

EASTERN IDAHO REGIONAL MEDICAL CENTER (COCID)
EMERGENCY PROVIDER REPORT
REPORT#:1103-0041 REPORT STATUS: Signed
DATE:11/03/16 TIME: 0829

PATIENT: WALTERS, CHRISTOPHER ALAN UNIT #: D000674833
ACCOUNT#: D00327498867 ROOM/BED:
DOB: 10/17/50 AGE: 66 SEX: M PCP PHYS: Ward, Reed I DO
SERVICE DT: 11/03/16 AUTHOR: Kovac, Cory PA
REP SRV DT: 11/03/16 REP SRV TM: 0829
* ALL edits or amendments must be made on the electronic/computer document *

KOVAC, CORY 11/03/16 0829:
HPI-Extremity Prob Lower

General

Confirmed Patient Yes
Patient Type New patient

Presentation

Chief Complaint Leg problem L (leg swollen)
Hx Obtained From Patient

Free Text HPI Notes

Free Text HPI Notes

66-year-old female presents to the emergency department this morning for evaluation of his left leg. He states he is living at Mount Vernon assisted living in town and the nurse last night noticed that his leg was more swollen and discolored. He says that he started to notice more swelling and discomfort in the left leg about one week ago. The nurse recommended that he come to the emergency room for evaluation. He states that he has a history of DVTs in both lower legs and has had them multiple times in the past. He has also had pulmonary embolisms in the past. He denies having any chest pain or shortness of breath at this time. He states he has chronic edema in his legs are little more swollen than usual but he had does have pain in the left calf area at this time. He denies any fevers or signs of skin infection at this time.

Risk-Extremity Prob Lower

Risk Stratification

Well's Criteria for DVT

Well's Criteria for DVT	Response	Value
Active Cancer?	No	0
Local Tend Deep Veinous Sys?	Yes	1
Calf Swelling > 3cm?	Yes	1
Pit Edema in Symptomatic Leg?	Yes	1
Previous Documented DVT?	Yes	1

Patient: WALTERS, CHRISTOPHER ALAN
Unit#:D000674833
Date: 11/03/16
Acct#:D00327498867

Total		4
-------	--	---

Well's DVT Score > 1, high risk for DVT
Deep Vein Thrombosis Risk factors reviewed, Prior DVT/PE

Review of Systems

Focused Review of Systems

Constitutional

Denies: Fever, Weakness - generalized.

Musculoskeletal

Reports: Extremity pain, Extremity swelling.

Skin

Reports: Swelling. Denies: Abrasion, Abscess, Bruising, Redness.

Past Medical History - Adult

Stated Complaint LEFT LEG SWELLING

Allergies

Coded Allergies:

enoxaparin (From LOVENOX) (RASH 10/26/16)
vancomycin (RASH 10/26/16)

Home Medications

Reported Medications

RIVAROXABAN (XARELTO) 20 MG PO DAILY
OMEPRAZOLE 20 MG PO DAILY
FUROSEMIDE (LASIX) 20 MG PO BID
POTASSIUM CHLORIDE (KLOR-CON) 20 MEQ PO BID

Review of Nursing Notes Rev avail, and agree

Additional Medical History

chronic DVT, C. difficile, peripheral vascular disease, staph infections, pulmonary embolism, lower extremity cellulitis, left hip osteoarthritis, diverticulosis, , hiatal hernia, chronic bilateral lower extremity edema, CHF, obesity

Additional Surgical History

Melanoma on his neck, and lower left leg, polyps in the colon,

Smoking status for patients 13 years old or older: Never Smoker

Free Text PMH Notes

Patient states that he came take fragmentin in and heparin

Patient: WALTERS, CHRISTOPHER ALAN
Unit#: D000674833
Date: 11/03/16
Acct#: D00327498867

Physical Exam

Initial Vital Signs Vital Signs

First Documented:

	Result	Date Time
Pulse Ox	92	11/03 0802
B/P	123/76	11/03 0802
Temp	96.9	11/03 0802
Pulse	89	11/03 0802
Resp	24	11/03 0802

Last Documented:

	Result	Date Time
Pulse Ox	97	11/03 1106
B/P	132/76	11/03 1106
Temp	97.8	11/03 1106
Pulse	73	11/03 1106
Resp	16	11/03 1106

Initial VS Reviewed, Vital signs normal

Basic Physical Exam

Basic PE GEN: Well appearing/NAD

Focused PE

General/Const

General/Const Awake, Alert, Well appearing, Not toxic appearing

Appearance/Presentation

Obese, morbidly.

Resp/Chest

Respiratory/Chest Atraumatic, Breath sounds NL, Breath sounds = bilat, No respiratory distress, No rales, No stridor, No chest tenderness, No chest wall deformity, No crepitus

Cardiovascular

Cardiovascular Heart rate NL, Regular rhythm, Heart sounds NL

Lower Extremities**

Text/Dict Notes

Distal to the knee discoloration consistent with peripheral vascular disease. He does have bilateral +1 pitting edema. Legs do not feel cool to the touch He also has bilateral same temperature noted. No signs of cellulitis. Pulses bilaterally intact

Patient: WALTERS, CHRISTOPHER ALAN
 Unit#: D000674833
 Date: 11/03/16
 Acct#: D00327498867

Right Leg/Calf

Swelling present. Negative: Tenderness present, Ecchymosis present.

Left Leg/Calf

Swelling present, Tenderness present. Negative: Ecchymosis present, Erythema present, Warmth present.

Ankle/Foot **

Text/Dict Note

As described above. Patient also has dry flaky skin and thickened nails on his bilateral toes.

Skin

Text/Dict Notes

As described above

Neurologic

Neurologic Oriented X3, Speech NL, No motor deficits, No sensory deficits, CN II - XII intact, Reflexes equal bilat, Cerebellar NL, Memory NL

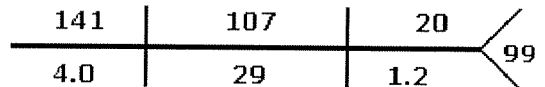
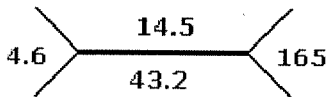
Interpretation & Diagnostics

Lab Results Interpretation

Results

Laboratory Tests

11/03/16 0840:



Laboratory Tests:

	11/03 0845	11/03 0843	11/03 0840	11/03 0840	11/03 0840
Chemistry					
Sodium (136 - 145 MEQ/L)					141
Potassium (3.5 - 5.1 MEQ/L)					4.0
Chloride (100 - 110 MEQ/L)					107
Carbon Dioxide (22 - 29 MEQ/L)					29
BUN (6 - 22 MG/DL)					20
Creatinine (0.6 - 1.3 MG/DL)					1.2
Est GFR (Non-Af Amer) (60 - 116 ML/MIN)					> 60
Glucose (70 - 99 MG/DL)					99
POC Lactic Acid (0.5 - 2.2 MMOL/L)	1.0				

Patient: WALTERS, CHRISTOPHER ALAN
 Unit#: D000674833
 Date: 11/03/16
 Acct#: D00327498867

Calcium (8.4 - 10.1 MG/DL)			8.5
Total Bilirubin (0.1 - 1.0 MG/DL)			0.5
AST (8 - 28 UNITS/L)			13
ALT (14 - 44 UNITS/L)			26
Total Alk Phosphatase (50 - 136 UNITS/L)			69
Total Creatine Kinase (26 - 308 UNITS/L)		60	
CK-MB (CK-2) (0 - 5 NG/ML)			1
POC Troponin I (0.00 - 0.08 NG/ML)	0.00		
Troponin I (0.00 - 0.04 NG/ML)		< 0.02	
C-Reactive Protein (0.0 - 1.0 MG/DL)			0.6
Total Protein (6.4 - 8.2 G/DL)			6.8
Albumin (3.4 - 5.0 G/DL)			3.3 L
Coagulation			
PT (9.0 - 12.5 SECONDS)			12.8 H
INR (2.0 - 3.5 THERAPY)			1.2 L
APTT (22 - 36 SECONDS)			31
Hematology			
WBC (4.0 - 10.5 K/MM3)			4.6
RBC (4.40 - 5.90 M/MM3)			4.42
Hgb (13.5 - 17.5 G/DL)			14.5
Hct (39.8 - 52.2 %)			43.2
MCV (80 - 99 FL)			97.8
MCH (26.6 - 33.8 PG)			32.9
MCHC (32.0 - 36.0 G/DL)			33.6
RDW (11.5 - 14.5 %)			14.1
Plt Count (150 - 450 K/MM3)			165
MPV (6.5 - 11.0 FL)			7.9
Gran % (47.0 - 76.0 %)			59.0
Gran # (1.2 - 8.0 K/MM3)			2.7
Lymphocytes % (26.0 - 42.0 %)			27.3
Monocytes % (4.0 - 10.0 %)			9.2
Eosinophils % (0.0 - 5.0 %)			3.6
Basophils % (0.0 - 2.0 %)			0.9
Lymphocytes # (1.0 - 4.4 K/MM3)			1.3
Monocytes # (0.2 - 1.0 K/MM3)			0.4
Eosinophils # (0.0 - 0.6 K/MM3)			0.2
Basophils # (0 - 0.2 K/MM3)			0.0
ESR Westergren (0 - 10 MM/HR)			15 H

Recent Impressions:

Ultrasound - US DUP VEIN BIL 11/03 0935

*** Report Impression - Status: SIGNED Entered: 11/03/2016 1028

Patient: WALTERS, CHRISTOPHER ALAN
Unit#:D000674833
Date: 11/03/16
Acct#:D00327498867

Impression:

No deep venous thrombosis in either lower extremity.

Varicose vein identified in the area of patient pain in the medial left calf.

** Electronically Signed by David Warden MD on 11/3/2016 10:24 AM **
Impression By: DMDDRW - DAVID R. WARDEN III, M.D.

Lab & Imaging Statement

Laboratory & radiographic studies reviewed and considered in the medical decision-making.

Point of Care Testing

Pulse Oximetry

Pulse Ox % 92

On: Room air

Interpretation Interpreted by me, Pulse oximetry normal

Time 0839

Re-Evaluation & MDM

Free Text MDM Notes

Free Text MDM Notes

I did discuss with the patient the results of the ultrasound and the labs. He remained stable during his duration in the emergency department. He will be discharged back to his home and follow-up with his PCP as instructed.

I have considered all of the elements of the relevant differential diagnosis, the patient is stable and has no other emergency medical condition obviously present at this time. They will be discharged home.

ED Course

Medication(s) Ordered

Medication(s) Ordered:

Central Nervous System Agents

Medication	Dose	Sig/Sch Route	Start time Stop Time	Status	Last Admin
Morphine Sulfate/	4 MG	Q30M PRN PRN	11/03 0830	DCD	

Patient: WALTERS, CHRISTOPHER ALAN
 Unit#: D000674833
 Date: 11/03/16
 Acct#: D00327498867

| Dextrose IV | | |

Gastrointestinal Drugs

Medication	Dose	Sig/Sch Route	Start time Stop Time	Status	Last Admin
Ondansetron HCl	4 MG	Q30M PRN IV	11/03 0830	DCD	

**Re-Evaluation/Progress
 Compartment Syndrome**

There are no signs or symptoms of compartment syndrome in the injured extremity at the time of this examination. Any pain the patient has is in proportion to the injury, the peripheral circulation is intact, capillary refill is not delayed, and there is no numbness, tingling or paresthesia.

Patient Discharge & Departure

**Vital Signs/Condition
 Vital Signs**

First Documented:

	Result	Date Time
Pulse Ox	92	11/03 0802
B/P	123/76	11/03 0802
Temp	96.9	11/03 0802
Pulse	89	11/03 0802
Resp	24	11/03 0802

Last Documented:

	Result	Date Time
Pulse Ox	97	11/03 1106
B/P	132/76	11/03 1106
Temp	97.8	11/03 1106
Pulse	73	11/03 1106
Resp	16	11/03 1106

All vital signs available at the time of this entry have been reviewed.

Condition Improved, Stable

Patient: WALTERS, CHRISTOPHER ALAN
Unit#:D000674833
Date: 11/03/16
Acct#:D00327498867

Clinical Impression

Clinical Impression

Primary Impression: Bilateral lower extremity edema

Secondary Impressions: Peripheral vascular disease of lower extremity, Varicose veins of left leg with edema

Disposition Decision

Discharge

Discharged to Home Yes

Time 1046

Date 11/03/16

Discharge/Care Plan

Counseled Regarding Diagnosis, Lab results, Imaging studies, Need for follow-up, When to return to ED

Discharge Note

I have spoken with the patient and/or caregivers. I have explained the patient's condition, diagnoses and treatment plan based on the information available to me at this time. I have answered the patient's and/or caregiver's questions and addressed any concerns. The patient and/or caregivers have as good an understanding of the patient's diagnosis, condition and treatment plan as can be expected at this point. The vital signs have been stable. The patient's condition is stable and appropriate for discharge from the emergency department.

The patient will pursue further outpatient evaluation with the primary care physician or other designated or consulting physician as outlined in the discharge instructions. The patient and/or caregivers are agreeable to this plan of care and follow-up instructions have been explained in detail. The patient and/or caregivers have received these instructions in written format and have expressed an understanding of the discharge instructions. The patient and/or caregivers are aware that any significant change in condition or worsening of symptoms should prompt an immediate return to this or the closest emergency department or a call to 911.

BLOXHAM, BRANDON D. 11/03/16 1845:
HPI-Extremity Prob Lower

General

Initial Greet Date/Time 11/03/16 0804

Physical Exam

Patient: WALTERS, CHRISTOPHER ALAN
Unit#:D000674833
Date: 11/03/16
Acct#:D00327498867

Initial Vital Signs
Vital Signs

Interpretation & Diagnostics

Lab Results Interpretation
Results

Re-Evaluation & MDM

ED Course
Medication(s) Ordered

Patient Discharge & Departure

Vital Signs/Condition
Vital Signs

Supervising Physician Note
MidLv Saw Pt Alone

I have reviewed the PA/NP's note and plan of care. I was available for consultation as needed at all times during the patient's visit in the emergency department. I agree with the clinical impression, plan and disposition.

Electronically Signed by Kovac,Cory PA on 11/03/16 at 1049
Electronically Signed by Bloxham,Brandon D DO on 11/03/16 at 1846

RPT #: 1103-0041
END OF REPORT

RUN DATE: 11/04/16
RUN TIME: 0202
PAGE NUMBER: 1

EASTERN IDAHO REGIONAL MEDICAL CENTER
3100 CHANNING WAY
IDAHO FALLS, IDAHO 83403-2077
(208) 529-6040
HPF LAB Discharge Summary Report w/o Pathology

PAGE 1

PATIENT: WALTERS, CHRISTOPHER ALAN ACCT #: D00327498867 LOC: D.ED U #: D000674833
AGE/SX: 66/M ROOM: REG: 11/03/16
REG DR: Rosenberg, Jeff V DO STATUS: DEP ER BED: DIS:

HEMATOLOGY

Date Time	Reference	Units	11/3/16 0840				
WBC	4.0-10.5	K/MM3	4.6				
RBC	4.40-5.90	M/MM3	4.42				
HGB	13.5-17.5	G/DL	14.5				
HCT	39.8-52.2	%	43.2				
MCV	80-99	FL	97.8				
MCH	26.6-33.8	PG	32.9				
MCHC	32.0-36.0	G/DL	33.6				
RDW	11.5-14.5	%	14.1				
PLT	150-450	K/MM3	165				
MPV	6.5-11.0	FL	7.9				
GRAN %	47.0-76.0	%	59.0				
LYMPH %	26.0-42.0	%	27.3				
MONO %	4.0-10.0	%	9.2				
EOS %	0.0-5.0	%	3.6				
BASO %	0.0-2.0	%	0.9				
GRAN #	1.2-8.0	K/MM3	2.7				
LYMPH #	1.0-4.4	K/MM3	1.3				
MONO #	0.2-1.0	K/MM3	0.4				
EOS #	0.0-0.6	K/MM3	0.2				
BASO #	0-0.2	K/MM3	0.0				
SED RATE	0-10	MM/HR	15	H			

Patient: WALTERS, CHRISTOPHER ALAN Age/Sex: 66/M Acct#D00327498867 Unit#D000674833

RUN DATE: 11/04/16
RUN TIME: 0202
PAGE NUMBER: 2

EASTERN IDAHO REGIONAL MEDICAL CENTER
3100 CHANNING WAY
IDAHO FALLS, IDAHO 83403-2077
(208) 529-6040
HPF LAB Discharge Summary Report w/o Pathology

Patient: WALTERS,CHRISTOPHER ALAN #D00327498867 (Continued)

C O A G U L A T I O N

Date Time	Reference	Units		11/3/16 0840				
PT	9.0-12.5	SECONDS		12.8	H			
INR	2.0-3.5	THERAPY		1.2	L			
PTT	22-36	SECONDS		31(A)				

(A) PTT HEP THERAPY RANGE 46 - 70 (VALIDATED BY ANTI-XA ASSAY)

Patient: WALTERS,CHRISTOPHER ALAN Age/Sex: 66/M Acct#D00327498867 Unit#D000674833

RUN DATE: 11/04/16
 RUN TIME: 0202
 PAGE NUMBER: 3

EASTERN IDAHO REGIONAL MEDICAL CENTER
 3100 CHANNING WAY
 IDAHO FALLS, IDAHO 83403-2077
 (208) 529-6040
 HPF LAB Discharge Summary Report w/o Pathology

 Patient: WALTERS,CHRISTOPHER ALAN #D00327498867 (Continued)

 C H E M I S T R Y

Date Time	Reference	Units	-----11/3/16-----		
			0843	0840	0840
POC TROPONIN I	0.00-0.08	NG/ML	0.00		
NA	136-145	MEQ/L			141
K	3.5-5.1	MEQ/L			4.0
CL	100-110	MEQ/L			107
CO2	22-29	MEQ/L			29
GLUCOSE	70-99	MG/DL			99
BUN	6-22	MG/DL			20
CREATININE	0.6-1.3	MG/DL			1.2
TOTAL PROTEIN	6.4-8.2	G/DL			6.8
ALBUMIN	3.4-5.0	G/DL			3.3 L
CALCIUM	8.4-10.1	MG/DL			8.5
BILIRUBIN TOTAL	0.1-1.0	MG/DL			0.5
AST/SGOT	8-28	UNITS/L			13
ALT/SGPT	14-44	UNITS/L			26
ALK PHOS TOTAL	50-136	UNITS/L			69
EST GFR	60-116	ML/MIN			> 60(B)

(B) IF THE PATIENT IS AFRICAN-AMERICAN, MULTIPLY GFR BY 1.21

CPK	26-308	UNITS/L		60	
CKMB	0-5	NG/ML			1(C)

(C) 0 - 5 NG/ML NORMAL
 5 - 15 NG/ML BORDERLINE ELEVATED
 >15 NG/ML POSITIVE FOR MYOCARDIAL INJURY

CRP	0.0-1.0	MG/DL			0.6
-----	---------	-------	--	--	-----

Test	Date	Time	Result	Reference	Units
POC LACTIC ACID	11/3/16	0845	1.0	0.5-2.2	MMOL/L
BASELINE TROPI	11/3/16	0840	< 0.02(D)	0.00-0.04	NG/ML

(D) 0.6 - 1.5 NG/ML IS CONSISTENT WITH THE WHO CRITERIA FOR AMI.

 Patient: WALTERS,CHRISTOPHER ALAN Age/Sex: 66/M Acct#D00327498867 Unit#D000674833

Eastern Idaho Reg Med Ctr
Medical Imaging Department
3100 Channing Way
Idaho Falls, Idaho
PHONE #: 208-227-2600
FAX #: 208-529-7018

Name: WALTERS, CHRISTOPHER ALAN
Phys: Rosenberg, Jeff V DO
DOB: 10/17/1950 Age: 66 Sex: M
Acct: D00327498867 Loc: D.ED
Exam Date: 11/03/2016 Status: REG ER
Radiology No:
Unit No: D000674833

EXAMS START DATE/TIME
001519731 US DUP VEIN BIL 11/03/16 0935

CLINICAL HISTORY: History of multiple DVTs. Swelling in lower extremities worse on the left.

Two-dimensional real time imaging, color flow imaging and Doppler spectral analysis were performed using ultrasound of the deep venous system of both lower extremities. No thrombus identified within the deep venous system of either lower extremity. There is good compressibility and augmentation throughout the deep venous system of both lower extremities. Normal spectral Doppler and color Doppler signal seen within the deep venous system of both lower extremities.

In the area of patient pain in the left medial calf there is a varicose vein identified.

Impression:

No deep venous thrombosis in either lower extremity.

Varicose vein identified in the area of patient pain in the medial left calf.

** Electronically Signed by David Warden MD on 11/3/2016 10:24 AM **

** Electronically Signed by M.D. DAVID R. WARDEN III **
** on 11/03/2016 at 1024 **

Reported and signed by: DAVID R. WARDEN III, M.D.

CC: Kovac, Cory PA; Rosenberg, Jeff V DO

Dictated Date/Time: 11/03/2016 (1023)
Technologist: ANTON D. NELSON, RDMS

Transcribed Date/Time: 11/03/2016 (1023)
Transcriptionist: RAD.DRID
Electronic Signature Date/Time: 11/03/2016 (1024)
Orig Print D/T: S: 11/03/2016 (1028)

PRINTED BY: cmu7907 DATE 11/11/2016 PATCH NO: N/A