

Patient Care Report

Patient Address: 77A 94302

Date: 5/15/98	City of Palo Alto Event #: 1660	Pt. # of 1	Unit ID: M2	Response: 1 2 3 (3)	Transport: 1 2 3 (2)	Destination: SUH
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Name: JOSEPH CIAMPI	Incident Address: (2) LINCOLN + BRYANT	City: P.A.
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Age: 40 M.D. DOB: 9/24/67	First Responder: Agency: PAE Unit E3P	Destination Decision	Dispatched: 1017
Sex: (M) Weight: 75 kg	PD Custody: Yes No	<input type="checkbox"/> Nearest Receiving Facility	Enroute: 1030
Private MD: NONE	Badge # W0107 Agency PAFD	<input type="checkbox"/> Base Order	Arrive Scene: 1032
		<input type="checkbox"/> Physician Requested	PT contact:
		<input type="checkbox"/> PU/Family Request	Transition:
		<input type="checkbox"/> Triage in trauma Center	Depart Scene: 1039
		<input type="checkbox"/> Triage in Other Specialty Center	Arrive Dest: 1045
		<input checked="" type="checkbox"/> Other PAFD	Canceled:
		<input type="checkbox"/> Diversion From	Suspect ETOH: Y (N) U
		Transported By: Agency: ID#	Suspect Drug: Y (N) U

Base Contact: <input type="checkbox"/> MICN: MD:	History: <input type="checkbox"/> Denied <input type="checkbox"/> Unknown <input type="checkbox"/> Cariac (Unspecified) <input type="checkbox"/> MI <input type="checkbox"/> CVATIA
	<input type="checkbox"/> Psych <input type="checkbox"/> GHE <input type="checkbox"/> Angina <input type="checkbox"/> COPD <input type="checkbox"/> HTN <input type="checkbox"/> D.M. <input type="checkbox"/> Seizure
	Other: CHRONIC FATIGUE SYNDROME, PINCHED NERVE IN BACK

Medications: TYLENOL, VALPROXIN	Allergies: NKDA	Glasgow	VERBAL	MOVES
		EYE	Orient 5	Obeys 6
		Spont 4	Com 4	Purpos 5
		Speech 3	Insp 3	Withdr 4
		Pain 2	ncamp 2	Flex 3
		None 1	None 1	Exten 2
		TOTAL: 15		None 1

CIC HPI: WHILE RUNNING AT WAS TASED - FELL TO SIDEWALK RESULTING IN MULTIPLE MINOR ABRASIONS + PUNCTURE FROM TREAD POSSIBLY IN W/FOOT. LOC. PT IS UNCOMFORT. PER P.D. PT TO BE TRANSPORTED BY/ML FOR MEDICAL EVALUATION. PT DENIES HA, B, DIZZINESS, P, BLUR/VISION, O.P., SOB, P.C.P. A.S.O.B. A.N.T.V. PAIN IN BACK PART OF BODY

Working DX: Pulse Oximetry: Before O: After Blood Glucose: 2:

Skin Color: <input checked="" type="checkbox"/> WNL <input type="checkbox"/> Pale <input type="checkbox"/> Flushed <input type="checkbox"/> Cyanotic	Temp: <input checked="" type="checkbox"/> WNL <input type="checkbox"/> Cool <input type="checkbox"/> Hot	Moisture: <input checked="" type="checkbox"/> WNL <input type="checkbox"/> Moist <input type="checkbox"/> Dry
<input type="checkbox"/> Other	<input type="checkbox"/> Diaphoretic	
Airway: <input checked="" type="checkbox"/> WNL/Clear	Breathing: <input checked="" type="checkbox"/> WNL/Clear <input type="checkbox"/> Labored	Pupils: <input checked="" type="checkbox"/> PEEL <input type="checkbox"/> Non-Responsive <input type="checkbox"/> Other
<input type="checkbox"/> Other	<input type="checkbox"/> Retractions <input type="checkbox"/> Shallow <input type="checkbox"/> Absent <input type="checkbox"/> Other	R: 4mm L: 4mm

Head/Face: <input checked="" type="checkbox"/> ADROMA LOT ON R SIDE	Abdomen: <input type="checkbox"/> SOFT NON-TENDER
Neck: <input checked="" type="checkbox"/> ADROMATIC	Back: <input type="checkbox"/> ADROMATIC
Chest: <input checked="" type="checkbox"/> ADROMATIC	Pelvis: <input type="checkbox"/> STABLE
Lungs: <input checked="" type="checkbox"/>	Extremities: <input type="checkbox"/> 11cm OPA (L) FA, ADROMA (L) FA, ADROMA (R) FA, ADROMA (R) FA

LD	Time	Blood Pressure	Pulse Rate	Resp. Rate	EKG	Management	Response
24830	1034	NIT	105	16	SINUS TACHYCARDIA	Hx vs PE, EKG.	ADROMA 5' DRAINING
2105	1034	NIT	104	16		Hx vs. St ambulate to MIV	AD
	1039	120/78	104	16	NIT	PE SWI, RESUSS	AD
	1045	128/76	96	16	NIT	PE SWI, RESUSS	AD



2087269 - 000 03/24/1997
CIAMPI, JOSEPH A
STREHLOW, MATTHEW C.

EST. ID	NHS	Bta	Gauge	Rate	Vol Inf	ID	IV NS	Site
	250 1000						250 1000	

Trauma Criteria Met: <input type="checkbox"/> Physiologic: <input type="checkbox"/> Anatomical: <input type="checkbox"/> Paramedic discretion	Crew Names	I.D.	Vehicle Specifications:	C-Spine Precautions:	Intubation
	Primary Attendant: HELLER	21605	Protective Devices:	<input type="checkbox"/> Collar <input type="checkbox"/> NN <input type="checkbox"/> Reg <input type="checkbox"/> Short <input type="checkbox"/> Tall <input type="checkbox"/> bNN <input type="checkbox"/> Podi	Reason: <input type="checkbox"/> Respiratory distress <input type="checkbox"/> Patient unable to control airway <input type="checkbox"/> Respiratory arrest <input type="checkbox"/> Full arrest
	Secondary Attendant: SANDERS	17369	Extraction Time:	Immobilization: <input type="checkbox"/> Backboard <input type="checkbox"/> Straps <input type="checkbox"/> Hdbed <input type="checkbox"/> Tape <input type="checkbox"/> Other	Airway prior to intubation: <input type="checkbox"/> None <input type="checkbox"/> BVM <input type="checkbox"/> OPA <input type="checkbox"/> NP Size
	3rd Person/Observer:		Report Given to: GREG (RN)		ETT Size: _____
	Signature: [Signature]				Attempts x _____ By ID: _____
	Signature: [Signature]				Attempts x _____ By ID: _____
					<input type="checkbox"/> Successful <input type="checkbox"/> Unsuccessful
					Complications: <input type="checkbox"/> Vrius <input type="checkbox"/> Blood <input type="checkbox"/> Clanged <input type="checkbox"/> Anatomy <input type="checkbox"/> Other
					Environment: <input type="checkbox"/> Enroute <input type="checkbox"/> On scene <input type="checkbox"/> Floor <input type="checkbox"/> Bed <input type="checkbox"/> Gurney <input type="checkbox"/> Ground <input type="checkbox"/> Other