Ref Range: 0.2 - 0.9] Immature Granulocytes #: 0.06 K/uL [Ref Range: 0.01 - 0.09]	Interface, Arup Lab
04:27:51	Orders Placed	OS CT Neuro RPT	Jason Bryan Young, MD
04:28:44	Orders Placed	XR Elbow 2 Views LT ; XR Elbow 2 Views RT	Jason Bryan Young, MD
04:28:44	XR Ordered	XR ELBOW 2 VIEWS RT, XR ELBOW 2 VIEWS LT	Erin R MITCHELLE
04:28:44	Imaging Exam Ordered		Erin R MITCHELLE
04:30	Imaging Exam Ended	OS CT Neuro RPT	Radiant, Sbuser
04:30	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 1	Inpatient, Patient Extract
04:30:25	Orders Placed	OS CT Neuro RPT	Jason Bryan Young, MD



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

04:32	POC ROTEM Once-Routine Resulted	Abnormal Result Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:47 Status: Final result Extem CT: 64 [Ref Range: 43 - 82] Extem CFT: 78 [Ref Range: 48 - 127] Extem Alpha Angle: 75 [Ref Range: 65 - 80] Extem A10: 64 [Ref Range: 40 - 60] Extem A20: 70 Extem MCF: 69 [Ref Range: 52 - 70] Intem CT: 182 [Ref Range: 122 - 208] Intem CFT: 62 [Ref Range: 45 - 110] Intem Alpha Angle: 77 [Ref Range: 70 - 81] Intem A10: 64 [Ref Range: 40 - 60] Intem A20: 70 Intem MCF: 68 [Ref Range: 51 - 72] Intem ML: 0 Fibtem CT: 57 Fibtem CFT: 175 Fibtem Alpha Angle: 77 Fibtem A10: 21 Fibtem MCF: 22 [Ref Range: 7 - 24]	Almir Fitozovic
04:32:53	Orders Placed	OS CT Spine RPT	Jason Bryan Young, MD
04:35	Imaging Exam Ended	OS CT Neuro RPT	Radiant, Sbuser
04:37:22	Orders Placed	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Jason Bryan Young, MD
04:37:24	Imaging Exam Started	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:37:24	Imaging Exam Ended	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:37:24	Imaging Final Result	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:37:25	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt Resulted	Last updated: 6/6/2020 04:37 Status: Final result	Radiant, Sbuser
04:38	PTT Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:38 Status: Final result PTT: 28 sec [Ref Range: 24 - 35]	Interface, Arup Lab
04:38:01	PT, International Normalized Ratio Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:38 Status: Final result Prothrombin Time: 12.1 sec [Ref Range: 12.0 - 15.5] INR: 0.9 ratio (INTERPRETIVE INFORMATION: International Normalized Ratio (INR)) INR values should only be used when evaluating patients on oral anticoagulant therapy. INR 2.0 - 3.0 : Prophylaxis of venous thromboembolism, treatment of venous thrombosis (following heparin therapy), prevention of systemic embolism (atrial fibrillation, valvular heart disease, bioprosthetic heart valves, acute myocardial infarction). INR 2.5 - 3.5 : Mechanical prosthetic heart valves, recurrent systemic embolism.	Interface, Arup Lab

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

04:38:22	Orders Placed	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Jason Bryan Young, MD
04:38:25	Imaging Exam Started	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:38:25	Imaging Exam Ended	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:38:25	Imaging Final Result	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:38:25	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt Resulted	Last updated: 6/6/2020 04:38 Status: Final result	Radiant, Sbuser
04:38:25	Team Member Assigned	Plastic Surgery assigned as Consulting Physician	James Willcockson, MD
04:39:59	Acetaminophen Level Resulted	Abnormal Result Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:40 Status: Final result Acetaminophen, Level: <3 ug/mL ▾ [Ref Range: 10 - 30] (INTERPRETIVE INFORMATION: Acetaminophen Critical Values: Post 4-hour ingestion Greater than 150 ug/mL Post 12-hour ingestion Greater than 40 ug/mL Acetaminophen concentrations greater than 150 ug/mL at 4 hours after ingestion and 40 ug/mL at 12 hours after ingestion are often associated with toxicity. Acetaminophen levels drawn within 4-6 hours after IV administration of a standard loading dose of 150 mg/kg of N-acetyl cysteine may be falsely low due to interference with the assay.)	Interface, Arup Lab
04:40	Salicylate Assay Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:40 Status: Final result Salicylate: <5 mg/dL [Ref Range: 2 - 10] (INTERPRETIVE INFORMATION: Salicylate Analgesic 2-10 mg/dL Anti-Inflammatory 10-30 mg/dL Toxic greater than 30 mg/dL)	Interface, Arup Lab
04:40	Imaging Exam Ended	OS CT Spine RPT	Radiant, Sbuser

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

04:40:01	Tricyclic Antidep Detection Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:40 Status: Final result Tricyclic Antidepressant Detection: Negative [Ref Range: Negative] (INTERPRETIVE INFORMATION: Tricyclic Antidepressants Detection This test is positive when the total concentration of all detectable tricyclic antidepressants produces a response greater than the cutoff of 300 ng/mL nortriptyline. This is a screening test, results are unconfirmed. Unconfirmed results are to be used for medical (treatment) purposes only. Tricyclic antidepressants detectable with this assay include: amitriptyline, clomipramine, desipramine, doxepin, imipramine, nortriptyline, protriptyline, and trimipramine. Levels of tricyclic antidepressants in the therapeutic range may not be detectable. False-positive results may occur with the following drugs: Seroquel (quetiapine fumarate), Trileptal (oxcarbazepine), Benadryl (diphenhydramine) at toxic concentrations, Flexeril (cyclobenzaprine), Thioridazine, and Thorazine (chlorpromazine).)	Interface, Arup Lab
04:40:02	Benzodiazepines Detection Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:40 Status: Final result Benzodiazepines Detection: Negative [Ref Range: Negative] (INTERPRETIVE INFORMATION: Benzodiazepines A test cutoff value of 50 ng/mL is used to discern positive from negative results. Because this is a screening test, positive findings are considered unconfirmed.)	Interface, Arup Lab
04:40:03	Ethanol STAT Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:40 Status: Final result ETOH STAT: <10 mg/dL (INTERPRETIVE INFORMATION: Ethanol, STAT Toxic concentrations may cause inebriation, CNS depression, respiratory depression, mental and motor impairment and liver damage. In children, ethanol ingestion may cause hypoglycemia.)	Interface, Arup Lab
04:40:20	Comprehensive Metabolic Panel Resulted	Abnormal Result Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:40 Status: Final result SODIUM: 141 mmol/L [Ref Range: 136 - 144] POTASSIUM: 3.9 mmol/L [Ref Range: 3.3 - 5.0] Chloride, S/P: 111 mmol/L ^ [Ref Range: 102 - 110] Carbon Dioxide, S/P: 23 mmol/L [Ref Range: 20 - 26] BUN, S/P: 11 mg/dL [Ref Range: 8 - 24] Creatinine S/P: 0.73 mg/dL [Ref Range: 0.57 - 1.11] Glucose S/P: 127 mg/dL [Ref Range: 64 - 128] Calcium, S/P: 8.5 mg/dL [Ref Range: 8.4 - 10.5] Protein, Total, S/P: 6.9 g/dL [Ref Range: 6.5 - 8.4] Albumin S/P: 3.9 g/dL [Ref Range: 3.5 - 5.0] Bilirubin, Total, S/P: 0.4 mg/dL [Ref Range: 0.2 - 1.4] Alkaline Phosphatase: 103 U/L [Ref Range: 38 - 126] AST: 22 U/L [Ref Range: 16 - 40] ALT: 22 U/L [Ref Range: 5 - 60] Anion Gap: 7 mmol/L v [Ref Range: 8 - 14]	Interface, Arup Lab



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

04:43:01	Pregnancy Serum Quant Nontumor Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:43 Status: Final result Beta-hCG, Serum Quantitative: <1 IU/L [Ref Range: 0 - 4]	Interface, Arup Lab
04:44:26	Orders Placed	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Jason Bryan Young, MD
04:44:28	Imaging Exam Started	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:44:28	Imaging Exam Ended	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:44:29	Imaging Final Result	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Radiant, Sbuser
04:44:29	OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt Resulted	Last updated: 6/6/2020 04:44 Status: Final result	Radiant, Sbuser
04:45	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.9	Inpatient, Patient Extract
04:49:28	TYPE & SCREEN (ABO/RH) Resulted	Collected: 6/6/2020 04:00 Last updated: 6/6/2020 04:49 Status: Final result ABORh Manual: O Positive Specimen Expiration Date: 06/09/2020 04:00 Antibody Screen: Negative	Interface, Arup Lab
04:58:34	Orders Acknowledged	New - XR Chest 1 View ; XR Pelvis 1 To 2 Views ; POC ROTEM Once-Routine ; CT T Spine WO IV Cont ; CT L Spine WO IV Cont ; XR Shoulder 2 or More Views RT ; XR Humerus 2 or More Views RT ; XR Forearm 2 Views RT ; XR Wrist 3 or More Views RT ; XR Hand 3 or More Views RT ; OS CT Neuro RPT ; XR Elbow 2 Views LT ; XR Elbow 2 Views RT ; OS CT Neuro RPT ; OS CT Spine RPT ; OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt ; OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt ; OS XR Musculoskeletal Consult Image Made Elsewhere No Rpt	Steven Michael Kelsey, RN
05:00	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.9	Inpatient, Patient Extract
05:08:27	CT Ordered	CT HEAD WO IV CONT	Samantha Sachiko Colby, MD
05:08:27	Imaging Exam Ordered		Samantha Sachiko Colby, MD
05:08:27	Orders Placed	CT Head WO IV Cont	Samantha Sachiko Colby, MD
05:08:54	Assign Nurse	Steven Michael Kelsey, RN assigned as Registered Nurse	Steven Michael Kelsey, RN
05:11:59	Imaging Preliminary Result	CT T Spine WO IV Cont	Interface, Powerscribe Magresults
05:11:59	CT Preliminary Result	(Preliminary result) CT T SPINE WO IV CONT	Interface, Powerscribe Magresults
05:15	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.9	Inpatient, Patient Extract
05:28:31	Imaging Preliminary Result	OS CT Neuro RPT	Interface, Powerscribe Magresults



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

05:30	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.9	
05:31:01	Imaging Preliminary Result	OS CT Neuro RPT	Interface, Powerscribe Magresults
05:34:03	Team Member Assigned	Breanna Gabrielle Owens assigned as Technician	Breanna Gabrielle Owens
05:35:10	Imaging Preliminary Result	OS CT Spine RPT	Interface, Powerscribe Magresults
05:36	Imaging Preliminary Result	XR Chest 1 View	Interface, Powerscribe Magresults
05:36:01	XRay Preliminary Result	(Preliminary result) XR CHEST 1 VIEW	Interface, Powerscribe Magresults
05:36:51	Imaging Preliminary Result	XR Pelvis 1 To 2 Views	Interface, Powerscribe Magresults
05:36:51	XRay Preliminary Result	(Preliminary result) XR PELVIS 1 TO 2 VIEWS	Interface, Powerscribe Magresults
05:37	AUDIT & DAST-10	AUDIT & DAST-10 Outcome	Rebecca Burgert, LCSW
		Outcome: Complete	
		AUDIT (Alcohol Use Disorders Identification Test)	
		How often do you have a drink containing alcohol?: Never (Patient reported that she is two years sober.)	How many drinks containing alcohol do you have on a typical day when you are drinking?: 0 to 2
		How often you have six or more drinks on one occasion?: Never	How often during the last year have you found that you were not able to stop drinking once you started?: Never
		How often during the last year have you failed to do what was normally expected from you because of drinking?: Never	How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?: Never
		How often during the last year have you had a feeling of guilt or remorse after drink?: Never	How often during the last year have you been unable to remember what happened the night before because you had been drinking?: Never
		Have you or someone else been injured as a result of your drinking?: No	Has a relative or friend, or a doctor or other health worker been concerned about your drinking or suggested you cut down?: No
		AUDIT Score: 0	AUDIT Referral: Not applicable - AUDIT Score < 8
		Time Spent: 15-30 minutes	
		DAST-10	
		Have you used drugs other than those required for medical reasons?: No	DAST-10 Referral: Not applicable - DAST-10 Score < 3
		Time Spent: 15-30 minutes	
05:37	Custom Formula Data	Other flowsheet entries	Rebecca Burgert, LCSW
		DAST-10 Score: 0	

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HEALTH
UNIVERSITY OF UTAH

UH HOSPITALS AND CLINICS
50 North Medical Drive
Salt Lake City UT 84132-0001

Ortega, Jean
MRN: 22256727, DOB: 10/17/1977, Sex: F
Acct #: 91073325
Adm: 6/6/2020, D/C: 6/8/2020

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

05:37:02	Imaging Exam Started	CT Head WO IV Cont	Matthew Barnes
05:45	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.9	
05:48:26	Imaging Exam Ended	CT Head WO IV Cont	Matthew Barnes
05:51	Remove Nurse	Steven Michael Kelsey, RN removed as Registered Nurse	Michael D Baird, RN
05:51:29	Assign Nurse	Michael D Baird, RN assigned as Registered Nurse	Michael D Baird, RN
05:51:52	Orders Acknowledged	New - CT Head WO IV Cont	Michael D Baird, RN



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

05:59	SW Adult Assessment	<p>Visit Information</p> <p>Service/Unit: ED: Trauma Description of Patient and Diagnosis: Trauma Papa, real name Jean Ortega is a 42 year old female that was brought to the UUMC.ED due to domestic assault by her ex- husband Darwin Yowell. She has significant facial trauma and a brain bleed due to the assault. Location: ED</p> <p>Reason for SW Visit: Trauma Spoke to: Patient (Also spoke with patient's mother, Melva Jackson 1-775-778-6490.)</p> <p>Emergency Contact: Melva Jackson, mother 1-775-778-6490,</p> <p>Next of Kin: Melva Jackson, mother 1-775-778-6490. Patient also has three children, the youngest in 18 and lives in Denver, Co. Patient request contact be made with her mom.</p> <p>Social History</p> <p>Current Relationship Status: Living together (Melva, patient's mother, reported that the patient is divorced but her ex-husband is homeless and he is working his way back into her life. They were staying in a hotel together for a time.) Family Structure/Support System: Patient has the support of her mother, Melva Jackson 1-775-778-6490 and her brother Michael Jackson. Patient has some contact with her youngest child, Ski Ortega but her two oldest children are upset with their mom and have little contact with her. Military: No</p> <p>Mental Health: Yes</p> <p>Substance Use: Denied (Patient reports that she has been two years sober.)</p> <p>Substance Use</p> <p>Substance Use: Denied (Patient reports that she has been two years sober.)</p>	Rebecca Burgert, LCSW
06:00	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
06:00:01	Imaging Preliminary Result	Sepsis %?: 0.9 CT L Spine WO IV Cont	Interface, Powerscribe Magresults
06:00:01	CT Preliminary Result	(Preliminary result) CT L SPINE WO IV CONT	Interface, Powerscribe Magresults
06:04:42	Imaging Preliminary Result	CT Head WO IV Cont	Interface, Powerscribe Magresults

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

06:04:42	CT Preliminary Result	(Preliminary result) CT HEAD WO IV CONT	Interface, Powerscribe Magresults
06:15	mEWS Flowsheet	Other flowsheet entries Sepsis.%?: 0.9	Inpatient, Patient Extract
06:24	OS CT Neuro RPT Resulted	Last updated: 6/6/2020 06:25 Status: Final result	Interface, Powerscribe Magresults
06:25:31	Imaging Final Result	OS CT Neuro RPT	Interface, Powerscribe Magresults
06:27	OS CT Neuro RPT Resulted	Last updated: 6/6/2020 06:28 Status: Final result	Interface, Powerscribe Magresults
06:28	CT Head WO IV Cont Resulted	Collected: 6/6/2020 05:36 Last updated: 6/6/2020 06:29 Status: Final result	Interface, Powerscribe Magresults
06:28:12	Imaging Final Result	OS CT Neuro RPT	Interface, Powerscribe Magresults
06:28:37	Registration Completed		Fawn Kim-Ann Heiner
06:29	CT T Spine WO IV Cont Resulted	Collected: 6/6/2020 04:08 Last updated: 6/6/2020 06:31 Status: Final result	Interface, Powerscribe Magresults
06:29:12	Imaging Final Result	CT Head WO IV Cont	Interface, Powerscribe Magresults
06:29:12	CT Final Result	(Final result) CT HEAD WO IV CONT	Interface, Powerscribe Magresults
06:30	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract
06:31	OS CT Spine RPT Resulted	Last updated: 6/6/2020 06:32 Status: Final result	Interface, Powerscribe Magresults
06:31:02	Imaging Final Result	CT T Spine WO IV Cont	Interface, Powerscribe Magresults
06:31:03	CT Final Result	(Final result) CT T SPINE WO IV CONT	Interface, Powerscribe Magresults
06:32	CT L Spine WO IV Cont Resulted	Collected: 6/6/2020 04:08 Last updated: 6/6/2020 06:33 Status: Final result	Interface, Powerscribe Magresults
06:32:23	Imaging Final Result	OS CT Spine RPT	Interface, Powerscribe Magresults
06:33:51	Imaging Final Result	CT L Spine WO IV Cont	Interface, Powerscribe Magresults
06:33:51	CT Final Result	(Final result) CT L SPINE WO IV CONT	Interface, Powerscribe Magresults
06:45	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

06:45	Medication Given	lidocaine-EPINEphrine 1 %-1:100000 injection 10 mL - Dose: 10 mL ; Route: Subcutaneous ; Site: Face ; Scheduled Time: 0645 ; Comment: Given by Plastics MD ; Linked override order: lidocaine-EPINEphrine 1 %-1:100000 injection	Kasi Ostrander, RN
06:56:35	Team Member Removed	Breanna Gabrielle Owens removed as Technician	Breanna Gabrielle Owens
07:00	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract
07:12:06	Team Member Assigned	Ryan Smythe assigned as Technician	Ryan Smythe
07:13	Remove Nurse	Michael D Baird, RN removed as Registered Nurse	Kasi Ostrander, RN
07:13:16	Assign Nurse	Kasi Ostrander, RN assigned as Registered Nurse	Kasi Ostrander, RN
07:15	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract
07:24:38	Admit Disposition Selected	ED Disposition set to Admit	Holbrook Stoecklein, MD
07:24:38	Disposition Selected		Holbrook Stoecklein, MD
07:24:38	Orders Placed	ED Admit Request RABB, CRAIG HINSON; Subdural hemorrhage (HCC); Inpatient; Unknown at this time, No Monitoring Needed; Unknown at this time; No; Unknown at this time; COVID R/O Asymptomatic; NAC - Neuro Acute Care	Holbrook Stoecklein, MD
07:24:41	Bed Request Ordered	ED Admit Request RABB, CRAIG HINSON; Subdural hemorrhage (HCC); Inpatient; Unknown at this time, No Monitoring Needed; Unknown at this time; No; Unknown at this time; COVID R/O Asymptomatic; NAC - Neuro Acute Care - [192462548]	Holbrook Stoecklein, MD
07:24:41	Orders Completed	ED Admit Request RABB, CRAIG HINSON; Subdural hemorrhage (HCC); Inpatient; Unknown at this time, No Monitoring Needed; Unknown at this time; No; Unknown at this time; COVID R/O Asymptomatic; NAC - Neuro Acute Care	Holbrook Stoecklein, MD
07:26	Orders Acknowledged	New - ED Admit Request RABB, CRAIG HINSON; Subdural hemorrhage (HCC); Inpatient; Unknown at this time, No Monitoring Needed; Unknown at this time; No; Unknown at this time; COVID R/O Asymptomatic; NAC - Neuro Acute Care	Kasi Ostrander, RN
07:27:53	Enter Bed Request Details into Teletracking Completed	ED Admit Request RABB, CRAIG HINSON; Subdural hemorrhage (HCC); Inpatient; Unknown at this time, No Monitoring Needed; Unknown at this time; No; Unknown at this time; COVID R/O Asymptomatic; NAC - Neuro Acute Care	Eden Paige Merkley
07:30	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract
07:32:31	ED Provider Notes	Note filed at this time	Holbrook Stoecklein, MD
07:32:31	ED Note Filed	ED Prov Note filed by Holbrook Stoecklein, MD	Holbrook Stoecklein, MD
07:34	Collect COVID19PCR Completed	COVID19PCR - Type: Swab ; Source: Nasopharyngeal	Kasi Ostrander, RN
07:34	Specimens Collected	COVID19PCR - ID: 2587979559-3002638 Type: Swab	Kasi Ostrander, RN



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

07:38	XR Chest 1 View Resulted	Collected: 6/6/2020 03:47 Last updated: 6/6/2020 07:40 Status: Final result	Interface, Powerscribe Magresults
07:40	ED Boarder Patient		Samantha Sachiko Colby, MD
07:40:03	Imaging Final Result	XR Chest 1 View	Interface, Powerscribe Magresults
07:40:03	Xray Final Result	(Final result) XR CHEST 1 VIEW	Interface, Powerscribe Magresults
07:40:58	Supply Charges	Timed Procedures	Kasi Ostrander, RN
		Critical Care Time, First Hour: Yes Critical Care Time, Each Addl 30 Min: 6	
07:41:28	ED Notes	Nursing one to one care, critical care time, needed for patient due to: Frequent vital signs to evaluate for change in hemodynamic stability and Frequent continual neurological checks to assess for mental status changes. Nurse at clinical bedside performing one to one nursing care from 0356 to 0740 as documented in the Critical Care documentation in summary of clinical course. MD notified and made aware of any hemodynamic and neurological changes. Treated per MD orders.	Kasi Ostrander, RN
		Kasi Ostrander, RN 06/06/20 0741	
07:42:01	Lab Ordered	COVID19PCR	Wesley Williams, MD
07:42:01	Orders Placed	COVID19PCR	Wesley Williams, MD
07:44:11	Home Medications Reviewed		Lauren Emily Burgess
07:45	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
07:45:03	Orders Placed	Admit/Refer To Inpatient; Neurosurgery; RABB, CRAIG HINSON; Subdural hematoma (HCC); NAC - Neuro Acute Care; Less than 2 midnights; Sequential Compression Device Bilateral; Knee Length; Notify Provider - Hemodynamic Parameters; Vital Signs Q4H; Weight; Neuro-Checks; Pulse Oximetry - Nursing Continuous; Intake and Output Every Hour, Strict; Patient Hand Hygiene Protocol TID; Out of Bed; 12 Lead ECG; Code Status - Full Code; Regular Diet; Advance Diet as Tolerated. Regular Diet; sodium chloride 0.9 % infusion; Basic Metabolic Panel; CBC With Plt Count And Auto Diff; D-Dimer, Quantitative; OT Eval and Treat; PT Eval and Treat; levETIRAcetam (KEPPRA) IV Injection 1,000 mg	Samantha Sachiko Colby, MD
07:45:04	EKG Ordered	12 LEAD ECG (EKG)	Samantha Sachiko Colby, MD



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

07:45:04	Orders Placed	acetaminophen (OFIRMEV) injection 1,000 mg ; Peripheral IV	Samantha Sachiko Colby, MD
07:45:07	ED Boarder Patient	Admit/Refer To Inpatient; Neurosurgery; RABB, CRAIG HINSON; Subdural hematoma (HCC); NAC - Neuro Acute Care; Less than 2 midnights - [192462574]	Samantha Sachiko Colby, MD
07:45:08	Stop Calculating FCC	Admit/Refer To Inpatient; Neurosurgery; RABB, CRAIG HINSON; Subdural hematoma (HCC); NAC - Neuro Acute Care; Less than 2 midnights - [192462574]	Samantha Sachiko Colby, MD
07:45:08	Orders Completed	Admit/Refer To Inpatient; Neurosurgery; RABB, CRAIG HINSON; Subdural hematoma (HCC); NAC - Neuro Acute Care; Less than 2 midnights	Samantha Sachiko Colby, MD
07:45:27	Orders Placed	Neuro Bowel Protocol ; senna 8.6 mg per tab 2 tablet ; polyethylene glycol 3350 (MIRALAX) packet ; polyethylene glycol 3350 (MIRALAX) packet	Samantha Sachiko Colby, MD
07:45:28	Orders Placed	bisacodyl (DULCOLAX) suppository 10 mg ; magnesium hydroxide (MILK OF MAGNESIA) 80 mg/mL suspension 30 mL ; naloxegol (MOVANTIK) tablet 25 mg ; methylnaltrexone (RELISTOR) injection 12 mg	Samantha Sachiko Colby, MD
07:46	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 15.4	
07:46:51	Orders Acknowledged	New - COVID19PCR	Kasi Ostrander, RN
07:59	XR Pelvis 1 To 2 Views Resulted	Collected: 6/6/2020 08:30 Last updated: 6/6/2020 08:00 Status: Final result	Interface, Powerscribe Magresults
08:00:55	Imaging Final Result	XR Pelvis 1 To 2 Views	Interface, Powerscribe Magresults
08:00:55	Xray Final Result	(Final result) XR PELVIS 1 TO 2 VIEWS	Interface, Powerscribe Magresults
08:01	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
08:05	Risk Scores	mSOFA Scores	Inpatient, Patient Extract
		Hypotension: 0	
		Creatinine Level: 0	
08:06	Risk Scores	mSOFA Scores	Inpatient, Patient Extract
		mSOFA Score: 0	
		SpO2/FiO2 Ratio: 0	
		Jaundice/Bilirubin: 0	
08:15	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
08:16	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 15.4	
08:21:03	Bed was Held		Kasi Ostrander, RN

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)
ED Care Timeline (continued)

08:22:15	Orders Acknowledged	New - Admit/Refer To Inpatient; Neurosurgery; RABB, CRAIG HINSON; Subdural hematoma (HCC); NAC - Neuro Acute Care; Less than 2 midnights; RN Sequential Compression Device Bilateral; Knee Length; Notify Provider - Hemodynamic Parameters; Vital Signs Q4H; Weight; Neuro Checks; Pulse Oximetry - Nursing Continuous; Intake and Output Every Hour, Strict; Patient Hand Hygiene Protocol TID; Out of Bed; 12 Lead ECG; Code Status - Full Code; Regular Diet; Advance Diet as Tolerated Regular Diet; sodium chloride 0.9 % infusion; Basic Metabolic Panel; CBC With Plt Count And Auto Diff; D-Dimer, Quantitative; OT Eval and Treat; PT Eval and Treat; levETIRAcetam (KEPPRA) IV Injection 1,000 mg; acetaminophen (OFIRMEV) injection 1,000 mg; Peripheral IV; Neuro Bowel Protocol; senna 8.6 mg per tab 2 tablet; polyethylene glycol 3350 (MIRALAX) packet; polyethylene glycol 3350 (MIRALAX) packet; bisacodyl (DULCOLAX) suppository 10 mg; magnesium hydroxide (MILK OF MAGNESIA) 80 mg/mL suspension 30 mL; naloxegol (MOVANTIK) tablet 25 mg; methylnaltrexone (RELISTOR) injection 12 mg	Kasi Ostrander,
08:30	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
08:31	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 15.4	
08:45	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
08:46	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 15.4	
08:56:11	Patient transferred	From room 0004 to room 0015	Kasi Ostrander, RN
08:56:12	Patient transferred		Kasi Ostrander, RN
08:57:46	Orders Discontinued	XR Hand 3 or More Views RT; XR Hand 3 or More Views RT	Lindsey Searle
08:58:07	Orders Discontinued	XR Wrist 3 or More Views RT; XR Wrist 3 or More Views RT	Lindsey Searle
08:58:26	Orders Discontinued	XR Forearm 2 Views RT; XR Forearm 2 Views RT	Lindsey Searle
08:58:44	Orders Discontinued	XR Humerus 2 or More Views RT; XR Humerus 2 or More Views RT	Lindsey Searle
08:59:08	Orders Discontinued	XR Shoulder 2 or More Views RT; XR Shoulder 2 or More Views RT	Lindsey Searle
08:59:24	Orders Discontinued	XR Elbow 2 Views RT; XR Elbow 2 Views RT	Lindsey Searle
08:59:40	Orders Discontinued	XR Elbow 2 Views LT; XR Elbow 2 Views LT	Lindsey Searle
09:00	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 0.8	
09:00	Nutrition Screen	Nutrition Screen	Newell Gene McMurry, RD
		RD Initial assessment date: 06/10/20	
09:01	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 15.4	



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ED Care Timeline (continued)

09:01	Peripheral IV 06/06/20 Right Hand 20 Gauge Placed	Removal Date/Time: 06/07/20 1106 Placement Date/Time: 06/06/20 0901 Placed by External Staff/Trauma Line: Trauma Line Laterality: Right Location: Hand Size Gauge: 20 Gauge Removal Indications: Occluded Removed by: c Other Comment Catheter...	Kasi Ostrander, RN
09:01	Peripheral IV 06/06/20 Right Antecubital 20 Gauge Placed	Removal Date/Time: 06/08/20 2222 Placement Date/Time: 06/06/20 0901 Placed by External Staff/Trauma Line: Trauma Line Laterality: Right Location: Antecubital Size Gauge: 20 Gauge	Kasi Ostrander, RN
09:01:25	Orders Acknowledged	Discontinued - XR Shoulder 2 or More Views RT ; XR Humerus 2 or More Views RT ; XR Forearm 2 Views RT ; XR Wrist 3 or More Views RT ; XR Hand 3 or More Views RT ; XR Elbow 2 Views LT ; XR Elbow 2 Views RT	Kasi Ostrander, RN
09:01:49	Peripheral IV 06/06/20 Right Hand 20 Gauge Assessment	Dressing Type: Transparent Site Assessment: WDL Dressing Status: WDL Line Status: WDL	Kasi Ostrander, RN
09:02	Peripheral IV 06/06/20 Left Hand 18 Gauge Placed	Removal Date/Time: 06/08/20 1058 Placement Date/Time: 06/06/20 0902 Placed by External Staff/Trauma Line: Trauma Line Laterality: Left Location: Hand Size Gauge: 18 Gauge Removal Indications: c Patient Removed Catheter Tip Intact: Yes	Kasi Ostrander, RN
09:02:08	Peripheral IV 06/06/20 Right Antecubital 20 Gauge Assessment	Dressing Type: Transparent Site Assessment: WDL Line Status: WDL	Kasi Ostrander, RN
09:02:29	Peripheral IV 06/06/20 Left Hand 18 Gauge Assessment	Dressing Type: Transparent Site Assessment: WDL Dressing Status: WDL Line Status: WDL	Kasi Ostrander, RN
09:02:40	Orders Completed	Peripheral IV	Kasi Ostrander, RN
09:02:40	Place Peripheral IV Completed	Peripheral IV	Kasi Ostrander, RN
09:03:14	Orders Acknowledged	New - Peripheral IV ; Peripheral IV	Kasi Ostrander, RN
09:03:14	Orders Placed	Peripheral IV ; Peripheral IV	Holbrook Stoecklein, MD
09:15	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 0.8	Inpatient, Patient Extract
09:15	Medication New Bag	sodium chloride 0.9 % infusion - Dose: 75 mL/hr ; Rate: 75 mL/hr ; Route: Intravenous ; Line: Peripheral IV 06/06/20 Left Hand 18 Gauge ; Scheduled Time: 0800	Kasi Ostrander, RN
09:15	Medication Given	levETIRAcetam (KEPPRA) IV Injection 1,000 mg - Dose: 1,000 mg ; Rate: 300 mL/hr ; Route: Intravenous ; Line: Peripheral IV 06/06/20 Left Hand 18 Gauge ; Scheduled Time: 0800	Kasi Ostrander, RN
09:16	mEWS Flowsheet	Other flowsheet entries Deterioration Index: 15.4	Inpatient, Patient Extract
09:25:30	Medication New Bag	acetaminophen (OFIRMEV) injection 1,000 mg - Dose: 1,000 mg ; Rate: 400 mL/hr ; Route: Intravenous ; Line: Peripheral IV 06/06/20 Right Hand 20 Gauge	Kasi Ostrander, RN
09:27:58	Orders Completed	Peripheral IV	Kasi Ostrander, RN
09:27:58	Place Peripheral IV Completed	Peripheral IV	Kasi Ostrander, RN



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ED Care Timeline (continued)

09:28:01	Orders Completed	Peripheral IV	Kasi Ostrander, RN
09:28:01	Place Peripheral IV Completed	Peripheral IV	Kasi Ostrander, RN
09:28:11	Complex VS & Measurement	Vitals Temp: 36.6 °C (97.9 °F) Heart Rate: 100 Resp: 14 Automatic Restart Vitals Timer: Yes Oxygen Therapy SpO2: 98 % NIBP BP: 123/84 Patient Position: Supine BP Method: Automatic Primary Pain Is Patient Currently in Pain?: Unable to report POSS Opioid Sedation Scale Resp: 14	Kasi Ostrander, RN
09:28:11	Custom Formula Data	Temp Source: Temporal Heart Rate Source: Monitor SpO2: 98 % O2 Therapy: None (Room air) BP Mean: 96 BP (Cuff) Location: Right arm Relevant Labs and Vitals Temp (in Celsius) Do Not Use: 36.6 mSOFA Scores do not use: 0 Other flowsheet entries Mean Arterial Pressure (Calculated): 97 Heart Rate score: 0 Resp score: 0 Vitals Taken: 1 Pulse: 100 mEWS Sepsis BP Score: 0 Sepsis Temp score: 0 mEWS Row Score: 0 Vent Calculation: Off Max Temp: 36.6 C	Kasi Ostrander, RN
09:29	Neurological	Neurological Neuro (WDL): Within Defined Limits	Kasi Ostrander, RN
09:29	HEENT	EENT EENT (WDL): Exceptions to WDL R Eye: Conjunctiva red; Sclera red; Edema L Eye: Conjunctiva red; Sclera red; Edema Nose: Laceration Throat: No difficulty swallowing Voice: No difficulty talking Mucous Membrane(s): Moist; Pink Teeth: Intact	Kasi Ostrander, RN
09:30	mEWS Flowsheet	Other flowsheet entries Sepsis %?: 1.8	Inpatient, Patient Extract



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ED Care Timeline (continued)

09:30	Primary Assessment	Airway		Kasi Ostrander, RN
		Obstructed?: Patent Breathing		
09:30	Respiratory	Breathing: Spontaneous	Breathing: Unlabored	Kasi Ostrander, RN
		Respiratory (WDL): Within Defined Limits		
09:30	Skin Color/Condition	Integumentary		Kasi Ostrander, RN
		Integumentary (WDL): Exceptions to WDL	Skin Integrity: Ecchymosis	
09:30	Cardiac/Telemetry	Cardiovascular		Kasi Ostrander, RN
		Cardiovascular (WDL): Within Defined Limits		
09:30	Gastrointestinal	Gastrointestinal		Kasi Ostrander, RN
		Gastrointestinal (WDL): Within Defined Limits		
09:30	Genitourinary	Genitourinary		Kasi Ostrander, RN
		Genitourinary (WDL): Within Defined Limits		
09:30	Musculoskeletal	Musculoskeletal		Kasi Ostrander, RN
		Musculoskeletal (WDL): Within Defined Limits		
09:30	Psychosocial	Psychosocial		Kasi Ostrander, RN
		Psychosocial (WDL): Within Defined Limits		
09:30	Peripheral Vascular	Peripheral Vascular		Kasi Ostrander, RN
		Peripheral Vascular (WDL): Within Defined Limits		
09:30	Behavioral Health Assessment	Consciousness/Thoughts		Kasi Ostrander, RN
		Level of Consciousness: Alert	Orientation: Oriented x4	
09:30	Braden Scale Assessment	Braden Scale		Kasi Ostrander, RN
		Sensory Perceptions: No impairment	Moisture: Rarely moist	
		Activity: Walks frequently	Mobility: No limitation	
		Nutrition: Adequate	Friction and Shear: No apparent problem	
		Braden Scale Score: 22		
09:30	Custom Formula Data	Other flowsheet entries		Kasi Ostrander, RN
		Fall Risk Level: Low Risk		
09:30	Daily Cares/Safety	Safety		Kasi Ostrander, RN
		Fall Risk: Low		



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

09:30	Fall Risk Assessment	Morse Fall Risk	Kasi Ostrander, RN
		LTM Seizure Patients – AUTOMATIC HIGH FALL RISK: No Secondary Diagnosis: No Gait: Normal/bedrest/wheelchair Mental Status: Oriented to own ability	History of Falling: No Ambulatory Aid: None/bedrest/nurse assist IV Therapy/IV Access: No Morse Fall Risk Score: 0
09:31	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
09:31:38	ED Notes	Patient transferred to hospital bed maintaining full spine precautions. Patient medicated per MAR for pain. Patient sleeping at this time. No further needs.	Kasi Ostrander, RN
		Kasi Ostrander, RN 06/06/20 0932	
09:37:30	Orders Acknowledged	New - lidocaine-EPINEPHrine 1 %-1:100000 injection 10 mL	Kasi Ostrander, RN
09:37:30	Orders Placed	lidocaine-EPINEPHrine 1 %-1:100000 injection 10 mL	Holbrook Stoecklein, MD
09:41	Medication Stopped	acetaminophen (OFIRMEV) injection 1,000 mg - Route: Intravenous ; Line: Peripheral IV 06/06/20 Right Hand 20 Gauge	Kasi Ostrander, RN
09:41	Intake/Output	acetaminophen (OFIRMEV) injection 1,000 mg	Kasi Ostrander, RN
		Volume (mL): 100	
09:45	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 1.8	
09:46	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
10:00	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 1.8	
10:01	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
10:15	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 1.8	
10:16	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
10:28:31	ED Primary Pain	Primary Pain	Kasi Ostrander, RN
		Is Patient Currently in Pain?: Yes; Patient indicates pain level is acceptable	



UH HOSPITALS AND CLINICS
50 North Medical Drive
Salt Lake City UT 84132-0001

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Acct #: 91073325
Adm: 6/6/2020, D/C: 6/8/2020

06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

10:30	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 1.8	
10:31	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
10:35:19	Observation Status Selected		Alexandra Evans, RN
10:35:22	IP Bed Assigned Status Selected		Alexandra Evans, RN
10:39	Specimen Collection	Blood Specimen Collection Status	Trask Daniel Verbos, RN
		Specimen Collection: Lab collect	
10:43	Departure Condition	Departure Condition	Kasi Ostrander, RN
		Mobility at Departure: (Hospital bed)	
		Patient Teaching: Admission discussed; Patient verbalized understanding	
		Departure Mode: By self	
10:43:31	Home Medications Reviewed		Lauren Emily Burgess
10:44:33	ED Notes	Admission discussed with patient and pt. Verbalized understanding. Patient taken to floor in hospital bed with all belongings. VSS prior to DC from ED	Kasi Ostrander, RN
		Kasi Ostrander, RN 06/06/20 1047	
10:45	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 1.8	
10:46	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
10:47	Care Handoff	Care Handoff	Kasi Ostrander, RN
		Report Given to: Given to floor	
10:47	Patient Belongings	Other flowsheet entries	Kasi Ostrander, RN
		Patient Belongings: All patient belongings returned	
10:53	Medication Continue to Inpatient Floor.	sodium chloride 0.9 % infusion - Dose: 75 mL/hr ; Rate: 75 mL/hr ; Route: Intravenous ; Line: Peripheral IV 06/06/20 Left Hand 18 Gauge ; Scheduled Time: 1053	Kasi Ostrander, RN
10:53:28	Orders Placed	Precaution Cervical Spine	Aubrey Place, MD
10:53:55	Remove Nurse	Kasi Ostrander, RN removed as Registered Nurse	Kasi Ostrander, RN
10:54:01	Patient transferred	From room 0015 to room OTF	Kasi Ostrander, RN
10:54:01	Patient transferred		Kasi Ostrander, RN
10:54:01	Patient transferred		Kasi Ostrander, RN
			Kasi Ostrander, RN



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

ED Care Timeline (continued)

10:54:01	ED Departure to IP Unit		Kasi Ostrander, RN
10:54:07	Orders	New - Precaution Cervical Spine	Trask Daniel
	Acknowledged		Verbos, RN
11:00	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Sepsis %?: 1.8	
11:01	mEWS Flowsheet	Other flowsheet entries	Inpatient, Patient Extract
		Deterioration Index: 26.3	
11:03:12	Patient admitted		Jessica Lyon
11:03:12	Patient admitted	To department UH (NAC) NEURO ACUTE CARE	Jessica Lyon
11:03:14	Charting Complete		Trask Daniel
			Verbos, RN
11:03:14	Charting Complete		Kasi Ostrander, RN
11:03:14	Charting Complete		Ryan Smythe
11:03:14	Charting Complete		Holbrook
			Stoecklein, MD
11:03:14	Charting Complete		Steven Michael
			Kelsey, RN
11:03:14	Charting Complete		Mark Timmel, MD
11:03:14	Charting Complete		Michael D Baird, RN
11:03:14	Charting Complete		Breanna Gabrielle Owens

H&P Notes

H&P by Jason Bryan Young, MD at 6/6/2020 3:49 AM

Trauma Admission History and Physical

Chief Complaint:

Domestic assault yesterday at approximately 1930 Needing assessment and management for possible injury.

History of Present Illness:

42 year old female Trauma II s/p domestic assault yesterday at approximately 1930. Transported to University Hospital by Air Ambulance: Med Air One from North Eastern Nevada Regional Hospital (Elko, NV). Patient complains of headache and R arm pain. Per report she was allegedly assaulted at home with fists. Did not lose consciousness. GCS 14 at scene and during transit. She received the following medications prior to arrival: fentanyl, tetanus booster, Kepra, ativan, Zofran.

OSH Images: done at 2300 yesterday

CT head - subdural hematoma, nasal fracture

XR right wrist - no fractures; right forearm - no fractures; L forearm - no fractures



HEALTH
UNIVERSITY OF UTAH

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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

Assistant Provider(s)

Junior Resident: "Aislinn Lewis, MD

Senior Resident: "Lily Gutnik, MD

Advanced Practice Clinician(s)

None for this trauma resuscitation

Trauma Attending

Dr. Jason Young

Past Medical History:- Depression

Past Surgical History: cholecystectomy

Family History:

Reviewed and non -contributory

Social History:

tobacco 5-6 cigarettes qdaily; no EtOH; no other recreational drug use

Home Medications:

Celexa

Allergies:Reviewed and non -contributory

Primary Assessment:

Airway:

Intact, patient speaking in clear voice

Breathing:

Clear and equal breath sounds bilaterally

Circulation:

Palpable radial and femoral pulses bilaterally, no apparent external hemorrhage

Disability:

Moves all extremities to command

Exposure:

Full, covered with warm blankets

Resuscitation:

none

Review of Systems:



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

A complete ROS was performed and found to be negative with exception to the positives documented in the HPI.

Vital Signs:

Vital Signs on Arrival:

Heart Rate: 111

Blood Pressure: 142/78

Respiratory Rate: 27

O2 Sat: 92%

Temperature: 37.2 C

Physical Exam:

Neuro: Glasgow Coma Scale:

Intubated at the time of this evaluation: No

Eye: 4

Verbal: 4

Motor: 6

Total: 14

Decreased to 13 at imaging

Head & General Appearance: Pupils are Equal, Round, Reactive to Light and Accommodation (PERRLA), Right Pupil 4 mm and does react to light, Left Pupil 4 mm and does react to light, Extra-ocular movements are intact, Scalp atraumatic, 2cm laceration above R eye, 1cm laceration below L eye, 1 cm laceration side of nose, swelling R upper lip, TTP over face but no obvious fractures, bilateral periorbital edema

Neck: C-collar placed by University Staff, Cervical spine was cleared in the trauma bay, it is tender to palpation, without step-off/deformity,

Back: Thoracic spine was cleared in the trauma bay, it is tender to palpation, without step-off/deformity, Lumbar spine was cleared in the trauma bay, it is not tender to palpation, without step-off/deformity,

Chest: Stable sternum, clavicles and chest wall, without signs of chest trauma

Cardiovascular: Rate: Regular Rate Rhythm: regular, S1 S2, heart sounds normal

Respiratory: Respiratory Effort: Unlabored, regular, Breath Sounds: clear, good air movement and equal breath sounds

Abdomen: Abdomen is soft without Tenderness to palpation. she does not have rebound tenderness/peritoneal signs

Pelvis: Pelvis stable on AP and Lateral Compression

GU: No signs of genitourinary trauma, no lacerations, hematoma or areas or ecchymosis. Good rectal tone, no gross blood.

Extremities:

Right Upper extremity TTP of R humerus, forearm, and hand; no lacerations; bruising R bicep

Left Upper extremity TTP L elbow, no lacerations, contusions, deformity, gross instability, or edema

Right lower extremity No apparent injury no lacerations, contusions, deformity, gross instability, or point tenderness to palpation, or edema



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

Left lower extremity No apparent injury no lacerations, contusions, deformity, gross instability, or point tenderness to palpation

Neurologic: Oriented To: person, place and time

Pulses: Radial pulse is present on right

Skin: Lacerations as listed above

Objective:

Labs:

Lab Results

Component	Value	Date/Time
WBC	11.35 (H)	06/06/2020 04:00 AM
HGB	11.2 (L)	06/06/2020 04:00 AM
HCT	35.0 (L)	06/06/2020 04:00 AM
PLTS	396	06/06/2020 04:00 AM

No results found for: PT, PTT, INR

Lab Results

Component	Value	Date/Time
SODIUM	141	06/06/2020 04:00 AM
K	3.9	06/06/2020 04:00 AM
CL	111 (H)	06/06/2020 04:00 AM
CO2	23	06/06/2020 04:00 AM
BUN	11	06/06/2020 04:00 AM
CREAT	0.73	06/06/2020 04:00 AM

Lab Results

Component	Value	Date/Time
TBILI	0.4	06/06/2020 04:00 AM
AST	22	06/06/2020 04:00 AM
ALT	22	06/06/2020 04:00 AM
ALKP	103	06/06/2020 04:00 AM

No results found for: PH, PACO2, PAO2, PAO2TMPCRRT, BE, LACTATE, BICARBONATE

Imaging/Radiology Studies with Results:

Ct T Spine Wo Iv Cont

Result Date: 6/6/2020

No acute trauma to the thoracic spine.

Additional Imaging Studies obtained, but not yet resulted:

XR Elbow bilateral, XR forearm bilatera, XR R hand, XR R humeru, XR R shoulder, XR R wrist

Significant Findings of the Focused Assessment Sonography in Trauma (FAST):



06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

Negative FAST Exam with Image Capture: A coronal plane of the RUQ was obtained & was negative for blood in Morrison's pouch, or the right paracolic gutter. Next, a coronal plane of the left upper quadrant was obtained and was negative for blood in the splenorenal space and the left paracolic gutter. Next, subcostal and parasternal long axes of the heart were negative for the presence of blood in the pericardial space. Finally, the urinary bladder was insonated in sagittal and transverse views and there was no evidence of free intraperitoneal fluid posterior or lateral to the bladder. Conclusion: This was a negative FAST exam for free intraperitoneal blood and hemopericardium. Image Capture: Permanent images were captured and saved electronically.

I have independently reviewed all labs and radiology images and they show
Left SDH
Right Nasal bone fracture

Impression and Plan:

Papa Trauma is an 43 year old female S/P, Trauma 2 {domsetic assault yesterday at 1930. Transferred from OSH.

Problems/Injuries Identified:

Active Problems:

Subdural hematoma (HCC)

-Left SDH

-Right Nasal bone fracture

Additional active issues being addressed in this patient:

None

Mental Health Comorbidities
Depression

Consults:

Plastic surgery
Neurosurgery

Plan

Neuro: C spine Precaution

OSH CT with subdural hematoma, neurosurgery consulted

- **Acute Pain Control:** Acetaminophen

Cardiovascular: no issues

Pulmonary: atelectasis prevention- encourage incentive spirometry, wean O2 as tolerated, encourage early mobilization as injuries permit

GI/Nutrition: Advance diet as tolerated



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

Renal/GU: continue maintenance IV fluids while NPO

Hem/ID: H/H stable on initial labs

Antibiotics: not indicated

MSK: PT/OT

Prophylaxis: SCD

TESS Calculator

Age in years: 43 year old (<29 - 0 pt, 30-64 - 1pt, >65 - 2 pt) 1pt

Estimated ISS 1-9 - 0 pt

body mass index is unknown because there is no height or weight on file. (BMI <30 - 0 pt, BMI >30 - 1 pt)

Ventilation days? " No - 0 pt

Lower-extremity Fracture? No - 0 pt

TESS = 1

Literature supports DVT Chemoprophylaxis for TESS score of ≥ 5

Dispo: NCC with NSGY

Jessica Zhu, MS3

I was present with a medical student who participated in the documentation of this note. I personally saw and evaluated the patient and performed my own physical examination (PE) and / or medical decision making (MDM). I discussed the case with the medical student. I have reviewed, verified, and revised the note as necessary and agree with the content and plan as written by the medical student.

Aislinn Lewis, MD PGY-2
General Surgery Resident
University of Utah

Attending Surgeon Attestation

I provided this service on 6/6/2020 at 03:56.

I have reviewed the note by the physician/APC above and verified its contents. My attestation may contain changes to, or differing subjective, objective, and/or assessment and plan data.

I reviewed and confirmed the HPI, PFSH, and ROS.

42 y/o woman s/p blunt assault. Transferred from OSH. Unknown LOC. GCS 14. No episodes of hypotension or hypoxia. Given Keppra at OSH. Complains of headache. Pain up to 8 out of 10, sharp, constant, non radiating, no exacerbating or alleviating factors. ? EtOH.

Family History: No bleeding diatheses or anesthetic complications.



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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

Allergies: NKDA.

Review of Systems:

10 systems reviewed and are negative except as stated in the HPI.

I examined the patient, and confirm the findings by the physician/APC above.

Constitutional: No acute distress. Resting comfortably.

Eyes: Pupils are equal, round, and reactive. No scleral icterus.

ENMT: No hemotympanum, no epistaxis, no rhinorrhea. Oropharynx clear.

Neck: Trachea midline. Cervical collar in place.

Chest: Equal and symmetric chest rise. No chest wall crepitus. No flail segment.

Neuro: GCS 14. Follows commands. Moves all extremities.

Respiratory: Lung sounds are clear to auscultation bilaterally. No wheezes/rales/rhonchi.

Cardiovascular: Normal rate, regular rhythm. No murmurs/rubs/gallops.

GI: Abdomen is soft, non tender, non distended. No hepatosplenomegaly.

GU: Normal external female genitalia. No costovertebral angle tenderness.

MSK: Moves all extremities. Sensori-motor function intact.

Psychiatry: Normal affect.

Lymph/Heme: No lymphadenopathy.

I have reviewed and discussed the chart, tests, labs, imaging, diagnoses, evaluation, and treatment plan with the physician/APC above. I approve the plan as noted.

Problem List:

-Left SDH

-Right Nasal bone fracture

Plan:

- NSG and MaxFace consults.

- Serial neuro exams.

- Seizure prophylaxis.

- Stability CT Head 6 hours from initial scan.

- Admit to NCCU.

- Social Work consult.

- UTES to perform tertiary exam and clear spine if indicated.

Medical Decision Making:

The patient's presentation qualifies them as high risk due to the presenting problems of an acute or chronic illness or injury, which poses a threat to life or bodily function.

CRITICAL CARE ATTESTATION



UH HOSPITALS AND CLINICS
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06/06/2020 - ED to Hosp-Admission (Discharged) in University of Utah Neuro Acute Care (continued)

H&P Notes (continued)

This patient has critical care diagnoses that place the patient at significant risk of organ failure and possible risk of death. I have spent approximately 36 minutes of continuous critical care time in the care of this patient for the above listed diagnoses, involving the above listed interventions. The patient has a critical care diagnosis of traumatic brain injury and is at risk of deterioration from the neurological and respiratory standpoint with risk of neurological decline and subsequent inability to protect airway therefore possibly requiring intubation and mechanical ventilation, therefore requires frequent and continuous monitoring. This time is exclusive of procedures and includes the following activities:

- Direct examination of the patient and history taking
- Review of laboratory data
- Review of radiological data
- Discussion and coordination of care with consulting services
- Discussion and coordination of care with the resident and NP team
- Counseling of the patient and family.

Additional active issues being addressed in this patient:

Depression.

Jason B. Young, MD, PharmD

Assistant Professor
Department of Surgery
949-278-0466

Electronically signed by Jason Bryan Young, MD at 06/07/20 0648

Clinical Notes

Flowsheet

Filed on 6/6/2020 9:27 PM

Scan on 6/6/2020 1042: Trauma Flowsheet (below)

PLAINTIFF EXHIBIT NO: 60
CASE NO.: DC-CR-20-159
DISTRICT COURT: JUDGE MASON SIMONS
DATE MARKED: 6/8/2021
DATE ADMITTED: 6/15/21
CLERK: MM

*****AUTO**MIXED ADC 300
1217 12 MB 2.916
OFFICE OF THE DISTRICT ATTY
Erika
540 COURT ST FL 2

001217

2020 JUL -5 AM 11:40

ELKO CO. DISTRICT ATTORNEY

ELKO, NV 89801-3515

69pgs



0069001217K03



ATTENTION

Confidential Information enclosed.
To be viewed by authorized persons only.

If you have questions regarding any information you have requested,
please call the phone number on the enclosed invoice.

To Whom It Concern:

CIOX has provided to you protected health information that may contain information that falls under the 42 C.F.R. Part 2. The federal rules prohibit you from making any further disclosure of information in this record that identifies a patient as having or having had a substance use disorder either directly, by reference to publicly available information, or through verification of such identification by another person unless further disclosure is expressly permitted by written consent of the individual whose information is being disclosed or as otherwise permitted by 42 CFR part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose (see 42 CFR §2.31). The federal rules restrict any use of the information to investigate or prosecute with regard to a crime any patient with a substance use disorder, except as provided at 42 CFR §§ 2.112(c)(5) and 2.65.

If the enclosed record pertains to HIV/AIDs, it has been disclosed to you from records whose confidentiality is protected by federal and perhaps, state law, which prohibits you from making any further disclosure of such information without the specific consent of the person to whom such information pertains or as otherwise permitted by state law. A general authorization for this release of health or other information is not sufficient for this purpose.

If the information requested is from a facility located within the Washington State area then this information will fall under the RCW 70.02.300 which states that this information has been disclosed to you from records whose confidentiality may be protected by state law. State law prohibits you from making any further disclosure of it without the specific written authorization of the person to whom it pertains, or as otherwise permitted by state law. A general authorization for the release of this protected information is not sufficient for this purpose.



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INVOICEInvoice #: **0310233334**Date: **06/29/2020**Customer #: **1772621****Ship to:**

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OFFICE OF THE DISTRICT ATTY
540 Court Street
FL 2
ELKO, NV 89801-3515

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540 Court Street
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ELKO, NV 89801-3515

Records from:

NORTHEASTERN NEVADA
REGIONAL H
2001 ERRECART BLVD
ELKO, NV 89801-8333

Requested By: OFFICE OF THE DISTRICT ATTY**DOB :** 10/17/1977**Patient Name:** ORTEGA JEAN

Description	Quantity	Unit Price	Amount
Basic Fee			0.00
Retrieval Fee			0.00
Per Page Copy (Paper) 1	63	0.60	37.80
Shipping			3.20
Subtotal			41.00
Sales Tax			0.00
Invoice Total			41.00
Balance Due			41.00
Terms: Net 30 days Please remit this amount : \$41.00(USD)			

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TYLER J. INGRAM
District Attorney

CHAD B. THOMPSON
Chief Criminal Deputy

**OFFICE OF THE DISTRICT ATTORNEY
OF ELKO COUNTY, NEVADA**

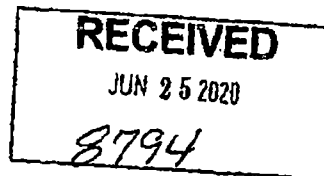
540 Court Street, Second Floor
Elko, Nevada 89801-3515
775-738-3101 • 775-738-0160 fax

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BREA M. MITCHELL
MEGAN A. SMITH
KRIS C. CARLSON
RYAN MCCORMICK
Deputy District Attorneys

FAX TRANSMISSION LEAD SHEET

DATE: June 24, 2020

TO: NORTHEASTERN NEVADA REGIONAL HOSPITAL
ATTN: MEDICAL RECORDS – KIMBERLY FRANZEN
FAX NO.: 748-2150
RE: MEDICAL RECORDS OF: JEAN ANGEL ORTEGA, DOB: 10/17/1977
STATE OF NEVADA VS. DARWYN ROSS YOWELL



AC 6330157

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TOTAL NUMBER OF PAGES (including cover sheet): 4

- Please mail **CERTIFIED** copies of the complete medical records for treatment date on or around June 5, 2020, and any follow-up treatment thereafter as well as copies of any medical bills concerning this incident. A signed medical release from the patient is attached. The notarized CERTIFICATE OF CUSTODIAN OF MEDICAL RECORDS must accompany the certified records.

Thank you for your attention to this request. If you have any questions, please call me at (775) 738-3101.

***PLEASE PROVIDE RECORDS ASAP. WE HAVE A HEARING ON 6/30/20

DA #F-20-01235

I hereby authorize the use or disclosure of my individually identifiable health information as described above. I understand that this authorization is voluntary.

FOR OFFICE USE ONLY	
Verified <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	By <u>Bee Med Rec</u>
License No. <u>BA</u>	SS No. _____
Signature <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <u>Im Chaitman</u>	

Jean A. Ortese
Signature of Patient or Legal Representative

8-24-00
Date and Time

If Patient Representative - please type in name _____

Basis for which representative has the authority to act for the patient _____

Signature of Witness _____

Date and Time _____

Northeastern Nevada Regional Hospital
Release of Information (English)
Page 2 of 2
NHT013-032514

DOB:
ADMIT:
ATT:
MR P:

AGE: HSV:
ROOM/BED SEX:
PAT #:

CERTIFICATE OF CUSTODIAN OF MEDICAL RECORDS

Pursuant to NRS 52.260/52.325

STATE OF NEVADA)
)ss
COUNTY OF ELKO)

COMES NOW Gregory I. Halton, who first being duly sworn, deposes and says:

1. That Deponent is the MEDICAL RECORDS CLERK (Job Title) with the NORTHEASTERN NEVADA REGIONAL HOSPITAL and in this capacity is a custodian of the records of said employer.
2. That NORTHEASTERN NEVADA REGIONAL HOSPITAL is licensed to do business as a medical provider in the State of Nevada.
3. That on JUNE 25TH, 2020, the Deponent received a request to produce medical records pertaining to JEAN ANGEL ORTEGA date of birth: 10/17/1977, which are now, or were formerly, maintained at this institution. The request to produce said records was in one of the following forms: a subpoena, a search warrant, or a medical release from the above-named patient or the patient's legal representative.
4. That the Deponent has examined the original of those records and has made, or caused to be made, a true and exact copy of them and that the reproduction of them attached hereto is true and complete.
5. That the original of those records was made at or near the time of the act, event, condition, opinion or diagnosis recited therein by or from information transmitted by a person with knowledge, in the course of a regularly conducted activity of the Deponent or the stated employer.

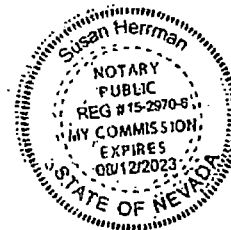
I declare under penalty of perjury that the foregoing is true and correct.

Dated this 25 day of June, 2020.

[Signature]
Custodian of Records

Subscribed and sworn to before me
this 25th day of June, 2020.

[Signature]
NOTARY PUBLIC



CERTIFICATE OF CUSTODIAN OF MEDICAL RECORDS

Pursuant to NRS 52.260/52.325

STATE OF NEVADA)
)ss.
COUNTY OF ELKO)

COMES NOW Gregory I. Halton, who first being
duly sworn, deposes and says:

1. That Deponent is the MEDICAL RECORDS CLERK (Job Title)
with the NORTHEASTERN NEVADA REGIONAL HOSPITAL and in this capacity is a
custodian of the records of said employer.

2. That NORTHEASTERN NEVADA REGIONAL HOSPITAL is licensed to
do business as a medical provider in the State of Nevada.

3. That on JUNE 25th, 2020, the Deponent received a
request to produce medical records pertaining to JEAN ANGEL ORTEGA date of birth:
10/17/1977, which are now, or were formerly, maintained at this institution. The request
to produce said records was in one of the following forms: a subpoena, a search
warrant, or a medical release from the above-named patient or the patient's legal
representative.

4. That the Deponent has examined the original of those records and has
made, or caused to be made, a true and exact copy of them and that the reproduction of
them attached hereto is true and complete.

5. That the original of those records was made at or near the time of the act,
event, condition, opinion or diagnosis recited therein by or from information transmitted
by a person with knowledge, in the course of a regularly conducted activity of the
Deponent or the stated employer.

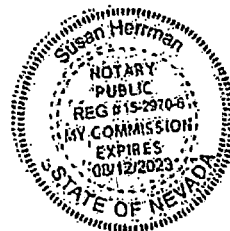
I declare under penalty of perjury that the foregoing is true and correct.

Dated this 25 day of June, 2020.

[Signature]
Custodian of Records

Subscribed and sworn to before me
this 25th day of June, 2020.

[Signature]
NOTARY PUBLIC



MEDICAL RECORD NUMBER		MRSA		NORTHEASTERN NEVADA REGIONAL HOSPITAL		VHE		PATIENT ACCOUNT NUMBER	
000008794				Facesheet				6330157	
PATIENT (Name, Address, Phone)				BIRTHDATE		AGE		BIRTH PLACE	
ORTEGA JEAN A 1719 ARROW ST				10/17/1977		42		530-02-2358	
ELKO NV 89801				SEX: F RACE: I M		ED CD		PREV ADL REL: R NCE	
COUNTY: ELKO PHONE: (775) 753-8713				ADMIT DATE & TIME		DISCHARGE DATE & TIME		SERVICE ROOM / BED NO	
				06/05/20 22:22				SD /	
PATIENT EMPLOYER (Name, Address, Phone, Occ)				EMERGENCY CONTACT (Name, Address, Phone, Rel)				REFERRAL SOURCE / AGENCY / TEAM MEMBER	
PHONE: OCC:				JIM HARVEY 1719 ARROW ST ELKO NV 89801 PHONE: (775) 753-8713 REL: FATHER				PHONE: CONTACT NAME:	
GUARANTOR (Name, Address, Phone)				GUARANTOR EMPLOYER (Name, Address, Phone)				FINANCIAL CLASS	
ORTEGA JEAN A 1719 ARROW ST								03 MEDICAID	
ELKO NV 89801				PHONE:				ATTENDING PHYSICIAN	
PHONE: (775) 753-8713 REL: Patient is insured								SEMPEROTT JUSTIN MD 8522 ADMISSION STATUS: DISCHARGE STATUS: 0	
PRIMARY INSURANCE				SECONDARY INSURANCE				TERTIARY INSURANCE	
MEDICAID NV PRIMARY PO BOX 30042									
RENO NV 895203042				PHONE:				PHONE:	
PHONE: (877) 638-3472				POLICY#				POLICY#	
POLICY# 00000161188				GROUP #:				GROUP #:	
GRP NAME:				GRP NAME:				GRP NAME:	
AUTH#:				AUTH#:				AUTH#:	
ORTEGA JEAN A DOB: 10/17/1977 SEX: F REL: Patient is insured				DOB: SEX:				DOB: SEX:	
REL:				REL:				REL:	
CHIEF COMPLAINT:									
BLUNT TRAUMA									
COMMENTS:									
2231 PT BIRA, DUE TO PT CONDITION ER ADMIT CLERKS SIGNED MANUAL CONSENT, NO ID/INS CARD, NOT ABLE TO VERIFY RCP, PER RELAY PT IS ELIG MCAID, R2P RED, NO EST/DEF FOR PT W/ DUAL INS									

HN10001033011

06/05/20 000008794 ORTEGA, JEAN A.

FACESHET

User: HMS NORTHEASTERN NEVADA REGIONAL HOSPITAL
Facility: 26 All Orders History
All Dates for Encounter

Page: 1
Date: 6/09/20
Time: 44

Encounter: 6330187 ORTEGA JEAN A
Date of Birth: 10/17/1977

Order Type: All
Sequenced by: Entered Date.

6/05/20 22:21 Ancillary Order#: 800
Desc: WRIST 4V RT Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Comments: Pain with Trauma/Injury
Ancillary Instructions: Bed Name: 11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

6/05/20 22:21 Ancillary Order#: 700
Desc: FOREARM 2V RT Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Comments: Pain with Trauma/Injury
Ancillary Instructions: Bed Name: 11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

6/05/20 22:21 Ancillary Order#: 600
Desc: FOREARM 2V < Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Comments: Pain with Trauma/Injury
Ancillary Instructions: Bed Name: 11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

6/05/20 22:21 Ancillary Order#: 500
Desc: CT FACIAL BONES NO CONT Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Comments: Facial Pain with Trauma/Injury
Ancillary Instructions: Bed Name: 11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

6/05/20 22:21 Ancillary Order#: 400
Desc: CT HEAD NO CONT Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Comments: Head Trauma with pain
Ancillary Instructions: Bed Name: 11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

User: HMS
Facility: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
All Orders History
All Dates for Encounter

Page: 2
Date: 6/09/20
Time: 44

Encounter: 6330157 ORTEGA JEAN A
Date of Birth: 10/17/1977

Order Type: All
Sequenced by: Entered Date

6/05/20 22:21 Ancillary Order#: 300
Desc: CT CERVICAL SPINE WO:CONT Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Comments: Pain with Trauma/Injury
Ancillary Instructions: Bed Name: 11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

6/05/20 22:21 Ancillary Order#: 200
Desc: CBC WITH DIFF Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Ancillary Instructions: Bed:11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

6/05/20 22:21 Ancillary Order#: 100
Desc: CMP-COMplete METABOLIC PANEL Start: 6/05/20 22:21
Priority: Stat Frequency: ONE TIME Occurrences: 1
Ancillary Instructions: Bed:11
Order Origin: eOrder
Ordering Physician: SEMPSROTT JUSTIN MD MD
Electronically Signed by: SEMPSROTT JUSTIN MD MD 6/05/20 22:21
Entered by: SEMPSROTT JUSTIN MD MD

User: HMS
Facility: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
All Orders History
All Dates for Encounter

Page: 3
Date: 6/09/20
Time: 44

Encounter: 6330157 ORTEGA JEAN A
Date of Birth: 10/17/1977

Order Type: All
Sequenced by: Entered Date.

Legend:

D/C = Discontinue
WBD-BSA = Weight based dose - Body Surface Area
WBD-IBW = Weight based dose - Ideal Body Weight
WBD-Weight = Weight based dose - Weight
INFO = Informational Message

Providers:

SEMPSCOTT JUSTIN MD MD (8502)

*** End of Report ***

REMARKS:

NORTHEASTERN NEVADA REGIONAL HOSPITAL
PHYSICIAN ATTESTATION

PAGE: 1

Date: 6/09/20
Time: 2:00:43

PATIENT NAME: ORTEGA JEAN A AGE: 42 SEX: FEMALE
PATIENT NO: 0330157 CHART NO: 008008794 HISTORY NO: 008008794
ADMISSION DATE: 06/08/20 DISCHARGE DATE: 06/06/20
PC: 03 SRV: 008 EMERGENCY DEPARTMENT
PHYSICIAN: 00582 DISCHARGE STATUS: 02 TO SHORT-TERM HOSPIT.

FINAL DIAGNOSES

Coded by
Finalized by 0078582

FOR

ICD
CODE

PRINCIPAL DIAGNOSIS

TRAUMATIC SUBARACHNOID HEMORRHAGE WITH LOSS O

5066X9A

SECONDARY DIAGNOSES

FRACTURE OF NASAL BONES, INITIAL ENCOUNTER FO
LACERATION WITHOUT FOREIGN BODY OF OTHER PART
ASSAULT BY STRIKE AGAINST OR BUMPED INTO BY A
MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, ON
ALLERGY STATUS TO PENICILLIN
ALLERGY STATUS TO OTHER DRUGS, MEDICATIONS AN

5022XXA

5018XXA

Y042XXA

F329

Z880

Z884

0
0
0 CLEHARS ** *SAME *SAME *f
0 *FCFCA USRATA
0 0 R20R28E OUTC 0 00VPP
0 HEM
0

NORTHEASTERN NEVADA REGIONAL HOSPITAL
PHYSICIAN ATTESTATION

PAGE: 1

Date: 6/07/20
Time: 16:24:00

PATIENT NAME: ORTEGA, JEAN A AGE: 42 SEX: FEMALE
PATIENT NO: 6130167 CHART NO: 000008794 HISTORY NO: 030008794
ADMISSION DATE: 06/06/20 DISCHARGE DATE: 06/06/20
PC: 01 SRV: 008 EMERGENCY DEPARTMENT
PHYSICIAN: 08582 DISCHARGE STATUS: 02 TO SHORT-TERM HOSPITAL

FINAL DIAGNOSES	ICD
Coded By	CODE
Finalized by 008582	

PRINCIPAL DIAGNOSIS	ICD
TRAUMATIC SUBARACHNOID HEMORRHAGE WITH LOSS OF	9060X9A

SECONDARY DIAGNOSES	ICD
FRACTURE OF NASAL BONES, INITIAL ENCOUNTER TO	S022XMA
LACERATION WITHOUT FOREIGN BODY OF OTHER PART	S018XMA
ASSAULT BY STRIKE AGAINST OR BUMPED INTO BY A	Y042XMA
MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, UN	F329
ALLERGY STATUS TO PENICILLIN	Z880
ALLERGY STATUS TO OTHER DRUGS, MEDICINATIONS AN	Z984

CH0R82
User: HMS

NORTHEASTERN NEVADA REGIONAL HOSPITAL
PATIENT DISCHARGE SUMMARY REPORT

Page: 0001
Date: 6/09/20
Time: 42

Patient: ORTEGA JEAN A
Rm/Bed: /
Encounter#: 6330167
Admit Date: 06/05/2020
Height: 5' 00 in / 152.4 cm
Weight: 165.00 lb / 74.83 kg
Diagnosis: BLUNT TRAUMA
Race: AMERICAN INDIAN OR ALASKA NATIVE
Allergies: Ibuprofen, PCN

DOB: 10/17/1977 (42 Y)
Physician: SEMPSROTT JUSTIN MD
History Num: 000008794
Discharge Date: 06/06/2020
Pref Language: English
Sex: F
Ethnicity: NOT HISPANIC OR LATI NO

DISCHARGE MEDICATIONS:

Discharge Reconciliation has not been completed or still in progress

DISCHARGE INSTRUCTIONS:

SPECIAL INSTRUCTIONS:

ALLERGIES:

Allergy	Symptoms	Type	Adverse Event Date
Ibuprofen	Nausea	M	
PCN	Rashes	User	

PATIENT PROBLEMS:

LAB RESULTS:

Performing Location: NORTHEASTERN NEVADA REGIONAL HOSPITAL
2001 ERRECA RT BLVD.
ELKO, NV 89801

*****CHEMISTRY*****

Test	Result	Flag	06/05/2020 22:25 Reference Range	Unit of Measure
CMP-COMplete METABOLIC PANEL				
SODIUM	138		136 - 148	mmol/L
K	3.6		3.5 - 5.2	mmol/L
CHLORIDE	106		98 - 108	mmol/L
BICARB	21.4		21 - 32	mmol/L
ANION GAP	10.6		6 - 18	
GLUCOSE	111	H	70 - 100	mg/dl
BUN	11		7 - 24	mg/dl
CREAT	0.82		0.6 - 1.3	mg/dl
BUN/CREA	13.4		12.0 - 20.0	ratio
EGFR	81		70 -	mL/min/1.73m
SGOT-AST	23		9 - 35	U/L
CA	8.5	L	8.8 - 10.5	mg/dl
ALBUMIN	3.4		3.4 - 5.0	g/dl
PROTEIN	7.4		6.4 - 8.2	g/dl
GLOBULIN	4.0	H	2.3 - 3.5	g/dl
A/G RATIO	0.9	L	1.1 - 1.9	

Continued

CH0R82
User: HMS

NORTHEASTERN NEVADA REGIONAL HOSPITAL
PATIENT DISCHARGE SUMMARY REPORT

Page: 0002
Date: 6/08/20
Time: 42

Patient: ORTEGA JEAN A
Rm/Bed: /
Encounter#: 6330157

DOB: 10/17/1977 (42 Y)
Physician: SEMPSROTT JUSTIN MD
History Num: 000008794

Test	Result	Flag	Reference Range	Unit of Measure
T BIL A	0.2		0.0 - 1.0	mg/dl
ALK PHOS	104		46 - 116	U/L
SGPT-ALT	32		23 - 65	U/L

Performing Location: NORTHEASTERN NEVADA REGIONAL HOSPITAL
2001 ERRECART BLVD.
ELKO, NV 89801

CT DEPARTMENT

CT CERVICAL SPINE WO CONT 06/06/2020

CT FACIAL BONES WO CONT 06/06/2020

CT HEAD WO CONT 06/06/2020

Performing Location: NORTHEASTERN NEVADA REGIONAL HOSPITAL
2001 ERRECART BLVD.
ELKO, NV 89801

*****HEMATOLOGY*****

OBC WITH DIFF

Test	Result	Flag	Reference Range	Unit of Measure
WBC	11.2	H	4.8 - 10.8	X 10(3)
NEUTS	87.0	H	41.7 - 82.3	%
LYMPHS	7.9	L	15.0 - 51.1	%
MONOS	3.6		0.0 - 11.7	%
EOSINS	0.7		0.0 - 5.5	%
BASOS	0.4		0.0 - 3.0	%
NE#	9.7	H	2.5 - 9.0	X 10(3)
LY#	0.9		0.9 - 4.8	X 10(3)
MO#	0.4		0.1 - 0.9	X 10(3)
EO#	0.1		0.0 - 0.7	X 10(3)
BA#	0.1		0.0 - 0.2	X 10(3)
RBC	4.29		4.2 - 5.4	X 10(6)
HGB	10.9	L	12.0 - 16.0	GM/DL
HCT	34.7	L	36.0 - 48.0	%
MCV	80.9		80.0 - 99.0	FL
MCH	25.4	L	27.0 - 34.0	PG
MCHO	31.4		31.0 - 36.0	GM%
RDW	16.4	H	11.5 - 15.2	%
PLATELET	390		140 - 440	X 10(3)
MPV	9.0		6.5 - 12.0	FL

Performing Location: NORTHEASTERN NEVADA REGIONAL HOSPITAL
2001 ERRECART BLVD.
ELKO, NV 89801

RADIOLOGY

Continued

CH0R82
User: HMS

NORTHEASTERN NEVADA REGIONAL HOSPITAL
PATIENT DISCHARGE SUMMARY REPORT

Page: 0003
Date: 6/09/20
Time: 42

Patient: ORTEGA JEAN A
Rm/Bed: /
Encounter#: 6330157

DOB: 10/17/1977 (42 Y)
Physician: SEMPSROTT JUSTIN MD
History Num: 000008794

FOREARM 2V LT	FINAL RESULTED	06/06/2020
FOREARM 2V RT	FINAL RESULTED	06/06/2020
WRIST 4V RT	FINAL RESULTED	06/06/2020

Performing Location: NORTHEASTERN NEVADA REGIONAL HOSPITAL
2001 ERRECAR BLVD.
ELKO, NV 89801

PROCEDURES:

Procedure Description:	Date:	Time:
------------------------	-------	-------

WELLNESS:

Smoking Status

Current smoking status: <Response Removed>

How many years has the patient smoked?

Tobacco use start date:

Tobacco use quit date:

Was the patient offered smoking cessation? <Response removed>

Comment:

VITAL SIGNS:

Blood Pressure:	SBP:	DBP:
Height:	ft .00 in	.00 cm
Weight:	lbs. .00 oz	.000 kg
BSA:		
BMI:		

IMMUNIZATIONS:

<u>Vaccine Name</u>	<u>Series Number</u>	<u>Consent Status</u>	<u>Date Offered/ Administered</u>
pneumococcal polysacchari	1 of 1	Deferred	11/06/13

Location Offered/
Administered
NORTHEASTERN NEVADA REGIONAL HOSPITAL 2001 ERRECAR

<u>Dose/UOM</u>	<u>Route</u>	<u>Site</u>	<u>Manufacturer</u>	<u>Lot Number</u>	<u>Exp. Date</u>	<u>Reactions Noted</u>
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Continued

CH0R82
User: HMS

NORTHEASTERN NEVADA REGIONAL HOSPITAL
PATIENT DISCHARGE SUMMARY REPORT

Page: 0004
Date: 6/09/20
Time: 42

Patient: ORTEGA JEAN A
Rm/Bed: /
Encounter#: 6330157

DOB: 10/17/1977 (42 Y)
Physician: SEMPSROTT JUSTIN MD
History Num: 000008704

PATIENT CARE TEAM:

Care Team Member	Role
MADDEN KIRIN MD	Primary Care
SEMPSON JUSTIN MD	Primary Attending
SEMPSON JUSTIN MD	Referring
SEMPSON JUSTIN MD	Admitting

ENCOUNTER DIAGNOSIS:

Code	System	Diagnosis	Type	Date
S0993XA	ICD10	UNSPECIFIED INJURY OF FAC	Admitting	06/07/2020 14:23
S066X9A	ICD10	TRAUMATIC SUBARACHNOID HE	Primary	06/07/2020 14:23
S022XXA	ICD10	FRACTURE OF NASAL BONES	Secondary	06/07/2020 14:23
S0181XA	ICD10	LACERATION WITHOUT FOREIG	Secondary	06/07/2020 14:23
Y042XXA	ICD10	ASSAULT BY STRIKE AGAINST	Secondary	06/07/2020 14:23
F329	ICD10	MAJOR DEPRESSIVE DISORDER	Secondary	06/07/2020 14:23
Z880	ICD10	ALLERGY STATUS TO PENICIL	Secondary	06/07/2020 14:23
Z888	ICD10	ALLERGY STATUS TO OTHER D	Secondary	06/07/2020 14:23

PHYSICIAN DISCHARGE SUMMARY:

Transcribed Documents:

No transcribed documents available.

Physician	Date	Time	Signature/Initials
Nurse	Date	Time	Signature/Initials
Patient	Date	Time	Signature/Initials

** End of Report **

Encounter Summary

Name: Jean Ortega
Age: 42 yrs DOB: 10/17/1977
Sex: Female
Race: American Indian or Alaska
Native
Marital Status: Married

SSN: 530-02-2358
MRN: 8794
Account#: 6330157
Home phone: (775)753-8713

Work phone:

Chief Complaint: Blunt Trauma
MOA: EMS
Acuity: Emergent (2)

Arrival: 06/05/2020 22:14

Responsible Dept: Trauma

Care Complete Date 06/06/2020
Care Complete Time 00:04
Departure Date 06/06/2020
Departure Time 01:15

Special Handling:
Family Waiting: No
Bed 11

Assigned staff & roles

Name	Role	Specialty
Sempsrott, Justin	Attending Physician	
Pehrson, Sarah P	Primary Nurse	

Outcome: Transfer

Location: University of Utah - Salt Lake City

Condition: Critical

Chief Complaint: Blunt Trauma

Diagnosis: Traumatic subarachnoid hemorrhage, Fracture of nasal bones, Assault by unspecified means, Facial Laceration/ Laceration without foreign body of cheek and temporomandibular area

Prescriptions:

Follow up:

Special Notes:

Attending Physician: Sempsrott

Mid Level Provider:

Accepting Physician: Dr Stoecklein

Orders: CMP, Cbc W/ Auto Diff, CT C Spine W/o, Ct Brain Head W/o, CT Maxillofacial W/o, Forearm 2v Lt, Forearm 2v Rt, Wrist 4v Rt; scaphoid pain, morphine, ADAcet, Lidocaine, Miscellaneous Medication - Non Formulary, Cardiac Monitoring, NS saline lock, Oxygen, Pulse Ox Continuous

Discharge Instruction: Handoff Communication Form

Jean Ortega
MRN: 8794
ACCT: 6330157

Emergency Services

Handoff Communication Form

See attached ER record for more information

S	Situation Patient Name: Ortega, Jean A Age: 42 yrs Gender: Female Admitting Physician: Admitting Diagnosis: Traumatic subarachnoid hemorrhage; Facial Laceration/ Laceration without foreign body of cheek and temporomandibular area; Fracture of nasal bones; Assault by unspecified means Presenting Complaint:	Room Number: University of Utah - Salt Lake City Room type: Dispo Info: Special Handling: Normal																								
B	Background Chief Complaint: Blunt Trauma ED arrival time: 06/05/2020 22:14 Home Meds 1. Celebra 20 mg oral tab 2. busprone 10 mg oral tab Initial VS: 06/05/20 22:15 BP: 139/82 Ob/Gyn: LMP: 6/5/2020	Height: 5ft. 5in. Weight: 80.72Kg Allergies: IBUPROFEN (Nausea), PCN (Rash) Past Medical: Acute depression Past Surgical: Cholecystectomy																								
A	Assessment ED Medications <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th>Drug & Dose</th><th>Route</th><th>Rate</th><th>Infused Over</th><th>Given At</th><th>Given By</th></tr> </thead> <tbody> <tr> <td>morphine 4 mg</td><td>IVP</td><td></td><td></td><td>06/05 22:35</td><td>bb5</td></tr> <tr> <td>ADAcet 0.5 ml₁</td><td>IM</td><td></td><td></td><td>06/05 23:42</td><td>sc</td></tr> <tr> <td>lovetraCETAm 1000 mg</td><td>IV</td><td>1 bolus</td><td></td><td>06/06 00:19</td><td>sc</td></tr> </tbody> </table> Total Intake: 0 ml Total Output: NIH: GCS: Trauma Score: 22:17 - 11 Vent Settings: Abnormal and/or Critical Lab Values: GLUCOSE: 111 mg/dl, CA: 8.5 mg/dl, GLOBULIN: 4.0, A/GRATIO: 0.9, WBC: 11.2 X 10 ³ , NEUTS: 87.0 %, LYMPHS: 7.9 %, NE# 9.7 X 10 ³ , HEMOGLOBIN: 10.9 GM/DL, HEMATOCRIT: 34.7 %, MCH: 25.4 PG, RDW: 16.4 % Fall Risk Assessment: <input type="checkbox"/> Universal fall risk <input type="checkbox"/> Elevated fall risk due to: <input type="checkbox"/> Hx of falls <input type="checkbox"/> Assistive devices <input type="checkbox"/> Confusion <input type="checkbox"/> Incontinence <input type="checkbox"/> Foley <input type="checkbox"/> Weakness <input type="checkbox"/> Dizziness <input type="checkbox"/> Medication IVs: <input type="checkbox"/> LFA <input type="checkbox"/> RFA <input type="checkbox"/> RAC <input type="checkbox"/> LAC <input type="checkbox"/> Central Line Other: _____ Foley: <input type="checkbox"/> Yes <input type="checkbox"/> No NGT: <input type="checkbox"/> Yes <input type="checkbox"/> No Oxygen: <input type="checkbox"/> Nasal Cannula <input type="checkbox"/> Non-rebreather <input type="checkbox"/> CPAP <input type="checkbox"/> Vent NPO? <input type="checkbox"/> Yes <input type="checkbox"/> No Last VS: 06/06/20 00:43 P: 125 O2: 100%		Drug & Dose	Route	Rate	Infused Over	Given At	Given By	morphine 4 mg	IVP			06/05 22:35	bb5	ADAcet 0.5 ml ₁	IM			06/05 23:42	sc	lovetraCETAm 1000 mg	IV	1 bolus		06/06 00:19	sc
Drug & Dose	Route	Rate	Infused Over	Given At	Given By																					
morphine 4 mg	IVP			06/05 22:35	bb5																					
ADAcet 0.5 ml ₁	IM			06/05 23:42	sc																					
lovetraCETAm 1000 mg	IV	1 bolus		06/06 00:19	sc																					
R	Recommendations Tests pending at 06/07/2020 03:15 AM: ETA at destination: _____ Admissions orders <input type="checkbox"/> Attached <input type="checkbox"/> Admitting physician to write <input type="checkbox"/> Call for orders																									

Nurse's Notes

Northeastern Nevada Regional Hospital

Name: Jean Ortega

Age: 42 yrs Sex: Female DOB: 10/17/1977

Arrival Date: 06/05/2020 Time: 22:14

Bed 11

MRN: 8794

Account#: 6330157

Private MD:

Diagnosis: Traumatic subarachnoid hemorrhage; Fracture of nasal bones; Assault by unspecified means; Facial Laceration/ Laceration without foreign body of cheek and temporomandibular area

Presentation:

06/05 Presenting complaint: EMS states: pt was in an alleged physical altercation with significant other. Pt has 22:15 periorbital edema, dried epistaxis, approx 0.25cm laceration to right nose, laceration approx 2cm to right cheek and approx 2cm laceration to left cheek, chest wall bruising noted. Pt c/o of facial pain right forearm pain and neck pain. PTA IV #20 LH, NSL and 2mg Ativan IVP. Blood glucose 110mg/dL. Care prior to arrival: See EMS report. Mechanism of injury: Aggravated assault with fists, by significant other. Trauma event details: The patient did not lose consciousness, injury occurred at home, injury occurred June 05, 2020 injury occurred at 19:30.

22:15 Acuity: Emergent (2).

22:15 Method Of Arrival: EMS: Elko EMS.

22:29 Airway is patent with good air movement. The patient is breathing without difficulty. The patient is pink, warm and dry. Patient is alert and oriented to person, place and time, Patient is moving all extremities appropriately. Pain: Complains of pain in head.

OB/GYN:

22:17 LMP 6/5/2020

Historical:

- Allergies: IBUPROFEN (Nausea); PCN (Rash);
- Home Meds:
 1. Celebra 20 mg oral tab
 2. busprone 10 mg oral tab
- PMHx: Acute depression
- PSHx: Cholecystectomy

- Infectious Disease Screening:: Have you had a cough, shortness of breath or difficulty breathing? No, patient is wearing a mask. Is the patient experiencing any two of the following symptoms? Was the patient having two or more of the above symptoms? No, patient is wearing a mask. Have you or someone in your household tested positive for COVID-19 or are awaiting lab results for COVID-19? No, Have you traveled outside of the US in the last 21 days or had contact with someone that has traveled outside the US and is sick or has been sick in the past 21 days? No, Patient is wearing a mask..
- Social history:: Tobacco Status: Unknown if patient has ever smoked. The patient lives with family, The patient's primary language is English. The patient's preferred language is English..
- Columbia suicide severity rating:: Have you wished you were dead or wish you could go to sleep and not wake up? Past month NO. In the past month have you actually had thoughts of killing yourself? NO. Have you ever done anything, started to do anything, or prepared to do anything to end your life? NO. Assessed Risk Score: No suicide risk identified for this patient..
- Family history:: Reviewed and not pertinent..
- Sepsis Screening:: Resp Rate >20, HR >90; more assessment required. ED provider notified..
- Influenza risk:: Fever: The patient has no complaints of fever..

Screening:

22:26 Abuse Screen:

Patient verbally states he/she is victim of abuse/neglect. ED Provider notified. Police notified. Visitors limited.

Infectious Disease Screening:

Have you had a cough, shortness of breath or difficulty breathing? No, patient is wearing a mask. Is the patient experiencing any two of the following symptoms? Was the patient having two or more of the above

Print Time: 6/7/2020 03:15:58

*** CHART COMPLETE ***

Page 1 of 4

Nurse's Notes Con't

symptoms? Have you or someone in your household tested positive for COVID-19 or are awaiting lab results for COVID-19? Have you traveled outside of the US in the last 21 days or had contact with someone that has traveled outside the US and is sick or has been sick in the past 21 days? No, Patient is wearing a mask.

Nutritional Screening:

No deficits noted.

Tuberculosis screening:

No symptoms or risk factors identified. Never had TB.

06/06 Fall Risk:

00:24 History of Falls: No (0 points). The patient does not have a history of falls.

Cultural/Spirit Needs:

There are no cultural/spiritual considerations for care for this patient.

Assessment:

06/05

22:19 visited this patient and evaluated for pain, information needs and comfort.

22:20

Injury Description: Head injury sustained to right eye, right cheek, nose, left cheek, left eye and mouth. Bruise sustained to right clavicle, left clavicle, anterior aspect of right upper chest and anterior aspect of left upper chest. Laceration sustained to right cheek, nose and left cheek is clean, 0.5 to 2.5 cm long, bleeding moderately, was sustained 1-2 hours ago, is bleeding moderately. Complaints of pain in head. The level of pain that is acceptable is 5 out of 10 on a pain scale. At worst, pain level was 9 out of 10 on a pain scale. **General:** Appears distressed, Behavior is appropriate for age, cooperative, pleasant, quiet. **Neuro:** No deficits noted. Level of Consciousness is awake, alert, obeys commands, Oriented to person, place, time, Speech is normal, Pupils are PERRLA, Patient reports headache in entire. **EENT:** Eyes unable to open eyes due to swelling however RN able to open eyes to assess. **Cardiovascular:** No deficits noted. Heart tones present S1 S2. Rhythm is sinus tachycardia Denies palpitations, shortness of breath chest pain. **Respiratory:** No deficits noted. Breath sounds are clear bilaterally. **GI:** Abd is soft and non-tender X4. **quads, Derm:**

Vital Signs:

Time	B/P	Pulse	Resp	Temp	Pulse Ox	Weight	Height	Pain	Staff
22:15									bb5
22:15					97%				bb5
22:17						90.72 kg	5 ft 5 in. (165.10 cm) (R)	9/10	bb5
22:18					98%				sc
22:30	131 / 73 (auto/)								bb5
22:30					98%				bb5
22:30			16						bb5
22:31									sc
22:37				98.8					bb5
22:45	133 / 71 (auto/)								bb5
22:45					97%				bb5
22:45			15						bb5
22:59			77						sc

Name: Jean Ortega

Print Time: 6/7/2020 03:15:58

MRN: 8794

Account#: 6330157

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Nurse's Notes Con't

06/06 00:22		35					sc
00:23							sc
00:29		20					sc
00:30							sc
00:43				100%			sc

06/06
22:17 Body Mass Index 33.28 (90.72 kg, 165.10 cm)

bb5

Trauma Score (Adult):

Time	Eye Response	Verbal Response	Motor Response	Systolic BP	Respiratory Rate	Glasgow Score	Trauma Score	Staff
22:17	spontaneous(1)	oriented(1)	obeys commands(2)	> 89 mm Hg(4)	> 29 per min(3)	15	11	bb5

ED Course:

22:14 Patient arrived in ED. bb5
 22:14 Patient moved to Waiting. bb5
 22:14 Patient moved to 11. bb5
 22:19 Sempserott, Justin, MD is Attending Physician. jrs
 22:20 Triage completed. bb5
 22:22 Peterson, Sarah P, RN is Primary Nurse. sc
 22:27 Patient has correct armband on for positive identification. Placed in gown. Bed in low position. Call light in reach. Side rails up X2. Trauma Interventions: Cardiac monitor on. Pulse ox on. NIBP on. bb5
 22:35 CMP Sent. bb5
 23:01 Patient prepared / and transported to CT. bb5
 23:01 No physician assisted procedures were completed. Maintain field IV. Dressing intact. Good blood return noted. Site clean & dry. Gauge & site: #20 RH NSL. bb5
 23:03 Patient moved to CT Scan. gr
 23:40 Patient moved to 11. lg

Administered Medications:

Time	Drug & Dose <i>Dispensable & Quantity</i>	Volume	Route	Rate	Infused Over	Site	Delivery	Staff
22:35	morphine 4 mg		IVP			right hand		bb5
06/06 00:43	Follow up: Response: Pain is decreased							sc
06/06 23:42	ADAcet 0.5 ml ¹		IM			left deltoid		sc
06/06 00:43	Follow up: Response: No adverse reaction							sc
00:19	levetiracetam 1000 mg		IV	1 bolus		left hand		sc
00:43	Follow up: IV Status: Completed infusion							sc
00:43	Not Given (patient transferred): Lidocaine (2%) 10 ml infiltration once; to bedside							sc

¹ - Manufacturer: Sanofi Pasteur (Aventis), Exp.: 03/19/2022, Lot #: U6612AA.

Outcome:

Name: Jean Ortega

Print Time: 6/7/2020 03:15:58

MRN: 8794
 Account#: 6330157
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Nurse's Notes Con't

00:04 ER care complete, transfer ordered by MD. jrs
 00:07 Initiated flight transfer via MedX Dispatch. Spoke with Kayla RN, will check weather and call back. bb5
 00:17 RW declined for weather. FW pilot is doing a weather check and they will call back. bb5
 00:31 MedX Dispatched stated that FW crew accepted ETA 15-20 mins. bb5
 00:34 Condition: stable sc
 01:15 Patient left the ED. sc
 01:15 Transfer: The patient was transported by fixed wing. Discharge instructions given to patient, instructed on need for transfer. Patient and/or family voiced understanding of instructions using teach back method. sc
 Discharge Assessment: Patient verbalized understanding of disposition instructions. Patient has no functional deficits. sc

Signatures:

Rangel, Greg	gr	Pehrson, Sarah P. RN	RN	sc
Gill, Lori	lg	Burwell, Beth. RN		bb5
Sempritt, Justin. MD	MD. jrs			

Corrections:

03:36 00:36 Transfer: The patient was transported by fixed wing. sc sc
 03:36 00:36 Discharge instructions given to patient, instructed on need for transfer. Patient and/or family voiced understanding of instructions using teach back method. sc sc
 03:36 00:36 Discharge Assessment: Patient verbalized understanding of disposition instructions. Patient has no functional deficits. sc sc
 05:26 06:06 Presenting complaint: CMS states pt was in an alleged physical altercation with significant 22:15 other. Pt has periorbital edema, dried epistaxis, approx 0.25cm laceration to right nose, laceration approx 2cm to right cheek and approx 2cm laceration to left cheek, chest wall bruising noted. Pt c/o of facial pain, right forearm pain and neck pain. PTA IV #20 LIT. NSL and 2mg Ativan IV. Blood glucose 110mg/dL. bb5 sc

Name: Jean Ortega

Print Time: 6/7/2020 03:15:58

MRN: 8794
 Account#: 6330157
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**Physician
Documentation**

Northeastern Nevada Regional Hospital

Name: Jean Ortega

Age: 42 yrs Sex: Female DOB: 10/17/1977

Arrival Date: 06/05/2020 Time: 22:14

Bed 11

ED Physician Semprott, Justin

HPI:

06/06 This 42 yrs old American Indian or Alaska Native Female presents to ED via EMS with complaints of Blunt Jrs
01:23 Trauma.

01:23 Context of injury: Patient is accompanied to the ED by EMS, who provides additional history. Approximately Jrs
2 hours prior to arrival, she reports being assaulted by her ex-husband. She had loss of consciousness and
has diffuse pain on her face, bilateral arms, and right wrist. In the interim between the initial assault and
now, her face is swollen to the point where she is unable to see, so she also reports being unable to see.
Prior to this, she had no diplopia. She denies abdominal pain, dysuria, increased urinary frequency, skin
rash, fever, or upper respiratory symptoms. She was in her usual state of health prior to this incident.

OB/GYN:

06/05

22:17 LMP 6/5/2020

bb5

Historical:

- Allergies: IBUPROFEN (Nausea); PCN (Rash);
- Home Meds:
 - 1. Celebra 20 mg oral tab
 - 2. buspirone 10 mg oral tab
- PMHx: Acute depression
- PSHx: Cholecystectomy.

- **Infectious Disease Screening:** Have you had a cough, shortness of breath or difficulty breathing? No; patient is wearing a mask. Is the patient experiencing any two of the following symptoms? Was the patient having two or more of the above symptoms? No; patient is wearing a mask. Have you or someone in your household tested positive for COVID-19 or are awaiting lab results for COVID-19? No. Have you traveled outside of the US in the last 21 days or had contact with someone that has traveled outside the US and is sick or has been sick in the past 21 days? No. Patient is wearing a mask.
- **Social history:** Tobacco Status: Unknown if patient has ever smoked. The patient lives with family. The patient's primary language is English. The patient's preferred language is English.
- **Columbia suicide severity rating:** Have you wished you were dead or wish you could go to sleep and not wake up? Past month NO. In the past month have you actually had thoughts of killing yourself? NO. Have you ever done anything, started to do anything, or prepared to do anything to end your life? NO. Assessed Risk Score: No suicide risk identified for this patient.
- **Family history:** Reviewed and not pertinent.
- **Sepsis Screening:** Resp Rate >20, HR >90, more assessment required. ED provider notified.
- **Influenza risk:** Fever: The patient has no complaints of fever.
- **The history from nurses notes was reviewed:** Including home medications listed in patient's chart, and I agree with what is documented up to this point.

ROS:

06/06 All other systems are negative, except as documented below.
01:23

Jrs

Exam:

01:23

Jrs

Constitutional: The patient appears CONSTITUTIONAL. Visibly uncomfortable, but in no acute distress

Print Time: 6/7/2020 03:18:00

*** CHART COMPLETE ***

Page 1 of 5.

Physician Documentation Con't.

HEAD: Extensive swelling and ecchymosis. Bilateral eyes are swollen shut. Lacerations over bilateral zygomatic arches with significant facial swelling across both zygomatic arches and the nasal bridge. EYE: Exam is limited by patient's amount of facial swelling. I am only able to evaluate 1 pupil at a time. They are each 4 mm, reactive. Unable to assess extraocular movements. ENT: Nasopharynx is clear with no septal hematoma. Swelling of nasal bridge. Oropharynx is clear without exudate. No malocclusion or midface instability. Mucous membranes moist, no external abnormalities to ears. TM's are pearly gray without hemotympanum. NECK: Non-tender to palpation. No midline or paraspinal tenderness, swelling, stepoffs, or deformities. Normal range of motion, supple, no lymphadenopathy, no JVD BACK: No midline or paraspinal tenderness, swelling, stepoffs, or deformities to thoracic or lumbar spine. LUNGS: Clear to auscultation bilaterally, no wheezing, rales, or rhonchi. Normal respiratory effort. CHEST: Numerous contusions in various stages of healing across the bilateral breasts and chest wall. Exam performed with RN Sarah P present at the bedside throughout. No rashes or lesions. No clavicular tenderness. No crepitus or subcutaneous emphysema. CARDIOVASCULAR: Tachycardic, regular, no murmurs, rubs, or gallops. Well perfused upper and lower extremities, 2+ = radial pulses. No pedal edema GI: Abdomen is soft, non-tender, non-distended, no rebound, guarding, or rigidity. Negative Murphy's sign, no tenderness at McBurney's point. SKIN: Normal color, warm and dry without rashes. MSK: No gross abnormalities to upper and lower extremities. Full painless range of motion with no swelling or tenderness to bilateral shoulders, elbows, wrists, hips, knees, and ankles. No tenderness over left anatomic snuffbox. Tenderness over right anatomic snuffbox. Tenderness and ecchymoses over bilateral mid forearms. NEURO: Awake, alert, and oriented. Normal strength and sensation to upper and lower extremities. CN II-XII intact with the exception of extraocular movements, which I am unable to assess, no gross cerebellar dysfunction. 5/5 strength to flexion and extension of major upper and lower extremity muscle groups. 2+ = patellar deep tendon reflexes. PSYCH: Appropriate interaction with normal mood and affect. No evidence of thought disorder.

Vital Signs:

Time	B/P	Pulse	Resp	Temp	Pulse Ox	Weight	Height	Pain	Staff
06/05 22:15									bb5
22:15					97%				bb5
22:17						90.72 kg	5 ft. 5 in. (165.10 cm) (R)	9/10	bb5
22:18					98%				sc
22:30	131 / 73 (auto/)								bb5
22:30					98%				bb5
22:30			16						bb5
22:31									sc
22:37				98.8					bb5
22:45	133 / 71 (auto/)								bb5
22:45					97%				bb5
22:45			15						bb5
22:59			77						sc
06/06 00:22			35						sc
00:23									sc
00:29			20						sc

Name: Jean Ortega

MRN: 8794

Account#: 6330157

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Physician Documentation Con't.

00:30								sc
00:43				100%				sc

06/05 Body Mass Index 33.28 (90.72 kg, 165.10 cm)
22:17

bb5

Trauma Score (Adult):

Time	Eye Response	Verbal Response	Motor Response	Systolic BP	Respiratory Rate	Glasgow Score	Trauma Score	Staff
22:17	spontaneous(1)	oriented(1)	obeys commands(2)	> 89 mm Hg(4)	> 29 per min(3)	15	11	bb5

MDM:

22:19 MSE Initiated by Provider.

jrs

23:48

jrs

ED course: I just received a call from the radiologist, who indicated that she had a 5 mm left posterior temporal extra-axial hemorrhage concerning for sub arachnoid versus epidural. Call placed to University of Utah of trauma..

06/06

jrs

00:13 **ED course:** A few minutes ago, I spoke to the initial responding officer on this call. I informed him that she had potentially life-threatening bleeding within her brain and was being transferred to the Trauma Center. Patient's expressed consent to update law enforcement was obtained prior to making the call peer.

01:36

jrs

ED course: Patient status post assault with extensive facial injuries. No evidence of fracture to her bilateral forearms, however, because of the anatomic snuffbox tenderness on her right wrist, and concern for occult scaphoid fracture. Due to her or intracranial hemorrhage, she will be transferred to the University of Utah trauma center. She was transferred before we were able to place a splint or repair the lacerations on her face, however, these are communicated to the receiving team..

Data reviewed: vital signs, nurses notes, old medical records, lab test result(s), radiologic studies.

Time	Order name	Complete Time	Staff
06/05 22:21	CMP	23:04	jrs
06/05 22:21	Cbc W/ Auto Diff	22:51	jrs
06/05 22:21	CT C Spine Wo	16:41	jrs
06/05 22:21	Ct Brain Head Wo	16:39	jrs
06/05 22:21	CT Maxillofacial Wo	16:41	jrs
06/05 22:21	Forearm 2v Lt	16:42	jrs
06/05 22:21	Forearm 2v Rt	16:41	jrs
06/05 22:21	Wrist 4v Rt: scaphoid pain	16:42	jrs
06/05 22:25	morphine 4 mg IVP every 20 minutes; PRN pain 6-10/10	22:35	jrs
06/05 23:04	ADAcet 0.5 ml IM once; Indicated for adults and teenagers 11 to 64 years of age	23:42	jrs
06/06 00:08	levetiracetam 1000 mg IV at 1 bolus bolus	00:19	jrs

Name: Jean Ortega

MRN: 8794

Account#: 6330157

Print Time: 6/7/2020 03:16:00

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Physician Documentation Con't.

06/05 22:21	Cardiac Monitoring	22:35	Jrs
06/05 22:21	NS saline lock	22:36	Jrs
06/05 22:21	Oxygen	22:36	Jrs
06/05 22:21	Pulse-Ox Continuous	22:36	Jrs

Dispensed Medications:

Time	Drug & Dose <i>Dispensable & Quantity</i>	Volume	Route	Rate	Infused Over	Site	Delivery	Staff
06/05 22:35	morphine 4 mg		IVP			right hand		bb5
06/06 00:43	Follow up: Response: Pain is decreased							sc
06/05 23:42	ADAcet 0.5 ml ¹		IM			left deltoid		sc
06/06 00:43	Follow up: Response: No adverse reaction							sc
00:19 00:43	levetiracetam 1000 mg		IV	1 bolus		left hand		sc
00:43	Follow up: IV Status: Completed infusion							sc
00:43	Not Given (patient transferred): Lidocaine (2%) 10 ml infiltration once, to bedside.							sc

¹ - Manufacturer: Sanofi Pasteur (Avantis), Exp: 03/19/2022, Lot #: U6612AA.

Disposition:

01:36 Electronically signed by Sempsrott, Justin, MD at 01:37 on 06/06/2020. Chart complete,

Jrs

Disposition Summary:

06/06/20 00:04

Transfer Ordered

- Transfer Location: University of Utah - Salt Lake City
- Reason: Higher Level of Care
- Condition: Critical
- Problem: new
- Symptoms: have worsened
- Accepting Physician: Dr. Stoecklein (06/06/20 01:15)
- Diagnosis:
 - Traumatic subarachnoid hemorrhage
 - Fracture of nasal bones
 - Assault by unspecified means
 - Facial Laceration/ Laceration without foreign body of cheek and temporomandibular area
- Forms:
 - Handoff Communication Form

Jrs
Jrs
Jrs
Jrs
Jrs
sc
Jrs
Jrs
Jrs
Jrs
Jrs

Critical care time excluding procedures:

01:36 Critical care time: Bedside Care excluding time for separate services: 30 minutes. Consultation: 10 minutes. Family Intervention: 5 minutes. Total time: 45 minutes

Jrs

Signatures:

Dispatcher MedHost
Burwell, Beth, RN

EDMS
bb5

Pehrson, Sarah P, RN
Sempsrott, Justin, MD

RN sc
MD Jrs

Name: Jean Ortega

Print Time: 6/7/2020 03:16:00

MRN: 8794
Account#: 6330157
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Physician Documentation Con't.

Corrections:

01:15 00:04 Dr. Stoecklein

jrs sc

Name: Jean Ortega

Print Time: 6/7/2020 03:16:00

MRN: 8794

Account#: 6330157

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RNR011

CUMULATIVE REPORT

Page: 1

0026

** FINAL **

Print date: 6/07/20

Printed by: NORTSDAYEND

Time: 0:55

NORTHEASTERN NEVADA REGIONAL HOSPITAL

LABORATORY2 CLIA#2900058654

2001 ERREGART BLVD.

GEORGE MARDINI, M.D.

ELKO

NV. 89501

NAME: ORTEGA, JEAN A.

DOB: 10/17/77

STATUS : O/R / 2D

PKT#: 0330157

AGE: 42

ADN DATE: 6/05/20

MRN : 000028794

SEX: F

OSCHG DT: 6/06/20

ADM PHYS: SEMEROTT, JUSTIN MD

*****CHEMISTRY*****

COLLECT	DT	IN	06/05/20 22:25	REFERENCE		UNITS
				LOW	HIGH	
SODIUM			138	136	148	mmol/L
K			3.6	3.5	5.2	mmol/L
CHLORIDE			103	98	108	mmol/L
BICARB			21.4	21	32	mmol/L
ANION GAP			19.2	6	18	
GLUCOSE			111 H	70	100	mg/dl
BUN			11	7	24	mg/dl
CREAT			0.82	0.6	1.3	mg/dl
BUN/CREA			13.4	12.0	20.0	ratio
EGFR			81	30		mL/min/1.73m
SGOT-AST			23	9	33	U/L
CA			8.5 L	8.8	10.5	mg/dl
ALBUMIN			3.4	3.4	5.0	g/dl
PROTEIN			7.4	6.3	8.3	g/dl
GLOBULIN			4.0 H	2.3	3.5	
A/G RATIO			0.9 L	1.1	1.9	
T.BIL A			0.2	0.0	1.0	mg/dl
ALK PHOS			104	46	118	U/L
SGPT-ALT			32	23	35	U/L
REPORTED DT			06/05/20			
TM			22:53			

RROR11

CUMULATIVE REPORT

Page: 2

0026

** FINAL **

Print date: 6/07/20

Printed by: MNERDAYEND.

Time: 0:59

NORTHEASTERN NEVADA REGIONAL HOSPITAL

LABORATORY2 CLIN#290000000000

2001 EBBERTS BLVD.

GEORGE MARDINI, M.D.

ELRO NV. 89001

NAME: ORTEGA, JEAN A.

DOB: 10/17/77

STATUS : O/P / ED

PAT#: 0330157

AGE: 42

ADM DATE: 6/05/20

MR#: 000000794

SEX: F

DSHG DT: 6/06/20

ADMIT: SEMPEROTTI, JUSTIN MD

*****HEMATOLOGY*****

COLLECT DT 06/05/20
TM 22:25

REFERENCE

LOW - HIGH

UNITS

WBC	11.2 H	4.8 - 10.8	X 10 ³ (3)
NEUTS	87.0 H	41.7 - 82.3	%
LYMPHS	7.0 L	15.0 - 51.1	%
MONOS	3.6	0.0 - 11.7	%
EOSINS	0.7	0.0 - 5.5	%
BASOP	0.4	0.0 - 3.0	%
RSI	9.7 H	2.5 - 3.5	X 10 ³ (3)
LYM	0.9	0.9 - 4.8	X 10 ³ (3)
MDI	0.4	0.1 - 0.9	X 10 ³ (3)
EOI	0.1	0.0 - 0.7	X 10 ³ (3)
BNP	0.1	0.0 - 0.2	X 10 ³ (3)
RBC	4.29	4.2 - 5.4	X 10 ⁶ (5)
HGB	10.9 L	12.0 - 16.0	GM/DL
HCT	34.7 L	36.0 - 48.0	%
MCV	80.9	80.0 - 99.0	FL
MCH	25.4 L	27.0 - 34.0	PG
MCR	31.4	31.0 - 56.0	GM%
RDW	16.4 H	11.5 - 15.2	%
PLATELET	390	140 - 440	X 10 ³ (3)
MPV	9.0	6.5 - 12.0	FL

REPORTED DT 06/05/20
TM 22:45

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775)748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000300
MRN: 008794
Exam: CT CERVICAL SPINE WO CONT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report
EXAM:
CT Cervical Spine Without Intravenous Contrast

CLINICAL HISTORY:
Pain with Trauma/Injury

TECHNIQUE:
Axial computed tomography images of the cervical spine without intravenous contrast.

COMPARISON:
No relevant prior studies available.

FINDINGS:
Vertebrae: No acute fracture or malalignment.
Discs/spinal canal/neural foramina: No acute process.
Soft tissues: Unremarkable.

IMPRESSION:
No acute fracture or malalignment.

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:55 PM
Signed By: Schoellerman, Manal
Signed On: 6/5/2020
Transcribed By:

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:55:35

Transcribed On: 6/5/2020

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SCHOELEMAN MANAL MD 2020-06-05 23:55:35

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775)748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000500
MRN: 008794
Exam: CT FACIAL BONES, WQ CONT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report
EXAM:
CT Maxillofacial Without Intravenous Contrast

CLINICAL HISTORY:
Facial Pain with Trauma/Injury

TECHNIQUE:
Axial computed tomography images of the face without intravenous contrast.

COMPARISON:
No relevant prior studies available.

FINDINGS:
Bones/joints: Nasal fracture. Degenerative changes of the TMJs
Soft tissues: Facial soft tissue injuries with soft tissue swelling and edema.
Orbits: Unremarkable.
Sinuses: No acute sinusitis.

IMPRESSION:
Nasal fracture.

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:49 PM
Signed By: Schoellerman, Manal

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:49:31

Signed On: 6/5/2020
Transcribed By:
Transcribed On: 6/5/2020

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SCHIOELLERMAN MANAL MD 2020-06-05 23:49:31

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775)748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000400
MRN: 008794
Exam: CT HEAD WO CONT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report

EXAM:

CT Head Without Intravenous Contrast

CLINICAL HISTORY:

Head Trauma with pain

TECHNIQUE:

Axial computed tomography images of the head/brain without intravenous contrast.

COMPARISON:

No relevant prior studies available.

FINDINGS:

Brain: Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Midline shift: No midline shift.

Ventricles: No ventriculomegaly.

Bones/joints: No acute fracture.

Soft tissues: Facial trauma, see dedicated report.

Sinuses: No acute sinusitis.

Mastoid air cells: No mastoid effusion.

IMPRESSION:

Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Communications:

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 25:44:58

Call Doctor Other

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:45 PM
Signed By: Schoellerman, Manal
Signed On: 6/5/2020
Transcribed By:
Transcribed On: 6/5/2020

Addendum 1

StatRad Final Report

EXAM:

CT Head Without Intravenous Contrast

CLINICAL HISTORY:

Head Trauma with pain

TECHNIQUE:

Axial computed tomography images of the head/brain without intravenous contrast.

COMPARISON:

No relevant prior studies available.

FINDINGS:

Brain: Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Midline shift: No midline shift.

Ventricles: No ventriculomegaly.

Bones/joints: No acute fracture.

Soft tissues: Facial trauma, see dedicated report.

Sinuses: No acute sinusitis.

Mastoid air cells: No mastoid effusion.

IMPRESSION:

Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:44:59

Communications:

06/05/20 23:46 Call Doctor Regarding Other, called Dr. Justin on
06/05/23:46 (-07:00)

Dictated By: Schoellerman, Manal

Dictated On: 6/5/2020

Signed By: Schoellerman, Manal

Signed On: 6/5/2020

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SC/SOELLERMAN MANAL MD 2020-06-05 23:44:59

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775)748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000400
MRN: 008794
Exam: CT HEAD WO CONT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report
EXAM:
CT Head Without Intravenous Contrast

CLINICAL HISTORY:
Head Trauma with pain

TECHNIQUE:
Axial computed tomography images of the head/brain without intravenous contrast.

COMPARISON:
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FINDINGS:
Brain: Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.
Midline shift: No midline shift.
Ventricles: No ventriculomegaly.
Bones/joints: No acute fracture.
Soft tissues: Facial trauma, see dedicated report.
Sinuses: No acute sinusitis.
Mastoid air cells: No mastoid effusion.

IMPRESSION:
Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Communications:

Legally authenticated by SCHIOELLERMAN MANAL MD 2020-06-05 23:44:59

Call Doctor Other.

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:45 PM
Signed By: Schoellerman, Manal
Signed On: 6/5/2020
Transcribed By:
Transcribed On: 6/5/2020

Addendum 1

StatRad Final Report

EXAM:

CT Head Without Intravenous Contrast.

CLINICAL HISTORY:

Head Trauma with pain

TECHNIQUE:

Axial computed tomography images of the head/brain without intravenous contrast.

COMPARISON:

No relevant prior studies available.

FINDINGS:

Brain: Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Midline shift: No midline shift.

Ventricles: No ventriculomegaly.

Bones/joints: No acute fracture.

Soft tissues: Facial trauma, see dedicated report.

Sinuses: No acute sinusitis.

Mastoid air cells: No mastoid effusion.

IMPRESSION:

Extra-axial hemorrhage in the left posterior temporal region measuring approximately 5 mm.

Legally authenticated by SCHOELLERMAN-MANAL MD 2020-06-05 23:44:59

Communications:

06/05/20 23:46 Call Doctor Regarding Other, called Dr. Justin on
06/05 23:46 (-07:00)

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020
Signed By: Schoellerman, Manal
Signed On: 6/5/2020

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:44:39

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775) 748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000600
MRN: 008794
Exam: FOREARM ZV LT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report
EXAM:
XR Left Forearm, 2 Views

CLINICAL HISTORY:
Pain with Trauma/Injury.

TECHNIQUE:
Frontal and lateral views of the left forearm.

COMPARISON:
No relevant prior studies available.

FINDINGS:
Bones/joints: No acute fracture.
Soft tissues: No radiodense foreign body.

IMPRESSION:

No acute fracture

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:25 PM
Signed By: Schoellerman, Manal
Signed On: 6/5/2020
Transcribed By:

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:25:09

Transcribed On: 6/5/2020

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SCHOLLERMAN MANAL AND 2020-06-05 23:25:09

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775)748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000700
MRN: 008794
Exam: FOREARM 2V RT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report
EXAM:
XR Right Forearm, 2 Views

CLINICAL HISTORY:
Pain with Trauma/Injury

TECHNIQUE:
Frontal and lateral views of the right forearm.

COMPARISON:
No relevant prior studies available.

FINDINGS:
Bones/joints: No acute fracture.
Soft tissues: No radiodense foreign body.

IMPRESSION:
No acute fracture.

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:22 PM
Signed By: Schoellerman, Manal
Signed On: 6/5/2020
Transcribed By:
Transcribed On: 6/5/2020

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:22:20

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SCHOLLERMAN MANAL MD 2020-06-05 23:22:20

Northeastern Nevada Regional Hospital
2001 Errecart Blvd
Elko, NV 89801
Phone: (775)748-2030

Name: ORTEGA, JEAN
Exam Date: 6/5/2020
DOB: 10/17/1977 Age 42
Accession: 63301570000800
MRN: 008794
Exam: WRIST 4V RT
Physician: SEMPSROTT, JUSTIN
Facility: NV-NNRH Facility

StatRad Final Report
EXAM:
XR Right Wrist Complete, 3 or More Views

CLINICAL HISTORY:
Pain with Trauma/Injury

TECHNIQUE:
Frontal, lateral and oblique views of the right wrist.

COMPARISON:
No relevant prior studies available.

FINDINGS:
Bones/joints: No acute fracture.
Soft tissues: Soft tissue edema. No radiodense foreign body,
Intravenous catheter.

IMPRESSION:
No acute fracture.

Dictated By: Schoellerman, Manal
Dictated On: 6/5/2020 11:19 PM
Signed By: Schoellerman, Manal
Signed On: 6/5/2020
Transcribed By:

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:18:38

Transcribed On: 6/5/2020

Thank you for referring ORTEGA, JEAN to Northeastern Nevada Regional Hospital.

Legally authenticated by SCHOELLERMAN MANAL MD 2020-06-05 23:18:36

RX0828
 Hospital: 0026
 Rx/Location:
 Nursing Stn:
 Patient: ORTEGA JEAN A. (6330157)
 History Number: 8724
 Height:
 IBW: 0 LB 9.00 oz / 0.000 kg
 Pregnancy:
 Admit Date: 06/05/2020
 Physician: SEMPERETT JUSTIN MD
 Diagnosis: BLUNT TRAUMA
 Allergies: Allergy Change-Please Verify... / Ibuprofen; PCN

NORTHEASTERN NEVADA REGIONAL HOSPITAL
 MONITOR Pharmacy System
 Medication Profile Report

Page: 1 of 2
 Date: 6/06/20
 Time: 00:00:43
 User: HNS

ALL ORDERS
 Room/Bed:
 Age: 42 Y
 (As of: 06/05/2020)
 DOB: 10/17/1977
 Weight:
 BSA: 0.000
 CrCL:
 Lactation:
 Discharge Date: 06/06/2020

PROFILE MEDICATION ORDERS:

Order#	Medication	Dose/UOM	Route	Start/Stop Date	OrderStatus
2540911	sodium chloride 0.9% SOLN NORMAL SALINE 0.9% 100 ML Frequency: ONE	100 mL	IV	6/06/20 1:17 6/06/20 14:13	D/C
Changes:					
2540910	levETIRAcetam (KEFPRA) 500 MG/ KEFPRA (levETIRAcetam) 500 MG/5 Frequency: ONE	500 MG	IV	6/06/20 1:17 6/06/20 14:17	D/C
Changes:					
2540789	lidocaine (XYLOCAINE) 1% SOL XYLOCAINE 1% (lidocaine) 20 ML Frequency: ONE	20 mL	SUBCUT	6/05/20 23:13 6/05/20 23:17	D/C
Changes:					
2540788	tetanus/diphtheria/pertussis D. Tdap (tetanus/diphtheria/pertuss Frequency: ONE	0.5 mL	IM	6/05/20 23:13 6/05/20 23:13	D/C
Changes:					
2540787	lidocaine (XYLOCAINE) 1% SOL XYLOCAINE 1% (lidocaine) 20 ML Frequency: ONE	20 mL	SUBCUT	6/05/20 23:13 6/05/20 23:13	D/C
Changes:					
2540771	morphine sulfate (PF) 4 MG/ML morphine 4 MG/ML Frequency: ONE	4 MG	IV RUSH	6/05/20 22:33 6/05/20 22:33	D/C

Continued on next page

RXOR28
 Hospital . . . : 0026
 Rx Location . . :
 Nursing Stn . . :
 Patient . . . : ORTEGA JEAN A. (6330157)
 History Number: 2724
 Height:
 IBW . . : 0 lb 0.00 oz / 0.000 kg
 Pregnancy . . :
 Admit Date . . : 06/05/2020
 Physician: SEMPSROTT, JUSTIN MD
 Diagnosis: SLUNT TRAUMA
 Allergies: Allergy Change-Please Verify...; Ibuprofen; PCN

NORTHEASTERN NEVADA REGIONAL HOSPITAL
 MONITOR Pharmacy System
 Medication Profile Report

Page: 2 of 2
 Date: 6/09/20
 Time: 06:00:43
 User: RMS

* ALL ORDERS *

DOB . . . : 10/17/1977
 Room/Bed:
 Age . . : 42 Y
 Weight:
 Discharge Date: 06/06/2020
 (As of: 06/05/2020)

PROFILE MEDICATION ORDERS:

Order#	Medication	Dose/Freq	Route	Start/Stop Date	OrderStatus	Qty. #Disch.
--------	------------	-----------	-------	-----------------	-------------	--------------

* * * * * END OF REPORT * * * * *

BT0R15

NORTHEASTERN NEVADA REGIONAL HOSPITAL

Page: 1

Medication Administration Record

Date: 6/09/20

User: RMS

6-05-2020 through 6-09-2020

Shift: ALL

Time: 0:00:42

Order By: admin by, schedule date, schedule time

Administered: ALL

Patient: ORTEGA JEAN A

Patient No.: 6330157 Sex: F Admit Date: 6-05-2020

Physician:

Location: ALL

Order No: 0000000

**** No Records found with selected criteria ****

**** End of Report ****

Page: 1
Date: 6/09/78
Time: 00

Discharge Date: 6/26/20
Sex: F

Carefree:
Medicine

Prüfung

<u>POSSESSION</u>	<u>ROUTE</u>	<u>FREQUENCY</u>	<u>GRD Y/N/D</u>	<u>IMPORTED</u>

प्रति

वि.

Special:
No Special details

Wellness:
No Ketones detected.
Lipidylak 100%
No Irritation detected.

Assessments	First Point of Contact Screenings:
Completed	6/05/20 22:26 NCE6099

have you had any of the following symptoms:
cough, shortness of breath or difficulty breathing, OR any two of the following: Fever, greater than or equal to 100F, chills or repeated shivering with chills, muscle pain, headache, sore throat, new loss of taste or smell – please note that having a fever and already wearing a mask and fully masking/humane care of exposure risk.

HP: see instructions above.

Have you or someone in your household tested positive for COVID-19 or are currently awaiting test results for COVID-19?

HP: Yes, No. The option I chose is what I am not already wearing a mask and fully masking/humane care of exposure risk.

HP: see instructions above.

Have you traveled outside of the US in the last 73 days or had contact with someone that has traveled outside of the US and by stick to the next 73 days?

HP: Yes, No. The option I chose is what I am not already wearing a mask and fully masking/humane care of exposure risk.

HP: see instructions above.

Are you presently one of these types of patient?

None

Care Plans

Patient Care Activities

Flow Sheet

Vitória: Signs

Indices/Outputs

Charge-Instructions

CITIZENSHIP

Electronic Signatures

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 001
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

CURRENT:

Medical Condition:

Admitting Diagnosis: UNSPECIFIED INJURY OF FACE, INITIAL ENCOUNTER

Current Diagnosis:

Height:

Weight:

BSA:

BMI:

Pregnant:

Lactating:

LMP:

Date Time User ID

06/07/20 14:23 QOT8582

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 002
Date: 6/05/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

PATIENT PROBLEMS:

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 003
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

ALLERGIES:

No Known Allergies (Deselected) —
No Known Allergies (Selected) —
Unable to Assess (Deselected) —

Date	Time	User ID
00/00/00	00:00	CQG4714
00/00/00	00:00	UDP1360
00/00/00	00:00	UDP1960

Allergy	Symptoms	Severity	Type	Date	Time	User ID
IBUPROFEN Modify Reason: ERROR IN DOCUMENTATION Modify Comment: Modified by MAP user ru26856	Nausea	Moderate	Drug	06/05/20	22:31	RUZ6856
IBUPROFEN Source of Information: *Patient	Nausea	Moderate	Drug	06/17/13	16:45	RID8350
IBUPROFEN Source of Information: *Patient	Nausea	Moderate	Drug	06/17/13	12:23	CQG4714
PCN Modify Reason: ERROR IN DOCUMENTATION Modify Comment: Modified by MAP user ru26856	Rashes	Yes	Drug	06/05/20	22:31	RUZ6856
PCN Source of Information: *Patient	Rashes	Yes	Drug	06/17/13	16:45	RID8350
PCN Source of Information: *Patient	Rashes	Yes	Drug	06/17/13	12:23	CQG4714

General Comments:

Date	Time	User ID
------	------	---------

Review of allergies:

Date	Time	User ID
------	------	---------

Continued

CH0R80
User: HMS
Hospital: 28

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 004
Date: 6/09/20
Time: 43

Patient Name: ORTEGA-JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y
HSV Code: ED

UNIVERSAL:

Advance Directive:

Copy on Chart:

DNR:

Oxygen:

Ventilator:

Monitor:

IV:

Mobility:

Transportation:

Isolation:

Other Remarks:

Past Med/Surg Proc:

Special Needs:

Date Time User ID

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 005
Date: 6/09/20
Time: 43

Patient Name: ORTEGA-JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

ADVANCE DIRECTIVE:

Date Time User ID

Continued

CH0R80
User: HMS
Hospital: 28

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report:

Page: 006
Date: 6/08/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6380157
Chart Number: 8794

Room/Bed: 11
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

HOME MEDICATIONS:

Medication	Dose/UOM	Route	Frequency	Date	Time	User ID
				Last Dose		Ordered
Celaxa 20 mg tab	MG	PO				U

Date	Time	User ID
06/05/20	22:31	ruz6856

Medication	Dose/UOM	Route	Frequency	Last Dose	Ordered
buspirona 10 mg tab		PO			U

Date	Time	User ID
06/05/20	22:31	ruz6856

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report:

Page: 007
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6380157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

DIETARY:

Food Likes:
Food Dislikes:

Date Time User ID

<u>Allergy</u>	<u>Symptoms</u>	<u>Severity</u>	<u>Type</u>	<u>Date</u>	<u>Time</u>	<u>User ID</u>
----------------	-----------------	-----------------	-------------	-------------	-------------	----------------

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report:

Page: 008
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

SPECIAL:

Date Time User ID

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 009
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

DRUG RESISTANT INFECTIONS:

Date Time User ID

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report:

Page: 010
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 6794

Room/Bed: 1
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

IMMUNIZATIONS:

<u>Vaccine Name:</u>	<u>Series Number</u>	<u>Consent Status</u>
pneumococcal polysacchari	1 of 1	Deferred

<u>Date Offered/ Administered</u>	<u>Location Offered/ Administered:</u>
11/06/13	NORTHEASTERN NEVADA REGIONAL HOSPITAL 2001 ERRECAR

<u>Dose/UOM</u>	<u>Route</u>	<u>Site</u>	<u>Exp. Date</u>	<u>Category</u>
	IM		1/01/01	

Manufacturer

Lot Number

Reactions:

Vaccine Funding Program

Source of Consent: "Patient"
Name of Source: Jean ortega
Refusal/Deferral Reason: PI does not believe that he/she is at risk
Date/Time/User: 11/06/13 19:31 GGO8190

Transmission of Immunization Registry:

Date Time User ID

General Comments:

Date Time User ID

Review of Immunization History:

Date Time User ID

Continued

CH0R80
User: HMS
Hospital: 26

NORTHEASTERN NEVADA REGIONAL HOSPITAL
Clinical History Profile Report

Page: 011
Date: 6/09/20
Time: 43

Patient Name: ORTEGA JEAN A
Patient Number: 6330157
Chart Number: 8794

Room/Bed: /
Date of Birth: 10/17/1977
Age: 42 Y

HSV Code: ED

WELLNESS:

RUZ6856-User ID error,
COG4714-Stacey L Headlee RN, RN
GGO8190-Sherry A. Pretzer RN, RN
QOT8582-TERESA BELT - HIM, HIM
RID8350-Jacquelyn Moore Pharmacist, RX
RUZ6856-Bethany Burwell, RN
UDP1360-Nga Pham, RX

** End of Report **

DATE: 6/09/20
TIME: 0:00:42

NORTHEASTERN NEVADA REGIONAL HOSPITAL
CARE PLAN

PGM: NCOR02
PAGE: 0001

Patient : 6130157 ORTEGA JEAN A
Room/Bed :
Admit Date: 6/03/20
Birth Date: 02/17/1977
Physician: GEMPEROT, JUSTIN MD

Med Rec # : 000008794
Sex / Age : F / 42
Created by:
Updated by:
Reviewed by:

* ALL *

Diagnosis: RIGHT TRAUMA



PATIENT TRANSFER

Name: ORTEGA, JEAN A Patient Number: 6330157
Age: 42 Date of Birth: 10/17/1977 Sex: F MR No.: 000008794
Date: 6/16/2020

Section I: Patient Consent (This section must be signed by the patient and / or responsible party.)

I acknowledge the patient will be transferred to: University of Utah - Emergency Dept
The risks and benefits involved in the transfer have been explained to me, as well as the risks and benefits of foregoing this transfer, and I accept full responsibility for such transfer. I acknowledge that I have received a medical screening for my condition. I give consent to this hospital to release all of my medical records and x-ray films, including information related to HIV, drug / alcohol abuse, or psychiatric treatment.

Transported Via: ☐ ALS ☐ BLS ☐ POV Against Medical Advice
☒ Air Evacuation ☐ POV

I elect to provide my own transportation and decline medical transportation for the transfer. I am aware of the risks and release the physician, this hospital, and its agents from any liability related to transportation to the receiving facility.

Patient / Responsible Party's Signature: N/A Relationship: N/A Date: N/A

Summary of Risks and Benefits:

Risk of Transfer:

☒ Worsening of medical condition including risk to unborn/newborn in the case of pregnancy. Disease specific risks:

Breast

☒ Transportation Risks Air crash, Death

☐ Other: _____

Benefits of Transfer:

☒ Immediate access to specialized practitioner / equipment / monitoring, specifically:

Trauma team / trauma consult

☐ Bed capacity that is not currently available at this facility.

☒ Continuity of care

☐ Other: _____

I release the physician, this hospital and its agents from any liability as a result of this transfer.

Signature of Responsible Party: Unable to open eyes to sign

Signature of Witness: BB

Relationship: Nurse/nurse

Relationship: Nurse/nurse

Date: 6/16/2020

Date: 6/16/2020

Section II: Patient Refusal for Transfer

This risk and benefits involved in the transfer have been explained to me, as well as the risks and benefits of foregoing this transfer, and I have decided to decline the transfer. I accept full responsibility for this decision. I release the physician, this hospital, and its agents from any liability as a result of NOT being transferred.

Signature of Responsible Party: N/A

Relationship: N/A

Date: N/A

Signature of Witness: N/A

Relationship: N/A

Date: N/A

Northeastern Nevada Regional Hospital
Patient Transfer (English)
Page 1 of 2
NN1080/100617

ORTEGA JEAN A
DOB: 10/17/1977 AGE: 42 SEX: F
ADMIT: 06/05/20 ROOM/BED
ATT: SEMPSROTT, JUSTIN MD #1: 8582
MR #: 000008794 PAT #: 6330157

CONSENT

Name: ORTEGA JEAN A Patient Number: 6330157
Age: 42 Date of Birth: 10/17/1977 Sex: F MR No.: 000008794
Date: 10/6/2020

Section III: (This section must be completed and certified by physician who authorizes transfer.)

Check ONE of the following:

- ☒ The patient has been stabilized such that within reasonable medical probability, no material deterioration of the patient's condition is likely to result from transfer.
☐ Patient's condition has not been stabilized.
☐ Pregnant patient is having contractions.

Check ONE of the following:

- ☐ Patient requests transfer.
☐ A legally responsible person acting on the patient's behalf requests transfer.
☒ Based upon the information available at the time of the patient's examination, the medical benefits reasonably expected from the provision of appropriate medical treatment at another medical facility outweigh the increased risks, if any, to the patient (and in case of labor, to the unborn child).

EACH of the following must be satisfied PRIOR to transfer:

- ☒ The Hospital has provided medical treatment within its capacity, which minimizes the risks to the patient (and in case of labor, to the unborn child).
☒ The receiving facility has available space and quality personnel for the treatment of the patient and has agreed to accept the transfer.
Facility: University of Utah Person Accepting: Brian Title: Nurse Time: 0010
Receiving Physician: Dr. Stoccklein MD.
☒ The patient will be transferred by qualified personnel and transportation equipment, as required, including the use of necessary and medically appropriate life support measures.
☒ The patient (or person acting on his / her behalf) has been informed of the risks and benefits of transfer.
☒ Consent form has been signed by the patient (or person on his / her behalf).
☒ Chart, x-rays, labs, and valuables are being sent with the patient.

If transfer is REFUSED check ONE of the following:

- ☐ Patient was offered transfer but refused.
☐ Transfer was offered but refused by legally responsible person acting on the patient's behalf.

Signature of Responsible Party

Relationship

Date

Certification of Physician Authorizing Transfer

I certify that based upon the information available at the time of the patient's transfer, the medical benefits reasonably expected from the provision of appropriate medical treatment at another medical facility outweigh the increased risks, if any, to the patient (and in case of labor, to the unborn child).

Signature of Physician

Date

Time

Signature of Physician

Date

Time

Northeastern Nevada Regional Hospital
Patient Transfer (English)
Page 2 of 2
NN1082/103517

ORTEGA JEAN A
DOB: 10/17/1977 AGE: 42 SEX: F
ADMIT: 06/05/20 ROOM/BED 7
ATT: SEMPSROTT JUSTIN MD # 8582
MR #: 000008794 PAT #: 6330157



CONSENT FOR SERVICES AND FINANCIAL RESPONSIBILITY

Please read carefully and sign the necessary authorizations, releases and agreements so that we may proceed with the care and treatment ordered by your physician.

1. **CONSENT TO HOSPITAL SERVICES:** I understand that a patient's care is directed by his/her attending physician(s) and I consent to any hospital services that are appropriate for my care and as ordered by my physician(s).
2. **MEDICAL EDUCATION:** I understand that residents, interns, medical students, nursing or other students and trainees may observe, examine, treat and participate, with supervision, in my care as part of medical education programs.
3. **PATIENT'S CERTIFICATION AND PAYMENT REQUEST:** I certify that the information given by me in applying for payment under Title XVIII or XIX of the Social Security Act (Medicare) is correct. If I am a recipient of Medicare, I understand that I am responsible for the Medicare deductible, the co-insurance, life-time reserve days, if applicable, and the 20% Part B co-insurance for professional charges. I hereby irrevocably assign payment of all hospitalization and medical benefits applicable and otherwise payable to me to the hospital and to all clinical providers providing care to me at the hospital. Unless otherwise stated in the insurance contract, precertification is ultimately a patient responsibility.
4. **FINANCIAL AGREEMENT:** I, the undersigned, in consideration of the services to be rendered to the patient, am obligated to promptly pay the hospital in accordance with the charges listed in the hospital's charge description master and, if applicable, the hospital's charity care and discount payment policies and state and federal law. The hospital may provide, upon my request, a reasonable estimate of charges for items and services based on the hospital's charge description master. If any account is referred to an attorney or collection agency for collection, I agree to pay reasonable attorney's fees and collection expenses. I understand that, as a courtesy to me, the Hospital may bill my insurance company or health benefit plan, but is not required to do so. I agree and understand that, except where prohibited by law, the financial responsibility for the services rendered belongs to me, the undersigned. I further understand that the obligation to pay the hospital may not be deferred for any reason, including pending legal actions against other parties to recover medical costs. The Hospital shall determine whether and when an account is in default due to non-payment of the balance on the account. I understand that all physicians and surgeons, including the radiologist, pathologist, emergency physician, anesthesiologist, hospitalist, and others, will bill separately for their services.
5. **HOSPITAL TO ACT AS AGENT:** I irrevocably assign and transfer to the hospital all rights, benefits, and any other interests in connection with any insurance plan, health benefit plan (including an employer-sponsored health benefit plan), or other source of payment for my care. This assignment shall include assigning and authorizing direct payment to the hospital of all insurance and health plan benefits payable for this hospitalization or for those outpatient services. I agree that the insurers or plan's payment to the hospital pursuant to this authorization shall discharge its obligations to the extent of such payment. I understand that I am financially responsible for charges not paid according to this assignment, to the extent permitted by state and federal law. I agree to cooperate with and take all steps reasonably requested by this hospital to perfect, confirm, or validate this assignment. I also hereby authorize the Hospital, or the Hospital's designee, to act on my behalf in any dispute with a managed care organization, government health program, any insurance plan or any employer-sponsored health benefit plan with respect to benefits available under such plan. This authorization specifically includes the authorization to file any appeal on my behalf from a denial of benefits and to act as my agent in pursuing such appeals.
6. **CONSENT TO WIRELESS TELEPHONE CALLS AND TEXT MESSAGES:** If at any time I provide a wireless telephone number at which I may be contacted, I consent to receive calls or text messages, including but not restricted to communications regarding billing and payment for items and services, unless I notify the hospital to the contrary in writing. In this section, calls and text messages include but is not restricted to pre-recorded messages, artificial voice messages, automatic telephone dialing devices or other computer assisted technology, or by electronic mail, text messaging or by any other form of electronic communication from the hospital, affiliates, contractors, servicers, clinical providers, attorneys or its agents including collection agencies.
7. **CONSENT TO EMAIL USAGE:** If at any time I provide an email address at which I may be contacted, unless I notify the hospital to the contrary in writing, I consent to receiving discharge instructions, statements, bills, marketing material for new services and payment receipts at that email address from the hospital.

Northeastern Nevada Regional Hospital
Consent for Services (English)
Page 1 of 3
NN1001000118

ORTEGA JEAN A
DOB: 10/17/1977 AGE: 42 SEX: F
ADMIT: 06/05/20 ROOM/BED: /
ATT: SEMSROTT JUSTIN MD #: 8582
MR #: 000008794 PAT #: 6330157

HSV: ED

AGE: 42

SEX: F

ROOM/BED: /

#: 8582

PAT #: 6330157

CONSENT

8. **OUTPATIENT MEDICARE PATIENTS:** Medicare does not cover prescription drugs except for a few exceptions. Per Medicare regulations you are responsible for any drugs furnished you while an outpatient that meet Medicare's definition of a prescription drug. These drugs are commonly referred to as self-administered drugs, as they are typically self-administered but can be administered by hospital personnel. Medicare requires hospitals to bill Medicare patients or other third party payers for these drugs. Medicare Part D beneficiaries may bill Medicare Part D for possible reimbursement of these drugs in accordance with Medicare Drug plan enrollment materials.
9. **INFECTION CONTROL CONSENT:** To protect against possible transmission of blood borne diseases, such as Hepatitis or Human Immunodeficiency Virus (AIDS, HIV), I understand it may be necessary or medically indicated to test my blood while I am a patient of the hospital if, for example, a hospital employee is stuck by a needle while drawing blood, is splashed with blood, or sustains a scalp injury and is exposed to my blood. I understand my blood, as well as the employee's blood will be tested for possible infection with the above mentioned diseases. The test results of both employee and patient will be kept confidential as provided by law.
10. **RELATIONSHIP BETWEEN HOSPITAL AND PHYSICIANS AND OTHER HEALTH CARE PROVIDERS:** I understand that most or all of the health care providers performing services in this Hospital are independent contractors and are not Hospital employees, representatives or agents. Most physicians and surgeons providing services to me, including the radiologist, pathologist, emergency physician, anesthesiologist, hospitalist and others, are independent contractors and are not employees, representatives or agents of the hospital. Likewise, most physician assistants (PA's), Nurse Practitioners (NP's), and Certified Registered Nurse Anesthetists (C.R.N.A.'s) are independent contractors and are not employees, representatives or agents of the hospital. Independent contractors are responsible for their own actions and the Hospital shall not be liable for the acts or omissions of any such independent contractors. I understand that I may ask my Health Care Provider to verify if they are a Hospital employee or an independent contractor.

I understand that I am under the care and supervision of my attending physician. The hospital and its nursing staff are responsible for carrying out my physician's instructions. My physician or surgeon is responsible for obtaining my informed consent, when required, to medical or surgical treatment, special diagnostic or therapeutic procedures, or hospital services provided to me under my physician's general and special instructions.

I understand that physicians providing care at this hospital may be NON-PARTICIPATING providers in my insurance plan and will bill me for their professional services separately from the Hospital bill.

11. **ELECTION TO ELECTRONICALLY TRANSMIT MEDICAL INFORMATION AT DISCHARGE:** I authorize Hospital to provide a copy of the medical record of my treatment, the discharge summary, and a summary of care record to my primary care physician(s), specialty care physician(s), and/or any health care provider(s) or facility(ies) identified on my discharge paperwork to facilitate my treatment and continuity of care. I understand that information disclosed under this paragraph may include, among other things, confidential HIV-related information and other information relating to sexually transmitted or communicable diseases, information relating to drug or alcohol abuse or drug or alcohol dependence, mental or behavioral health information (excluding psychotherapy notes), genetic testing information, and/or abortion-related information. The summary of care record consists of information from my medical record, including among other things, information concerning procedures and lab tests performed during this admission, my care plan, a list of my current and historical problems, and my current medication list. I understand that I may, by placing my request in writing to the Privacy Officer, revoke this authorization at any time. However, I understand that a healthcare organization cannot take back information that has already been released under this authorization. This authorization will expire automatically one year after the date on which my current treatment episode comes to an end.
12. **ELECTION TO PARTICIPATE IN HEALTH INFORMATION EXCHANGE(S):** I hereby authorize Hospital to provide a copy of my medical record or portions thereof to any health information exchange or network with which Hospital participates and to any other participant in such health information exchange or network for purposes of treatment, payment, and health care operations and in accordance with the terms of the participation agreement for that health information exchange or network. A full list of health information exchanges and/or network with which Hospital participates may be found in the Notice of Privacy Practices, which is available on the Hospital website, and this list may be updated from time to time if and when Hospital participates with new health information exchanges or networks. Hospital participates in the LifePoint health information exchange, which is operated by business associates of Hospital identified in the Notice of Privacy Practices, including LifePoint Corporate Services General Partnership. I understand that information disclosed under this paragraph may include, among other things, confidential HIV-related information and other information relating to sexually transmitted or communicable diseases, information relating to drug or alcohol abuse or drug or alcohol dependence, mental or behavioral health information (excluding psychotherapy notes), genetic testing information, and/or abortion-related information. I understand that I may, by placing my request in writing to the Privacy Officer, revoke this authorization at any time. However, I understand that a healthcare organization cannot take back information that has already been released under this authorization. This authorization will expire upon revocation.

Northeastern Nevada Regional Hospital
Consent for Services (English)
Page 2 of 3
NN1001080118

ORTEGA JEAN A HSV: ED
DOB: 10/17/1977 AGE: 42 SEX: F
ADMIT: 06/05/20 ROOM/BED: /
ATT: SEMPSROTT JUSTIN MD #: 8582
MR #: 000008794 PAT #: 6330157

13. **NOTICE OF PRIVACY PRACTICES:** I understand and have been provided with a Notice of Privacy Practices that provides a more complete description of my health care information uses and disclosures.

14. **PATIENT DIRECTORY PREFERENCE:** I have been informed that unless I object, the hospital can use a facility directory to inform visitors or callers, if they ask for me by name, about my location in the facility and general medical condition. Clergy may also receive this information as well as my religious affiliation.

☐ I object to having my name, location and general condition listed in the facility directory.

15. **ELECTION TO REQUEST INTERPRETIVE SERVICES:** In accordance with Sect. 60, of Title VI, the Hospital is committed to ensuring that all patients receive equal access to medical care. To achieve this goal, interpretive services may be utilized or requested at no cost to you.

16. **PATIENT RIGHTS:** I have received a copy of the Patient Rights. I understand these rights and if I have further questions, I will ask the nursing staff.

17. **CONSENT TO PHOTOGRAPH:** I consent to photographs, video or other images where deemed medically necessary by my physician before, during, or after a procedure. This is to provide documentation of my treatment and medical condition and will be kept as a part of my medical record.

18. **ADVANCE DIRECTIVE ACKNOWLEDGMENT:** I understand that I am not required to have an Advance Directive in order to receive medical treatment at this health care facility. I understand that the terms of my Advance Directive that I have executed will be followed by the health care facility and my caregivers to the extent permitted by law.

- ☐ I have executed an Advance Directive
☐ I have not executed an Advance Directive
☐ I would like to formulate an Advance Directive and receive additional information

19. **OTHER ACKNOWLEDGEMENTS:**

a. **Personal Valuables:** I understand that I am responsible for all my personal effects, including personal grooming articles, clothing, eyeglasses, contact lenses, hearing aids, dentures, other prosthetic devices, electronic devices such as cell phones, laptops, electronic readers, iPads/Pods and all other such devices. I understand and agree that the hospital maintains a safe for the safekeeping of money and other valuables; however, except as required by law, the hospital is not liable for any loss or damage to property that is secured in the safe.

b. **Smoke Free Facility Policy:** The Hospital is a smoke free facility. I understand that while I am a patient at the Hospital I may not use tobacco products.

c. **Weapons / Explosives / Drugs:** I understand and agree that the hospital is a weapons, explosives, illegal substance or drug and alcohol free facility. I understand that while I am a patient at the Hospital I may not have these items in my room or with my belongings. If the hospital believes I have any of the above mentioned items the hospital may search my room and belongings. If found, the items may be confiscated, disposed appropriately or turned over to the law enforcement authorities.

20. **MATERNITY PATIENTS:** If I deliver an infant(s) while a patient of this hospital, I agree that each provision of this Consent for Services and Financial Responsibility applies to the infant(s).

I have read and fully understand this Patient Consent and Financial Agreement and been given the opportunity to ask questions. I acknowledge that I either have no questions or that my questions have been answered to my satisfaction.

06/05/20 22:24

Signature of Patient or Legal Representative for Health Care Hospital Services If Other Than Patient

Date and Time

Admit Clerk

Relationship to Patient

Admit Clerk

Reason individual is Unable to Sign, i.e., Minor or Legally Incompetent

Signature of Witness

06/05/20 22:24

Date and Time

Northeastern Nevada Regional Hospital
Consent for Services (English)
Page 3 of 3
NN1001080118

ORTEGA JEAN A
DOB: 10/17/1977 AGE: 42 SEX: F
ADMIT: 06/05/20 ROOM/BED: /
ATT: SEMPSROTT JUSTIN MD #: 8582
MR #: 000009794 PAT #: 6330157

ELKO JUSTICE COURT
STATE OF NEVADA EXHIBIT #: 16 ✓
MARKED FOR IDENTIFICATION:
ADMITTED IN EVIDENCE: ✓
CASE #: ELJC CR-F-20-2587

PLAINTIFF EXHIBIT NO: 61
CASE NO.: DC-CR-20-159
DISTRICT COURT: JUDGE MASON SIMONS
DATE MARKED: 6/8/2021
DATE ADMITTED: 10/15/21
CLERK: MM

STIPULATION OF FACT:

The terms Subdural Hematoma and Nasal Fracture are defined as follows:

A Subdural Hematoma develops when blood veins that are located between the membranes covering the brain (the meninges) leak blood after an injury to the head. This is a serious condition since the increase in intracranial pressure can cause damage to brain tissue and loss of brain function.

A Nasal Fracture is a break in the bone over the ridge of the nose. It usually results from a blunt injury and is one of the most common facial fractures. Symptoms of a broken nose include pain, blood coming from the nose, bruising around the eyes, misshapen appearance, swelling, and difficulty breathing through the nose. Serious nose injuries can cause problems that require immediate attention. However, for minor nose injuries, the doctor may prefer to see the victim after the swelling subsides to evaluate the extent of the injury.

PLAINTIFF EXHIBIT NO: 90
CASE NO.: DC-CR-20-159
DISTRICT COURT: JUDGE MASON E. SIMONS
DATE MARKED: ~~06/10/2021~~ 6/15/21
DATE ADMITTED: 6/15/21
CLERK: BM



ELKO COUNTY SHERIFF'S OFFICE

SHERIFF

SHERIFF JIM PITTS

Voluntary Written Statement

Reporting Person

Last Name: <u>Yowell Daryn</u>		First Name: <u>Daryn</u>		MI: <u>K</u>	
Street Address: <u>HC 30 Box #4</u>		City: <u>Spring Creek</u>		State: <u>NV</u>	Zip: <u>89815</u>
DL/ID #: _____		DL/ID State: _____		Home Ph. #: _____	
Cell Ph. #: <u>(775) 387-7377</u>	Other Ph. #: <u>Angel's ORTEGA Phone</u>		Email: <u>yowell.daryn@pythian.com</u>		
DOB: <u>6/13/87</u>	Age: <u>34</u>	Ethnic Background: <u>N/A</u>	Sex: <u>Male</u>	Height: <u>5'10"</u>	Weight: <u>180</u>
Eyes: <u>Blue</u>	Hair: <u>Brown</u>	Employer / Occupation: <u>Carboy</u>			

Date of Incident: <u>6/5/20</u>	Time of Incident: <u>2000</u>	Location of Incident: <u>Mountain City Highway</u>
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I, Daryn Ross Yowell, do hereby voluntarily, make the following statement without threat, coercion, offer of benefit, or favor by any persons whomsoever.

I asked Jean Angel Ortega for a ride home

*Jean Phone date - time stamp

She agreed and picked me up at Rick Francis house. On the way back to her hotel room (Room #1 American Inn) She became violent. Struck me repeatedly. She main aggressor struck myself 1st and approximately 20-50 times. I struck back inflicting damage with each counterstrike. We got into a fight.

Her eyes were damaged during altercation. She asked me to drive. She couldn't see I was driving so I proceeded home. During Drive home she became more and more violent. She is on parole for stabbing her dad, I stopped vehicle after nearly wrecking. And walked home. I was apprehended at my home. I didn't want her to violate parole conditions so I left. My face and wounds also but is just domestic violence. I would appreciate the kidnapping charge. Dr. Regent

*Cell Phone Jean Angel ORTEGA

Text Message

6/5/20

Caution! By signing this document, I certify or declare, under penalty of perjury under the laws of the State of Nevada, that the foregoing statement is true and correct to the best of my knowledge. Furthermore, I am also aware that making a false or misleading report is a crime. Both civil, as well as criminal action may be taken against a party who deliberately does so. (NRS 207.280; 199.210; 41.508)

Statement Written By: Daryn Yowell Print Name: Daryn Yowell Date: _____

Deputy: Beck, Tyler 7/20/20 Date: 6-Jun-2020 Case #: _____

Page 11 of 11

PLAINTIFF EXHIBIT NO: 62
CASE NO.: DC-CR-20-159
DISTRICT COURT: JUDGE MASON SIMONS
DATE MARKED: 6/8/2021
DATE ADMITTED: 6/11/2021
CLERK: MM



Elko County Sherriff's Office

Voluntary Written Statement

Reporting Person

Last Name: <u>Yowell</u>		First Name: <u>Darwin</u>		MI: <u>R</u>	
Street Address: <u>HC 30 Box #4</u>		City: <u>Spring Creek</u>		State: <u>NV</u>	Zip: <u>89815</u>
DL / ID #:		DL / ID State:		(Optional) SS #: <u>530-01-9521</u>	
Home Ph. #:		Cell Ph. #:		Other Ph. #:	
Email:		DOB: <u>10/3/83</u>	Age: <u>38</u>	Ethnic Background: <u>NA</u>	Sex: <u>Male</u> / Female
Height: <u>5'11"</u>	Weight: <u>180</u>	Eyes: <u>Bue</u>	Hair: <u>Brown</u>	Employer / Occupation:	

Date of Incident: <u>June 5 20</u>	Time of Incident: <u>morning</u>	Location of Incident: <u>American Inn</u>
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I, Darwin Yowell, do hereby voluntarily, make the following statement without threat, coercion, offer of benefit, or favor by any persons whomsoever.

June 5 2020 Jean Ortega and I had sex three times 2 oral 1 anal - During first sex she bit my penis hard enough to leave a scar (Teethmarks): Front: I received a anal Bite that day hard enough to leave scars. I believe this information is vital in my upcoming trial June 14 2021. I did not give my consent or permission to bite me either time. I noticed the scar in isolation E block February 2021. It happened at American Inn Jean Ortega's Room. This happened in the morning.

Caution! By signing this document, I certify or declare, under penalty of perjury under the laws of the State of Nevada, that the foregoing statement is true and correct to the best of my knowledge. Furthermore, I am also aware that making a false or misleading report is a crime. Both civil, as well as criminal action may be taken against a party who deliberately does so. (NRS 207.280; 199.210; 41.508)

Statement Written By: Darwin Yowell Print Name: Darwin Yowell Date: 5/14/21

Deputy:	Date:	Case #:
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Page 1 of 1

PLAINTIFF EXHIBIT NO: 63
CASE NO.: DC-CR-20-159
DISTRICT COURT: JUDGE MASON SIMONS
DATE MARKED: 6/8/2021
DATE ADMITTED: 6/10/21
CLERK: MM

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CASE NO. DC-CR-20-159
DEPT. NO. 3

FOURTH JUDICIAL DISTRICT COURT
**ORIGINAL
FILED IN OPEN COURT**

Date: 6/17/21

Time: 1:44 pm

Clerk: B.M.

FOURTH JUDICIAL DISTRICT COURT

COUNTY OF ELKO, STATE OF NEVADA

STATE OF NEVADA,

Plaintiff,

vs.

VERDICT

DARWYN ROSS YOWELL,

Defendant.

We, the jury being duly empaneled in the above entitled matter find the Defendant:

(Check only one of the six boxes below):

- ☐ Guilty: Kidnapping in the First Degree with Substantial Bodily Harm
- ☐ Guilty: Kidnapping in the First Degree
- ☐ Guilty: Kidnapping in the Second Degree
- ☐ Guilty: Felony Coercion
- ☐ Guilty: Misdemeanor Coercion
- ☒ Not Guilty

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(Check only one of the four boxes below):

- ☒ Guilty: Domestic Battery Resulting In Substantial Bodily Harm
- ☐ Guilty: Battery with Substantial Bodily Harm
- ☐ Guilty: Domestic Battery
- ☐ Not Guilty

DATED this 17th day of June, 2021.

Steven Gross
FOREPERSON - Signature