

MARY ELLEN LYONS  
750 E Laurel Ave  
Glendora CA 91741-2851

13641139  
Dec 13 2022 4:06 PM  
KATHLEEN LYONS

386  
Dec 13 2022 4:28 PM



10387

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**CONFIDENTIAL - MEDICAL RECORDS**

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This packet may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended recipient, please forward these records to the person(s) who handles medical records for your organization. Any misuse of this information is a violation of state and federal privacy laws and is strictly prohibited.

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# Patient Request for Health Information

## Patient Information

First Name: Kathleen ✓	Middle Initial:	Last Name: Lyons ✓	Date of Birth: ✓1961-07-13
Street Address: 750 E. Laurel Ave			
City: Glendora	State: CA	Zip: 91741	

## Facility Information

Clinic/Hospital Name: Emanate Health Queen of the Valley Hospital ✓		
Street Address: 1115 S. Sunset		
City: West Covina	State: CA	Zip: 91790

Check any information that you would like:

- Office Notes
- Imaging Reports
- Medications
- Procedures / Operative Notes
- Lab / Test results (Blood tests, Urinalysis, etc.)
- Immunization Records
- Other (specify): 100% of the notes & diaries of all health providers, all documents, all images, all videos (including the videos taken during surgery), MRI's, CT scans and all else attached to Kathleen Ann Lyons' medical records. ✓

Which types of sensitive information do you authorize for release?

- Genetic / Hereditary Test Results
- Substance Abuse Information
- HIV Test Results
- Sexually Transmitted Disease
- Behavioral / Mental Health Records

What's the primary reason for your request? This may help us respond more completely to your request.

Other ✓

What time period are you requesting information from? (Specify a range of dates or write something like "last 2 years")

10/15/2022 ✓ through 12/04/2022 ✓



How would you like your records delivered? (Select one option)

Mail

In-Person Pickup

Email: GuyAnthonyLyons@gmail.com ✓

Fax: \_\_\_\_\_

Recipient Information (please fill out address even if the delivery method is not mail)

Name or organization: Mary Ellen Lyons	Phone number: (626) 629-0197
Street Address: 750 E. Laurel Ave	
City: Glendora	State: CA      Zip: 91741
Provide any additional detail or contact information for the recipient below (optional): In addition to personal pick up, please also send via secure email to GuyAnthonyLyons@gmail.com	

Please print your name and sign below:

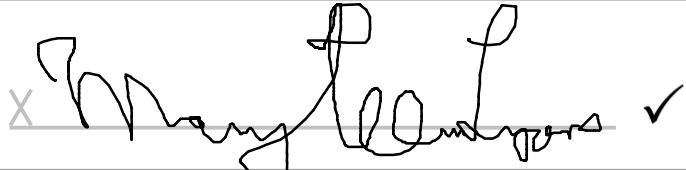
Name:	Relationship (if other than patient):
Mary Ellen Lyons ✓	
Signature:	Date:
 X ✓	12/04/2022 ✓

Photo of Identification: Mary Ellen Lyons License.jpg

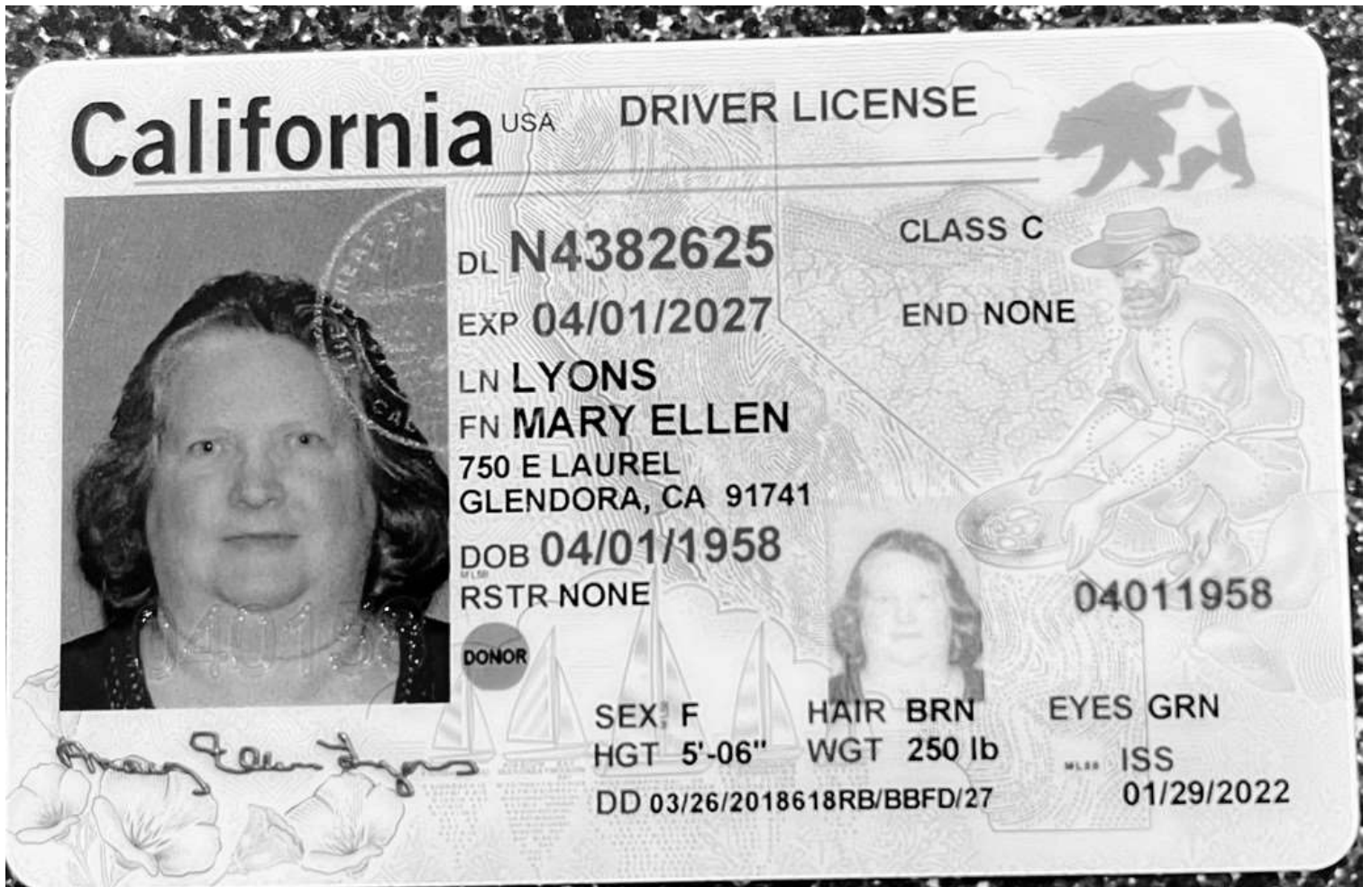





Photo of Identification: Mary Ellen Lyons License.jpg

**California** USA **DRIVER LICENSE** 



DL **N4382625** CLASS C  
EXP **04/01/2027** END NONE  
LN **LYONS**  
FN **MARY ELLEN**  
750 E LAUREL  
GLENDDORA, CA 91741  
DOB **04/01/1958**  
RSTR NONE




**04011958**

**DONOR**

SEX: F HAIR: BRN EYES: GRN  
HGT: 5'-06" WGT: 250 lb  
DD 03/26/2018618RB/BBFD/27 MLSS ISS 01/29/2022

*Mary Ellen Lyons*





Emanate Health  
 Queen of the Valley Hospital ( NPI# 1063441293 )  
 1115 S. Sunset Ave.  
 West Covina, CA 91790-3940

**Inpatient FaceSheet**

**EMR:** E01343504

<b>Patient Name/Address</b> Lyons,Kathleen A 750 E Laurel Ave  Glendora CA 91741 <b>Email:</b> no@email 626-629-0156 Cell Phone	<b>Account#</b> QH0054940416	<b>Type</b> IN	<b>Adm/Svc Date</b> 10/18/22	<b>Time</b> 22:00	<b>MRN</b> MR01483046						
	<b>Location</b> Q1ICU	<b>Source</b> XHOS	<b>D/C Date</b> 12/02/22	<b>Time</b> 05:05	<b>ADM Priority</b> EL						
	<b>Mode Of Arrival</b>	<b>Room/Bed</b> QI007-A	<b>Accom. Code</b> ICU	<b>Service</b> ICU							
	<b>Date Of Birth</b> 07/13/1961	<b>Age</b> 61	<b>Sex</b> F	<b>Mar Stat</b> S	<b>Race</b> CA	<b>VIP</b> No					
<b>Employer Name/Address</b> Glendora U.S.D 500 N Loraine Ave  Glendora CA 91741 <b>Occupation:</b> Sub <b>Phone:</b> 8189631611 <b>Status:</b> Part-Time Employed	<b>Religion</b> CA	<b>Language</b> ENG	<b>Interpreter</b> N		<b>Reg By</b> BALBE						
	<b>Emergency Contact 1</b> Lyons,Mary Ellen 750 E Laurel Ave  Glendora CA 91741 626-629-0197 Cell Phone 626-963-2862 Home Phone			<b>Relationship</b> Sister							
	<b>Emergency Contact 2</b> Lyons,Guy unk  Unknown CA XXXXX 661-805-9103 Cell Phone			<b>Relationship</b> Brother							
<b>Guarantor Name/Address</b> Lyons,Kathleen A 750 E Laurel Ave  Glendora CA 91741 <b>Phone:</b> 626-629-0156 Cell Ph  <b>Relationship:</b> Self / Same As Patient <b>Guar. Employer:</b> Glendora U.S.D	<b>Financial Class</b> PPO										
	<table border="1"> <thead> <tr> <th>Subscriber</th> <th>Relationship</th> </tr> </thead> <tbody> <tr> <td>BLUE CROSS PRUDENT BUYER P. O. BOX 60007 LOS ANGELES CA 90060-0007 <b>Phone:</b> (800)677-6669</td> <td>Lyons,Kathleen A Self / Same As Patient</td> </tr> </tbody> </table>						Subscriber	Relationship	BLUE CROSS PRUDENT BUYER P. O. BOX 60007 LOS ANGELES CA 90060-0007 <b>Phone:</b> (800)677-6669	Lyons,Kathleen A Self / Same As Patient	
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<b>Auth Status:</b> Approved	<b>Group #:</b> 174279M4A1										
<b>Insurance Mnemonic 1</b> BLC20	<b>Insurance 1 Group/IPA</b> NO IPA GROUP	<b>Insurance Mnemonic 2</b> PER00	<b>Insurance 2 Group/IPA</b> NO IPA GROUP								
<b>Reason For Visit</b> Hydrocephalus E87.1 Hypo-osmolality and hyponatremia											
<b>Provider Name</b> (Attending) Lau,Tsang 800-940-2243 <b>NPI#</b> 1700100732	<b>Admitting Provider</b> Batou,Augen 800-940-2243 <b>NPI#</b> 1497016315		<b>Primary Care Provider</b> Care Physician,NO Primary <b>NPI#</b>								
<b>Other Provider(s)</b> Goshtasbi,Mana 800-940-2243		Kamdar,Sana 714-202-2330	Cutler,Aaron 909-450-0369								
<b>Occurrence Code Date/Time</b>	<b>Occurrence Code</b>										
<b>Comments</b> Tx FROM ICC											



**User ID:** HERMC

12/06/22 13:37

Desktop

FF.100

(Rev 5-19)

QH0054940416 LYONS,KATHLEEN,A MR01483046



Emanate Health  
 Queen of the Valley Hospital  
 1115 S Sunset Ave.  
 West Covina, CA 91790

**INPATIENT FACESHEET**

EMR : E01343504

<b>PATIENT INFORMATION</b>	<b>PATIENT NAME / ADDRESS</b> Lyons, Kathleen A 750 E Laurel Ave Glendora CA 91741 EMAIL: no@gmail PHONE: 626-629-0156 TYPE: Cell Ph		<b>ACCOUNT #</b> QH0054940416	<b>TYPE</b> IN	<b>ADM / SVC DATE</b> 10/18/22	<b>TIME</b> 22:00	<b>MRN #</b> MR01483046
	<b>LOCATION</b> Q6NSU	<b>SOURCE</b> XHOS	<b>D/C DATE</b>	<b>D/C TIME</b>	<b>ADM PRIORITY</b> UR		
	<b>MODE OF ARRIVAL</b>		<b>BED/ROOM</b> Q0605-B	<b>ACCOMODATION CODE</b> NSU		<b>SERVICE</b> ICU	
	<b>DATE OF BIRTH</b> 07/13/1961	<b>AGE</b> 61	<b>SEX</b> F	<b>MAR STAT</b> S	<b>RACE</b> CA	<b>VIP</b>	
<b>EMPLOYER INFO</b>	<b>EMPLOYER NAME / ADDRESS</b> Glendora U.S.D 500 N Loraine Ave Glendora CA 91741 OCCUPATION: Sub PHONE: 8189631611 STATUS: Part-Time Emplo		<b>RELIGION</b> CA	<b>LANGUAGE</b> ENG	<b>INTERPRETER</b>	<b>REG BY</b> BALBE	
	<b>RESPONSIBLE PARTY</b>	<b>GUARANTOR NAME / ADDRESS</b> Lyons, Kathleen A 750 E Laurel Ave Glendora CA 91741 PHONE: 626-629-0156 TYPE: Cell Ph RELATIONSHIP: Self / Same As Patient GUAR. EMPLOYER: Glendora U.S.D		<b>EMERGENCY CONTACT 1</b>	<b>NAME / ADDRESS</b> Lyons, Mary Ellen 750 E Laurel Ave Glendora CA 91741 PHONE: 626-629-0197 TYPE: Cell Phone 626-963-2862 Home Phone		<b>RELATIONSHIP</b> Sister
		<b>EMERGENCY CONTACT 2</b>	<b>NAME / ADDRESS</b>		<b>RELATIONSHIP</b>		
<b>FINANCIAL CLASS:</b> PPO		<b>PRIMARY INSURANCE NAME</b> BLUE CROSS PRUDENT BUYER P. O. BOX 60007 LOS ANGELES CA 90060-0007 PHONE #: (800)677-6669		<b>SUBSCRIBER</b> Lyons, Kathleen A	<b>RELATIONSHIP</b> Self / Same As Patient		
		<b>SECONDARY INSURANCE NAME</b> Self Pay		<b>AUTH #:</b> UM35955723 <b>AUTH STATUS:</b> Pending	<b>POLICY #:</b> ABO793A67868 <b>GROUP #:</b> 174279M4A1		
		<b>PHONE #:</b>		<b>AUTH #:</b> <b>AUTH STATUS:</b>	<b>POLICY #:</b> <b>GROUP #:</b>		
<b>INSURANCE MNEMONIC 1</b> BLC20	<b>INSURANCE 1 GROUP / IPA</b> NO IPA GROUP		<b>INSURANCE MNEMONIC 2</b> PER00	<b>INSURANCE 2 GROUP / IPA</b> NO IPA GROUP			
<b>REASON FOR VISIT</b> Hydrocephalus							
<b>PROVIDER NAME ( ATTENDING )</b> Onyekwuluje, Anne N		<b>PROVIDER PHONE</b> 800-940-2243		<b>PRIMARY CARE PROVIDER NAME</b> Care Physician, NO Primary		<b>PRIMARY PROV. PHONE</b>	
<b>ADMITTING PROVIDER NAME</b> Onyekwuluje, Anne N		<b>ADMITTING PROV. PHONE</b> 800-940-2243		<b>OTHER PROVIDER NAME</b>		<b>OTHER PROVIDER PHONE</b>	
<b>OCCURRENCE DATE / TIME</b>				<b>OCCURRENCE CODE</b>			
<b>COMMENTS</b> Tx FROM ICC							



User ID: BALBE

Print Date/Time: 10/18/22 22:12



Emanate Health  
 Queen of the Valley Hospital  
 1115 S Sunset Ave.  
 West Covina, CA 91790

**INPATIENT FACESHEET**

EMR : E01343504

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	<b>LOCATION</b> Q6NSU	<b>SOURCE</b> XHOS	<b>D/C DATE</b>	<b>D/C TIME</b>	<b>ADM PRIORITY</b> UR		
	<b>MODE OF ARRIVAL</b>	<b>BED/ROOM</b> Q0605-B	<b>ACCOMODATION CODE</b> NSU	<b>SERVICE</b> NSU			
	<b>DATE OF BIRTH</b> 07/13/1961	<b>AGE</b> 61	<b>SEX</b> F	<b>MAR STAT</b> S	<b>RACE</b> CA	<b>VIP</b> No	
	<b>EMPLOYER NAME / ADDRESS</b> Glendora U.S.D 500 N Loraine Ave  Glendora CA 91741 OCCUPATION: Sub PHONE: 8189631611 STATUS: Part-Time Emplo		<b>RELIGION</b> CA	<b>LANGUAGE</b> ENG	<b>INTERPRETER</b> NO	<b>REG BY</b> BALBE	
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	<b>RELATIONSHIP: Self / Same As Patient</b> <b>GUAR. EMPLOYER: Glendora U.S.D</b>		<b>EMERGENCY CONTACT 2</b>		<b>NAME / ADDRESS</b>   <b>PHONE:</b> <b>TYPE:</b>		
<b>RESPONSIBLE PARTY</b>	<b>FINANCIAL CLASS: PPO</b>		<b>EMERGENCY CONTACT 1</b>		<b>NAME / ADDRESS</b>   <b>PHONE:</b> <b>TYPE:</b>		
	<b>PRIMARY INSURANCE NAME</b> BLUE CROSS PRUDENT BUYER P. O. BOX 60007 LOS ANGELES CA 90060-0007 PHONE #: (800)677-6669		<b>SUBSCRIBER</b> Lyons, Kathleen A		<b>RELATIONSHIP</b> Self / Same As Patient		
<b>SECONDARY INSURANCE NAME</b> Self Pay		<b>SUBSCRIBER</b>		<b>REL. ID NUMBER</b> <b>GRP#</b>			
<b>PHONE #:</b>		<b>AUTH #:</b> <b>AUTH STATUS:</b>		<b>POLICY #:</b> <b>GROUP #:</b>			
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<b>ADMITTING PROVIDER NAME</b> Onyekwuluje, Anne N		<b>ADMITTING PROV. PHONE</b> 800-940-2243	<b>OTHER PROVIDER NAME</b>		<b>OTHER PROVIDER PHONE</b>		
<b>OCCURRENCE DATE / TIME</b>			<b>OCCURRENCE CODE</b>				
<b>COMMENTS</b> Tx FROM ICC							



User ID: BALBE

Print Date/Time: 10/18/22 22:48



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 6 Neuroscience Unit  
Primary Provider: Batou, Augen  
Date: 10/18/22

1. Your doctors have recommended the following operation or procedure for:  
Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

Right, possible bilateral, frontal endoscopic transventricular resection of colloid cyst, possible placement of external ventricular drain

Upon your authorization and consent, this operation or procedure, together with any different or further procedures which, in the opinion of the doctor(s) performing the procedure, may be indicated due to any emergency, will be performed on you. The operations or procedures will be performed by the doctor named below (or in the event the doctor is unable to perform or complete the procedure, a qualified substitute doctor), together with associates and assistants, including anesthesiologists, pathologists, and radiologists from the medical staff of to whom the doctor(s) performing the procedure may assign designated responsibilities. The hospital maintains personnel and facilities to assist your doctors in their performance of various surgical operations and other special diagnostic or therapeutic procedures. However, the persons in attendance for the purpose of performing specialized medical services such as anesthesia, radiology, or pathology are not employees or agents of the hospital or of doctor(s) performing the procedure. They are independent medical practitioners.

2. Name of the practitioner who is performing the procedure or administering the medical Treatment:

Practitioner:

Dr. Je Donald

3. All operations and procedures carry the risk of unsuccessful results, complications, injury, or even death, from both known and unforeseen causes, and no warranty or guarantee is made as to result or cure.

You have the right to be informed of:

- The nature of the operation or procedure, including other care, treatment or medications;
- Potential benefits, risks or side effects of the operation or procedure, including potential problems that might occur during recuperation;
- The likelihood of achieving treatment goals;
- Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not receiving care or treatment.

Except in cases of emergency, operations or procedures are not performed until you have had the opportunity to receive this information and have given your consent. You have the right to give or refuse consent to any proposed operation or procedure at any time prior to its performance.



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 6 Neuroscience Unit
Primary Provider: Batou, Augen
Date: 10/18/22

4. If your doctor determines that there is a reasonable possibility that you may need a blood transfusion as a result of the surgery or procedure to which you are consenting, your doctor will inform you of this and will provide you with information concerning the benefits and risks of the various options for blood transfusion, including predonation by yourself or others. You also have the right to have adequate time before your procedure to arrange for predonation, but you can waive this right if you do not wish to wait.

Transfusion of blood products involves certain risks, including the transmission of disease such as hepatitis or Human Immunodeficiency Virus (HIV), and you have a right to consent or refuse consent to any transfusion. You should discuss any questions that you may have about transfusions with your doctor.

5. By your signature below, you authorize the pathologist to use his or her discretion in disposition or use of any member, organ or tissue removed from your person during the operation or procedure set forth above, subject to the following conditions (if any):

6. Your signature on this form indicates that:
You have read and understand the information provided on this form;
Your doctor has adequately explained to you the operation or procedure and the anesthesia set forth above, along with the risks, benefits, alternatives, and the other information described above in this form.;
You have had a chance to ask your doctors questions;
You have received all of the information you desire concerning the operation or procedure and the anesthesia; and
You authorize and consent to the performance of the operation or procedure and the Anesthesia.

Signature: Kathleen Ann Lyons Date: 10-25-22 Time: 19:24
(patient/parent/conservator/guardian)

If signed by other than the patient, indicate name and relationship: \_\_\_\_\_

Witness Signature: [Signature] Date: 10/25/22 Time: 19:29

Print Witness Name: [Name]
Form ID: AUTH

PHYSICIAN CERTIFICATION

I, the undersigned physician, hereby certify that I have discussed the procedure in this consent form with this patient(or the patient's legal representative), including:
The risks and benefits of the procedure;
And the adverse reactions that may reasonably be expected to occur;
Any alternative efficacious methods of treatment which may be medically viable;
The potential problems that may occur during recuperation; and
Any research or economic interest I may have regarding this treatment.

I certify that the patient was encouraged to ask questions and that all questions were answered.





Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 6 Neuroscience Unit
Primary Provider: Batou, Augen
Date: 10/18/22

Physician Signature [Signature] Date: 10/26/22 Time 4:07p

Print Physician Name: Donald V

If informed consent was documented previously, it can be found in:

- [ ] H&P
[ ] Consult Note
[ ] Progress Note
[ ] Office Note
[ ] Emergency Case

INTERPRETER'S STATEMENT

I have accurately and completely read the foregoing document to: (patient or patient's legal representative) in the patient's or legal representative's primary language English. He/she understood all the of the terms and conditions and acknowledged her/her agreement by signing the document in my presence.

Interpreter Signature: Date: Time

Print Interpreter Name:

CONSENT FOR ANESTHESIA/DEEP SEDATION/MODERATE SEDATION

I acknowledge that my doctor has explained to me that I will have an operation, diagnostic, or treatment/ procedure. My doctor has explained the risks of the procedure, advised me of alternative treatments and told me about the expected outcome and what could happen if my condition remains untreated. I also understand that anesthesia services are needed so that my doctor can perform the operation or procedure.

It has been explained to me that all forms of anesthesia/sedation involve some risks and that no guarantee or promise can be made concerning the results or my procedure or treatment. Although rare, unexpected severe complications with anesthesia/sedation can occur and include the remote possibility of infection, bleeding, drug reactions, blood clots, loss of sensation, loss of limb function, paralysis, stroke, brain damage, heart attack or death. I understand that these risks apply to all forms of anesthesia/sedation and that additional or specific risks have been identified below as they may apply to a specific type of anesthesia/sedation. I understand that the type(s) of anesthesia/sedation checked below will be used for my procedure and that the anesthesia/ sedation technique to be used is determined by many factors including my physical condition, the type of procedure my doctor is to do, his/her preferences, as well as my own desire. It has been explained to me that sometimes an anesthesia technique which involves use of local anesthetics (spinal, epidural, nerve block), with or without sedation may not succeed completely and therefore another technique may have to be used including general anesthesia.



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 6 Neuroscience Unit  
 Primary Provider: Batou, Augen  
 Date: 10/18/22

<input checked="" type="checkbox"/> General Anesthesia	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>o Total unconscious state, possible placement of a tube into the windpipe.</li> <li>o Medication injected into the blood stream, breathed into the lungs, or by other routes.</li> <li>o Mouth or throat pain, hoarseness, injury to mouth or teeth, awareness under anesthesia, injury to blood vessels, aspiration, pneumonia, cardiovascular instability possible death.</li> </ul>
<input type="checkbox"/> Spinal or Epidural Analgesic/ Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>o Temporary decrease of loss of feeling and/or movement to lower body part.</li> <li>o Medication injected through a needle/catheter placed directly into the spinal canal or immediately outside the spinal canal.</li> <li>o Headache, backache, buzzing in the ears, convulsions, infection, persistent weakness, numbness, residual pain, injury to blood vessels, "total spinal", possible spinal cord injury possible death.</li> </ul>
<input type="checkbox"/> Major/Minor Nerve Block with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>o Temporary loss of feeling and/or movement of a specific limb area.</li> <li>o Medication injected near nerves providing loss of sensation to the area of the operation.</li> <li>o Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>
<input type="checkbox"/> Intravenous Regional Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>o Temporary loss of feeling and/or movement of specific limb area.</li> <li>o Drug injected into veins of arm or leg while using a tourniquet.</li> <li>o Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 6 Neuroscience Unit  
 Primary Provider: Batou, Augen  
 Date: 10/18/22

<input type="checkbox"/> Total Intravenous Anesthesia (TIVA)	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by an anesthesia doctor.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Deep Sedation	Expected Result  Technique  Possible Risks  <b>Medications</b>	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by doctors (non-anesthesia).</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> <li>◦ <b>Ketamine, Propofol and Etomidate.</b></li> </ul>
<input type="checkbox"/> Moderate Sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state by a registered nurse.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Insertion of Invasive Lines/Use of Transesophageal Echo	Expected Result  Possible Risks	<ul style="list-style-type: none"> <li>◦ Measurement of vital signs, fluid replacement access.</li> <li>◦ Infection, bleeding, pulmonary artery rupture, esophageal drainage possible death.</li> </ul>

**PHYSICIAN ATTESTATION**

I, the undersigned physician, hereby certify that I have discussed the anesthesia/sedation type in this consent form with this patient (or the patient's legal representative) including:

- The risk and benefits of anesthesia/sedation
- The adverse reactions that may reasonably be expected to occur
- Any alternatives to anesthesia/sedation
- The potential problems that may occur during recuperation
- Any research or economic interest I may have regarding anesthesia/sedation services



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 6 Neuroscience Unit  
Primary Provider: Batou, Augen  
Date: 10/18/22

I certify that the patient was encouraged to ask questions and that all questions were answered.

Physician Signature: [Signature] Date: 10/26/2022 Time: 1533

Print Physician Name: AM

Informed consent discussion documented in physician documentation/notes.

**PATIENT ACKNOWLEDGEMENT**

I hereby consent to the anesthesia/sedation services checked above and authorize that it be administered by \_\_\_\_\_ or his/her associate/designee. I also consent to an alternative type of anesthesia, if necessary, as determined by them.

Patient Signature: Kathleen Ann Lyons Date: 10-25-22 Time: 19:22  
(patient/parent/conservator/legal guardian/representative)

If signed by other than patient, indicate name and relationship: \_\_\_\_\_

Witness Signature: [Signature] Date: 10/25/22 Time: 1922

Print Witness Name: Jynell Mondares

**INTERPRETER STATEMENT**

The foregoing document has been accurately and completely read to (patient or patient's legal representative) \_\_\_\_\_ in the patient's or legal representative's primary language (identify language) \_\_\_\_\_. He/she understood all of the terms and conditions and acknowledges his/her agreement by signing this document.

Interpreter Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Interpreter Name: \_\_\_\_\_

Form ID: AUTH

I, (patient's name) Kathleen Ann Lyons, expecting to undergo a medical procedure, hereby consent to an additional observer being present during my procedure. I consent to (observer's name) Alex Gomez being present during my procedure, even though not medically necessary, in order to observe the procedure, equipment being used, workflow of staff/providers, or for another undisclosed reason. I understand that while in the procedural room, the Observer will be cognizant of aspects of my medical/health history and treatment.

I have been instructed by the attending physician/health care practitioner concerning standard practices during the medical procedure. I hereby release the attending physician/health care practitioner and Emanate Health, their officers, directors, agents, and employees from any liability in the event the presence of the observer during the procedure leads to injury to me or to the observer or to others.

Signature: Kathleen Ann Lyons  
Patient or Legal Representative

10-26-2022 3:55 pm  
Date Time

Witness: Abalima

10/26/22 1555  
Date Time

I, the Observer, understand that during the medical procedure, the attending physician/healthcare practitioner and the hospital staff must devote their full attention to the patient. I therefore agree to:

1. Bring to the attention of the attending Physician/healthcare practitioner and the hospital nursing staff any medical problems I have which could interfere with the care of the patient. Such problems might include:

- Lapse of consciousness problems, such as fainting, epilepsy, narcolepsy, etc.
- Weak stomach
- Convulsions
- Diabetes
- Heart problems

2. Conform to all rules and regulations of the hospital.

3. Comply with all orders and directions of the attending physician/healthcare practitioner or hospital nursing staff.

4. Leave the area immediately if considered necessary by the attending physician/healthcare practitioner or hospital nursing staff.

**PROCEDURAL OBSERVER CONSENT**



FF.700 (Rev 07-22)  
1 of 2

Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q6NSU Q0605 - B  
Att: Onyekwuluje, Anne



QH0054940416 LYONS, KATHLEEN, A MR01483046

I have been instructed by the attending physician/healthcare practitioner concerning standard practices during the medical procedure. I understand and agree that the hospital, physicians and other personnel have no duty to me and I hereby release the attending physician/healthcare practitioner and Emanate Health, their officers, directors, agents and employees from any liability in the event my presence during the medical procedure leads to injury to me or to the patient or to others.

Signature: *Sho-ACery / Giusyppayrb* 10/26/22 5:10pm  
(Observer) Date Time

Witness: *Palma* 10/26/22 1716  
Date Time

**INTERPRETER'S STATEMENT**

I have accurately and completely read the foregoing document to (*patient or patient's legal representative*) \_\_\_\_\_ in the patient's or legal representative's primary language \_\_\_\_\_ (*identify language*). He/she understood all of the terms and conditions and acknowledged his/her agreement by signing the document in my presence.

Interpreter Signature: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Interpreter Name: \_\_\_\_\_  
(Print)

**PROCEDURAL OBSERVER CONSENT**



FF.700 (Rev 07-22)  
2 of 2

Lyons, Kathleen A  
DOB: 07/13/1961 61 F  
ACCT: QH0054940416 MRN: MR01483046  
Adm/Svc: 10/18/22 Loc: Q6NSU  
Att: BATAUG

QH0054940416 LYONS, KATHLEEN, A MR01483046



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 1 Intensive Care Unit  
Primary Provider: Batou, Augen  
Date: 10/18/22

1. Your doctors have recommended the following operation or procedure for:  
Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

Tracheostomy

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Upon your authorization and consent, this operation or procedure, together with any different or further procedures which, in the opinion of the doctor(s) performing the procedure, may be indicated due to any emergency, will be performed on you. The operations or procedures will be performed by the doctor named below (or in the event the doctor is unable to perform or complete the procedure, a qualified substitute doctor), together with associates and assistants, including anesthesiologists, pathologists, and radiologists from the medical staff of to whom the doctor(s) performing the procedure may assign designated responsibilities. The hospital maintains personnel and facilities to assist your doctors in their performance of various surgical operations and other special diagnostic or therapeutic procedures. However, the persons in attendance for the purpose of performing specialized medical services such as anesthesia, radiology, or pathology are not employees or agents of the hospital or of doctor(s) performing the procedure. They are independent medical practitioners.

2. Name of the practitioner who is performing the procedure or administering the medical Treatment:

Practitioner:

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3. All operations and procedures carry the risk of unsuccessful results, complications, injury, or even death, from both known and unforeseen causes, and no warranty or guarantee is made as to result or cure.

You have the right to be informed of:

The nature of the operation or procedure, including other care, treatment or medications;

Potential benefits, risks or side effects of the operation or procedure, including potential problems that might occur during recuperation;

The likelihood of achieving treatment goals;

Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not receiving care or treatment.

Except in cases of emergency, operations or procedures are not performed until you have had the opportunity to receive this information and have given your consent. You have the right to give or refuse consent to any proposed operation or procedure at any time prior to its performance.



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Batou, Augen
Date: 10/18/22

4. If your doctor determines that there is a reasonable possibility that you may need a blood transfusion as a result of the surgery or procedure to which you are consenting, your doctor will inform you of this and will provide you with information concerning the benefits and risks of the various options for blood transfusion, including predonation by yourself or others. You also have the right to have adequate time before your procedure to arrange for predonation, but you can waive this right if you do not wish to wait.

Transfusion of blood products involves certain risks, including the transmission of disease such as hepatitis or Human Immunodeficiency Virus (HIV), and you have a right to consent or refuse consent to any transfusion. You should discuss any questions that you may have about transfusions with your doctor.

5. By your signature below, you authorize the pathologist to use his or her discretion in disposition or use of any member, organ or tissue removed from your person during the operation or procedure set forth above, subject to the following conditions (if any):

6. Your signature on this form indicates that:
You have read and understand the information provided on this form;
Your doctor has adequately explained to you the operation or procedure and the anesthesia set forth above, along with the risks, benefits, alternatives, and the other information described above in this form.;
You have had a chance to ask your doctors questions;
You have received all of the information you desire concerning the operation or procedure and the anesthesia; and
You authorize and consent to the performance of the operation or procedure and the Anesthesia.

Signature: TORBV Mary Ellen Lyons Date: 11/8/22 Time: 1709
(patient/parent/conservator/guardian)

If signed by other than the patient, indicate name and relationship: Sister

Witness Signature: Justin Paul De Vera Date: 11/8/22 Time: 1709

Print Witness Name: Justin Paul De Vera
Form ID: AUTH

PHYSICIAN CERTIFICATION

I, the undersigned physician, hereby certify that I have discussed the procedure in this consent form with this patient(or the patient's legal representative), including:
The risks and benefits of the procedure;
And the adverse reactions that may reasonably be expected to occur;
Any alternative efficacious methods of treatment which may be medically viable;
The potential problems that may occur during recuperation; and
Any research or economic interest I may have regarding this treatment.

I certify that the patient was encouraged to ask questions and that all questions were answered.





Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Batou, Augen
Date: 10/18/22

Physician Signature \_\_\_\_\_ Date: \_\_\_\_\_ Time \_\_\_\_\_

Print Physician Name: \_\_\_\_\_

If informed consent was documented previously, it can be found in:

- [ ] H&P
[ ] Consult Note
[ ] Progress Note
[ ] Office Note
[ ] Emergency Case

INTERPRETER'S STATEMENT

I have accurately and completely read the foregoing document to:
(patient or patient's legal representative) \_\_\_\_\_ in the patient's or legal representative's primary
language English. He/she
understood all the of the terms and conditions and acknowledged her/her agreement by signing the document in
my presence.

Interpreter Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time \_\_\_\_\_

Print Interpreter Name: \_\_\_\_\_

CONSENT FOR ANESTHESIA/DEEP SEDATION/MODERATE SEDATION

I acknowledge that my doctor has explained to me that I will have an operation, diagnostic, or treatment/
procedure. My doctor has explained the risks of the procedure, advised me of alternative treatments and told
me about the expected outcome and what could happen if my condition remains untreated. I also understand
that anesthesia services are needed so that my doctor can perform the operation or procedure.

It has been explained to me that all forms of anesthesia/sedation involve some risks and that no guarantee or
promise can be made concerning the results or my procedure or treatment. Although rare, unexpected severe
complications with anesthesia/sedation can occur and include the remote possibility of infection, bleeding,
drug reactions, blood clots, loss of sensation, loss of limb function, paralysis, stroke, brain damage, heart attack
or death. I understand that these risks apply to all forms of anesthesia/sedation and that additional or specific
risks have been identified below as they may apply to a specific type of anesthesia/sedation. I understand that
the type(s) of anesthesia/sedation checked below will be used for my procedure and that the anesthesia/
sedation technique to be used is determined by many factors including my physical condition, the type of
procedure my doctor is to do, his/her preferences, as well as my own desire. It has been explained to me that
sometimes an anesthesia technique which involves use of local anesthetics (spinal, epidural, nerve block), with
or without sedation may not succeed completely and therefore another technique may have to be used
including general anesthesia.



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 1 Intensive Care Unit  
 Primary Provider: Batou, Augen  
 Date: 10/18/22

<input type="checkbox"/> General Anesthesia	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Total unconscious state, possible placement of a tube into the windpipe.</li> <li>◦ Medication injected into the blood stream, breathed into the lungs, or by other routes.</li> <li>◦ Mouth or throat pain, hoarseness, injury to mouth or teeth, awareness under anesthesia, injury to blood vessels, aspiration, pneumonia, cardiovascular instability possible death.</li> </ul>
<input type="checkbox"/> Spinal or Epidural Anesthetic/Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary decrease of loss of feeling and/or movement to lower body part.</li> <li>◦ Medication injected through a needle/catheter placed directly into the spinal canal or immediately outside the spinal canal.</li> <li>◦ Headache, backache, buzzing in the ears, convulsions, infection, persistent weakness, numbness, residual pain, injury to blood vessels, "total spinal", possible spinal cord injury possible death.</li> </ul>
<input type="checkbox"/> Major/Minor Nerve Block with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary loss of feeling and/or movement of a specific limb area.</li> <li>◦ Medication injected near nerves providing loss of sensation to the area of the operation.</li> <li>◦ Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>
<input type="checkbox"/> Intravenous Regional Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary loss of feeling and/or movement of specific limb area.</li> <li>◦ Drug injected into veins of arm or leg while using a tourniquet.</li> <li>◦ Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 1 Intensive Care Unit  
 Primary Provider: Batou, Augen  
 Date: 10/18/22

<input type="checkbox"/> Total Intravenous Anesthesia (TIVA)	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by an anesthesia doctor.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Deep Sedation	Expected Result  Technique  Possible Risks  <b>Medications</b>	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by doctors (non-anesthesia).</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> <li>◦ <b>Ketamine, Propofol and Etomidate.</b></li> </ul>
<input type="checkbox"/> Moderate Sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state by a registered nurse.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Insertion of Invasive Lines/Use of Transesophageal Echo	Expected Result  Possible Risks	<ul style="list-style-type: none"> <li>◦ Measurement of vital signs, fluid replacement access.</li> <li>◦ Infection, bleeding, pulmonary artery rupture, esophageal drainage possible death.</li> </ul>

**PHYSICIAN ATTESTATION**

I, the undersigned physician, hereby certify that I have discussed the anesthesia/sedation type in this consent form with this patient (or the patient's legal representative) including:

- The risk and benefits of anesthesia/sedation
- The adverse reactions that may reasonably be expected to occur
- Any alternatives to anesthesia/sedation
- The potential problems that may occur during recuperation
- Any research or economic interest I may have regarding anesthesia/sedation services



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Batou, Augen
Date: 10/18/22

I certify that the patient was encouraged to ask questions and that all questions were answered.

Physician Signature: [Signature] Date: 11/8/22 Time: 2:12

Print Physician Name: David [Signature]

[ ] Informed consent discussion documented in physician documentation/notes.

PATIENT ACKNOWLEDGEMENT

I hereby consent to the anesthesia/sedation services checked above and authorize that it be administered by Dr. Wu or his/her associate/designee. I also consent to an alternative type of anesthesia, if necessary, as determined by them.

Patient Signature: TOBBV Mary Ellen Lyons Date: 11/8/22 Time: 17:09
(patient/parent/conservator/legal guardian/representative)

If signed by other than patient, indicate name and relationship: Sister

Witness Signature: [Signatures] Date: 11/8/22 Time: 17:09

Print Witness Name: Justin Paul DeVera RN / Jessalie Malaca, RN

INTERPRETER STATEMENT

The foregoing document has been accurately and completely read to (patient or patient's legal representative) in the patient's or legal representative's primary language (identify language). He/she understood all of the terms and conditions and acknowledges his/her agreement by signing this document.

Interpreter Name: Date: Time:

Print Interpreter Name:

Form ID: AUTH



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 1 Intensive Care Unit  
Primary Provider: Batou, Augen  
Date: 10/18/22

Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

1. Your doctors have recommended the following operation or procedure for:

Esophagogastroduodenoscopy With Possible Percutaneous Endoscopic Gastrostomy (Peg) Tube Placement, And Possible Biopsy, Polypectomy, Control Of Bleeding And Dilation

Upon your authorization and consent, this operation or procedure, together with any different or further procedures which, in the opinion of the doctor(s) performing the procedure, may be indicated due to any emergency, will be performed on you. The operations or procedures will be performed by the doctor named below (or in the event the doctor is unable to perform or complete the procedure, a qualified substitute doctor), together with associates and assistants, including anesthesiologists, pathologists, and radiologists from the medical staff of to whom the doctor(s) performing the procedure may assign designated responsibilities. The hospital maintains personnel and facilities to assist your doctors in their performance of various surgical operations and other special diagnostic or therapeutic procedures. However, the persons in attendance for the purpose of performing specialized medical services such as anesthesia, radiology, or pathology are not employees or agents of the hospital or of doctor(s) performing the procedure. They are independent medical practitioners.

2. Name of the practitioner who is performing the procedure or administering the medical Treatment:

Practitioner

Dr. Sharvel

3. All operations and procedures carry the risk of unsuccessful results, complications, injury, or even death, from both known and unforeseen causes, and no warranty or guarantee is made as to result or cure. You have the right to be informed of:  
The nature of the operation or procedure, including other care, treatment or medications;  
Potential benefits, risks or side effects of the operation or procedure, including potential problems that might occur during recuperation;  
The likelihood of achieving treatment goals;  
Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not receiving care or treatment. Except in cases of emergency, operations or procedures are not performed until you have had the opportunity to receive this information and have given your consent. You have the right to give or refuse consent to any proposed operation or procedure at any time prior to its performance.



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 1 Intensive Care Unit  
Primary Provider: Batou, Augen  
Date: 10/18/22

Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

4. If your doctor determines that there is a reasonable possibility that you may need a blood transfusion as a result of the surgery or procedure to which you are consenting, your doctor will inform you of this and will provide you with information concerning the benefits and risks of the various options for blood transfusion, including predonation by yourself or others. You also have the right to have adequate time before your procedure to arrange for predonation, but you can waive this right if you do not wish to wait.

Transfusion of blood products involves certain risks, including the transmission of disease such as hepatitis or Human Immunodeficiency Virus (HIV), and you have a right to consent or refuse consent to any transfusion. You should discuss any questions that you may have about transfusions with your doctor.

5. By your signature below, you authorize the pathologist to use his or her discretion in disposition or use of any member, organ or tissue removed from your person during the operation or procedure set forth above, subject to the following conditions (if any):

6. Your signature on this form indicates that:  
You have read and understand the information provided on this form;  
Your doctor has adequately explained to you the operation or procedure and the anesthesia set forth above, along with the risks, benefits, alternatives, and the other information described above in this form.;  
You have had a chance to ask your doctors questions;  
You have received all of the information you desire concerning the operation or procedure and the anesthesia; and  
You authorize and consent to the performance of the operation or procedure and the Anesthesia.

Signature: TORBV Mary Ellen Lyons Date: 11/9/22 Time: 1718  
(patient/parent/conservator/guardian)

If signed by other than the patient, indicate name and relationship: Sister

Witness Signature: [Signature] Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Witness Name: Justin DeJern RN / Jo Vanduke



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Batou, Augen
Date: 10/18/22

Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

PHYSICIAN CERTIFICATION

I, the undersigned physician, hereby certify that I have discussed the procedure in this consent form with this patient(or the patient's legal representative), including:

- The risks and benefits of the procedure;
And the adverse reactions that may reasonably be expected to occur;
Any alternative efficacious methods of treatment which may be medically viable;
The potential problems that may occur during recuperation; and
Any research or economic interest I may have regarding this treatment.

I certify that the patient was encouraged to ask questions and that all questions were answered.

Physician Signature \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Physician Name: \_\_\_\_\_

If informed consent was documented previously, it can be found in:

- [ ] H&P
[ ] Consult Note
[ ] Progress Note
[ ] Office Note
[ ] Emergency Case

INTERPRETER'S STATEMENT

I have accurately and completely read the foregoing document to (patient or patient's legal representative) \_\_\_\_\_ in the patient's or legal representative's primary language English(identify language). He/she understood all the of the terms and conditions and acknowledged her/her agreement by signing the document in my presence.

Interpreter Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Interpreter Name: \_\_\_\_\_

Form ID: AUTH



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Batou, Augen
Date: 10/18/22

Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

CONSENT FOR ANESTHESIA/DEEP SEDATION/MODERATE SEDATION

I acknowledge that my doctor has explained to me that I will have an operation, diagnostic, or treatment/ procedure. My doctor has explained the risks of the procedure, advised me of alternative treatments and told me about the expected outcome and what could happen if my condition remains untreated. I also understand that anesthesia services are needed so that my doctor can perform the operation or procedure.

It has been explained to me that all forms of anesthesia/sedation involve some risks and that no guarantee or promise can be made concerning the results or my procedure or treatment. Although rare, unexpected severe complications with anesthesia/sedation can occur and include the remote possibility of infection, bleeding, drug reactions, blood clots, loss of sensation, loss of limb function, paralysis, stroke, brain damage, heart attack or death. I understand that these risks apply to all forms of anesthesia/sedation and that additional or specific risks have been identified below as they may apply to a specific type of anesthesia/sedation. I understand that the type(s) of anesthesia/sedation checked below will be used for my procedure and that the anesthesia/ sedation technique to be used is determined by many factors including my physical condition, the type of procedure my doctor is to do, his/her preferences, as well as my own desire. It has been explained to me that sometimes an anesthesia technique which involves use of local anesthetics (spinal, epidural, nerve block), with or without sedation may not succeed completely and therefore another technique may have to be used including general anesthesia.

Table with 3 columns: Anesthesia Type (checkbox), Expected Result, Technique, Possible Risks. Row 1: [ ] General Anesthesia, Expected Result, Technique, Possible Risks. Risks include: Total unconscious state, possible placement of a tube into the windpipe; Medication injected into the blood stream, breathed into the lungs, or by other routes; Mouth or throat pain, hoarseness, injury to mouth or teeth, awareness under anesthesia, injury to blood vessels, aspiration, pneumonia, cardiovascular instability possible death.





Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 1 Intensive Care Unit  
 Primary Provider: Batou, Augen  
 Date: 10/18/22

<input type="checkbox"/> Spinal or Epidural Analgesic/Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary decrease of loss of feeling and/or movement to lower body part.</li> <li>◦ Medication injected through a needle/catheter placed directly into the spinal canal or immediately outside the spinal canal.</li> <li>◦ Headache, backache, buzzing in the ears, convulsions, infection, persistent weakness, numbness, residual pain, injury to blood vessels, "total spinal", possible spinal cord injury possible death.</li> </ul>
<input type="checkbox"/> Major/Minor Nerve Block with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary loss of feeling and/or movement of a specific limb area.</li> <li>◦ Medication injected near nerves providing loss of sensation to the area of the operation.</li> <li>◦ Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>
<input type="checkbox"/> Intravenous Regional Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary loss of feeling and/or movement of specific limb area.</li> <li>◦ Drug injected into veins of arm or leg while using a tourniquet.</li> <li>◦ Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>
<input type="checkbox"/> Total Intravenous Anesthesia (TIVA)	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by an anesthesia doctor.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 1 Intensive Care Unit  
 Primary Provider: Batou, Augen  
 Date: 10/18/22

<input type="checkbox"/> Deep Sedation	Expected Result  Technique  Possible Risks  Medications	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by doctors (non-anesthesia).</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> <li>◦ <b>Ketamine, Propofol and Etomidate.</b></li> </ul>
<input type="checkbox"/> Moderate Sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state by a registered nurse.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Insertion of Invasive Lines/Use of Transesophageal Echo	Expected Result  Possible Risks	<ul style="list-style-type: none"> <li>◦ Measurement of vital signs, fluid replacement access.</li> <li>◦ Infection, bleeding, pulmonary artery rupture, esophageal drainage possible death.</li> </ul>

**PHYSICIAN ATTESTATION**

I, the undersigned physician, hereby certify that I have discussed the anesthesia/sedation type in this consent form with this patient (or the patient's legal representative) including:

- The risk and benefits of anesthesia/sedation
- The adverse reactions that may reasonably be expected to occur
- Any alternatives to anesthesia/sedation
- The potential problems that may occur during recuperation
- Any research or economic interest I may have regarding anesthesia/sedation services

I certify that the patient was encouraged to ask questions and that all questions were answered.

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Physician Name: \_\_\_\_\_

Informed consent discussion documented in physician documentation/notes.



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 1 Intensive Care Unit  
Primary Provider: Batou, Augen  
Date: 10/18/22

Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

**PATIENT ACKNOWLEDGEMENT**

I hereby consent to the anesthesia/sedation services checked above and authorize that it be administered by \_\_\_\_\_ or his/her associate/designee. I also consent to an alternative type of anesthesia, if necessary, as determined by them.

Patient Signature: TORBU Mary Ellen Lyons Date: 17/18 Time: 11/9/22  
(patient/parent/conservator/legal guardian/representative)

If signed by other than patient, indicate name and relationship: Sister

Witness Signature: [Signature] Date: 1718 Time: 11/9/22

Print Witness Name: Justin Devera RN / Jo Vandemark

**INTERPRETER STATEMENT**

The foregoing document has been accurately and completely read to (patient or patient's legal representative) \_\_\_\_\_ in the patient's or legal representative's primary language (identify language) \_\_\_\_\_. He/she understood all of the terms and conditions and acknowledges his/her agreement by signing this document.

Interpreter Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Interpreter Name: \_\_\_\_\_

Form ID: AUTH



Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 1 Intensive Care Unit  
Primary Provider: Lau, Tsang  
Date: 10/18/22

1. Your doctors have recommended the following operation or procedure for:  
Patient: Lyons, Kathleen A Date of Birth: 07/13/1961

Right frontal ventriculoperitoneal shunt

Upon your authorization and consent, this operation or procedure, together with any different or further procedures which, in the opinion of the doctor(s) performing the procedure, may be indicated due to any emergency, will be performed on you. The operations or procedures will be performed by the doctor named below (or in the event the doctor is unable to perform or complete the procedure, a qualified substitute doctor), together with associates and assistants, including anesthesiologists, pathologists, and radiologists from the medical staff of to whom the doctor(s) performing the procedure may assign designated responsibilities. The hospital maintains personnel and facilities to assist your doctors in their performance of various surgical operations and other special diagnostic or therapeutic procedures. However, the persons in attendance for the purpose of performing specialized medical services such as anesthesia, radiology, or pathology are not employees or agents of the hospital or of doctor(s) performing the procedure. They are independent medical practitioners.

2. Name of the practitioner who is performing the procedure or administering the medical Treatment:

Practitioner:

Donald Ye MD

3. All operations and procedures carry the risk of unsuccessful results, complications, injury, or even death, from both known and unforeseen causes, and no warranty or guarantee is made as to result or cure.

You have the right to be informed of:

The nature of the operation or procedure, including other care, treatment or medications;

Potential benefits, risks or side effects of the operation or procedure, including potential problems that might occur during recuperation;

The likelihood of achieving treatment goals;

Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not receiving care or treatment.

Except in cases of emergency, operations or procedures are not performed until you have had the opportunity to receive this information and have given your consent. You have the right to give or refuse consent to any proposed operation or procedure at any time prior to its performance.



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Lau, Tsang
Date: 10/18/22

4. If your doctor determines that there is a reasonable possibility that you may need a blood transfusion as a result of the surgery or procedure to which you are consenting, your doctor will inform you of this and will provide you with information concerning the benefits and risks of the various options for blood transfusion, including predonation by yourself or others. You also have the right to have adequate time before your procedure to arrange for predonation, but you can waive this right if you do not wish to wait.

Transfusion of blood products involves certain risks, including the transmission of disease such as hepatitis or Human Immunodeficiency Virus (HIV), and you have a right to consent or refuse consent to any transfusion. You should discuss any questions that you may have about transfusions with your doctor.

5. By your signature below, you authorize the pathologist to use his or her discretion in disposition or use of any member, organ or tissue removed from your person during the operation or procedure set forth above, subject to the following conditions (if any):

6. Your signature on this form indicates that:
You have read and understand the information provided on this form;
Your doctor has adequately explained to you the operation or procedure and the anesthesia set forth above, along with the risks, benefits, alternatives, and the other information described above in this form.;
You have had a chance to ask your doctors questions;
You have received all of the information you desire concerning the operation or procedure and the anesthesia; and
You authorize and consent to the performance of the operation or procedure and the Anesthesia.

Signature: [Handwritten Signature] Date: 11-22-22 Time: 1736

(patient/parent/conservator/guardian) Sister

If signed by other than the patient, indicate name and relationship: [Handwritten Name]

Witness Signature: [Handwritten Signature] Date: 11/22/22 Time: 1736
Print Witness Name: [Handwritten Name]

Form ID: AUTH

PHYSICIAN CERTIFICATION

I, the undersigned physician, hereby certify that I have discussed the procedure in this consent form with this patient(or the patient's legal representative), including:
The risks and benefits of the procedure;
And the adverse reactions that may reasonably be expected to occur;
Any alternative efficacious methods of treatment which may be medically viable;
The potential problems that may occur during recuperation; and
Any research or economic interest I may have regarding this treatment.

I certify that the patient was encouraged to ask questions and that all questions were answered.



Patient: Kathleen A Lyons
Acct Num: QH0054940416
Med Rec Num: MR01483046
Location: Q 1 Intensive Care Unit
Primary Provider: Lau, Tsang
Date: 10/18/22

Physician Signature [Signature] Date: 11/20/22 Time 2:00

Print Physician Name: [Name]

If informed consent was documented previously, it can be found in:

- [ ] H&P
[ ] Consult Note
[ ] Progress Note
[ ] Office Note
[ ] Emergency Case

INTERPRETER'S STATEMENT

I have accurately and completely read the foregoing document to:
(patient or patient's legal representative) in the patient's or legal representative's primary language English. He/she understood all the of the terms and conditions and acknowledged her/her agreement by signing the document in my presence.

Interpreter Signature: Date: Time

Print Interpreter Name:

CONSENT FOR ANESTHESIA/DEEP SEDATION/MODERATE SEDATION

I acknowledge that my doctor has explained to me that I will have an operation, diagnostic, or treatment/procedure. My doctor has explained the risks of the procedure, advised me of alternative treatments and told me about the expected outcome and what could happen if my condition remains untreated. I also understand that anesthesia services are needed so that my doctor can perform the operation or procedure.

It has been explained to me that all forms of anesthesia/sedation involve some risks and that no guarantee or promise can be made concerning the results or my procedure or treatment. Although rare, unexpected severe complications with anesthesia/sedation can occur and include the remote possibility of infection, bleeding, drug reactions, blood clots, loss of sensation, loss of limb function, paralysis, stroke, brain damage, heart attack or death. I understand that these risks apply to all forms of anesthesia/sedation and that additional or specific risks have been identified below as they may apply to a specific type of anesthesia/sedation. I understand that the type(s) of anesthesia/sedation checked below will be used for my procedure and that the anesthesia/sedation technique to be used is determined by many factors including my physical condition, the type of procedure my doctor is to do, his/her preferences, as well as my own desire. It has been explained to me that sometimes an anesthesia technique which involves use of local anesthetics (spinal, epidural, nerve block), with or without sedation may not succeed completely and therefore another technique may have to be used including general anesthesia.



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 1 Intensive Care Unit  
 Primary Provider: Lau, Tsang  
 Date: 10/18/22

<input checked="" type="checkbox"/> General Anesthesia	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Total unconscious state, possible placement of a tube into the windpipe.</li> <li>◦ Medication injected into the blood stream, breathed into the lungs, or by other routes.</li> <li>◦ Mouth or throat pain, hoarseness, injury to mouth or teeth, awareness under anesthesia, injury to blood vessels, aspiration, pneumonia, cardiovascular instability possible death.</li> </ul>
<input type="checkbox"/> Spinal or Epidural Analgesic/Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary decrease of loss of feeling and/or movement to lower body part.</li> <li>◦ Medication injected through a needle/catheter placed directly into the spinal canal or immediately outside the spinal canal.</li> <li>◦ Headache, backache, buzzing in the ears, convulsions, infection, persistent weakness, numbness, residual pain, injury to blood vessels, "total spinal", possible spinal cord injury possible death.</li> </ul>
<input type="checkbox"/> Major/Minor Nerve Block with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary loss of feeling and/or movement of a specific limb area.</li> <li>◦ Medication injected near nerves providing loss of sensation to the area of the operation.</li> <li>◦ Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>
<input type="checkbox"/> Intravenous Regional Anesthesia with or without sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Temporary loss of feeling and/or movement of specific limb area.</li> <li>◦ Drug injected into veins of arm or leg while using a tourniquet.</li> <li>◦ Infection, convulsions, persistent numbness, residual pain, injury to blood vessels possible death.</li> </ul>



Patient: Kathleen A Lyons  
 Acct Num: QH0054940416  
 Med Rec Num: MR01483046  
 Location: Q 1 Intensive Care Unit  
 Primary Provider: Lau, Tsang  
 Date: 10/18/22

<input type="checkbox"/> Total Intravenous Anesthesia (TIVA)	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by an anesthesia doctor.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Deep Sedation	Expected Result  Technique  Possible Risks  <b>Medications</b>	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state given by doctors (non-anesthesia).</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> <li>◦ <b>Ketamine, Propofol and Etomidate.</b></li> </ul>
<input type="checkbox"/> Moderate Sedation	Expected Result  Technique  Possible Risks	<ul style="list-style-type: none"> <li>◦ Reduced anxiety and pain, partial or total amnesia.</li> <li>◦ Medication injected into bloodstream producing semi-conscious state by a registered nurse.</li> <li>◦ An unconscious state, depressed breathing, injury to blood vessels, aspiration possible death.</li> </ul>
<input type="checkbox"/> Insertion of Invasive Lines/Use of Transesophageal Echo	Expected Result  Possible Risks	<ul style="list-style-type: none"> <li>◦ Measurement of vital signs, fluid replacement access.</li> <li>◦ Infection, bleeding, pulmonary artery rupture, esophageal drainage possible death.</li> </ul>

**PHYSICIAN ATTESTATION**

I, the undersigned physician, hereby certify that I have discussed the anesthesia/sedation type in this consent form with this patient (or the patient's legal representative) including:

- The risk and benefits of anesthesia/sedation
- The adverse reactions that may reasonably be expected to occur
- Any alternatives to anesthesia/sedation
- The potential problems that may occur during recuperation
- Any research or economic interest I may have regarding anesthesia/sedation services





Patient: Kathleen A Lyons  
Acct Num: QH0054940416  
Med Rec Num: MR01483046  
Location: Q 1 Intensive Care Unit  
Primary Provider: Lau, Tsang  
Date: 10/18/22

I certify that the patient was encouraged to ask questions and that all questions were answered.

Physician Signature: [Signature] Date: 11/23/22 Time: 7:45a

Print Physician Name: Donald Ye Ryszah Annawanta  
11/23/22 07<sup>w</sup>

[  Informed consent discussion documented in physician documentation/notes.

**PATIENT ACKNOWLEDGEMENT**

I hereby consent to the anesthesia/sedation services checked above and authorize that it be administered by \_\_\_\_\_ or his/her associate/designee. I also consent to an alternative type of anesthesia, if necessary, as determined by them.

Patient Signature: Kathleen Lyons Date: 11/22/22 Time: 1736

(patient/parent/conservator/legal guardian/representative) Sister  
If signed by other than patient, indicate name and relationship:

Witness Signature: [Signature] Date: 11/22/22 Time: 1736

Print Witness Name: Brian Aguirre D. SACAW RN.

**INTERPRETER STATEMENT**

The foregoing document has been accurately and completely read to (patient or patient's legal representative) \_\_\_\_\_ in the patient's or legal representative's primary language (identify language) \_\_\_\_\_. He/she understood all of the terms and conditions and acknowledges his/her agreement by signing this document.

Interpreter Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Print Interpreter Name: \_\_\_\_\_

Form ID: AUTH

Patient Name: Lyons, Kathleen A

**CONSENT TO MEDICAL AND SURGICAL PROCEDURES**

I consent to the procedures that may be performed during this hospitalization or on an outpatient basis, including emergency treatment or services, which may include but are not limited to laboratory procedures, x-ray examinations, medical or surgical treatment or procedures, telehealth services, anesthesia, or hospital services rendered to the patient under the general and special instructions of the patient's physician or surgeon. I understand that practice of medicine and surgery is not an exact science and that diagnosis and treatment may involve risks of injury or even death. I acknowledge that zero guarantees have been made to me regarding the result of examination or treatment in this hospital.

**NURSING CARE**

This hospital provides only general duty nursing care which is ordered by the physician(s). If the patient's condition necessitates a private duty nurse, it is agreed that such must be arranged by the patient or his/her legal representative. The hospital shall not be responsible for failure to provide the same and is hereby released from any and all liability arising from the fact that the patient is not provided with such additional care.

**PHYSICIANS ARE INDEPENDENT CONTRACTORS**

All physicians, surgeons providing services to the patient, including the radiologist, pathologist, anesthesiologist, emergency physician and the like, are independent contractors and are not employees or agents of the hospital. The physicians will bill separately for their services. They have been granted the privilege of using the hospital for care and treatment of their patients. However they are not representatives of the hospital. They are not employees of the hospital. They are independent contractors.

Patient initials: \_\_\_\_\_

I understand that I am under the care and supervision of my attending physician and it is the responsibility of the hospital and its nursing staff to carry out the instructions of such physician. My physician, surgeon or allied health professional is responsible for obtaining my informed consent, when required, to medical or surgical treatment, special diagnostic or therapeutic procedures, or hospital services rendered to me under the general and special instructions of my physician.

**MATERNITY PATIENTS**

If I deliver an infant(s) while a patient of this hospital, I agree that these same Conditions of Admission apply to the infant(s).

**PERSONAL BELONGINGS**

It is understood and agreed that the hospital maintains a fireproof safe for the safekeeping of money and valuables, and the hospital shall not be liable for the loss or damage to any money, jewelry, documents, or other articles not placed in the safe. The liability of the hospital for loss of any personal property which is deposited with the hospital for safekeeping is limited by statute to five hundred dollars (\$500.00) unless a written receipt for a greater amount has been obtained from the hospital by the patient.



Emanate Health  
Queen of the Valley Hospital  
1115 S Sunset Ave.  
West Covina, CA 91790

**CONDITIONS OF ADMISSION**

Lyons, Kathleen A  
DOB: 07/13/1961 (61 - F)  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/22  
Attend: Onyekwuluje, Anne N



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**SMOKING POLICY**

Emanate Health facilities are tobacco free facilities. The use of tobacco products is prohibited anywhere within and on the grounds of any Emanate Health facility and on all property maintained by the hospital (except in a private vehicle). The tobacco free policy applies to all individuals working, visiting or receiving care within the boundaries of the hospital property. The non-smoking policy applies to vaping and use of medical marijuana.

**FINANCIAL AGREEMENT**

I agree to promptly pay all hospital bills in accordance with the reimbursement rates listed in the hospital's charge description master and if applicable, the hospital's charity care and discount payment policy and state and federal law. I understand I may review the hospital's charge description before (or after) I receive services from the hospital. I understand that all physicians and surgeons, including the radiologist, pathologist, emergency physician, anesthesiologist, and others, will bill separately for their services. Should any account be referred to an attorney or collection agency for collection, I will pay actual attorneys' fees and collection expenses. All delinquent accounts shall bear interest at the legal rate, unless prohibited by law.

Patient initials: \_\_\_\_\_

**ASSIGNMENT OF INSURANCE BENEFITS**

I assign and authorize direct payment to the hospital of any insurance benefits payable for this hospitalization or for these outpatient services. I agree that payment to the hospital, pursuant to this authorization, by an insurance company shall discharge said insurance company of any and all obligations under a policy to the extent of such payment. I understand that I am financially responsible for charges not paid pursuant to this assignment to the extent permitted by state and federal law.

**HEALTH PLAN OBLIGATION**

This hospital maintains a list of health plans with which it contracts. A list of such plans is available upon request from the financial office. The hospital has no contract, express or implied, with any plan that does not appear on the list. I agree to pay the reimbursement rates listed in the hospital's Charge Description Master (in accordance with the hospital's charity care and discounted payment policies, if applicable, and state and federal law) for all services rendered to me by the hospital if I belong to a plan that does not appear on the above mentioned list. All physicians and surgeons will bill separately for their services. It is my responsibility to determine if physicians providing services to me contract with my health plan, if any.



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**USE OF MEDICAL DEVICES**

Some medical devices used in the hospital contain a chemical identified by the State of California as a chemical that may cause cancer or birth defects or other reproductive harm. These chemical include Ethylene Oxide (used to sterilize products), and DEHP (used as a plasticizer in many forms of polyvinyl chloride [PVC] to make products such as gastric feeding tubes and IV tubing soft and pliable.

**PHOTOGRAPH OF NEWBORNS:** Taking of photographs of my newborn child or children for possible purchase by me is approved by me.

**PHOTOGRAPHS AND RECORDINGS:** I consent to the taking of pictures of my medical or surgical condition or treatment, and the use of the pictures, for purposes of my diagnosis or treatment or for the hospital's operations, including peer review and education or training programs conducted by the hospital. Patients, family members and visitors may not take photographs of employees or the delivery of care and treatment without express, written consent by the hospital. This includes voice recording of verbal communication.

**CLINICAL TRAINING PROGRAMS:**

The hospital provides clinical training programs for several categories of health professionals. The programs include allowing students to observe and, in some instances, provide nursing or medical assistance under the direction of a physician or hospital staff. Unless noted otherwise, your signature below constitutes your authorization and consent for students to observe and / or provide assistance in your care and treatment.

**DISCHARGE INSTRUCTIONS**

Your physician will complete your discharge instructions and discuss them with you. A copy of your instructions will also be given to you upon discharge also has the ability to provide discharge instructions electronically upon request.

**HEALTH INFORMATION EXCHANGE**

The hospital participates in Lanes Health Information Exchange (HIE). Participation in Lanes HIE is for the purpose of treatment, payment, and healthcare operations or as required by law. Personal Health Information that currently by law requires an additional signed authorization for release WILL NOT be transmitted to Lanes HIE without your consent, or as otherwise mandated by law or regulatory requirement. For more detailed information, please refer to our Notice of Privacy Practice or call the Emanate Health Corporate Compliance Officer at (626) 814-2572.

I certify that I have read the foregoing and received a copy thereof. I am the patient, the patient's legal representative, or am otherwise duly authorized by the patient to sign the above and accept its terms on his/her behalf.

*pt unable to sign due to condition*  
Signature (responsible party)

Date 10/18/22

Time 2:46

Witness

Date

Time



Emanate Health  
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**CONDITIONS OF ADMISSION**

Lyons, Kathleen A  
DOB: 07/13/1961 (61 - F)  
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Adm/Svc: 10/18/22  
Attend: Onyekwuluje, Anne N



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**MEDICARE PATIENT'S RELEASE INFORMATION**

The undersigned certifies that information given by me in applying for payment under Title XVIII of Social Security Act is correct. I authorize any holder of medical or other information about me to release to the Social Security Administration or its intermediaries or carriers any information needed for this or a related Medicare claim. I request that payment of authorized benefits be made on my behalf. I am responsible for any remaining balance not covered by other insurance.

The undersigned also certifies that I have answered any applicable questions in regards to the Medicare Secondary Payor form. I understand that any misinformation can result in a reduction or nonpayment for services rendered.

\_\_\_\_\_  
Signature (*financially responsible party*) Date/Time

\_\_\_\_\_  
Witness Date/Time

**Financial Responsibility Agreement by Person Other Than the Patient or the Patient's Legal Representative**

I agree to accept financial responsibility for services rendered to the patient and to accept the terms of the Financial Agreement, Assignment of Insurance Benefits, and Health Plan Obligation provisions above.

\_\_\_\_\_  
Signature (*financially responsible party*) Date/Time

\_\_\_\_\_  
Witness: Date/Time

**A COPY OF THIS DOCUMENT SHOULD BE GIVEN TO THE PATIENT AND ANY OTHER PERSON WHO SIGNS THIS DOCUMENT**



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**CONDITIONS OF ADMISSION**

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**Who decides about my treatment?**

Your doctors will give you information and advice about treatment. You have the right to choose. You can say "Yes" to treatments you want. You can say "No" to any treatment that you don't want even if the treatment might keep you alive longer.

**How do I know what I want?**

Your doctor must tell you about your medical condition and about what different treatments and pain management alternatives can do for you. Many treatments have "side effects." Your doctor must offer you information about problems that medical treatment is likely to cause you.

Often, more than one treatment might help you-and people have different ideas about which is best. Your doctor can tell you which treatments are available to you, but your doctor can't choose for you. That choice is yours to make and depends on what is important to you.

**Can other people help with my decisions?**

Yes. Patients often turn to their relatives and close friends for help in making medical decisions. These people can help you think about the choices you ace. You can ask the doctor and nurses to talk with your relatives and friends. They can ask the doctors and nurses questions for you.

**Can I choose a relative or friend to make healthcare decisions for me?**

Yes. You may tell your doctor that you want someone else to make healthcare decisions for you. Ask the doctor to list that person as your healthcare "surrogate" in your medical record. The surrogate's control over your medical decisions is effective only during treatment for your current illness or injury or, if you are in a medical facility, until you leave the facility.

**What if I become too sick to make my own healthcare decisions?**

If you haven't named a surrogate, your doctor will ask your closest available relative or friend to help decide what is best for you. Most of the time that works. But sometimes everyone doesn't agree about what to do. That's why it is helpful if you can say in advance what you want to happen if you can't speak for yourself.

**Do I have to wait until I am sick to express my wishes about health care?**

No. In fact, it is better to choose before you get very sick or have to go into a hospital, nursing home, or other healthcare facility. You can use an Advance Health Care Directive to say who you want to speak for you and what kind of treatments you want. These documents are called "advance" because on prepare one before healthcare decisions need to be made. They are called "directives" because they state who will speak on your behalf and what should be done.



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In California, the part of an advance directive you can use to appoint an agent to make healthcare decisions is called a Power of Attorney For Health Care. The part where you can express what you want done is called an Individual Health Care Instruction.

**Who can make an advance directive?**

You can if you are 18 years or older and are capable of making your own medical decisions. You do not need a lawyer.

**Who can I name as my agent?**

You can choose an adult relative or any other person you trust to speak for you when medical decisions must be made.

**When does my agent begin making my medical decisions?**

A healthcare agent will make decisions only after you lose the ability to make them yourself. But, if you wish, you can state in the Power of Attorney for Health Care that you want the agent to begin making decisions immediately.

**How does my agent know what I would want?**

After you choose your agent, talk to that person about what you want. Sometimes treatment decisions are hard to make, and it truly helps if your agent knows what you want. You can also write your wishes down in your advance directive.

**What if I don't want to name an agent?**

You can still write out your wishes in your advance directive, without naming an agent. You can say that you want to have your life continued as long as possible. Or you can say that you would not want treatment to continue your life. Also, you can express your wishes about the use of pain relief or any other type of medical treatment.

Even if you have not filled out a written Individual Health Care Instruction, you can discuss your wishes with your doctor, and ask your doctor to list those wishes in your medical record. Or you can discuss your wishes with your family members or friends. But it will probably be easier to follow your wishes if you write them down.

**What if I change my mind?**

You can change or cancel your advance directive at any time as long as you can communicate your wishes. To change the person you want to make your healthcare decisions, you must sign a statement or tell the doctor in charge of your care.

**What happens when someone else makes decisions about my treatment?**

The same rules apply to anyone who makes healthcare decisions on your behalf--a healthcare agent, a surrogate whose name you gave to your doctor, or a person appointed by a court to make decisions for you. All are required to follow your **Health Care Instructions** or, if none, your general wishes about treatment, including stopping treatment. If your treatment wishes are not known, the surrogate must try to determine what is in your best interest.

The people providing your health care must follow the decisions of your agent or surrogate unless a requested treatment would be bad medical practice or ineffective in helping you. If this causes disagreement that cannot be worked out, the provider must make a reasonable effort to find another healthcare provider to take over your treatment.



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**CONDITIONS OF ADMISSIONS**



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Lyons, Kathleen A

DOB: 07/13/1961 (61 - F)

Acct#: QH0054940416 MRN#: MR01483046

Adm/Svc: 10/18/22

Attend: Onyekwuluje, Anne N



**Will I still be treated if I don't make an advance directive?**

Absolutely. You will still get medical treatment. We just want you to know that if you become too sick to make decisions, someone else will have to make them for you.

Remember that:

- A Power of Attorney For Health Care lets you name an agent to make decisions for you. Your agent can make most medical decisions-not just those about life sustaining treatment-when you can't speak for yourself. You can also let your agent make decisions earlier, if you wish.
- You can create an Individual Health Care Instruction by writing down your wishes about health care or by talking with your doctor and asking the doctor to record your wishes in your medical file. If you know when you would or would not want certain types of treatment, an Instruction provides a good way to make your wishes clear to your doctor and to anyone else who may be involved in deciding about treatment on your behalf.
- These two types of Advance Healthcare Directives may be used together or separately.

**How can I get more information about making an advance directive?**

Ask your doctor, nurse, social worker, or healthcare provider to get more information for you. You can have a lawyer write an advance directive for you, or you can complete an advance directive by filling in the blanks on a form.

All of us at Queen of the Valley Hospital want our patients to understand their rights to make medical treatment decisions.

complies with California Laws and court decisions on advance directives. We will not fail to provide care or otherwise discriminate against anyone based on whether or not on have executed an advance directive. We have normal policies to ensure that our wishes about treatment will be followed. We also have an ethics committee that can help if any questions arise about your treatment wishes.

It is your responsibility to provide a copy of your advance directive to the hospital so that it can be kept with your records. If you have any questions about any of these forms, please talk to your doctor, your nurse, or the social worker.

Queen of the Valley Hospital 's policy on Patient Self Determination Act (PSDA) and your right to make decisions about your medical treatment are available for you to review from your nurse or Social Worker.

Any complaints concerning advance directive requirements may be made to the local California Department of Public Health (626) 569-3980. Please contact the Social Services Department at (626) 814-2408 if you have any further questions.

Interpreter: \_\_\_\_\_

Relationship to patient: \_\_\_\_\_



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**CONDITIONS OF ADMISSION**

Lyons, Kathleen A

DOB: 07/13/1961 (61 - F)

Acct#: QH0054940416 MRN#: MR01483046

Adm/Svc: 10/18/22

Attend: Onyekwuluje, Anne N



\* C O A \*

133ADM IN  
134PRE IN  
FF.101 (Rev 09-18)  
7 of 7





0525

Patient Name: LYONS, KATHLEEN

MR #: MR01483046 Unit: ICU

**ORGAN/TISSUE DONATION**  
**ONE LEGACY 1-800-338-6112**  
 \*\*\* Notify within 60 minutes \*\*\*

One Legacy notified by: HENRY LAMPARERO RN  
 Date: 12/2/22 Time: 0525  
 Regarding:  Imminent Death  Death  
 Call accepted by: RIA  
 Donor Number (DN#): R 2211-05020  
 Candidate:  Yes  No  Unknown  
 Removal Here:  Yes  No

**RECORD OF DEATH**

Date of Death: 12/2/22 Time of Death: 0505  
 Patient Weight: 111 kg  
 Notified Next of Kin - Name: LYONS, MARY ELLEN  
 Relationship: Sister Phone: (626) 629-0197  
 Name of MD to Sign Death Certificate: Dr. LAU  
 MD Phone: (800) 940-2243

Check all that apply:  
 Bloodborne disease  Isolation  
 Chemotherapy w/in last 72 hrs  Pacemaker  
 Thallium/Indium/Gallium Scan within past 48 hrs  
 Dentures with patient

**Fetal Log**  
 Stillborn:  Yes  No Gestation: \_\_\_\_\_  
 Weight: \_\_\_\_\_ Length: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Time of Birth: \_\_\_\_\_

**REPORTING REQUIREMENTS**

The patient was restrained at the time of death  
 Death occurred within 24 hours after the removal of the restraint  
 Death occurred within 1 week after the removal of the restraint where it is reasonable to assume the use of restraint directly or indirectly contributed to the death

**Note: If one of the boxes above was checked notify Nursing Administration**

Not Applicable

**CORONER'S CASE:**  Accept  Reject

Case #: \_\_\_\_\_

Form 18 Completed:  Yes  No

PA Case:  Yes  No  given to contract for follow-up

**CONSENT FOR RELEASE OF BODY**

I request that the deceased and any required patient information be released to the following mortuary:

I have not made arrangements at this time. I will contact the hospital with the name of the mortuary and authorize the deceased and any required patient information be released to the designated mortuary.

Date/Time Call Received: \_\_\_\_\_  
 By: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Relationship: \_\_\_\_\_  
 Name of Mortuary: \_\_\_\_\_  
 Phone: \_\_\_\_\_

12/2/22 M.C. Lyons  
 Date/Time Signature  
Sister  
 Relationship

**RECEIPT OF PERSONAL BELONGINGS**

I acknowledge I have received the following belongings:

None

I certify the above information is correct, that I am the next of kin or a relative acting as an agent for the next of kin.

12/2/22 M.S. Lyons  
 Date/Time Signature  
Sister  
 Relationship

**RELEASE TO MORTUARY / DISPOSITION**

Body released by: L. Palomares  
 Body released to: A. Mendez AM  
 Date: 12-2-22 Time: 2038  
 Mortuary: Pierce Brothers  
 Address: 1136 E. Los Tomas Dr, San Gabriel, CA 91776



40-188 (Rev 7-19)

White - Chart Yellow - Mortuary Pink - Nursing Supervisor

Patient Information

Pati \_\_\_\_\_  
 Unit \_\_\_\_\_  
 D.O. \_\_\_\_\_

**Lyons, Kathleen A**  
 DOB: 07/13/1961 61Y - F  
 Acct#: QH0054940416 MRN#: MR01483046  
 Adm/Svc: 10/18/2022 Loc: Q1ICU Q1007 - A  
 Att: Lau, Tsang

QH0054940416 LYONS, KATHLEEN, A MR01483046

RUN DATE: 12/03/22  
 RUN TIME: 1

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Emanate Health  
 P.O. Box 6108, Covina, CA 91722-5108  
 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

PATIENT: Lyons, Kathleen A ACCT: QH0054940416 LOC: Q1ICU U: MR01483046  
 AGE/SX: 61/F ROOM: QI007 REG: 10/18/22  
 REG DR: Tsang Lau STATUS: DIS INx BED: A DIS: 12/02/22

\*\*\* Hematology \*\*\*

Date Time	12/1/22 0624	11/30/22 0526	11/29/22 0430	11/28/22 0535	Reference	Units
WBC	8.6	10.3 # H	13.3 # H	16.7 H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	2.7 L	3.0 L	3.1 L	3.1 L	(3.9-4.9)	X10 <sup>6</sup> uL
HGB	8.1 L	8.9 L	9.4 L	9.0 L	(11.5-14.8)	g/dL
HCT	25.8 L	27.7 L	29.7 L	28.7 L	(34.2-43.8)	%
MCV	95.2	93.8	95.3	94.1	(80.5-98.2)	fL
MCH	29.8	30.0	30.1	29.6	(27.0-33.8)	pg
MCHC	31.3 L	32.0 L	31.6 L	31.5 L	(32.9-35.1)	g/dL
RDW-CV	16.8 H	16.0 H	16.0 H	15.7 H	(12.2-14.9)	%
Plt	106 L	127 L	135 L	140 L	(144-366)	X10 <sup>3</sup> /uL
MPV	11.0 H	10.4 H	10.5 H	10.1 H	(7.2-9.9)	fL
Neut	71.8		80.3 H	83.1 H	(43.1-73.5)	%
Lymph	11.9 L		7.4 L	6.3 L	(17.6-44.7)	%
Mono	2.3 L		2.4 L	2.8	(2.8-11.9)	%
Eos	13.5 H		9.5 H	7.7 H	(0.5-5.9)	%
Baso	0.5		0.4	0.1 L	(0.2-0.9)	%
Neut #	6.2		10.7 H	13.9 H	(1.8-6.3)	K/mm3
Lymph #	1.0		1.0	1.0	(0.5-3.1)	K/mm3
Mono #	0.2		0.3	0.5	(0.2-0.7)	K/mm3
Eos #	1.2 H		1.3 H	1.3 H	(0.0-0.3)	K/mm3
Baso #	0.00 L		0.10	0.00 L	(0.06-0.11)	K/mm3
Tot Cell Count		100				
Neut		55			(42-76)	%
Lymph		7 L			(15-46)	%
Mono		3			(0-10)	%
Eos		24 H			(0-3)	%
Myelo		2.0				%
Band		9.0 H			(0-4)	%
Aniso		1+				

Date Time	11/27/22 0430	11/26/22 0545	11/25/22 0411	11/24/22 0530	Reference	Units
WBC	17.0 H	20.5 # H	14.9 # H	20.2 # H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	3.1 L	3.1 L	3.1 L	3.9	(3.9-4.9)	X10 <sup>6</sup> uL
HGB	9.3 L	9.5 L	9.4 # L	11.7	(11.5-14.8)	g/dL
HCT	29.7 L	30.1 L	28.7 L	35.8	(34.2-43.8)	%
MCV	94.9	95.8	92.1	92.2	(80.5-98.2)	fL
MCH	29.8	30.4	30.1	30.2	(27.0-33.8)	pg
MCHC	31.4 L	31.7 L	32.7 L	32.8 L	(32.9-35.1)	g/dL
RDW-CV	15.9 H	16.1 H	14.5	14.1	(12.2-14.9)	%
Plt	164	212	197 #	326	(144-366)	X10 <sup>3</sup> /uL
MPV	9.6	9.7	9.3	9.6	(7.2-9.9)	fL

Patient: Lyons, Kathleen A Age/Sex: 61/F AcctQH0054940416 UnitMR01483046

RUN DATE: 12/03/22  
 RUN TIME: 2

Emanate Health  
 P.O. Box 6108, Covina, CA 91722-5108  
 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Hematology (Continued) ***						
Date Time	11/27/22 0430	11/26/22 0545	11/25/22 0411	11/24/22 0530	Reference	Units
Neut			86.0 H		(43.1-73.5)	%
Lymph			8.3 L		(17.6-44.7)	%
Mono			5.5		(2.8-11.9)	%
Eos			0.0 L		(0.5-5.9)	%
Baso			0.2		(0.2-0.9)	%
Neut #			12.8 H		(1.8-6.3)	K/mm3
Lymph #			1.2		(0.5-3.1)	K/mm3
Mono #			0.8 H		(0.2-0.7)	K/mm3
Eos #			0.0		(0.0-0.3)	K/mm3
Baso #			0.00 L		(0.06-0.11)	K/mm3
Tot Cell Count	100	100		100		
Neut	80 H	85 H		61	(42-76)	%
Lymph	12 L	9 L		7 L	(15-46)	%
Mono	2	6		5	(0-10)	%
Eos	2				(0-3)	%
Meta	1.0					
Myelo				2.0		%
Band	3.0			25.0 H	(0-4)	%
RBC Morph	NORMAL	NORMAL	NORMAL	NORMAL		
Platelet Eval	(A)	(B)	(C)	(D)		
	(A) ADEQUATE					
	(B) ADEQUATE					
	(C) ADEQUATE					
	(D) ADEQUATE					
Scan			(E)			
	(E) NORMAL					
	See also (F)					
	(F) TECHNOLOGIST REVIEW OF PERIPHERAL SMEAR					
	CONFIRMS VALIDITY OF AUTOMATED DIFFERENTIAL.					
Aniso		1+				
Date Time	11/23/22 0621	11/22/22 0534	11/21/22 0615	11/20/22 1005	Reference	Units
WBC	11.2 # H	8.7 #	7.2	6.2	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	3.4 L	3.3 L	3.3 L	3.4 L	(3.9-4.9)	X10 <sup>6</sup> /uL
HGB	10.7 L	10.1 L	9.9 L	10.3 L	(11.5-14.8)	g/dL
HCT	31.4 L	30.1 L	29.8 L	31.6 L	(34.2-43.8)	%
MCV	91.9	91.9	91.5	91.9	(80.5-98.2)	fL
MCH	31.3	30.7	30.4	30.1	(27.0-33.8)	pg
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

Emanate Health  
 P.O. Box 6108, Covina, CA 91722-5108  
 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416				(Continued)	
*** Hematology (Continued) ***							
Date Time	11/23/22 0621	11/22/22 0534	11/21/22 0615	11/20/22 1005	Reference	Units	
MCHC	34.1	33.4	33.3	32.7	L (32.9-35.1)	g/dL	
RDW-CV	13.6	13.6	13.8	13.8	(12.2-14.9)	%	
Plt	266	277	297	341	(144-366)	X10 <sup>3</sup> /uL	
MPV	9.0	8.6	8.7	8.3	(7.2-9.9)	fL	
Neut	72.1	64.2	54.0	53.0	(43.1-73.5)	%	
Lymph	15.9	L 22.5	33.0	33.6	(17.6-44.7)	%	
Mono	6.0	6.3	6.7	8.2	(2.8-11.9)	%	
Eos	5.6	6.3	H 5.5	4.6	(0.5-5.9)	%	
Baso	0.4	0.7	0.8	0.6	(0.2-0.9)	%	
Neut #	8.1	H 5.6	3.9	3.3	(1.8-6.3)	K/mm3	
Lymph #	1.8	2.0	2.4	2.1	(0.5-3.1)	K/mm3	
Mono #	0.7	0.5	0.5	0.5	(0.2-0.7)	K/mm3	
Eos #	0.6	H 0.5	H 0.4	H 0.3	(0.0-0.3)	K/mm3	
Baso #	0.00	L 0.10	0.10	0.00	L (0.06-0.11)	K/mm3	
Date Time	11/19/22 0950	11/18/22 0622	11/17/22 0500	11/16/22 0542	Reference	Units	
WBC	5.5	5.3	5.8	6.5	(4.0-9.6)	10 <sup>3</sup> /uL	
RBC	3.3	L 3.3	L 3.4	L 3.4	(3.9-4.9)	X10 <sup>6</sup> /uL	
HGB	10.0	L 10.1	L 10.2	L 10.3	(11.5-14.8)	g/dL	
HCT	30.0	L 30.2	L 31.2	L 31.1	(34.2-43.8)	%	
MCV	90.7	91.2	91.7	91.6	(80.5-98.2)	fL	
MCH	30.3	30.4	30.1	30.3	(27.0-33.8)	pg	
MCHC	33.4	33.3	32.8	L 33.1	(32.9-35.1)	g/dL	
RDW-CV	13.5	13.4	13.5	13.3	(12.2-14.9)	%	
Plt	347	342	353	396	H (144-366)	X10 <sup>3</sup> /uL	
MPV	8.3	8.5	8.2	8.5	(7.2-9.9)	fL	
Neut	50.9	52.6	50.0	46.2	(43.1-73.5)	%	
Lymph	37.5	34.7	35.8	39.0	(17.6-44.7)	%	
Mono	5.7	5.5	6.9	7.6	(2.8-11.9)	%	
Eos	5.3	6.5	H 6.8	H 6.7	(0.5-5.9)	%	
Baso	0.6	0.7	0.5	0.5	(0.2-0.9)	%	
Neut #	2.8	2.8	2.9	3.0	(1.8-6.3)	K/mm3	
Lymph #	2.1	1.8	2.1	2.5	(0.5-3.1)	K/mm3	
Mono #	0.3	0.3	0.4	0.5	(0.2-0.7)	K/mm3	
Eos #	0.3	0.3	0.4	H 0.4	H (0.0-0.3)	K/mm3	
Baso #	0.00	L 0.00	L 0.00	L 0.00	L (0.06-0.11)	K/mm3	
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046			

Emanate Health  
 P.O. Box 6108, Covina, CA 91722-5108  
 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Hematology (Continued) ***						
Date Time	11/14/22 0623	11/13/22 0530	11/12/22 0600	11/11/22 0415	Reference	Units
WBC	7.1	7.0	7.0 #	9.9 # H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	3.6 L	3.4 L	3.2 L	3.6 L	(3.9-4.9)	X10 <sup>6</sup> uL
HGB	10.7 L	10.3 L	10.0 L	11.0 L	(11.5-14.8)	g/dL
HCT	32.2 L	30.8 L	29.7 L	33.1 L	(34.2-43.8)	%
MCV	90.1	89.9	91.6	91.1	(80.5-98.2)	fL
MCH	30.0	30.0	30.7	30.1	(27.0-33.8)	pg
MCHC	33.3	33.4	33.5	33.1	(32.9-35.1)	g/dL
RDW-CV	13.0	12.5	13.0	13.3	(12.2-14.9)	%
Plt	447 H	385 H	344	361	(144-366)	X10 <sup>3</sup> /uL
MPV	8.6	8.9	8.5	9.7	(7.2-9.9)	fL
Neut	59.5	58.0	57.4	61.7	(43.1-73.5)	%
Lymph	28.1	30.1	29.9	28.4	(17.6-44.7)	%
Mono	6.1	5.7	7.0	6.7	(2.8-11.9)	%
Eos	5.7	5.7	5.1	2.5	(0.5-5.9)	%
Baso	0.6	0.5	0.6	0.7	(0.2-0.9)	%
Neut #	4.3	4.1	4.0	6.1	(1.8-6.3)	K/mm3
Lymph #	2.0	2.1	2.1	2.8	(0.5-3.1)	K/mm3
Mono #	0.4	0.4	0.5	0.7	(0.2-0.7)	K/mm3
Eos #	0.4 H	0.4 H	0.4 H	0.3	(0.0-0.3)	K/mm3
Baso #	0.00 L	0.00 L	0.00 L	0.10	(0.06-0.11)	K/mm3
RBC Morph				NORMAL		
Platelet Eval				(G)		
	(G)	ADEQUATE				
Scan				(H)		
	(H)	NORMAL				
		See also (I)				
	(I)	TECHNOLOGIST REVIEW OF PERIPHERAL SMEAR				
		CONFIRMS VALIDITY OF AUTOMATED DIFFERENTIAL.				
Date Time	11/10/22 0510	11/9/22 0905	11/8/22 0556	11/7/22 0540	Reference	Units
WBC	7.3	7.6	9.5	10.8 H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	3.5 L	3.5 L	3.5 L	3.5 L	(3.9-4.9)	X10 <sup>6</sup> uL
HGB	10.7 L	10.5 L	10.9 L	10.8 L	(11.5-14.8)	g/dL
HCT	32.0 L	31.3 L	32.2 L	32.1 L	(34.2-43.8)	%
MCV	90.7	90.1	91.4	90.9	(80.5-98.2)	fL
MCH	30.2	30.2	30.9	30.7	(27.0-33.8)	pg
MCHC	33.3	33.6	33.8	33.7	(32.9-35.1)	g/dL
RDW-CV	13.0	13.2	13.3	13.3	(12.2-14.9)	%
Plt	338	346	340	332	(144-366)	X10 <sup>3</sup> /uL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

Emanate Health  
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 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Hematology (Continued) ***						
Date Time	11/10/22 0510	11/9/22 0905	11/8/22 0556	11/7/22 0540	Reference	Units
MPV	9.0	8.8	9.0	9.2	(7.2-9.9)	fL
Neut	71.8	69.3		68.5	(43.1-73.5)	%
Lymph	19.4	20.3		19.7	(17.6-44.7)	%
Mono	5.3	6.6		8.6	(2.8-11.9)	%
Eos	3.0	3.3		3.0	(0.5-5.9)	%
Baso	0.5	0.5		0.2	(0.2-0.9)	%
Neut #	5.2	5.3		7.4 H	(1.8-6.3)	K/mm3
Lymph #	1.4	1.5		2.1	(0.5-3.1)	K/mm3
Mono #	0.4	0.5		0.9 H	(0.2-0.7)	K/mm3
Eos #	0.2	0.2		0.3	(0.0-0.3)	K/mm3
Baso #	0.00 L	0.00 L		0.00 L	(0.06-0.11)	K/mm3
Tot Cell Count			100			
Neut			61		(42-76)	%
Lymph			25		(15-46)	%
Mono			9		(0-10)	%
Eos			2		(0-3)	%
Band			3.0		(0-4)	%
RBC Morph				NORMAL		
Platelet Eval		(J)		(K)		
	(J)	ADEQUATE				
	(K)	ADEQUATE				
Scan		(L)		(N)		
	(L)	NORMAL				
		See also (M)				
	(M)	TECHNOLOGIST REVIEW OF PERIPHERAL SMEAR				
		CONFIRMS VALIDITY OF AUTOMATED DIFFERENTIAL.				
	(N)	NORMAL				
		See also (M)				
Date Time	11/6/22 0600	11/5/22 0545	11/4/22 0516	11/3/22 0557	Reference	Units
WBC	12.7 H	12.8 H	14.7 H	12.5 # H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	4.0	3.9	4.1	4.0	(3.9-4.9)	X10 <sup>6</sup> /uL
HGB	11.7	11.9	12.7	12.1	(11.5-14.8)	g/dL
HCT	35.6	35.3	36.9	35.7	(34.2-43.8)	%
MCV	90.1	89.8	90.9	90.1	(80.5-98.2)	fL
MCH	29.5	30.3	31.3	30.6	(27.0-33.8)	pg
MCHC	32.8 L	33.7	34.4	34.0	(32.9-35.1)	g/dL
RDW-CV	13.5	13.7	13.3	13.0	(12.2-14.9)	%
Plt	336	312	296	258 #	(144-366)	X10 <sup>3</sup> /uL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

Emanate Health  
 P.O. Box 6108, Covina, CA 91722-5108  
 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Hematology (Continued) ***						
Date Time	11/6/22 0600	11/5/22 0545	11/4/22 0516	11/3/22 0557	Reference	Units
MPV	9.4	9.4	9.4	9.4	(7.2-9.9)	fL
Neut	67.6	71.1	66.7	68.5	(43.1-73.5)	%
Lymph	20.0	16.7 L	20.3	19.5	(17.6-44.7)	%
Mono	9.5	9.2	9.2	8.0	(2.8-11.9)	%
Eos	2.3	2.4	3.3	3.4	(0.5-5.9)	%
Baso	0.6	0.6	0.5	0.6	(0.2-0.9)	%
Neut #	8.6 H	9.1 H	9.8 H	8.6 H	(1.8-6.3)	K/mm3
Lymph #	2.5	2.1	3.0	2.4	(0.5-3.1)	K/mm3
Mono #	1.2 H	1.2 H	1.4 H	1.0 H	(0.2-0.7)	K/mm3
Eos #	0.3	0.3	0.5 H	0.4 H	(0.0-0.3)	K/mm3
Baso #	0.10	0.10	0.10	0.10	(0.06-0.11)	K/mm3
Platelet Eval	(O)					
	(O) ADEQUATE					
Scan	(P)					
	(P) NORMAL See also (Q)					
	(Q) TECHNOLOGIST REVIEW OF PERIPHERAL SMEAR CONFIRMS VALIDITY OF AUTOMATED DIFFERENTIAL.					
Date Time	11/1/22 0630	10/31/22 0525	10/30/22 0530	10/29/22 0605	Reference	Units
WBC	10.1 H	10.5 H	11.8 # H	15.8 # H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	3.7 L	3.8 L	3.9	3.8 L	(3.9-4.9)	X10 <sup>6</sup> uL
HGB	11.5	11.7	11.5	11.5	(11.5-14.8)	g/dL
HCT	34.3	34.6	35.4	35.0	(34.2-43.8)	%
MCV	92.1	91.8	91.8	91.9	(80.5-98.2)	fL
MCH	30.9	30.9	29.9	30.3	(27.0-33.8)	pg
MCHC	33.5	33.7	32.6 L	32.9	(32.9-35.1)	g/dL
RDW-CV	13.7	14.2	14.6	14.0	(12.2-14.9)	%
Plt	199	202	210	225	(144-366)	X10 <sup>3</sup> /uL
MPV	9.1	9.1	9.3	8.9	(7.2-9.9)	fL
Neut	71.4	66.0	65.7	74.4 H	(43.1-73.5)	%
Lymph	17.1 L	22.6	23.9	17.9	(17.6-44.7)	%
Mono	6.2	5.9	7.1	6.4	(2.8-11.9)	%
Eos	4.9	5.2	3.1	1.0	(0.5-5.9)	%
Baso	0.4	0.3	0.2	0.3	(0.2-0.9)	%
Neut #	7.2 H	6.9 H	7.8 H	11.7 H	(1.8-6.3)	K/mm3
Lymph #	1.7	2.4	2.8	2.8	(0.5-3.1)	K/mm3
Mono #	0.6	0.6	0.8 H	1.0 H	(0.2-0.7)	K/mm3
Eos #	0.5 H	0.5 H	0.4 H	0.2	(0.0-0.3)	K/mm3
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

RUN DATE: 12/03/22  
 RUN TIME: 7

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Hematology (Continued) ***						
Date	11/1/22	10/31/22	10/30/22	10/29/22	Reference	Units
Time	0630	0525	0530	0605		
Baso #	0.00 L	0.00 L	0.00 L	0.10	(0.06-0.11)	K/mm3
Date	10/28/22	10/27/22	10/26/22	10/25/22	Reference	Units
Time	0516	0416	0518	0456		
WBC	20.3 # H	13.7 # H	7.8 #	10.4 H	(4.0-9.6)	10 <sup>3</sup> /uL
RBC	3.9	4.4	4.2	4.4	(3.9-4.9)	X10 <sup>6</sup> /uL
HGB	11.7	13.4	13.0	13.4	(11.5-14.8)	g/dL
HCT	37.2	41.0	37.8	40.1	(34.2-43.8)	%
MCV	96.4	92.8	90.2	91.0	(80.5-98.2)	fL
MCH	30.3	30.3	31.0	30.5	(27.0-33.8)	pg
MCHC	31.4 L	32.7 L	34.4	33.5	(32.9-35.1)	g/dL
RDW-CV	14.8	13.9	13.5	13.4	(12.2-14.9)	%
Plt	237	278 #	217	214	(144-366)	X10 <sup>3</sup> /uL
MPV	8.7	8.9	8.7	9.6	(7.2-9.9)	fL
Neut	79.6 H		61.0	69.1	(43.1-73.5)	%
Lymph	10.6 L		29.7	22.1	(17.6-44.7)	%
Mono	6.3		5.8	5.6	(2.8-11.9)	%
Eos	3.3		2.6	2.8	(0.5-5.9)	%
Baso	0.2		0.9	0.4	(0.2-0.9)	%
Neut #	16.1 H		4.8	7.2 H	(1.8-6.3)	K/mm3
Lymph #	2.2		2.3	2.3	(0.5-3.1)	K/mm3
Mono #	1.3 H		0.5	0.6	(0.2-0.7)	K/mm3
Eos #	0.7 H		0.2	0.3	(0.0-0.3)	K/mm3
Baso #	0.00 L		0.10	0.00 L	(0.06-0.11)	K/mm3
Tot Cell Count		100				
Neut		94 H			(42-76)	%
Lymph		2 L			(15-46)	%
Mono		2			(0-10)	%
Band		2.0			(0-4)	%
RBC Morph		NORMAL		NORMAL		
Platelet Eval		(R)		(S)		
	(R) ADEQUATE					
	(S) ADEQUATE					
Date	10/24/22	10/22/22			Reference	Units
Time	0507	1159				
WBC	8.7	9.6			(4.0-9.6)	10 <sup>3</sup> /uL
RBC	4.4	4.5			(3.9-4.9)	X10 <sup>6</sup> /uL
HGB	13.4	13.6			(11.5-14.8)	g/dL
HCT	40.1	41.0			(34.2-43.8)	%
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		



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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Hematology (Continued) ***					
Date Time	10/24/22 0507	10/22/22 1159		Reference	Units
MCV	91.0	91.0		(80.5-98.2)	fL
MCH	30.5	30.1		(27.0-33.8)	pg
MCHC	33.5	33.1		(32.9-35.1)	g/dL
RDW-CV	13.7	13.9		(12.2-14.9)	%
Plt	226	241		(144-366)	X10 <sup>3</sup> /uL
MPV	8.4	8.3		(7.2-9.9)	fL
Neut	66.5	69.7		(43.1-73.5)	%
Lymph	26.8	22.9		(17.6-44.7)	%
Mono	4.6	4.9		(2.8-11.9)	%
Eos	1.7	1.8		(0.5-5.9)	%
Baso	0.4	0.7		(0.2-0.9)	%
Neut #	5.8	6.7 H		(1.8-6.3)	K/mm3
Lymph #	2.3	2.2		(0.5-3.1)	K/mm3
Mono #	0.4	0.5		(0.2-0.7)	K/mm3
Eos #	0.1	0.2		(0.0-0.3)	K/mm3
Baso #	0.00 L	0.10		(0.06-0.11)	K/mm3
*** Coagulation ***					
Date Time	11/18/22 0622	11/17/22 0500	11/16/22 0542	10/25/22 0456	Reference Units
PT	10.6	10.4	10.5	10.3	(9.5-11.5) Sec
INR	1.03(T)	1.01(T)	1.02(T)	1.00(T)	(0.90-1.10)
(T)	INR: USED FOR MONITORING OF ORAL ANTICOAGULANT THERAPY				
	INR: 2.0 - 3.0 :Treatment of venous thrombosis of pulmonary embolus; prophylaxis against venous thrombosis or systemic embolism; atrial fibrillation.				
	INR: 2.5 - 3.5 :High risk patients with mechanical heart valves; recurrent system embolism.				
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Urinalysis ***					
Date	11/2/22	10/26/22			
Time	1220	0730		Reference	Units
Color	Yellow	Yellow			(Yellow)
Appearance	Cloudy H	Clear			(Clear)
pH	7.0	6.0			(5.0 - 9.0)
Spec. Gravity	1.015	1.014			(1.005-1.030)
Protein	(U)	(V)			(Negative)
	(U) Negative				
	(V) Negative				
Glucose	(W)	3+ H			(Negative)
	(W) Negative				
Ketone	(X)	1+ H			(Negative)
	(X) Negative				
Urine Bilirubin	(Y)	(Z)			(Negative)
	(Y) Negative				
	(Z) Negative				
Blood	2+ H	1+ H			(Negative)
Urobilinogen	1.0	0.2			(0.2-1.0) EU/dL
WBC Est	1+ H	Trace H			(Negative)
Nitrite	(AA)	(AB)			(Negative)
	(AA) Negative				
	(AB) Negative				
WBC	0-2	0-2			(0-2) /HPF
RBC	51-100	6-10			(<=5) /HPF
Epithelial Cell	(AC)	(AD)			(Rare) /LPF
	(AC) None Seen				
	(AD) None Seen				
Bacteria	2+	(AE)			(None Seen) /HPF
	(AE) None Seen				
Non-Path Cast	0-2	0-2			(0-2) /LPF
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry ***					
Date	12/1/22	-----11/30/22-----	11/29/22		
Time	0624	1350	0526	1518	Reference Units
NA	153 H	166(AF) *H	167(AG) *H	166(AH) *H	(136-145) mmol/L
(AF)	Critical Results called to: JESSA MALACA RN Results called & Verbal Readback 1454 11/30/22 Leilani B Hernandez				
(AG)	Critical Results called to: JESSA MALACA, RN Results called & Verbal Readback 0729 11/30/22 Grace Deatherage				
(AH)	Critical Results called to: UMA GORRELA RN Results called & Verbal Readback 1645 11/29/22 Kelvin Gabi				
K	3.6(AI)	3.7(AI)	3.9(AI)	3.9(AI)	(3.4-4.5) mmol/L
(AI)	*NEW REFERENCE RANGES*				
CL	123 H	134 H	135 H	135 H	(98-107) mmol/L
CO2	19 L	22	22	24	(20-31) mmol/L
Gap	15	14	14	11	(5-15) mmol/L
Glu	399 H	151 H	197 H	110 H	(74-106) mg/dL
BUN	69 H	65 H	63 H	60 H	(9-23) mg/dL
Crea	2.67 H	2.39 H	2.36 H	2.36 H	(0.55-1.02) mg/dL
EGFR	18(AJ) L	21(AJ) L	21(AJ) L	21(AJ) L	(>60) mL/min
(AJ)	The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.				
TP	5.1 L				(5.7-8.2) g/dL
Alb	2.6 L				(3.2-4.8) g/dL
CA	8.7	9.3	9.9	10.3	(8.3-10.6) mg/dL
Phos	6.3 H				(2.5-4.9) mg/dL
MG	2.3				(1.6-2.6) mg/dL
Total Bilirubin	0.3				(0.3-1.2) mg/dL
AST	24				(<34) U/L
Alt	20				(10-49) U/L
Alk Phos	109				(46-116) U/L
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	12/1/22	-----11/30/22-----	11/29/22		
Time	0624	1350	0526	1518	Reference Units
Vancomycin Rand			(AK)		ug/mL
(AK)	11.1				
	Therapeutic Range				
	-----				
	Vancomycin Trough: 5.0-10.0 ug/mL				
	Vancomycin Peak: 25.0-40.0 ug/mL				
	Vancomycin Random: No Available Therapeutic Range				
Date	11/29/22	-----11/28/22-----			
Time	0430	2214	1748	0535	Reference Units
NA	164(AL) *H	163(AM) *H	160 H	159 H	(136-145) mmol/L
(AL)	Critical Results called to: UMA GORRELA RN Results called & Verbal Readback 0716 11/29/22 Estela C Garcia				
(AM)	Critical Results called to: [RN DAVID DOMINGUEZ] Results called & Verbal Readback 2350 11/28/22 Radford Raymond Pfancuff				
K	4.2(AN)	4.7(AN) H	4.2(AN)	4.7(AN) H	(3.4-4.5) mmol/L
(AN)	*NEW REFERENCE RANGES*				
CL	132 H	133 H	130 H	128 H	(98-107) mmol/L
CO2	22	22	22	21	(20-31) mmol/L
Gap	14	13	12	15	(5-15) mmol/L
Glu	349 H	340 H	413(AO) *H	395 H	(74-106) mg/dL
(AO)	Critical Results called to: UMA GORRALA, RN Results called & Verbal Readback 1907 11/28/22 Dyna Ines				
BUN	58 H	52 H	52 H	55 H	(9-23) mg/dL
Crea	2.45 H	2.45 H	2.48 H	2.55 H	(0.55-1.02) mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	11/29/22	-----11/28/22-----			
Time	0430	2214	1748	0535	Reference Units
EGFR	20(AP) L	20(AP) L	20(AP) L	19(AP) L	(>60) mL/min
<p>(AP) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.</p>					
TP	6.4			6.2	(5.7-8.2) g/dL
Alb	3.3			3.2	(3.2-4.8) g/dL
CA	10.4	10.6	10.2	9.8	(8.3-10.6) mg/dL
Phos	4.6			4.3	(2.5-4.9) mg/dL
MG	2.4			2.3	(1.6-2.6) mg/dL
Total Bilirubin	0.3			0.3	(0.3-1.2) mg/dL
AST	27			37 H	(<34) U/L
Alt	30			39	(10-49) U/L
Alk Phos	170 H			173 H	(46-116) U/L
Vancomycin Rand				(AQ)	ug/mL
<p>(AQ) 24.5          Therapeutic Range</p> <hr/> <p>Vancomycin Trough: 5.0-10.0 ug/mL          Vancomycin Peak: 25.0-40.0 ug/mL          Vancomycin Random: No Available Therapeutic Range</p>					
Date		-----11/27/22-----		11/26/22	
Time	2200	1310	0430	1434	Reference Units
NA	159 H	157 H	157 H	160 H	(136-145) mmol/L
K	4.3(AR)	4.4(AR)	4.5(AR)	4.3(AR)	(3.4-4.5) mmol/L
<p>(AR) *NEW REFERENCE RANGES*</p>					
CL	128 H	126 H	126 H	127 H	(98-107) mmol/L
CO2	21	22	22	22	(20-31) mmol/L
Gap	14	13	14	15	(5-15) mmol/L
Glu	369 H	355 H	294 H	199 H	(74-106) mg/dL
BUN	53 H	51 H	51 H	50 H	(9-23) mg/dL
Crea	2.51 H	2.36 H	2.20 H	1.90 H	(0.55-1.02) mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	-----11/27/22-----			11/26/22	
Time	2200	1310	0430	1434	Reference Units
EGFR	19(AS) L	21(AS) L	23(AS) L	27(AS) L	(>60) mL/min
(AS) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.					
TP			6.5		(5.7-8.2) g/dL
Alb			3.4		(3.2-4.8) g/dL
CA	9.1	9.4	9.5	9.3	(8.3-10.6) mg/dL
Phos			5.3 H		(2.5-4.9) mg/dL
MG			2.2		(1.6-2.6) mg/dL
Total Bilirubin			0.2 L		(0.3-1.2) mg/dL
AST			55 H		(<34) U/L
Alt			58 H		(10-49) U/L
Alk Phos			163 H		(46-116) U/L
Vanc Trough		27.4 H		30.1 H	(5.0-10.0) ug/mL
Date	11/26/22	-----11/25/22-----			
Time	0545	2000	1430	0411	Reference Units
NA	160 H	156 H	160 H	162(AT) *H	(136-145) mmol/L
(AT) Critical Results called to: LALAIN OANDASAN, RN Results called & Verbal Readback 0510 11/25/22 Joel M Fuerte					
K	4.1(AU)	4.8(AU) H	3.8(AU)	3.3(AU) L	(3.4-4.5) mmol/L
(AU) *NEW REFERENCE RANGES*					
CL	126 H	126 H	131 H	133 H	(98-107) mmol/L
CO2	22	21	22	22	(20-31) mmol/L
Gap	16 H	14	11	10	(5-15) mmol/L
Glu	261 H	495(AV) *H	301 H	197 H	(74-106) mg/dL
(AV) Critical Results called to: LALAIN OANDASAN RN Results called & Verbal Readback 2035 11/25/22 Kelvin Gabi					
BUN	52 H	42 H	38 H	30 H	(9-23) mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	11/26/22	-----11/25/22-----			
Time	0545	2000	1430	0411	Reference Units
Crea	1.76 H	1.55 H	0.98	1.13 H	(0.55-1.02) mg/dL
EGFR	29(AW) L	34(AW) L	58(AW) L	49(AW) L	(>60) mL/min
<p>(AW) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.</p>					
TP	6.8			6.3	(5.7-8.2) g/dL
Alb	3.6			3.3	(3.2-4.8) g/dL
CA	9.8	9.2	9.1	9.7	(8.3-10.6) mg/dL
Phos	5.0 H			2.8	(2.5-4.9) mg/dL
MG	2.4			2.4	(1.6-2.6) mg/dL
Total Bilirubin	0.2 L			0.2 L	(0.3-1.2) mg/dL
AST	84 H			50 H	(<34) U/L
Alt	87 H			74 H	(10-49) U/L
CK				141	(34-145) U/L
Alk Phos	110			90	(46-116) U/L
Date		-----11/24/22-----			
Time	2327	1727	1615	0530	Reference Units
NA	163(AX) *H	158 H		143	(136-145) mmol/L
<p>(AX) Critical Results called to: LALAIN OANDASAN, RN        Results called &amp; Verbal Readback        0004 11/25/22 Joel M Fuerte</p>					
K	3.4(AZ)	3.4(AZ)		4.4(AZ)	(3.4-4.5) mmol/L
<p>(AZ) *NEW REFERENCE RANGES*</p>					
CL	132 H	127 # H		109 H	(98-107) mmol/L
CO2	23	24		24	(20-31) mmol/L
Gap	11	10		14	(5-15) mmol/L
Glu	175 H	289 H		565(AZ) *H	(74-106) mg/dL
<p>(AZ) Critical Results called to: MOLINA TONG RN        Results called &amp; Verbal Readback        0740 11/24/22 Jannette L Cruz</p>					
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date	-----11/24/22-----					
Time	2327	1727	1615	0530	Reference	Units
BUN	27 H	29 H		23	(9-23)	mg/dL
Crea	1.17 H	1.27 H		1.30 H	(0.55-1.02)	mg/dL
EGFR	47(BA) L	43(BA) L		42(BA) L	(>60)	mL/min
<p>(BA) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.</p>						
CA	9.5	10.0		10.2	(8.3-10.6)	mg/dL
CK		43			(34-145)	U/L
Ur Osmo			224.0		(50-1200)	mosm/Kg
Urine Sodium			11.0			mmol/L
CLUR			< 20			mmol/L
Date	11/23/22	11/22/22	11/21/22	11/20/22	Reference	Units
Time	0621	0534	0615	1005		
NA	141	140	143	146 H	(136-145)	mmol/L
K	4.1(BB)	3.9(BB)	3.9(BB)	4.1(BB)	(3.4-4.5)	mmol/L
(BB) *NEW REFERENCE RANGES*						
CL	105	108 H	110 H	114 H	(98-107)	mmol/L
CO2	29	28	27	25	(20-31)	mmol/L
Gap	11	8	10	11	(5-15)	mmol/L
Glu	200 H	295 H	273 H	237 H	(74-106)	mg/dL
BUN	14	15	13	13	(9-23)	mg/dL
Crea	0.85	0.88	0.91	0.89	(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		



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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date Time	11/23/22 0621	11/22/22 0534	11/21/22 0615	11/20/22 1005	Reference	Units
EGFR	(BC)	(BE)	(BF)	(BG)	(>60)	mL/min
	(BC) > 60 See also (BD) (BD) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in mL/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation. (BE) > 60 See also (BD) (BF) > 60 See also (BD) (BG) > 60 See also (BD)					
TP	6.5	6.4	6.3	6.1	(5.7-8.2)	g/dL
Alb	3.9	3.5	3.4	3.5	(3.2-4.8)	g/dL
CA	9.4	9.5	8.9	9.1	(8.3-10.6)	mg/dL
Phos			4.6	4.7	(2.5-4.9)	mg/dL
MG			1.8	2.0	(1.6-2.6)	mg/dL
Total Bilirubin	0.2 L	0.2 L	0.2 L	0.2 L	(0.3-1.2)	mg/dL
Direct Bili		< 0.1 L			(<0.3)	mg/dL
AST	68 H	104 H	171 H	195 H	(<34)	U/L
Alt	149 H	183 H	225 H	221 H	(10-49)	U/L
Alk Phos	126 H	118 H	117 H	128 H	(46-116)	U/L
Date Time	11/19/22 0950	11/18/22 0622	11/17/22 0500	11/16/22 0542	Reference	Units
NA	146 H	143	144	143	(136-145)	mmol/L
K	3.8(BH)	3.8(BH)	3.7(BH)	3.9(BH)	(3.4-4.5)	mmol/L
	(BH) *NEW REFERENCE RANGES*					
CL	114 H	110 H	109 H	107	(98-107)	mmol/L
CO2	26	25	27	30	(20-31)	mmol/L
Gap	10	12	12	10	(5-15)	mmol/L
Glu	136 H	189 H	170 H	235 H	(74-106)	mg/dL
BUN	11	14	17	18	(9-23)	mg/dL
Crea	0.90	0.76	0.73	0.98	(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date Time	11/19/22 0950	11/18/22 0622	11/17/22 0500	11/16/22 0542	Reference	Units
EGFR	(BI)	(BK)	(BL)	58(BJ) L	(>60)	mL/min
	(BI) > 60 See also (BJ) (BJ) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in mL/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation. (BK) > 60 See also (BJ) (BL) > 60 See also (BJ)					
TP	6.2	6.1	6.3	6.4	(5.7-8.2)	g/dL
Alb	3.3	3.4	3.4	3.7	(3.2-4.8)	g/dL
CA	9.3	9.3	9.3	9.7	(8.3-10.6)	mg/dL
MG		2.0	2.0	2.2	(1.6-2.6)	mg/dL
Total Bilirubin	< 0.2 L	< 0.2 L	< 0.2 L	0.2 L	(0.3-1.2)	mg/dL
AST	96 H	90 H	107 H	109 H	(<34)	U/L
Alt	151 H	168 H	195 H	235 H	(10-49)	U/L
Alk Phos	115	125 H	114	125 H	(46-116)	U/L
Date Time	11/14/22 0623	11/13/22 0530	11/12/22 0600	11/11/22 0415	Reference	Units
NA	141	137	136	131 L	(136-145)	mmol/L
K	4.3(BM)	3.9(BM)	4.0(BM)	4.6(BM) H	(3.4-4.5)	mmol/L
	(BM) *NEW REFERENCE RANGES*					
CL	103	103	103	101	(98-107)	mmol/L
CO2	28	28	26	25	(20-31)	mmol/L
Gap	14	10	11	10	(5-15)	mmol/L
Glu	192 H	113 H	168 H	315 H	(74-106)	mg/dL
BUN	14	14	13	17	(9-23)	mg/dL
Crea	0.91	0.75	0.73	1.04 H	(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	11/14/22	11/13/22	11/12/22	11/11/22	
Time	0623	0530	0600	0415	Reference Units
EGFR	(BN)	(BP)	(BQ)	54(BO) L	(>60) mL/min
	(BN) > 60 See also (BO) (BO) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation. (BP) > 60 See also (BO) (BQ) > 60 See also (BO)				
CA	9.7	9.8	9.6	8.9	(8.3-10.6) mg/dL
MG	2.1	2.1	2.1	1.9	(1.6-2.6) mg/dL
Date	11/10/22	-----11/9/22-----		11/8/22	
Time	0530	1500	0905	0556	Reference Units
NA	133 L		133 L	133 L	(136-145) mmol/L
K	4.3(BR)		4.3(BR)	4.8(BR) H	(3.4-4.5) mmol/L
	(BR) *NEW REFERENCE RANGES*				
CL	99		99	99	(98-107) mmol/L
CO2	28		29	28	(20-31) mmol/L
Gap	10		9	11	(5-15) mmol/L
Glu	203 H		179 H	160 H	(74-106) mg/dL
BUN	18		20	28 H	(9-23) mg/dL
Crea	0.89		0.96	1.18 H	(0.55-1.02) mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	11/10/22	-----11/9/22-----	11/8/22		
Time	0530	1500	0905	0556	Reference Units
EGFR	(BS)		59(BT) L	47(BT) L	(>60) mL/min
	(BS) > 60				
	See also (BT)				
	(BT) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.				
CA	9.7		9.6	9.7	(8.3-10.6) mg/dL
MG	2.0		2.1	2.3	(1.6-2.6) mg/dL
Vanc Trough		15.0 H			(5.0-10.0) ug/mL
Date	-----11/7/22-----	11/6/22	11/5/22		
Time	1415	0540	0600	0545	Reference Units
NA		134 L	133 L	132 L	(136-145) mmol/L
K		4.6(BU) H	4.7(BU) H	4.5(BU)	(3.4-4.5) mmol/L
	(BU) *NEW REFERENCE RANGES*				
CL		98	96 L	95 L	(98-107) mmol/L
CO2		28	31	29	(20-31) mmol/L
Gap		13	11	13	(5-15) mmol/L
Glu		134 H	151 H	269 H	(74-106) mg/dL
BUN		40 H	32 H	31 H	(9-23) mg/dL
Crea		1.38 H	1.28 H	1.20 H	(0.55-1.02) mg/dL
EGFR		39(BV) L	42(BV) L	46(BV) L	(>60) mL/min
	(BV) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.				
CA		10.2	10.2	9.9	(8.3-10.6) mg/dL
MG		2.5	2.6		(1.6-2.6) mg/dL
Vanc Trough	13.0 H				(5.0-10.0) ug/mL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date Time	11/4/22 0516	11/3/22 0557	11/2/22 0600	11/1/22 0630	Reference	Units
NA	133 L	132 L	132 L	140	(136-145)	mmol/L
K	4.3(BW)	4.3(BW)	4.5(BW)	4.5(BW)	(3.4-4.5)	mmol/L
(BW) *NEW REFERENCE RANGES*						
CL	96 L	96 L	98	106	(98-107)	mmol/L
CO2	30	27	28	29	(20-31)	mmol/L
Gap	11	13	11	10	(5-15)	mmol/L
Glu	191 H	265 H	274 H	280 H	(74-106)	mg/dL
BUN	22	19	15	14	(9-23)	mg/dL
Crea	0.89	0.88	0.97	0.90	(0.55-1.02)	mg/dL
EGFR	(BX)	(BZ)	58(BY) L	(CA)	(>60)	mL/min
(BX) > 60 See also (BY)						
(BY) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.						
(BZ) > 60 See also (BY)						
(CA) > 60 See also (BY)						
CA	9.7	9.2	9.4	9.0	(8.3-10.6)	mg/dL
MG				1.8	(1.6-2.6)	mg/dL
Date Time	10/31/22 0525	-----10/30/22----- 0530	0123	10/29/22 1710	Reference	Units
NA	146 H	144	141	141	(136-145)	mmol/L
K	4.0(CB)	4.2(CB)	4.3(CB)	4.4(CB)	(3.4-4.5)	mmol/L
(CB) *NEW REFERENCE RANGES*						
CL	110 H	113 H	113 H	114 H	(98-107)	mmol/L
CO2	27	24	23	21	(20-31)	mmol/L
Gap	13	11	9	10	(5-15)	mmol/L
Glu	229 H	316 H	326 H	298 H	(74-106)	mg/dL
BUN	12	14	14	15	(9-23)	mg/dL
Crea	0.86	0.95	0.86	0.80	(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date	10/31/22	-----10/30/22-----		10/29/22		
Time	0525	0530	0123	1710	Reference	Units
EGFR	(CC)	60(CD)	(CE)	(CF)	(>60)	mL/min
	(CC) > 60					
	See also (CD)					
	(CD) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.					
	(CE) > 60					
	See also (CD)					
	(CF) > 60					
	See also (CD)					
TP	6.6	6.4			(5.7-8.2)	g/dL
Alb	3.7	3.7			(3.2-4.8)	g/dL
CA	8.9	9.2	8.5	8.4	(8.3-10.6)	mg/dL
MG	1.8	1.8			(1.6-2.6)	mg/dL
Total Bilirubin	0.2 L	0.3			(0.3-1.2)	mg/dL
AST	13	19			(<34)	U/L
Alt	14	16			(10-49)	U/L
Alk Phos	99	96			(46-116)	U/L
Date	-----10/29/22-----		10/28/22			
Time	1051	0605	0124	0909	Reference	Units
NA	142	142	143	142	(136-145)	mmol/L
K	4.1(CG)	3.9(CG)	4.2(CG)	4.3(CG)	(3.4-4.5)	mmol/L
	(CG) *NEW REFERENCE RANGES*					
CL	113 H	116 H	117 H	116 H	(98-107)	mmol/L
CO2	20	20	19 L	18 L	(20-31)	mmol/L
Gap	13	10	11	12	(5-15)	mmol/L
Glu	257 H	174 H	160 H	146 H	(74-106)	mg/dL
BUN	17	17	16	26 H	(9-23)	mg/dL
Crea	0.85	0.81	0.85	1.06 H	(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	-----10/29/22-----			10/28/22	
Time	1051	0605	0124	0909	Reference Units
EGFR	(CH)	(CJ)	(CK)	53(CI) L	(>60) mL/min
	(CH) > 60 See also (CI) (CI) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation. (CJ) > 60 See also (CI) (CK) > 60 See also (CI)				
CA	8.6	8.9	8.6	8.6	(8.3-10.6) mg/dL
Phos		2.9			(2.5-4.9) mg/dL
MG		2.0			(1.6-2.6) mg/dL
Date	-----10/28/22-----		-----10/27/22-----		
Time	0517	0117	2200	1804	Reference Units
NA	141	142	145	139	(136-145) mmol/L
K	4.7(CL) H	4.8(CL) # H	3.1(CL) # L	3.7(CL)	(3.4-4.5) mmol/L
	(CL) *NEW REFERENCE RANGES*				
CL	116 H	117 H	121 H	111 H	(98-107) mmol/L
CO2	17 L	15 L	16 L	19 L	(20-31) mmol/L
Gap	13	15	11	13	(5-15) mmol/L
Glu	160 H	150 H	164 # H	315 H	(74-106) mg/dL
BUN	23	31 H	26 H	31 H	(9-23) mg/dL
Crea	1.13 H	1.18 H	0.97	1.43 H	(0.55-1.02) mg/dL
EGFR	49(CM) L	47(CM) L	58(CM) L	37(CM) L	(>60) mL/min
	(CM) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.				
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date	-----10/28/22-----		-----10/27/22-----			
Time	0517	0117	2200	1804	Reference	Units
TP	6.1				(5.7-8.2)	g/dL
Alb	3.5				(3.2-4.8)	g/dL
CA	8.6	8.9 #	6.6(CN) #*L	8.5	(8.3-10.6)	mg/dL
	(CN)	Critical Results called to: RN HELEN MAK] Results called & Verbal Readback 2302 10/27/22 Radford Raymond Pfancuff				
Phos	3.8			2.6	(2.5-4.9)	mg/dL
MG	2.0				(1.6-2.6)	mg/dL
Total Bilirubin	0.8				(0.3-1.2)	mg/dL
AST	32				(<34)	U/L
Alt	13				(10-49)	U/L
Alk Phos	77				(46-116)	U/L
Date	10/27/22	10/26/22	10/25/22	10/24/22		
Time	0416	0518	0456	0507	Reference	Units
NA	135 L	136	137	136	(136-145)	mmol/L
K	4.9(CO) H	4.5(CO)	4.1(CO)	4.5(CO)	(3.4-4.5)	mmol/L
	(CO) *NEW REFERENCE RANGES*					
CL	104	104	105	103	(98-107)	mmol/L
CO2	16 L	25	26	26	(20-31)	mmol/L
Gap	20 H	12	10	12	(5-15)	mmol/L
Glu	518(CP) *H	267 H	174 H	298 H	(74-106)	mg/dL
	(CP)	Critical Results called to: XAVIER DOMINGUEZ, RN Results called & Verbal Readback 0526 10/27/22 Joel M Fuente				
BUN	18	16	13	17	(9-23)	mg/dL
Crea	1.18 H	0.93	0.87	0.97	(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		



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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)		
*** Chemistry (Continued) ***						
Date	10/27/22	10/26/22	10/25/22	10/24/22	Reference	Units
Time	0416	0518	0456	0507		
EGFR	47(CQ) L	(CR)	(CS)	58(CQ) L	(>60)	mL/min
	<p>(CQ) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.</p> <p>(CR) &gt; 60 See also (CQ)</p> <p>(CS) &gt; 60 See also (CQ)</p>					
CA	8.8	8.7	8.8	8.7	(8.3-10.6)	mg/dL
Phos	3.4	3.8	4.3		(2.5-4.9)	mg/dL
MG	1.9	1.8	2.0		(1.6-2.6)	mg/dL
Date	10/22/22	10/20/22	10/19/22		Reference	Units
Time	1159	0501	0553			
NA	134 L	136	132 L		(136-145)	mmol/L
K	4.5(CT)	4.0(CT)	4.1(CT)		(3.4-4.5)	mmol/L
	(CT) *NEW REFERENCE RANGES*					
CL	103	103	99		(98-107)	mmol/L
CO2	19 L	20	25		(20-31)	mmol/L
Gap	17 H	17 H	12		(5-15)	mmol/L
Glu	313 H	65(CU) L	126 H		(74-106)	mg/dL
	(CU) Implement the hypoglycemia protocol					
BUN	13	13	10		(9-23)	mg/dL
Crea	0.80	0.79	0.75		(0.55-1.02)	mg/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046		

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
*** Chemistry (Continued) ***					
Date	10/22/22	10/20/22	10/19/22		
Time	1159	0501	0553	Reference	Units
EGFR	(CV)	(CX)	(CY)	( >60)	mL/min
	(CV) > 60				
	See also (CW)				
	(CW) The eGFR is calculated using the IDMS-Traceable Modification of Diet Renal Disease (MDRD) Equation. This equation is reported in ml/min/1.75 sq.meters and has not been tested with pregnant woman and some patients with serious comorbid conditions or persons of extremes of body size, muscle mass or nutritional status. Applications of the equation to this group may lead to errors in the eGFR estimation.				
	(CX) > 60				
	See also (CW)				
	(CY) > 60				
	See also (CW)				
TP	6.9			(5.7-8.2)	g/dL
Alb	4.0			(3.2-4.8)	g/dL
CA	8.9	8.6	8.8	(8.3-10.6)	mg/dL
Total Bilirubin	0.5			(0.3-1.2)	mg/dL
AST	16			(<34)	U/L
Alt	12			(10-49)	U/L
Alk Phos	97			(46-116)	U/L
***Special Chemistry***					
Date	11/25/22	-----11/24/22-----			
Time	0411	2327	2326	1621	Reference Units
Ammonia	< 10 L	10 L		(11-32)	umol/L
B-TNP			69(CZ)	(0-100)	pg/mL
	(CZ) The Brain Natriuretic Peptide (BNP) is an aid in the diagnosis and assessment of severity of heart failure. This test, in conjunction with other know risk factors, can also be used to predict survival in patients after myocardial infarction. The BNP should be interpreted by the physician in conjunction with clinical findings and other diagnostic test.				
Cort Random				96.33	ug/dL
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
***Special Chemistry (continued)***					
Date	10/28/22	10/25/22		Reference	Units
Time	0517	0456			
HGBA1C		7.9(DA) H		(<5.7)	%
(DA)					
For a patient who does not have diabetes, a normal A1C level is below 5.7%. If the A1C level is between 5.7 and 6.4%, the patient has impaired fasting glucose, which means a high risk for developing diabetes in the future (prediabetes).					
An A1C level of 6.5% or higher on two separate occasions indicates diabetes. An A1C level above 7% may indicate that a patient's diabetes is not well controlled.					
TSH		0.513 L		(0.55-4.78)	uIU/mL
***Serology***					
Date	11/24/22			Reference	Units
Time	2326				
Myco IgM Titer		(DB)		(Negative)	
(DB) Negative					
***Blood Gas***					
Date	10/26/22			Reference	Units
Time	2115				
pH		7.431		(7.35-7.45)	
pCO2		29.7 L		(35-45)	mmHg
pO2		311.0 H		(80-100)	mmHg
HCO3-		19.8 L		(20-26)	mmol/L
BE		-4.5 L		(-3+3)	mmol/L
%O2 Sat (calc)		99.4		(95-100)	%
tHb (RCD)		14.4		(10.0-16.0)	g/dL
%O2HB		98.6 H		(94-97)	%
CarboxyHGB		0.2			%
%MetHB		0.6		(0-1.5)	%
P(A-a)O2		360.600			mmHg
pH(T)		7.431			
PCO2(T)		29.7			
PO2(T)		311			
DEVICE		VENT			
FIO2 %		100.0			
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
***Blood Gas (continued)***					
Date	10/26/22				
Time	2115			Reference	Units
VT. cc	500				
AC	16				
Set Rate	16				
PT. RATE	16				
PEEP	5				
Test	Date	Time	Result	Reference	Units
Procalcitonin	11/24/22	2327	0.59	(<0.10)	ng/mL
Glu Bedside	10/19/22	0031	195	H (70-110)	
Glu Bedside	10/19/22	0815	203	H (70-110)	
Glu Bedside	10/19/22	0925	280	H (70-110)	
Glu Bedside	10/19/22	1149	369	H (70-110)	
Glu Bedside	10/19/22	1621	233	H (70-110)	
Glu Bedside	10/19/22	2051	248	H (70-110)	
Glu Bedside	10/20/22	0754	104	(70-110)	
Glu Bedside	10/20/22	1151	201	H (70-110)	
Glu Bedside	10/20/22	1643	233	H (70-110)	
Glu Bedside	10/20/22	2022	174	H (70-110)	
Glu Bedside	10/21/22	0750	208	H (70-110)	
Glu Bedside	10/21/22	1133	363	H (70-110)	
Glu Bedside	10/21/22	1608	238	H (70-110)	
Glu Bedside	10/21/22	2106	137	H (70-110)	
Glu Bedside	10/22/22	0800	183	H (70-110)	
Glu Bedside	10/22/22	1124	243	H (70-110)	
Glu Bedside	10/22/22	1725	300	H (70-110)	
Glu Bedside	10/22/22	2001	170	H (70-110)	
Glu Bedside	10/23/22	0223	37	*L (70-110)	
Glu Bedside	10/23/22	0250	52	L (70-110)	
Glu Bedside	10/23/22	0333	144	H (70-110)	
Glu Bedside	10/23/22	0749	257	H (70-110)	
Glu Bedside	10/23/22	1049	245	H (70-110)	
Glu Bedside	10/23/22	1701	79	(70-110)	
Glu Bedside	10/23/22	2031	126	H (70-110)	
Glu Bedside	10/24/22	0801	247	H (70-110)	
Glu Bedside	10/24/22	1132	212	H (70-110)	
Glu Bedside	10/24/22	1649	189(DC)	H (70-110)	
	(DC) MD Sliding Scale Follow Protocol CleanMeter-Pre/Post				
Glu Bedside	10/24/22	2022	182	H (70-110)	
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	10/25/22	0743	243	H (70-110)	
Glu Bedside	10/25/22	1232	190	H (70-110)	
Glu Bedside	10/25/22	1751	179	H (70-110)	
Glu Bedside	10/25/22	2044	85	(70-110)	
Glu Bedside	10/26/22	0753	260	H (70-110)	
Glu Bedside	10/26/22	1107	275	H (70-110)	
Glu Bedside	10/26/22	2059	240	H (70-110)	
Glu Bedside	10/26/22	2320	304	H (70-110)	
Glu Bedside	10/27/22	0532	468	*H (70-110)	
Glu Bedside	10/27/22	1221	441	*H (70-110)	
Glu Bedside	10/27/22	1316	403	*H (70-110)	
Glu Bedside	10/27/22	1408	427	*H (70-110)	
Glu Bedside	10/27/22	1509	366	H (70-110)	
Glu Bedside	10/27/22	1607	321(DD)	H (70-110)	
(DD) MD Sliding Scale					
Glu Bedside	10/27/22	1713	277	H (70-110)	
Glu Bedside	10/27/22	1807	286	H (70-110)	
Glu Bedside	10/27/22	1850	227	H (70-110)	
Glu Bedside	10/27/22	2008	220	H (70-110)	
Glu Bedside	10/27/22	2101	231	H (70-110)	
Glu Bedside	10/27/22	2203	156	H (70-110)	
Glu Bedside	10/27/22	2308	157	H (70-110)	
Glu Bedside	10/28/22	0010	140	H (70-110)	
Glu Bedside	10/28/22	0109	138	H (70-110)	
Glu Bedside	10/28/22	0227	142	H (70-110)	
Glu Bedside	10/28/22	0306	145	H (70-110)	
Glu Bedside	10/28/22	0404	136	H (70-110)	
Glu Bedside	10/28/22	0504	146	H (70-110)	
Glu Bedside	10/28/22	0609	151	H (70-110)	
Glu Bedside	10/28/22	0721	134	H (70-110)	
Glu Bedside	10/28/22	0812	134	H (70-110)	
Glu Bedside	10/28/22	0907	136	H (70-110)	
Glu Bedside	10/28/22	0955	142	H (70-110)	
Glu Bedside	10/28/22	1207	141	H (70-110)	
Glu Bedside	10/28/22	1412	149	H (70-110)	
Glu Bedside	10/28/22	1550	147	H (70-110)	
Glu Bedside	10/28/22	1748	133	H (70-110)	
Glu Bedside	10/28/22	2004	142	H (70-110)	
Glu Bedside	10/28/22	2202	171	H (70-110)	
Glu Bedside	10/29/22	0025	96	(70-110)	
Glu Bedside	10/29/22	0224	189	H (70-110)	
Glu Bedside	10/29/22	0354	198	H (70-110)	
Glu Bedside	10/29/22	0442	203	H (70-110)	
Glu Bedside	10/29/22	0605	174	H (70-110)	
Glu Bedside	10/29/22	0803	116	H (70-110)	
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	10/29/22	1011	202	H (70-110)	
Glu Bedside	10/29/22	1154	210	H (70-110)	
Glu Bedside	10/29/22	1615	192	H (70-110)	
Glu Bedside	10/29/22	1949	225	H (70-110)	
Glu Bedside	10/29/22	2351	293	H (70-110)	
Glu Bedside	10/30/22	0341	259	H (70-110)	
Glu Bedside	10/30/22	0821	230	H (70-110)	
Glu Bedside	10/30/22	1234	244	H (70-110)	
Glu Bedside	10/30/22	1643	249	H (70-110)	
Glu Bedside	10/30/22	1957	248	H (70-110)	
Glu Bedside	10/30/22	2334	256	H (70-110)	
Glu Bedside	10/31/22	0335	211	H (70-110)	
Glu Bedside	10/31/22	0750	191	H (70-110)	
Glu Bedside	10/31/22	1115	143	H (70-110)	
Glu Bedside	10/31/22	1617	196	H (70-110)	
Glu Bedside	10/31/22	2117	254	H (70-110)	
Glu Bedside	11/1/22	0013	299	H (70-110)	
Glu Bedside	11/1/22	0355	237	H (70-110)	
Glu Bedside	11/1/22	0750	248	H (70-110)	
Glu Bedside	11/1/22	1158	289	H (70-110)	
Glu Bedside	11/1/22	1411	277	H (70-110)	
Glu Bedside	11/1/22	1601	303	H (70-110)	
Glu Bedside	11/1/22	2013	255	H (70-110)	
Glu Bedside	11/2/22	0107	237	H (70-110)	
Glu Bedside	11/2/22	0411	230	H (70-110)	
Glu Bedside	11/2/22	0856	215(DE)	H (70-110)	
(DE) MD Sliding Scale Repeat Immediately Notify MD					
Glu Bedside	11/2/22	1255	176	H (70-110)	
Glu Bedside	11/2/22	1620	185	H (70-110)	
Glu Bedside	11/2/22	2023	171	H (70-110)	
Glu Bedside	11/3/22	0007	185	H (70-110)	
Glu Bedside	11/3/22	0359	223	H (70-110)	
Glu Bedside	11/3/22	0804	237	H (70-110)	
Glu Bedside	11/3/22	1145	195	H (70-110)	
Glu Bedside	11/3/22	1601	188	H (70-110)	
Glu Bedside	11/3/22	2006	165	H (70-110)	
Glu Bedside	11/4/22	0030	174	H (70-110)	
Glu Bedside	11/4/22	0434	167	H (70-110)	
Glu Bedside	11/4/22	0757	156	H (70-110)	
Glu Bedside	11/4/22	1210	171	H (70-110)	
Glu Bedside	11/4/22	1622	173	H (70-110)	
Glu Bedside	11/4/22	2228	271	H (70-110)	
Glu Bedside	11/5/22	0136	319	H (70-110)	
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

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Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	11/5/22	0458	273	H (70-110)	
Glu Bedside	11/5/22	1013	175	H (70-110)	
Glu Bedside	11/5/22	1329	133(DF)	H (70-110)	
(DF) Notify MD					
Glu Bedside	11/5/22	1810	170	H (70-110)	
Glu Bedside	11/5/22	2149	154	H (70-110)	
Glu Bedside	11/6/22	0239	224	H (70-110)	
Glu Bedside	11/6/22	0622	146	H (70-110)	
Glu Bedside	11/6/22	1010	146	H (70-110)	
Glu Bedside	11/6/22	1405	167	H (70-110)	
Glu Bedside	11/6/22	1804	204	H (70-110)	
Glu Bedside	11/6/22	2211	190	H (70-110)	
Glu Bedside	11/7/22	0226	134	H (70-110)	
Glu Bedside	11/7/22	0546	130	H (70-110)	
Glu Bedside	11/7/22	0954	117	H (70-110)	
Glu Bedside	11/7/22	1400	88	(70-110)	
Glu Bedside	11/7/22	1730	156	H (70-110)	
Glu Bedside	11/7/22	2232	137	H (70-110)	
Glu Bedside	11/8/22	0149	157	H (70-110)	
Glu Bedside	11/8/22	0551	140	H (70-110)	
Glu Bedside	11/8/22	1014	143	H (70-110)	
Glu Bedside	11/8/22	1429	99	(70-110)	
Glu Bedside	11/8/22	1733	145	H (70-110)	
Glu Bedside	11/8/22	2146	181	H (70-110)	
Glu Bedside	11/9/22	0207	186	H (70-110)	
Glu Bedside	11/9/22	0603	169	H (70-110)	
Glu Bedside	11/9/22	1015	160	H (70-110)	
Glu Bedside	11/9/22	1510	188	H (70-110)	
Glu Bedside	11/9/22	1759	242	H (70-110)	
Glu Bedside	11/9/22	2201	300	H (70-110)	
Glu Bedside	11/10/22	0142	295(DG)	H (70-110)	
(DG) Follow Protocol					
Glu Bedside	11/10/22	0558	175	H (70-110)	
Glu Bedside	11/10/22	0934	167	H (70-110)	
Glu Bedside	11/10/22	1135	PENDING	(70-110)	
Glu Bedside	11/10/22	1458	207	H (70-110)	
Glu Bedside	11/10/22	1750	235	H (70-110)	
Glu Bedside	11/10/22	2232	230(DH)	H (70-110)	
(DH) Follow Protocol					
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

RUN DATE: 12/03/22  
 RUN TIME: 31

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Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	11/11/22	0223	251(DI)	H (70-110)	
	(DI) Follow Protocol				
Glu Bedside	11/11/22	0634	312(DJ)	H (70-110)	
	(DJ) Follow Protocol				
Glu Bedside	11/11/22	1002	245	H (70-110)	
Glu Bedside	11/11/22	1527	226	H (70-110)	
Glu Bedside	11/11/22	1829	252	H (70-110)	
Glu Bedside	11/11/22	2137	214	H (70-110)	
Glu Bedside	11/12/22	0202	140	H (70-110)	
Glu Bedside	11/12/22	0533	129	H (70-110)	
Glu Bedside	11/12/22	0801	149	H (70-110)	
Glu Bedside	11/12/22	1012	134	H (70-110)	
Glu Bedside	11/12/22	1354	137	H (70-110)	
Glu Bedside	11/12/22	1734	211	H (70-110)	
Glu Bedside	11/12/22	2228	141	H (70-110)	
Glu Bedside	11/13/22	0109	113	H (70-110)	
Glu Bedside	11/13/22	0608	105	(70-110)	
Glu Bedside	11/13/22	1030	83	(70-110)	
Glu Bedside	11/13/22	1349	88	(70-110)	
Glu Bedside	11/13/22	1803	138	H (70-110)	
Glu Bedside	11/13/22	2207	146	H (70-110)	
Glu Bedside	11/14/22	0238	135	H (70-110)	
Glu Bedside	11/14/22	0409	144	H (70-110)	
Glu Bedside	11/14/22	0630	164	H (70-110)	
Glu Bedside	11/14/22	1005	176	H (70-110)	
Glu Bedside	11/14/22	1345	176	H (70-110)	
Glu Bedside	11/14/22	1737	149	H (70-110)	
Glu Bedside	11/14/22	2206	188	H (70-110)	
Glu Bedside	11/15/22	0212	193	H (70-110)	
Glu Bedside	11/15/22	0540	221	H (70-110)	
Glu Bedside	11/15/22	1046	230	H (70-110)	
Glu Bedside	11/15/22	1440	222	H (70-110)	
Glu Bedside	11/15/22	1743	198	H (70-110)	
Glu Bedside	11/15/22	2156	197	H (70-110)	
Glu Bedside	11/16/22	0243	200	H (70-110)	
Glu Bedside	11/16/22	0608	205	H (70-110)	
Glu Bedside	11/16/22	0957	163	H (70-110)	
Glu Bedside	11/16/22	1403	104	(70-110)	
Glu Bedside	11/16/22	1726	114	H (70-110)	
Glu Bedside	11/16/22	2210	115	H (70-110)	
Glu Bedside	11/17/22	0123	98	(70-110)	
Glu Bedside	11/17/22	0548	132	H (70-110)	
Glu Bedside	11/17/22	1116	156	H (70-110)	
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	



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Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	11/17/22	1413	127	H (70-110)	
Glu Bedside	11/17/22	1708	126	H (70-110)	
Glu Bedside	11/17/22	2140	130	H (70-110)	
Glu Bedside	11/18/22	0134	158	H (70-110)	
Glu Bedside	11/18/22	0522	166	H (70-110)	
Glu Bedside	11/18/22	0948	166	H (70-110)	
Glu Bedside	11/18/22	1520	109	(70-110)	
Glu Bedside	11/18/22	1718	109	(70-110)	
Glu Bedside	11/18/22	2235	92	(70-110)	
Glu Bedside	11/19/22	0204	75	(70-110)	
Glu Bedside	11/19/22	0556	142	H (70-110)	
Glu Bedside	11/19/22	0948	132	H (70-110)	
Glu Bedside	11/19/22	1423	106	(70-110)	
Glu Bedside	11/19/22	1749	137	H (70-110)	
Glu Bedside	11/19/22	2213	162	H (70-110)	
Glu Bedside	11/20/22	0154	193	H (70-110)	
Glu Bedside	11/20/22	1109	207	H (70-110)	
Glu Bedside	11/20/22	1401	213	H (70-110)	
Glu Bedside	11/20/22	1750	186	H (70-110)	
Glu Bedside	11/20/22	2142	197	H (70-110)	
Glu Bedside	11/21/22	0244	215	H (70-110)	
Glu Bedside	11/21/22	0633	242	H (70-110)	
Glu Bedside	11/21/22	1022	242	H (70-110)	
Glu Bedside	11/21/22	1517	239	H (70-110)	
Glu Bedside	11/21/22	1703	235	H (70-110)	
Glu Bedside	11/21/22	2155	169	H (70-110)	
Glu Bedside	11/22/22	0636	289	H (70-110)	
Glu Bedside	11/22/22	1153	225	H (70-110)	
Glu Bedside	11/22/22	1557	195	H (70-110)	
Glu Bedside	11/22/22	2159	200	H (70-110)	
Glu Bedside	11/23/22	0114	194	H (70-110)	
Glu Bedside	11/23/22	0536	176	H (70-110)	
Glu Bedside	11/23/22	1230	328	H (70-110)	
Glu Bedside	11/23/22	1801	390	H (70-110)	
Glu Bedside	11/23/22	2035	396	H (70-110)	
Glu Bedside	11/23/22	2343	462(DK)	*H (70-110)	
(DK) Notify MD					
Glu Bedside	11/24/22	0530	501(DL)	*H (70-110)	
(DL) Notify MD					
Glu Bedside	11/24/22	0819	436(DM)	*H (70-110)	
(DM) Notify MD					
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

RUN DATE: 12/03/22  
 RUN TIME: 33

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Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	11/24/22	1010	409(DN) *H	(70-110)	
	(DN) Notify MD				
Glu Bedside	11/24/22	1242	413(DO) *H	(70-110)	
	(DO) Notify MD				
Glu Bedside	11/24/22	1412	347 H	(70-110)	
Glu Bedside	11/24/22	1556	281 H	(70-110)	
Glu Bedside	11/24/22	1740	241 H	(70-110)	
Glu Bedside	11/24/22	2042	189 H	(70-110)	
Glu Bedside	11/24/22	2238	155 H	(70-110)	
Glu Bedside	11/25/22	0007	140 H	(70-110)	
Glu Bedside	11/25/22	0227	155 H	(70-110)	
Glu Bedside	11/25/22	0500	160 H	(70-110)	
Glu Bedside	11/25/22	0609	165 H	(70-110)	
Glu Bedside	11/25/22	0812	182 H	(70-110)	
Glu Bedside	11/25/22	1040	185 H	(70-110)	
Glu Bedside	11/25/22	1203	190 H	(70-110)	
Glu Bedside	11/25/22	1556	330 H	(70-110)	
Glu Bedside	11/25/22	2002	391 H	(70-110)	
Glu Bedside	11/25/22	2207	377 H	(70-110)	
Glu Bedside	11/26/22	0010	347 H	(70-110)	
Glu Bedside	11/26/22	0442	218 H	(70-110)	
Glu Bedside	11/26/22	0607	208 H	(70-110)	
Glu Bedside	11/26/22	0827	176 H	(70-110)	
Glu Bedside	11/26/22	1216	176 H	(70-110)	
Glu Bedside	11/26/22	1615	175 H	(70-110)	
Glu Bedside	11/26/22	2044	209 H	(70-110)	
Glu Bedside	11/26/22	2230	221 H	(70-110)	
Glu Bedside	11/26/22	2358	197 H	(70-110)	
Glu Bedside	11/27/22	0349	249 H	(70-110)	
Glu Bedside	11/27/22	0843	284 H	(70-110)	
Glu Bedside	11/27/22	1215	310 H	(70-110)	
Glu Bedside	11/27/22	1655	322 H	(70-110)	
Glu Bedside	11/27/22	2028	268 H	(70-110)	
Glu Bedside	11/28/22	0011	305 H	(70-110)	
Glu Bedside	11/28/22	0513	326 H	(70-110)	
Glu Bedside	11/28/22	1235	269 H	(70-110)	
Glu Bedside	11/28/22	1711	292 H	(70-110)	
Glu Bedside	11/28/22	1931	286 H	(70-110)	
Glu Bedside	11/29/22	0044	323 H	(70-110)	
Glu Bedside	11/29/22	0339	318 H	(70-110)	
Glu Bedside	11/29/22	0623	238 H	(70-110)	
Glu Bedside	11/29/22	1222	126 H	(70-110)	
Glu Bedside	11/29/22	1735	59 L	(70-110)	
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

RUN DATE: 12/03/22  
 RUN TIME: 34

Emanate Health  
 P.O. Box 6108, Covina, CA 91722-5108  
 Inter-Community Hospital and Queen of the Valley Hospital  
 Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
Test	Date	Time	Result	Reference	Units
Glu Bedside	11/29/22	1802	149 H	(70-110)	
Glu Bedside	11/29/22	1957	91	(70-110)	
Glu Bedside	11/29/22	2221	57 L	(70-110)	
Glu Bedside	11/29/22	2255	144 H	(70-110)	
Glu Bedside	11/30/22	0119	90	(70-110)	
Glu Bedside	11/30/22	0530	51 L	(70-110)	
Glu Bedside	11/30/22	0548	163 H	(70-110)	
Glu Bedside	11/30/22	0805	119 H	(70-110)	
Glu Bedside	11/30/22	1154	151 H	(70-110)	
Glu Bedside	11/30/22	1356	134 H	(70-110)	
Glu Bedside	11/30/22	1555	114 H	(70-110)	
Glu Bedside	11/30/22	2011	88	(70-110)	
Glu Bedside	12/1/22	0027	115 H	(70-110)	
Glu Bedside	12/1/22	0705	112 H	(70-110)	
Glu Bedside	12/1/22	1254	117 H	(70-110)	
Glu Bedside	12/1/22	1854	110	(70-110)	
Glu Bedside	12/1/22	2012	105	(70-110)	
Glu Bedside	12/1/22	2352	126 H	(70-110)	
Glu Bedside	12/2/22	0439	81	(70-110)	
VENT MODES	10/26/22	2115	AC		
ABG LAA	10/26/22	2115	1.8 H	(0.5-1.6)	mmol/L
Na+ (RCD)	10/26/22	2115	136.0	(136-145)	meq/L
K+ (RCD)	10/26/22	2115	4.3	(3.5-5.1)	meq/L
Ca++	10/26/22	2115	1.16	(1.13-1.32)	mmol/L
Cl- (RCD)	10/26/22	2115	105.0	(98-107)	meq/L
Sample Type	10/26/22	2115	Arterial		
Sample Site	10/26/22	2115	(DP)		
(DP) Right Radial					
Allens Test	10/26/22	2115	Pass		
Radiometer Inst	10/26/22	2115	QVH-B		
<b>*** Microbiology ***</b>					
Specimen: 22:B0022197R					
<b>Urine Culture</b>		Final 11/05/22			
Organism 1	Enterobacter cloacae complex				
Colony Count	>100,000 CFU/ml				
Organism 2	Staphylococcus epidermidis				
Colony Count	>100,000 CFU/ml				
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	



RUN DATE: 12/03/22  
RUN TIME: 36

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Emanate Health  
P.O. Box 6108, Covina, CA 91722-5108  
Inter-Community Hospital and Queen of the Valley Hospital  
Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A	QH0054940416	(Continued)
*** Microbiology (Continued) ***		
Specimen: 22:BC0030336R		
Blood Culture	Final 11/30/22	NO GROWTH AFTER 5 DAYS
Specimen: 22:M0024765S		
MRSA Culture	Final 10/28/22	No growth of Methicillin Resistant Staph aureus (MRSA)
Specimen: 22:M0025397R		
Gram Stain	Final 11/02/22	
Gram Stain	1+ (Rare) White Blood Cells	No organisms Seen
Sputum Culture	Final 11/07/22	
Organism 1	Normal respiratory flora	
Quantitation:	1+ (Rare)	
Specimen: 22:M0027575R		
Gram Stain	Final 11/25/22	
Gram Stain	3+ (Moderate) White Blood Cells	No organisms Seen
Sputum Culture	Final 11/27/22	
Organism 1	Normal respiratory flora	
Quantitation:	1+ (Rare)	
Patient: Lyons, Kathleen A	Age/Sex: 61/F	AcctQH0054940416 UnitMR01483046

RUN DATE: 12/03/22  
RUN TIME: 37

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Emanate Health  
P.O. Box 6108, Covina, CA 91722-5108  
Inter-Community Hospital and Queen of the Valley Hospital  
Foothill Presbyterian Hospital

Summary Discharge Report for LIS ELR

Patient: Lyons, Kathleen A		QH0054940416		(Continued)	
<b>***Blood Culture***</b>					
Specimen: 22:BC0028096R					
Blood Culture		Final 11/07/22 NO GROWTH AFTER 5 DAYS			
Specimen: 22:BC0028097R					
Blood Culture		Final 11/07/22 NO GROWTH AFTER 5 DAYS			
Specimen: 22:BC0030335R					
Blood Culture		Final 11/30/22 NO GROWTH AFTER 5 DAYS			
Specimen: 22:BC0030336R					
Blood Culture		Final 11/30/22 NO GROWTH AFTER 5 DAYS			
<b>*** Blood Bank ***</b>					
COLLECTED: Oct 25, 2022 6:26pm					
Blood Type		B POSITIVE			
Antibody Screen		NEGATIVE			
COLLECTED: Oct 25, 2022 4:55am					
ABO/Rh Retype		B POSITIVE			
Patient: Lyons, Kathleen A		Age/Sex: 61/F		AcctQH0054940416 UnitMR01483046	

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046  
 Account Num QH005494016  
 Allergies No Known Allergies  
 Admt Date 10/18/22  
 Discharge Date 12/02/22  
 Status DIS INX

MEDICATION DISCHARGE SUMMARY

Age 61  
 sex F

ADMINISTRATION PERIOD:  
 0700 10/19/22 to 0659 10/19/22

Sodium Chloride 0.9% 1,000 ML  
 (0.9% Sodium Chloride 1,000 ml Bag)  
 50 Mls/Hr IV .020H  
 RX #: 002217827

10/18/22 2345 NSC.TRM110 at 10/19/22 - 0032 GAVE: 50 Mls/Hr  
 Barcode Medication: Sodium Chloride 0.9%  
 NDC/DIN: 00338004904 (SOURCE: Default NDCs)  
 Admin Queries  
 Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed Time (minutes):  
 0m Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0  
 2359 Edit or Verification ZPH.A.BOB  
 2359 Edit or Verification ZPH.A.BOB  
 0032 Acknowledged Order NSC.TRM110  
 0032 Infusion in Progress 0032 NSC.TRM110: Started, Dose Rate: , Rate: 50 Mls/Hr  
 Intake: , Cumulative Intake: , Container Volume: 1000 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 50  
 Waste Amount: 0  
 0044 Transaction Rule PHABKJOB  
 MEDI.WASTE - Medicate Waste  
 Description: Debit Svc Dc/Tm 10/19/22 0032: NS Amount Wasted: 0 ML, Drug Waste%: 0

Printivill (Lisinopril 40 mg Tablet)  
 40 MG PO NOW/ONE  
 RX #: 002217873  
 10/19/22 0008 NSC.TRM110 at 0033 GAVE: 40 MG  
 Barcode Medication: Printivill  
 10/19/22  
 NDC/DIN: 00904720061 (SOURCE: Default NDCs)  
 0012 Edit or Verification ZPH.A.BOB  
 0012 Edit or Verification ZPH.A.BOB  
 0012 Discontinue PHABKJOB  
 0033 Acknowledged Order NSC.TRM110  
 0044 Transaction Rule PHABKJOB  
 MEDI.WASTE - Medicate Waste  
 Description: Debit Svc Dc/Tm 10/19/22 0033: ZES40 Amount Wasted: 0 MG, Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 10/18/22 to 0659 10/19/22 (continued)		

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
30 UNITS SUB-Q Daily with Breakfast  
Comments: PR approved sub for: Iartus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02219101

**Zofran (Ondansetron 4 mg/2 ml Vial)**  
4 MG 1V-Push Q6H/PRN  
PRN Reason: Nausea And Vomiting  
RX #: Q02217854

**Tylenol (Acetaminophen 650 mg supp)**  
650 MG PR Q6H/PRN  
PRN Reason: Fever >100.4  
Comments: Maximum acetaminophen (in any form) allowable  
in 24 hours is  
4gm.  
RX #: Q02217855

**Dulcolax (Bisacodyl 10 mg supp)**  
10 MG PR Q6H/PRN  
PRN Reason: Constipation  
RX #: Q02217856

**Glucose 15 (Dextrose Gel 40% 1 each tube)**  
1 EACH PO PR PROCOU/PRN  
PRN Reason: Hypoglycemia  
Comments: 93.75 ml tube of Glucose 15 delivers 15 gms  
of glucose.  
Give if BS < 70 with or without symptoms of  
hypoglycemia.  
RX #: Q02217857



DATE: 12/03/22 @ 0013  
USER: PHARCTORB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 10/18/22 to 0659 10/19/22 (continued)

START/  
STOP

**Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)**  
See Dose Ins. SUB-Q with meals and at bedtime/PRN  
PRN Reason: Glucocorticoid Coverage  
Comments: LA/SA warning; order is for Novolin  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02217868

110/19/22 0009 Edit or Verification ZPHA.BOB  
1009 Edit or Verification ZPHA.BOB  
0654 Acknowledged Order ZPBMJAU

ADMINISTRATION PERIOD:  
0700 10/19/22 to 0659 10/20/22

START/  
STOP

**Sodium Chloride 0.9% 1,000 mL**  
**(0.9% Sodium Chloride 1,000 mL Bag)**  
50 MLS/HR IV .Q20H  
RX #: Q02217827

110/18/22 1945 NSC.TRM101 at 2115 GAVR: 50 MLS/HR  
Barcode Medication: sodium chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)

Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 1000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
2032 Infusion in Progress 2032 NSC.TRM101: Infused, Dose Rate: , Rate: 50 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (RX):  
1000 Container Volume: 0 Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease:  
Infused Intake: 1000 Infusion Rate: 50 Waste Amount: 0  
2115 Infusion in Progress 2115 NSC.TRM101: started/Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 1000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
2120 Transaction Rule PHARCTORB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 10/19/22 2115: NS Amount Wasted: 0 ML; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHARMC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num ME01483046  
 Medication Discharge Summary  
 Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 10/19/22 to 0659 10/20/22 (continued)		

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
**30 UNIT** SUB-Q Daily with Breakfast  
 Comments: PAT approved sub for: Iartus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRE 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02219101

110/19/22	1540	Edit of Verification ZPHA,AS
110/20/22	1540	Edit of Verification ZPHA,AS
	1540	Edit of Verification ZPHA,AS
	1541	Acknowledged Order ZBRMLAU
	1541	Edit of Verification ZPHA,AS
	1541	Edit of Verification ZPHA,AS
	1545	ZBRMLAU at 1554 CO-SIGNER: NSC.TRM69 SITE: left PosteroLateral Arm GAVE: 30 UNIT
		Barcode Medication: Levemir
		NDC/DIN: 0169368712 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 233 MAR Injection site: 13
	1624	Edit of Verification DAUG80
	1625	Order Entry DAUG80
	1649	Acknowledged Order ZBRMLAU
	1705	Transaction Rule PHARMC08
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 10/19/22 1654: INSHLYT Amount Wasted: 0 UNIT; Amount Given: 0.300 ML
	2130	Discontinue ZPHA,SAK
		0533 Acknowledged Order NSC.TRM101

**Prinivil (Lisinopril 20 mg Tablet)**  
**20 MG** PO DAILY  
 RX #: Q02218670

110/20/22	1120	Edit of Verification ZPHA,CL
	1120	Edit of Verification ZPHA,CL
	1122	Acknowledged Order ZBRMLAU
	1621	Discontinue DAUG80
	1621	Order Entry DAUG80
	1623	Acknowledged Order ZBRMLAU

**Synthroid (Levothyroxine 112 mcg Tablet)**  
**112 MCG** PO DAILY before breakfast  
 RX #: Q02218666

110/20/22	1118	Edit of Verification ZPHA,CL
	1118	Edit of Verification ZPHA,CL
	1122	Acknowledged Order ZBRMLAU
	0647	Transaction Rule PHARMC08
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 10/20/22 0641: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHARGT08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 10/19/22 to 0659 10/20/22 (continued)	

Prilinavil (Lisihopril 40 mg Tablet)  
40 MG PO DAILY  
RX #: 002219192

START/STOP	DESCRIPTION
10/20/22	1621 Order Entry DAVGO
	1623 Acknowledged Order ZERNIAU
	1634 Edit or Verification VUCHRIS
	1634 Edit or Verification VUCHRIS

Levemir (Insulin Detemir 100 units/ml 10ml Vial)

START/STOP	DESCRIPTION
10/20/22	1625 Order Entry DAVGO
	1641 Edit or Verification VUCHRIS
	1649 Acknowledged Order ZERNIAU
	2131 Edit or Verification ZPHA.SAK
	2131 Edit or Verification ZPHA.SAK
	0533 Acknowledged Order NSC.TRM101

35 UNIT SUB-Q DAILY  
Comments: Eat approved sub for: Lantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002219569

10/19/22 1649 Acknowledged Order ZERNIAU  
10/20/22 2100 Not Administered ZERNIAU at 10/20/22 - 0814 prev shift  
2132 Discontinue ZPHA.SAK  
2132 Edit or Verification SYSTEM

DATE: 12/03/22 @ 0013  
USER: PHABKGOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/19/22 to 0659 10/20/22 (continued)	STAGE	STAGE

**Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)**  
**See Dose Ins.** SUB-Q with meals and at bedtime/PN  
PN Reason: Glucosecan Coverage  
Comments: LA/SA warnings; order is for Novolin  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRE 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02217868

10/19/22	0822 ZERNIAU at 0822 CO-SIGNER: GURRIS SITE: Left Posterolateral Arm GAVE: 4 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 204 MAR Injection site: 13
	0832 Transaction Rule PHABKGOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/19/22 0822; INSRBG Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	1155 ZERNIAU at 1155 CO-SIGNER: NSC.TRN69 SITE: Right Posterolateral Arm GAVE: 10 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 369 MAR Injection site: 16
	1204 Transaction Rule PHABKGOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/19/22 1155; INSRBG Amount Wasted: 0 UNIT; Amount Given: 0.100 ML
	1623 Edit or Verification DAVCRO
	1649 Acknowledged Order ZERNIAU
	1651 ZERNIAU at 1651 CO-SIGNER: NSC.TRN69 SITE: Left Posterolateral Arm GAVE: 4 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 233 MAR Injection site: 13
	1705 Transaction Rule PHABKGOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/19/22 1651; INSRBG Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	2115 NSC.TRN101 at 2115 CO-SIGNER: MHLIND SITE: Abdomen GAVE: 4 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	MAR Injection site: 11
	2120 Transaction Rule PHABKGOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/19/22 2115; INSRBG Amount Wasted: 0 UNIT; Amount Given: 0.040 ML

DATE: 12/03/22 @ 0013  
USER: PHARGTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 10/19/22 to 0659 10/20/22 (continued)		

**Catapres (clonidine 0.1 mg Tablet)**  
0.1 MG PO Q6H/PRN  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for clonidine (catapres)  
RX #: 002219197

START/STOP	
10/19/22	1623 Acknowledged Order ZBRMLAU
	1641 Edit or Verification VUCHRIS
	1641 Edit or Verification VUCHRIS

**Glucose 15 (Dextrose Gel 40% 1 each tube)**  
1 EACH NUCOUS MEM As Directed/PRN  
PRN Reason: Hypoglycemia [Gel]  
Comments: Give if BS < 70 and/or symptoms of hypoglycemia per protocol.  
Do not administer if pt NPO or on Tube Feed  
RX #: 002219197

START/STOP	
10/19/22	2121 Order Entry ZPHA.DSH
	0533 Acknowledged Order NSC.TENN101

**Dextrose 50% (Dextrose 50% 50 ml Syringe)**  
50 ML IV-Push As Directed/PRN  
PRN Reason: See Comments  
Comments: Give if BS < 70 and/or patient has any altered level of consciousness  
RX #: 002219197

START/STOP	
10/19/22	2121 Order Entry ZPHA.DSH
	0533 Acknowledged Order NSC.TENN101

**Dextrose 10% 250 ml 250 ML (Dextrose 10% 250 ml Bag)**  
999 ML/HR IV . Q16M/PRN  
PRN Reason: Hypoglycemia [IV Backup]  
Comments: Run D10% 250 ml bag at 999 ml/hr per hypoglycemia protocol #IDP-19  
Give if BS < 70 and/or patient has any altered level of consciousness  
Give if BS < 50 after 2 oral CHO Treatments  
\*If Dextrose 50% Syringe unobtainable  
RX #: 002219197

START/STOP	
10/19/22	2121 Order Entry ZPHA.DSH
	0533 Acknowledged Order NSC.TENN101

ADMINISTRATION PERIOD:	START/STOP	
0700 10/20/22 to 0659 10/21/22		

DATE: 12/03/22 @ 0013  
USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/28/22 to 0659 10/21/22 (continued)	STOP	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

110/18/22 1545 Not Administered NSC.TRM106 at 2100 CBSI  
2100 Infusion In Progress 2100 NSC.TRM106; Not Given, Dose Rate: / Rate:  
Intake: / Cumulative Intake: / Container Volume: / Site:  
0649 Infusion In Progress 0649 NSC.TRM106; Infused, Dose Rate: / Rate: 50 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (mg): 1000 cumulative Intake (Rx):  
2000 Container Volume: 0 Cumulative Elapsed Time (minutes): 53h 34m Increase/Decrease:  
Infused Infusion Intake: 1000 Infusion Rate: 50 Waste Amount: 0  
0649 NSC.TRM106 at 0649 GAVE: 50 MLS/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 2000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 53h 34m Increase/Decrease: started/Running  
Infusion Rate: 50 Waste Amount: 0  
0649 Infusion In Progress 0649 NSC.TRM106; Started/Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 2000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 53h 34m Increase/Decrease: started/Running  
Infusion Rate: 50 Waste Amount: 0

Synthroid (levothyroxine 112 mcg Tablet)  
112 MCG PO DAILY before breakfast  
RX #: 002218666

110/20/22 0700 NSC.TRM101 at 0641 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 00074929290 (SOURCE: Default NDCs)

Prinivil (Lisinopril 40 mg Tablet)  
40 MG PO DAILY  
RX #: 002219192

110/20/22 1000 ZBRM141 at 0942 GAVE: 40 MG  
Barcode Medication: Prinivil  
NDC/DIN: 0904720061 (SOURCE: eMAR)  
1003 Transaction Rule PHARMCOR  
MDT.WASTE - Medicare Waste  
Description: Debt svc Dc/Tm 10/20/22 0942: ZBR40 Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/28/22 to 0659 10/21/22 (continued)		

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
**35 UNIT** SUB-Q DAILY  
Comments: Rpt approved sub for: Iantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02219569  
11/02/20/22 1000 ZERRMLAU at 0943 CO-SIGNER: GUERRILS SITE: Left PosteroLateral Arm GAVE: 35 UNIT  
Barcode Medication: Levemir  
NDC/DIN: 0169368712 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 104 MAR Injection Site: 13  
1003 Transaction Rule PHABRCJOB  
MED. WASTE - Medicate Waste  
Description: Debit Svc Dc/Tm 10/20/22 0943: INSLBYT Amount Mastered: 0 UNIT; Amount  
Given: 0.350 ML

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
**20 UNIT** SUB-Q once daily at bedtime  
Comments: Rpt approved sub for: Iantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02219567  
11/02/19/22 0805 Acknowledged Order ZERRMLAU

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	
0700 10/26/22 to 0659 10/21/22 (continued)		

**Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)**  
 See Dose Ins. SUB-Q with meals and at bedtime/PN  
 PRN Reason: Glucosecan Coverage  
 Comments: LA/SA warning: order is for Novolin  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02217868

START/STOP		
110/19/22	1202 ZERMLAU at 1202 CO-SIGNER: GURRIS SITE: Right PosteroLateral Arm GAVE: 4 UNIT	
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 201 MAR Injection site: 16	
	1217 Transaction Rule PHABRC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/20/22 1202: INSRBS Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	
	1757 ZERMLAU at 1757 CO-SIGNER: MARTERI SITE: Left PosteroLateral Arm GAVE: 4 UNIT	
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 233 MAR Injection site: 13	
	1803 Transaction Rule PHABRC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/20/22 1757: INSRBS Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	
	2101 NSC TRM106 at 2101 CO-SIGNER: EVALJUS SITE: Abdomen GAVE: 2 UNIT	
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 174 MAR Injection site: 11	
	2103 Transaction Rule PHABRC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/20/22 2101: INSRBS Amount Wasted: 0 UNIT; Amount Given: 0.020 ML	

ADMINISTRATION PERIOD:	START/STOP	
0700 10/21/22 to 0659 10/22/22		



DATE: 12/03/22 @ 0013  
USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 10/21/22 to 0659 10/22/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

10/18/22 0703 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/21/22 0649: NS Amount Wasted: 0 ML; Drug Waste%: 0  
1145 Not Administered LOBRNM at 1227 CBST  
1227 Infusion In Progress 1227 LOBRNM: Not Given, Dose Rate: / Rate:  
Intake: / Cumulative Intake: / Container Volume: / Site:  
0110 Infusion In Progress 0110 UDE8JW: Paused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 917.5 mls, Cumulative Intake: 917.5 mls, Container Volume: 82.5 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag) : 917.5 Cumulative Intake (Rx) :  
2917.5 Container Volume: 82.5 Cumulative Elapsed Time (minutes) : 71h 55m  
Increase/Decrease: Paused Infusion Intake: 917.5 Infusion Rate: 0 Waste Amount: 0  
0143 Infusion In Progress 0143 UDE8JW: Resumed, Dose Rate: / Rate: 50 MLS/HR  
Intake: 0 mls, Cumulative Intake: 917.5 mls, Container Volume: 82.5 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag) : 917.5 Cumulative Intake (Rx) :  
2917.5 Container Volume: 82.5 Cumulative Elapsed Time (minutes) : 71h 55m  
Increase/Decrease: Resumed Infusion Intake: 0 Infusion Rate: 50 Waste Amount: 0  
0339 Infusion In Progress 0339 UDE8JW: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 82.5 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag) : 1000 Cumulative Intake (Rx) :  
3000 Container Volume: 0 Cumulative Elapsed Time (minutes) : 3d 1h 51m Increase/Decrease:  
Infused Infusion Intake: 82.5 Infusion Rate: 0 Waste Amount: 0

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG PO DATIV before breakfast  
RX #: 002218666

10/20/22 0700 NSC.TRM106 at 0706 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0717 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/21/22 0706: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%:  
0  
0601 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/22/22 0600: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%:  
0

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 10/21/22 to 0659 10/25/22 (continued)		

Prinivil (Lisinhopril 40 mg Tablet)  
40 MG PO DAILY  
RX #: 002219192

10/20/22 0847 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 10/21/22 0836: Z8840 Amount Wasted: 0 MG; Drug Waste#: 0  
1000 LOPERM at 0836 GAVE: 40 MG  
Barcode Medication:  
NDC/DIN: 0169368712 (SOURCE: eMAR)  
Comments  
barcode scrapped off

Levemir (Insulin Detemir 100 units/ml 10ml Vial)

35 UNIT SUB-Q DAILY  
Comments: P&T approved sub for: Lantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002219192

10/20/22 0847 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 10/21/22 0835: INSHEVT Amount Wasted: 0 UNIT; Amount  
Given: 0.350 ML  
1000 LOPERM at 0835 CO-SIGNER: ROYBLAI SITE: Abdomen GAVE: 35 UNIT  
Barcode Medication: Levemir  
NDC/DIN: 0169368712 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 208 MAR Injection site: 11

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 10/21/22 to 0659 10/25/22 (continued)		

**NOVOLIN Regular (Insulin Regular (Human) 100 units/mL Vial)**  
 See Dose Ins. SUB-Q with meals and at bedtime/PN  
 PRN Reason: Glucosecan Coverage  
 Comments: LA/SA warning; order is for NOVOLIN  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02217868

START/STOP		
110/19/22	0834 IOPERRM at 0834 CO-SIGNER: ROYBLAI SITE: Abdomen GAVE: 4 UNIT	
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 208 MAR Injection site: 11	
	0847 Transaction Rule PHABRC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/21/22 0834: INSRBS Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	
	1219 IOPERRM at 1219 CO-SIGNER: NSC.TRN36 SITE: Right PosteroLateral Arm GAVE: 10 UNIT	
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 363 MAR Injection site: 16	
	1233 Transaction Rule PHABRC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/21/22 1219: INSRBS Amount Wasted: 0 UNIT; Amount Given: 0.100 ML	
	1613 IOPERRM at 1613 CO-SIGNER: DELACVA SITE: Right PosteroLateral Arm GAVE: 4 UNIT	
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 238 MAR Injection site: 16	
	1619 Transaction Rule PHABRC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/21/22 1613: INSRBS Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	

ADMINISTRATION PERIOD:	START/STOP	
0700 10/22/22 to 0659 10/23/22		

DATE: 12/03/22 @ 0013  
 USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 10/23/22 to 0659 10/23/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
 (0.9% Sodium Chloride 1,000 ml Bag)  
 50 MLS/HR IV .020H  
 RX #: 002217827

110/18/221 0745 ZBRMLAU at 1757 GAVE: 50 MLS/HR  
 Barcode Medication: sodium Chloride 0.9%  
 NDC/DIN: 0338004904 (SOURCE: eMAR)  
 Admin Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (Rx): 3000 Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 3d 1h 51m Increase/Decrease: started/running  
 Infusion Rate: 50 Waste Amount: 0  
 1757 Infusion In Progress 1757 ZBRMLAU: started/Running, Dose Rate: / Rate: 50 MLS/HR  
 Intake: / Container Volume: 1000 mls/ Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (Rx): 3000 Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 3d 1h 51m Increase/Decrease: started/running  
 Infusion Rate: 50 Waste Amount: 0  
 1803 Transaction Rule PHARCTOR  
 MED1.WASTE - Medicate Waste  
 Description: Debit svc Dr/Tm 10/22/22 1757: NS Amount Wasted: 0 ML; Drug Waste%: 0  
 0345 Not Administered UDESTMV at 0607 CBST  
 0607 Infusion In Progress 0607 UDESTMV: Not Given, Dose Rate: / Rate:  
 Intake: / Container Volume: / Site:

Synthroid (Letrothyroxine 112 mcg Tablet)  
 112 MCG PO DAILY before breakfast  
 RX #: 002218666

110/20/221 0700 UDESTMV at 0600 GAVE: 112 MCG  
 Barcode Medication: Synthroid  
 NDC/DIN: 4229203901 (SOURCE: eMAR)  
 0631 Transaction Rule PHARCTOR  
 MED1.WASTE - Medicate Waste  
 Description: Debit svc Dr/Tm 10/23/22 0622: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%: 0

Prinivil (Lisinopril 40 mg Tablet)  
 40 MG PO DAILY  
 RX #: 002219192

110/20/221 0846 Transaction Rule PHARCTOR  
 MED1.WASTE - Medicate Waste  
 Description: Debit svc Dr/Tm 10/22/22 0842: ZES40 Amount Wasted: 0 MG; Drug Waste%: 0  
 1000 ZBRMLAU at 0842 GAVE: 40 MG  
 Barcode Medication: Prinivil  
 NDC/DIN: 0904720061 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/25/22 to 0659 10/25/22 (continued)		

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
 35 UNIT SUB-Q DAILY  
 Comments: Not approved sub for: Iartus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02219569

**NovoLog (Insulin Aspart 100 units/ml 10ml Vial)**  
 5 UNIT SUB-Q Three times daily with meals  
 Comments: Administer routine doses at same time as  
 Food.  
 DO NOT COMBINE WITH NOVOLIN.  
 0-15 MINUTES BEFORE MEAL  
 \*HOLD AND CALL PHYSICIAN IF MEAL IS  
 SKIPPED, ORAL INTAKE  
 DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS  
 BY PHYSICIAN  
 ARE NOT MET.  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02224354

NOVOLIN (Insulin Aspart 100 units/ml 10ml Vial)	10/22/22	1438	Edit or Verification	ZPHA.HH
1438 Edit or Verification				
1501 Acknowledged Order ZERRMLAU				
1700 ZERRMLAU at 1731 CO-SIGNER: NSC.TRN213				SITE: Left PosteroLateral Arm GAVE: 5 UNIT
Barcode Medication: NovoLOG				
NDC/DIN: 0169750111 (SOURCE: eMAR)				
Admin Queries				
Finger Stick Blood Glucose: 300 MAR Injection Site: 13				
1748 Transaction Rule PHABRCJOB				
MEDI.WASTE - Medicare Waste				
Description: Debit svc Dr/Tm 10/22/22 1731: INSAASP Amount Wasted: 0 UNIT; Amount Given: 0.050 HL				

DATE: 12/03/22 @ 0013  
USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/25/22 to 0659 10/25/22 (continued)	STAGE	

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
20 UNIT SUB-Q once daily at bedtime

Comments: PAT approved sub for: Iantus

\*DO NOT HOLD IF EATING STATUS CHANGES

\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES

\*Hold Insulin only if BS < 100

CAUTION: HIGH RISK/HIGH ALERT MEDICATION

REQUIRES 2 SIGNATURES FOR DOCUMENTATION

RX #: Q02224403

10/22/22	1535 Edit or Verification ZPH,KV
	1535 Edit or Verification ZPH,KV
	1545 Acknowledged order ZERMLAU
	2049 Transaction Rule PHARMCOR
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/22/22 2034: INSHRY Amount Wasted: 0 UNIT; Amount Given: 0.200 ML
	2100 URESRX at 2034 CO-SIGNER: SIBARRI SITE: Abdomen GAVE: 20 UNIT
	Barcode Medication: Levemir
	NDC/DIN: 0169368712 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 170 MAR Injection site: 11

**Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)**

See Dose Dis. SUB-Q with meals and at bedtime/PN

PN Reason: Glucosecan Coverage

Comments: LA/SA warning; order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION

REQUIRES 2 SIGNATURES FOR DOCUMENTATION

RX #: Q02217868

10/19/22	0842 ZERMLAU at 0842 CO-SIGNER: NSC.TRN36 SITE: Left Posterolateral Arm GAVE: 2 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 183 MAR Injection site: 13
	0846 Transaction Rule PHARMCOR
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/22/22 0842: INSHRY Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
	1139 ZERMLAU at 1139 CO-SIGNER: KARKSAM SITE: Right Posterolateral Arm GAVE: 4 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 243 MAR Injection site: 16
	1147 Transaction Rule PHARMCOR
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/22/22 1139: INSHRY Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	1732 ZERMLAU at 1732 CO-SIGNER: NSC.TRN213 SITE: Left Posterolateral Arm GAVE: 6 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 300 MAR Injection site: 13
	1748 Transaction Rule PHARMCOR
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/22/22 1732: INSHRY Amount Wasted: 0 UNIT; Amount Given: 0.060 ML

\*\*\* Continued on Page 17 \*\*\*  
This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 10/23/22 to 0659 10/24/22	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

110/18/22 2039 Infusion In Progress 2039 UDESJWV: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 900 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 100 Cumulative Intake (RX):  
| 3100 Container Volume: 900 Cumulative Elapsed Time (minutes): 4d 4h 3m Increase/Decrease:  
| Running Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0  
| 2345 Not Administered UDESJWV at 10/24/22 - 0029 CBST  
| 0029 Infusion In Progress 0029 UDESJWV: Not Given, Dose Rate: / Rate:  
| Intake: / Cumulative Intake: / Container Volume: / Site:  
| 0333 Infusion In Progress 0333 UDESJWV: Paused, Dose Rate: / Rate: 0 MLS/HR  
| Intake: 345 mls, Cumulative Intake: 445 mls, Container Volume: 555 mls, Site:  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 445 Cumulative Intake (RX):  
| 3445 Container Volume: 555 Cumulative Elapsed Time (minutes): 4d 1h 27m  
| Increase/Decrease: Paused Infusion Intake: 345 Infusion Rate: 0 Waste Amount: 0

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG PO DAILY before breakfast  
RX #: 002218666

110/20/22 0700 UDESJWV at 0622 GAVR: 112 MCG  
|  
| Barcode Medication: Synthroid  
| NDC/DIN: 4229203901 (SOURCE: eMAR)  
| 0615 Transaction Rule PHABRCJOB  
| MED1.WASTE - Medication Waste  
| Description: Debit Svc Dc/Tm 10/24/22 0606: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%:  
| 0

Prinivil (Lisinopril 40 mg Tablet)  
40 MG PO DAILY  
RX #: 002219192

110/20/22 0916 Transaction Rule PHABRCJOB  
|  
| MED1.WASTE - Medication Waste  
| Description: Debit Svc Dc/Tm 10/23/22 0909: ZES40 Amount Wasted: 0 MCG; Drug Waste%: 0  
| 1000 LSHAKI at 0909 GAVR: 40 MG  
| Barcode Medication: Prinivil  
| NDC/DIN: 0904720061 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/23/22 to 0659 10/24/22 (continued)	STOP	STOP

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
35 UNIT SUB-Q DAILY

Comments: Not approved sub for: Iartus

\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION

RX #: Q02219569

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
5 UNIT SUB-Q Three times daily with meals

Comments: Administer routine doses at same time as  
Food.

DO NOT COMBINE WITH NOVOLIN.

0-15 MINUTES BEFORE MEAL

\*HOLD AND CALL PHYSICIAN IF MEAL IS  
SKIPPED/ORAL INTAKE

DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS  
BY PHYSICIAN

ARE NOT MET.

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION

RX #: Q02224354

DATE	DESCRIPTION	AMOUNT	UNIT	AMOUNT GIVEN	AMOUNT WASTED
11/20/22	0916 Transaction Rule PHARMCIOB MED:WASTE - Medicare Waste				
	Description: Debit svc Dr/Tm 10/23/22 0904: INSURVT Amount Wasted: 0 UNIT; Amount Given: 0.350 ML				
	1000 IBSHARI at 0904 CO-SIGNER: BOWLEHI SITE: Left Deltoid GAVE: 35 UNIT				
	Barcode Medication: Levemir NDC/DIN: 0169368712 (SOURCE: eMAR)				
	Admin Queries				
	Finger Stick Blood Glucose: 257 MAR Injection Site: 1				
	1107 Transaction Rule PHARMCIOB MED:WASTE - Medicare Waste				
	Description: Debit svc Dr/Tm 10/23/22 0808: INSASBP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML				
	1200 IBSHARI at 1102 CO-SIGNER: BOWLEHI SITE: Left Deltoid GAVE: 5 UNIT				
	Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)				
	Admin Queries				
	Finger Stick Blood Glucose: 245 MAR Injection Site: 1				
	1700 IBSHARI at 1625 CO-SIGNER: BOWLEHI SITE: Left Deltoid GAVE: 5 UNIT				
	Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)				
	Admin Queries				
	Finger Stick Blood Glucose: 79 MAR Injection Site: 1				
	1834 Transaction Rule PHARMCIOB MED:WASTE - Medicare Waste				
	Description: Debit svc Dr/Tm 10/23/22 1825: INSASBP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML				



DATE: 12/03/22 @ 0013  
USER: PHARGTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 10/23/22 to 0659 10/24/22 (continued)	STOP

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
20 UNIT SUB-Q once daily at bedtime  
Comments: P&R approved sub for: Iantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02224403

10/22/22 1012 Discontinue GOSHMAN  
1012 Order Entry GOSHMAN  
1038 Acknowledged Order IESHARI

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
10 UNIT SUB-Q once daily at bedtime  
Comments: P&R approved sub for: Iantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02225524

10/23/22 1012 Order Entry GOSHMAN  
1019 Edit of Verification ZPHA,KV  
1019 Edit of Verification ZPHA,KV  
1038 Acknowledged Order IESHARI  
2048 Transaction Rule PHARGTOR  
MEDI.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 10/23/22 2035; INSULIN Amount Wasted: 0 UNIT; Amount Given: 0.100 ML  
2100 URESSTAV at 2035 CO-STINGER; IPEATFU SITE: Abdomen GAVE: 10 UNIT  
Barcode Medication: Levemir  
NDC/DIN: 0169368712 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 126 MAR Injection site: 11

DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION
0700 10/23/22 to 0659 10/24/22 (continued)		

**Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)**  
 See Dose Ins. SUB-Q with meals and at bedtime/PN  
 P/N Reason: Glucocan Coverage  
 Comments: LA/SA warning; order is for Novolin  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02217868

START/STOP	DESCRIPTION
10/19/22	0805 IESHARI at 0805 CO-SIGNER: BOWLPHI SITE: Left Deltoid GAVE: 6 UNIT Barcode Medication: Novolin Regular NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 257 MAR Injection site: 1
	0816 Transaction Rule PHABRC0B MEDL.WASTE - Medicate Waste Description: Dablt Svc Dc/Tm 10/23/22 0805: INSRBS Amount Wasted: 0 UNITF, Amount Given: 0.060 ML
	1103 IESHARI at 1103 CO-SIGNER: BOWLPHI SITE: Left Deltoid GAVE: 4 UNIT Barcode Medication: Novolin Regular NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 245 MAR Injection site: 1
	1117 Transaction Rule PHABRC0B MEDL.WASTE - Medicate Waste Description: Dablt Svc Dc/Tm 10/23/22 1103: INSRBS Amount Wasted: 0 UNITF, Amount Given: 0.040 ML

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION
0700 10/24/22 to 0659 10/25/22		

**Sodium Chloride 0.9% 1,000 ML (0.9% Sodium Chloride 1,000 ml Bag)**  
 50 MLS/HR IV .Q20H  
 RX #: Q02217827

START/STOP	DESCRIPTION
10/18/22	1803 Infusion In Progress 1803 ZBRWIAN: Resumed, Dose Rate: / Rate: 50 MLS/HR Intake: 0 mls, Cumulative Intake: 445 mls, Container Volume: 555 mls, Site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 445 Cumulative Intake (Rx): 3445 Container Volume: 555 Cumulative Elapsed Time (minutes): 4d 11h 27m Increase/Decrease: Resumed Infusion Intake: 0 Infusion Rate: 50 Waste Amount: 0 1945 Not Administered MUHLIND at 10/25/22 - 0116 CBTI 0116 Infusion In Progress 0116 MUHLIND: Not Given, Dose Rate: / Rate: Intake: / Cumulative Intake: / Container Volume: / Site: 0225 Infusion In Progress 0225 MUHLIND: Not Given, Dose Rate: / Rate: Intake: / Cumulative Intake: / Container Volume: / Site: Queries IV Site: Right Forearm

DATE: 12/03/22 @ 0013  
USER: PHARMCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/24/22 to 0659 10/25/22 (continued)	STAGE	

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG PO DAILY before breakfast  
RX #: 002218666

DATE	DESCRIPTION	AMOUNT	WASTED
10/20/22	0700 UDESIVL at 0606 GAVE: 112 MCG		
	Barcode Medication: Synthroid		
	NDC/DIN: 4229203901 (SOURCE: eMAR)		
	0616 Transaction Rule PHARMCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 10/25/22 0610: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%: 0		

**Prinivil (Lisinopril 40 mg Tablet)**  
40 MG PO DAILY  
RX #: 002219192

DATE	DESCRIPTION	AMOUNT	WASTED
10/20/22	0815 Transaction Rule PHARMCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 10/24/22 0807: ZES40 Amount Wasted: 0 MG; Drug Waste%: 0		
	1000 ZERNIDAU at 0807 GAVE: 40 MG		
	Barcode Medication: Prinivil		
	NDC/DIN: 0904720061 (SOURCE: eMAR)		

**Levemir (Insulin Detemir 100 units/mL 10mL Vial)**  
35 UNIT SUB-Q DAILY  
Comments: Not approved sub for: Lantus  
+DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002219569

DATE	DESCRIPTION	AMOUNT	WASTED
10/20/22	1000 ZERNIDAU at 1035 CO-SIGNER: DELACVA SITE: Left Posterolateral Arm GAVE: 35 UNIT		
	Barcode Medication: Levemir		
	NDC/DIN: 0169368712 (SOURCE: eMAR)		
	Admin Queries		
	Finger Stick Blood Glucose: 243 MAR Injection site: 13		
	1045 Transaction Rule PHARMCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 10/24/22 1035: INSLEVT Amount Wasted: 0 UNIT; Amount Given: 0.350 ML		

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 10/24/22 to 0659 10/25/22 (continued)	STOP

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
5 UNIT SUB-Q Three times daily with meals  
Comments: Administer routine doses at same time as food.

- DO NOT CONFUSE WITH NOVOLIN.
- 0-15 MINUTES BEFORE MEAL
- \*HOLD AND CALL PHYSICIAN IF MEAL IS SKIPPED/ONAL INTAKE
- DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS BY PHYSICIAN
- ARE NOT MET.

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002224354

11/02/22/221	0800 ZERRINLU at 0807 CO-SIGNER: GUBRILIS SITE: Left Posterolateral Arm GAVE: 5 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 247 MAR Injection site: 13
	Transaction Rule PHARMCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 0807: INSBASP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML
	1200 ZERRINLU at 1202 CO-SIGNER: GUBRILIS SITE: Right Posterolateral Arm GAVE: 5 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 212 MAR Injection site: 16
	Transaction Rule PHARMCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 1202: INSBASP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML
	1700 ZERRINLU at 1757 CO-SIGNER: GUBRILIS SITE: Right Posterolateral Arm GAVE: 5 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 189 MAR Injection site: 16
	Transaction Rule PHARMCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 1757: INSBASP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
10 UNIT SUB-Q once daily at bedtime  
Comments: Pat approved sub for: Iantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002225524

11/02/22/221	2032 Transaction Rule PHARMCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 2027: INSLIYV Amount Wasted: 0 UNIT; Amount Given: 0.100 ML
	2100 MHLIND at 2027 CO-SIGNER: SALABRI SITE: Abdomen GAVE: 10 UNIT
	Barcode Medication: Levemir
	NDC/DIN: 00169368712 (SOURCE: Default NDCs)
	Admin Queries
	Finger Stick Blood Glucose: 182 MAR Injection site: 11

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 10/24/22 to 0659 10/25/22 (continued)		

**Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)**  
 See Dose Ins. SUB-Q with meals and at bedtime/PN  
 P/N Reason: Glucosecan Coverage  
 Comments: LA/SA warning: order is for Novolin  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02217868

10/19/22	0811 ZERMLAU at 0811 CO-SIGNER: GUBRIS SITE: Left Posterolateral Arm GAVE: 4 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 243 MAR Injection site: 13
	0815 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 0811: INSRBG Amount Wasted: 0 UNITF; Amount Given: 0.040 ML
	1201 ZERMLAU at 1201 CO-SIGNER: GUBRIS SITE: Right Posterolateral Arm GAVE: 4 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 212 MAR Injection site: 16
	1216 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 1201: INSRBG Amount Wasted: 0 UNITF; Amount Given: 0.040 ML
	1757 ZERMLAU at 1757 CO-SIGNER: GUBRIS SITE: Right Posterolateral Arm GAVE: 2 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 189 MAR Injection site: 16
	1817 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 1757: INSRBG Amount Wasted: 0 UNITF; Amount Given: 0.020 ML
	2027 MHLIND at 2027 CO-SIGNER: SALABRI SITE: Abdomen GAVE: 2 UNIT
	Barcode Medication: Novolin Regular
	NDC/DIN: 0169183311 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 182 MAR Injection site: 11
	2032 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/24/22 2027: INSRBG Amount Wasted: 0 UNITF; Amount Given: 0.020 ML

ADMINISTRATION PERIOD:	START/STOP	
0700 10/25/22 to 0659 10/26/22		

DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/25/22 to 0659 10/26/22 (continued)	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

10/18/22 1545 Not Administered MHLIND at 0225 IVDC  
Admin Queries  
IV site: Right Forearm  
2110 Infusion In Progress 2110 MONDTR: Infused, Dose Rate: , Rate: 50 MLS/HR  
Intake: 555 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 cumulative Intake (Rx):  
4000 Container Volume: 0 Cumulative Disposed Time (minutes): 5d 14h 34m Increase/Decrease:  
Infused Intake: 555 Infusion Rate: 50 Waste Amount: 0

Synthroid (levothyroxine 112 mcg Tablet)  
112 MCG PO DAILY before breakfast  
RX #: 002218666

10/20/22 0700 MHLIND at 0610 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)

Printivill (lisdopril 40 mg Tablet)  
40 MG PO DAILY  
RX #: 002219192

10/20/22 0846 Transaction Rule PHARCTOR  
MDI.WASTE - Medicare Waste  
Description: Debt Svc Dt/Tm 10/25/22 0829: Z8840 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 PITCHER at 0829 GAVE: 40 MG  
Barcode Medication: Printivill  
NDC/DIN: 0904720061 (SOURCE: eMAR)

Levemir (Insulin Detemir 100 units/ml 10ml Vial)  
35 UNIT SUB-Q DAILY  
Comments: Ref approved sub for: Lantus  
\*DO NOT HOLD IF EATING STATUS CHANGES  
\*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
\*Hold Insulin only if BS < 100  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002219569

10/20/22 0846 Transaction Rule PHARCTOR  
MDI.WASTE - Medicare Waste  
Description: Debt Svc Dt/Tm 10/25/22 0828: INSLEVY Amount Wasted: 0 UNIT; Amount  
GIVEN: 0.350 ML  
1000 PITCHER at 0828 CO-SIGNER: SANDALO SITE: Abdomen GAVE: 35 UNIT  
Barcode Medication: Levemir  
NDC/DIN: 0169368712 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 243 MAR Injection site: 11

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 10/25/22 to 0659 10/26/22 (continued)		

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
 5 UNIT SUB-Q Three times daily with meals  
 Comments: Administer routine doses at same time as food.

DO NOT CONFUSE WITH NOVOLIN.  
 0-15 MINUTES BEFORE MEAL  
 \*HOLD AND CALL PHYSICIAN IF MEAL IS SKIPPED/OMAL INTAKE  
 DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS BY PHYSICIAN  
 ARE NOT MET.

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: 002224354

110/22/22	0800	ETICBER at 0827 CO-SIGNER: SANDALO SITE: Abdomen GAVE: 5 UNIT	
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 243 MAR Injection site: 11	
		0846 Transaction Rule PHABRCJOB	
		MDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/25/22 0827: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML	
		1200 WILSRAT at 1258 CO-SIGNER: ROYBLAI SITE: Right PosteroLateral Arm GAVE: 5 UNIT	
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 190 MAR Injection site: 16	
		1317 Transaction Rule PHABRCJOB	
		MDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/25/22 1258: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML	
		1700 PITCHER at 1815 CO-SIGNER: NSC.FRN86 SITE: Abdomen GAVE: 5 UNIT	
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 179 MAR Injection site: 11	
		1833 Transaction Rule PHABRCJOB	
		MDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/25/22 1815: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.050 ML	

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
 10 UNIT SUB-Q once daily at bedtime  
 Comments: Per approved sub for: Iantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: 002225524

110/23/22	2100	Not Administered MONDAY at 2049 PRAM.PROF	
		Admin Queries	
		Finger stick Blood Glucose: 85	

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/25/22 to 0659 10/26/22 (continued)		

Claritin-D 24 Hour (Loratadine/P-Ephed 10/240 ER Tablet)  
1 TAB PO Q24H  
Comments: Do not crush tablet.  
RX #: 002229946

10/25/22	1510	FILICBER at 1646 GAVE: 1 TAB
		Barcode Medication: Claritin-D 24 Hour
		NDC/DIN: 5166072411 (SOURCE: eMAR)
		1516 Edit or Verification ZPRA.DAY
		1516 Edit or Verification ZPRA.DAY
		1646 Acknowledged Order FILICBER
		1702 Transaction Rule PHARMCIOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 10/25/22 1646: CLAD24 Amount Wasted: 0 TAB; Drug Waste\$: 0

Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)  
See Dose Ins. 808-Q With meals and at bedtime/PRN  
PRN Reason: Glucoscan Coverage  
Comments: LA/SA warning: order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002217868

10/19/22	0827	FILICBER at 0827 CO-STIGMER: SANDALO SITE: Abdomen GAVE: 4 UNIT
		Barcode Medication: Novolin Regular
		NDC/DIN: 0169183311 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 243 MAR Injection site: 11
		0846 Transaction Rule PHARMCIOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 10/25/22 0827: INSR66 Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
		1255 WILSKAM at 1255 CO-STIGMER: KORYLAI SITE: Right PosteroLateral Arm GAVE: 2 UNIT
		Barcode Medication: Novolin Regular
		NDC/DIN: 0169183311 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 190 MAR Injection site: 16
		1317 Transaction Rule PHARMCIOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 10/25/22 1255: INSR66 Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
		1615 FILICBER at 1615 CO-STIGMER: NSC.FRN86 SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolin Regular
		NDC/DIN: 0169183311 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 179 MAR Injection site: 11
		1833 Transaction Rule PHARMCIOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 10/25/22 1615: INSR66 Amount Wasted: 0 UNIT; Amount Given: 0.020 ML



DATE: 12/03/22 @ 0013  
USER: PHARGTOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 10/26/22 to 0659 10/27/22		

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 10/26/22 to 0659 10/27/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

110/18/22 1145 Not Administered KARASAM at 1227 CBST  
1227 Infusion In Progress 1227 KARASAM: Not Given, Dose Rate: / Rate:  
Intake: / Cumulative Intake: / Container Volume: / Site:  
2100 Infusion In Progress 2100 DMTXAV: Started/Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 4000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 5d 14h 34m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0 IV Site: Left Hand  
2200 Infusion In Progress 2200 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 950 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 50 Cumulative Intake (Rx):  
4050 Container Volume: 950 Cumulative Elapsed Time (minutes): 5d 15h 34m  
Increase/Decrease: Running Infusion Intake: 50 Waste Amount: 0  
2300 Infusion In Progress 2300 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 100 mls, Container Volume: 900 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 100 Cumulative Intake (Rx):  
4100 Container Volume: 900 Cumulative Elapsed Time (minutes): 5d 16h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0000 Infusion In Progress 0000 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 150 mls, Container Volume: 850 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 150 Cumulative Intake (Rx):  
4150 Container Volume: 850 Cumulative Elapsed Time (minutes): 5d 17h 34m  
Increase/Decrease: Running Infusion Intake: 50 Waste Amount: 0  
0100 Infusion In Progress 0100 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 200 mls, Container Volume: 800 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 200 Cumulative Intake (Rx):  
4200 Container Volume: 800 Cumulative Elapsed Time (minutes): 5d 18h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0200 Infusion In Progress 0200 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 250 mls, Container Volume: 750 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 250 Cumulative Intake (Rx):  
4250 Container Volume: 750 Cumulative Elapsed Time (minutes): 5d 19h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0215 Transaction Rule PHABRC0B  
MEDL.VASRN - Medication Waste  
Description: Dabit Svc Dt/Tm 10/26/22 2100: NS Amount Wasted: 0 ML. Drug Waste: 0  
0300 Infusion In Progress 0300 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR



DATE: 12/03/22 @ 0013  
 USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num ME01483046  
 Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 10/26/22 to 0659 10/27/22 (Continued)		

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
**35 UNIT SUB-Q DAILY**  
 Comments: P&T approved sub for: Lantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02219569

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
**5 UNIT SUB-Q Three times daily with meals**  
 Comments: Administer routine doses at same time as  
 Food.  
 DO NOT CONFUSE WITH NOVOLIN.  
 0-15 MINUTES BEFORE MEAL  
 \*HOLD AND CALL PHYSICIAN IF MEAL IS  
 SKIPPED/ORAL INTAKE  
 DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS  
 BY PHYSICIAN  
 ARE NOT MET.  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02224354

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
**10 UNIT SUB-Q once daily at bedtime**  
 Comments: P&T approved sub for: Lantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: Q02225524

\*\*\* Continued on Page 31 \*\*\*  
 This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
USER: PHABGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 10/26/22 to 0659 10/27/22 (continued)	

Claritin-D 24 Hour (loratadine/p-ephed 10/240 ER Tablet)  
1 TAB PO Q24H  
Comments: Do not crush tablet.  
RX #: 002229946

MNSA Decolonization Per Pharmacy (MNSA - Dosed by PHA)  
1 EACH MISCELLANEOUS PER PROTOCOL  
RX #: 002231091

Ofirmev 100 ML  
(Xocefamiphen 1,000 mg/100 ml vial)  
400 MG/HR IVB8 NMG/ONE  
Comments: Use 1st for pain level >4 x 1 dose  
\*\* For use in PACU \*\*  
RX #: 002231837

Thrombin (Thrombin (Bovine) 5,000 unit vial)  
5,000 UNIT IRRIGATION ONCE/ONE  
Comments: given intraop by surgeon  
RX #: 002232206

10/26/22	1742	YEDONAL at 1743 GAVE: 5,000 UNIT
10/26/22		Barcode Medication: Thrombinar
		NDC/DIN: 6079321505 (SOURCE: eMAR)
	1743	Acknowledged Order BALMERIC
	1756	Edit or Verification ZPHA.DAV
	1756	Edit or Verification ZPHA.IE
	1756	Edit or Verification ZPHA.IE
	1756	Discontinue PHABGJOB
	1802	Transaction Rule PHABGJOB
		MBDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 10/26/22 1742: TR85T Amount Wasted: 0 UNIT; Drug Waste%: 0
	2055	Acknowledged Order DOMIXAV

Route Change - PO to NG-Tube - Per Pharmacy (PO to NG-Tube - RX Consult)  
1 EACH MISCELLANEOUS PER PROTOCOL  
RX #: 002232359

DATE: 12/03/22 @ 0013  
USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/26/22 to 0659 10/27/22 (continued)		

Route Change - PO to NG-Tube - Per Pharmacy (PO to NG-Tube - Ex Consult)  
1 EACH MISCELLANEOUS PER PROTOCOL  
RX #: 002232592

Diprivan (Propofol 200 mg/20 ml Vial)

200 MG . ROUTE . STR-MED/ONE  
RX #: 002232667

110/26/22	2022	Discontinue STR MED	
110/26/22	2225	Order Entry ZPHA.JMM	
110/26/22	2233	Transaction Rule PHARGJOB	
110/26/22		MBDI.WASTE - Medicare Waste	
110/26/22		Description: Debit Svc Dt/Tm 10/26/22 2022: DIP20 Amount Wasted: 0 MG; Drug Waste%: 0	

Sublimaze (Fentanyl 100 mcg/2 ml Amp)

200 MCG . ROUTE . STR-MED/ONE  
RX #: 002232668

110/26/22	2022	Discontinue STR MED	
110/26/22	2225	Order Entry ZPHA.JMM	
110/26/22	2233	Transaction Rule PHARGJOB	
110/26/22		MBDI.WASTE - Medicare Waste	
110/26/22		Description: Debit Svc Dt/Tm 10/26/22 2022: SUB100I Amount Wasted: 0 MCG; Drug Waste%: 0	

Quelicin (Succinylcholine 200 mg/10 ml Vial)

200 MG . ROUTE . STR-MED/ONE  
RX #: 002232669

110/26/22	2022	Discontinue STR MED	
110/26/22	2225	Order Entry ZPHA.JMM	
110/26/22	2233	Transaction Rule PHARGJOB	
110/26/22		MBDI.WASTE - Medicare Waste	
110/26/22		Description: Debit Svc Dt/Tm 10/26/22 2022: ANB200I Amount Wasted: 0 MG; Drug Waste%: 0	

Zemuron (Rocuronium Bromide 50 mg/5 ml Vial)

50 MG . ROUTE . STR-MED/ONE  
RX #: 002232670

110/26/22	2022	Discontinue STR MED	
110/26/22	2225	Order Entry ZPHA.JMM	
110/26/22	2233	Transaction Rule PHARGJOB	
110/26/22		MBDI.WASTE - Medicare Waste	
110/26/22		Description: Debit Svc Dt/Tm 10/26/22 2022: ZEM50I Amount Wasted: 0 MG; Drug Waste%: 0	

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/26/22 to 0659 10/27/22 (continued)	STAGE	

**Ancef (Cefazolin 1 gm Vial)**  
2 GM .ROUTE .STR-MED/ONE  
RX #: 002232671

DATE	TIME	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
10/26/22	2022	Discontinue STR MED		
10/26/22	2225	Order Entry ZPHA.JMM		
	2233	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/26/22 2022: ANCI Amount Wasted: 0 GM; Drug Waste%: 0		

**Decadron (Dexamethasone Sod Phos 10 mg/ml Vial)**  
10 MG .ROUTE .STR-MED/ONE  
RX #: 002232672

DATE	TIME	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
10/26/22	2022	Discontinue STR MED		
10/26/22	2225	Order Entry ZPHA.JMM		
	2233	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/26/22 2022: DEC10I Amount Wasted: 0 MG; Drug Waste%: 0		

**Zofran (Ondansetron 4 mg/2 ml Vial)**  
4 MG .ROUTE .STR-MED/ONE  
RX #: 002232673

DATE	TIME	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
10/26/22	2022	Discontinue STR MED		
10/26/22	2225	Order Entry ZPHA.JMM		
	2233	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/26/22 2022: ZOF4I Amount Wasted: 0 MG; Drug Waste%: 0		

**Trandate (labetalol 100 mg/20 ml Vial)**  
100 MG .ROUTE .STR-MED/ONE  
RX #: 002232674

DATE	TIME	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
10/26/22	2022	Discontinue STR MED		
10/26/22	2225	Order Entry ZPHA.JMM		
	2233	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/26/22 2022: NOR100I Amount Wasted: 0 MG; Amount Given: 1.000 VIAL		

**Robinal (Glycopyrrolate 0.4 mg/2 ml Vial)**  
0.4 MG .ROUTE .STR-MED/ONE  
RX #: 002232675

DATE	TIME	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
10/26/22	2022	Order Entry ZPHA.JMM		
	2225	Discontinue STR MED		
	2233	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/26/22 2022: ROB4I Amount Wasted: 0 MG; Drug Waste%: 0		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/26/22 2030: ROB4I Amount Wasted: 0 MG; Drug Waste%: 0		

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/26/22 to 0659 10/27/22 (continued)	STOP	STOP

**Blockiverz (Neostigmine 5 mg/10 ml Vial)**  
5 MG .ROUTE .STR-MED/ONE  
RX #: 002232676

10/26/22	2022
110/26/22	2225 Discontinue SRK MED
110/26/22	2225 Order Entry ZPRA.JMM
110/26/22	2233 Transaction Rule PHABRCJOB
110/26/22	MEDI.WASTE - Medicare Waste
110/26/22	Description: Debit Svc Dt/Tm 10/26/22 2022: BLOCKI Amount Wasted: 0 MG; Drug Waste%: 0

**Nimotop (nimodipine 60 mg/2 ml Oral Susp)**  
60 MG NG-TUBE Every 4 hours  
Dose Ins: FOR OCF  
FIRST DOSE NOW  
Comments: \*Refrigerate\*  
Medication MUST be given 30 mins before or 30 mins after scheduled dose  
RX #: 002232964

10/27/22	0243
110/27/22	0214 Edit or Verification ZPRA.RJB
110/27/22	0214 Edit or Verification ZPRA.RJB
110/27/22	0218 Acknowledged Order DORIXAV
110/27/22	0243 Discontinue MARHEI
110/27/22	0243 Order Entry MARHEI
110/27/22	0245 Acknowledged Order DORIXAV

**Nimotop (nimodipine 60 mg/2 ml Oral Susp)**  
60 MG NG-TUBE Every 4 hours  
Dose Ins: FOR OCF  
FIRST DOSE NOW  
Comments: \*Refrigerate\*  
Medication MUST be given 30 mins before or 30 mins after scheduled dose  
RX #: 002232960

10/27/22	0243
110/27/22	0243 Order Entry MARHEI
110/27/22	0243 Edit or Verification MARHEI
110/27/22	0245 Acknowledged Order DORIXAV
110/27/22	0300 DORIXAV at 0325 GAVE: 60 MG
110/27/22	Barcode Medication: Nimotop
110/27/22	NDC/DIN: 69452020913 (SOURCE: Default NDCs)
110/27/22	0310 Edit or Verification ZPRA.RJB
110/27/22	0310 Edit or Verification ZPRA.RJB
110/27/22	0329 Transaction Rule PHABRCJOB
110/27/22	MEDI.WASTE - Medicare Waste
110/27/22	Description: Debit Svc Dt/Tm 10/27/22 0325: NIM30L Amount Wasted: 0 MG; Drug Waste%: 0
110/27/22	0337 Discontinue ZPRA.RJB
110/27/22	0504 Acknowledged Order DORIXAV

**Nimotop (nimodipine 60 mg/2 ml Oral Susp)**  
60 MG NG-TUBE Every 4 hours  
Dose Ins: FOR OCF  
FIRST DOSE NOW  
Comments: \*Refrigerate\*  
Medication MUST be given 30 mins before or 30 mins after scheduled dose  
RX #: 002233007

10/27/22	0337
110/27/22	0337 Order Entry ZPRA.RJB
110/27/22	0337 Edit or Verification ZPRA.RJB
110/27/22	0337 Edit or Verification ZPRA.RJB
110/27/22	0504 Acknowledged Order DORIXAV
110/27/22	0511 Discontinue MARHEI
110/27/22	0512 Acknowledged Order DORIXAV



DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 10/26/22 to 0659 10/27/22 (continued)	STOP

Vasotec (Enalapril 1.25 mg/ml Vial)  
2.5 MG IV-Push NOW/ONE  
RX #: 002233072

110/27/22 0458 DOMIXAV at 0508 GAVE: 2.5 MG  
110/27/22 Barcode Medication: Vasotec  
NDC/DIN: 0143978701 (SOURCE: eMAR)  
Barcode Medication: Vasotec  
NDC/DIN: 0143978701 (SOURCE: eMAR)  
0501 Edit or Verification ZPRA.RJB  
0501 Edit or Verification ZPRA.RJB  
0501 Discontinue PHABRCJOB  
0504 Acknowledged Order DOMIXAV  
0514 Transaction Rule PHABRCJOB  
MED:WASTP - Med:care Waste  
Description: Debit svc Dt/Trm 10/27/22 0508: VAS125I Amount Wastred: 0 MG; Drug Waste\$: 0

Nimotop (Cilostazol 60 mg/2 ml Oral Susp)

60 MG NG-TUBE Q4H  
Dose Inst: FOR OCP  
FIRST DOSE NOW  
Comments: \*Refrigerate\*  
Medication MUST be given 30 mins before or 30  
mins after scheduled dose  
RX #: 002233076

110/27/22 0511 Order Entry MARKHE  
110/27/22 0512 Acknowledged Order DOMIXAV  
0514 Edit or Verification ZPRA.RJB  
0514 Edit or Verification ZPRA.RJB

DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/26/22 to 0659 10/27/22 (continued)	STOP

**Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)**  
See Dose Ins. SUB-Q with meals and at bedtime/PN  
PN Reason: Glucococan Coverage  
Comments: LA/SA warnings; order is for Novolin  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02217868

10/19/22	0916 KARRSAM at 0916 CO-SIGNER: NSC.FRM209	SITE: Abdomen GAVE: 3 UNIT
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 260 MAR Injection site: 11	
	Comments	
	per patients request, only wants 3 units, MD AMARR	
	Transaction Rule PHABRCIOB	
	0931 Transaction Rule PHABRCIOB	
	MDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/26/22 0916: INSRBG Amount Wasted: 0 UNIT; Amount Given:	
	0.030 ML	
	1229 KARRSAM at 1229 CO-SIGNER: TRANAMY	SITE: Abdomen GAVE: 6 UNIT
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger stick Blood Glucose: 275 MAR Injection site: 11	
	1232 Transaction Rule PHABRCIOB	
	MDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/26/22 1229: INSRBG Amount Wasted: 0 UNIT; Amount Given:	
	0.060 ML	
	0546 DORTXAV at 0546 CO-SIGNER: MAKHEL	SITE: Right PosteroLateral Arm GAVE: 10 UNIT
	Barcode Medication: Novolin Regular	
	NDC/DIN: 0169183311 (SOURCE: eMAR)	
	Admin Queries	
	Finger stick Blood Glucose: 468 MAR Injection site: 16	
	Comments	
	PER DR ONYERWUJUE, 10 UNITS FOR 468 B8	
	0600 Transaction Rule PHABRCIOB	
	MDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 10/27/22 0546: INSRBG Amount Wasted: 0 UNIT; Amount Given:	
	0.100 ML	

DATE: 12/03/22 @ 0013  
USER: PHAR608

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 10/26/22 to 0659 10/27/22 (continued)		

**Catapres (clonidine 0.1 mg Tablet)**  
0.1 MG PO Q6H/PRN

PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for clonidine(catapres)

START/STOP	
10/19/22	2246 Edit Administration DOMIXAV at 2246 GAVE: 0.1 MG
	Barcode Medication: Catapres
	NDC/DIN: 6068711311 (SOURCE: eMAR)
	Comments
	GIVEN THROUGH OGT
	10/26/22-2246 by DOMIXAV
	10/26/22-2312 Edit Administration by DOMIXAV
	New Comments: GIVEN THROUGH OGT
	2248 Transaction Rule PHAR608
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 10/26/22 2246: CAPT Amount Wasted: 0 MG; Drug Waste\$: 0

**Morphine (Morphine 4 mg/ml Vial)**  
2 MG IV-Push Q15M/PRN

PRN Reason: Pain while in PACU  
Total Doses: Max 5 (0 of 5 Given)  
Comments: \*\* For use in PACU \*\*  
RX #: Q02231838

START/STOP	
10/26/22	1433 Edit or Verification ZPHA.DAV
10/26/22	1433 Edit or Verification ZPHA.DAV
	1526 Acknowledged Order KARRSAM
	2030 Discontinue PHAR608
	2055 Acknowledged Order DOMIXAV

**Dilaudid (Hydromorphone 2 mg/ml Vial)**  
0.5 MG IV-Push Q15M/PRN

PRN Reason: Pain while in PACU  
Total Doses: Max 4 (0 of 4 Given)  
Comments: \*\* For use in PACU \*\*  
RX #: Q02231839

START/STOP	
10/26/22	1433 Edit or Verification ZPHA.DAV
10/26/22	1433 Edit or Verification ZPHA.DAV
	1526 Acknowledged Order KARRSAM
	2030 Discontinue PHAR608
	2055 Acknowledged Order DOMIXAV

**Zofran (Ondansetron 4 mg/2 ml Vial)**  
4 MG IV-Push ONCE/PRN

PRN Reason: Nausea/Vomiting while in PACU  
Total Doses: Max 1 (0 of 1 Given)  
Comments: \*\* For use in PACU \*\*  
RX #: Q02231841

START/STOP	
10/26/22	1433 Edit or Verification ZPHA.DAV
10/26/22	1433 Edit or Verification ZPHA.DAV
	1526 Acknowledged Order KARRSAM
	2030 Discontinue PHAR608
	2055 Acknowledged Order DOMIXAV

DATE: 12/03/22 @ 0013  
USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/26/22 to 0659 10/27/22 (continued)	STAGE	

**Decadron (Dexamethasone Sod Phos 10 mg/ml Vial)**  
8 MG IV-Push ONCE/PRN  
PRN Reason: Nausea/Vomiting while in PACU  
Total Doses: Max 1 (0 of 1 Given)  
Comments: \*Give slow IVP over a minimum of 1 minute\*  
\*\* For use in PACU \*\*  
RX #: 002231842

110/26/22	1433	Edit or Verification ZPHA, DAV
110/26/22	1433	Edit or Verification ZPHA, DAV
	1526	Acknowledged Order KARRESAM
	2030	Discontinue PHARGJOB
	2055	Acknowledged Order DORTXAV

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/26/22 to 0659 10/27/22 (continued)	STOP

Sodium Chloride 0.9% 250 ml 240 ML  
(0.9% Sodium Chloride 250 ml Bag)  
CARDENE 25 MG  
(Nicardipine 25 mg/10 ml Vial)  
50 Mls/HR IV TITRATE/PRN  
PRN Reason: Hypertension  
Comments: Conc. = 0.1 mg/ml  
Protect From Light  
RX #: Q02232426

110/26/22 2046 Edit or Verification ANNOCCI  
2046 Edit or Verification ANNOCCI  
2055 Acknowledged Order DOMIXAV  
2120 DOMIXAV at 2120 SANE: 50 Mls/HR  
Barcode Medication: CARDENE  
NDC/DIN: 00143968910 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 250 ml  
NDC/DIN: 0038004902 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 250 Dose Rate: 5 Cumulative Elapsed Time (minutes): 0m  
Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0 IV Site: Left Antecubital  
2120 Infusion In Progress 2120 DOMIXAV: started, Dose Rate: 5 MG/HR, Rate: 50 Mls/HR  
Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:  
Queries  
Container Volume: 250 Dose Rate: 5 Cumulative Elapsed Time (minutes): 0m  
Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0 IV Site: Left Antecubital  
2132 Infusion In Progress 2132 DOMIXAV: Increased, Dose Rate: 7.5 MG/HR, Rate: 75 Mls/HR  
Intake: 10 mls, Cumulative Intake: 10 mls, Container Volume: 240 mls, Site:  
Queries  
Cumulative Dose: 1 Cumulative Intake (bag): 10 Cumulative Intake (Rx): 10  
Container Volume: 240 Dose Rate: 7.5 Cumulative Elapsed Time (minutes): 12m  
Increase/Decrease: Increased Infusion Intake: 10 Infusion Rate: 75 Waste Amount: 0  
2133 Transaction Rule PHABRC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Fm 10/26/22 2120: NIC25I Amount Wasted: 0 MG; Drug Waste%: 0  
2133 Transaction Rule PHABRC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Fm 10/26/22 2120: NS250 Amount Wasted: 10 Ml; Drug Waste%: 4  
2145 Infusion In Progress 2145 DOMIXAV: Increased, Dose Rate: 10 MG/HR, Rate: 100 Mls/HR  
Intake: 16.25 mls, Cumulative Intake: 26.25 mls, Container Volume: 223.75 mls, Site:  
Queries  
Cumulative Dose: 2.625 Cumulative Intake (bag): 26.25 Cumulative Intake (Rx): 26.25  
Container Volume: 223.75 Dose Rate: 10 Cumulative Elapsed Time (minutes): 25m  
Increase/Decrease: Increased Infusion Intake: 16.25 Infusion Rate: 100 Waste Amount: 0  
2200 Infusion In Progress 2200 DOMIXAV: Increased, Dose Rate: 12.5 MG/HR, Rate: 125 Mls/HR  
Intake: 25 mls, Cumulative Intake: 51.25 mls, Container Volume: 198.75 mls, Site:  
Queries  
Cumulative Dose: 5.125 Cumulative Intake (bag): 51.25 Cumulative Intake (Rx): 51.25  
Container Volume: 198.75 Dose Rate: 12.5 Cumulative Elapsed Time (minutes): 40m  
Increase/Decrease: Increased Infusion Intake: 25 Infusion Rate: 125 Waste Amount: 0  
2209 Discontinue ANNOCCI  
2230 Infusion In Progress 2230 DOMIXAV: Increased, Dose Rate: 15 MG/HR, Rate: 150 Mls/HR  
Intake: 62.5 mls, Cumulative Intake: 113.75 mls, Container Volume: 136.25 mls, Site:

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/STOP	QUESTIONS
0700 10/26/22 to 0659 10/27/22 (continued)		

Queries  
Cumulative Dose: 11.375 Cumulative Intake (Bag): 113.75 Cumulative Intake (Rd): 113.75  
Container Volume: 136.25 Dose Rate: 15 Cumulative Elapsed Time (minutes): 1h 10m  
Increase/Decrease: Increased Infusion Intake: 62.5 Infusion Rate: 150 Waste Amount: 0  
2244 Acknowledged Order DORIXAV

Diprivan 100 ML  
(Propofol 1,000 mg/100 ml Vial)  
3.3 MLS/HR IV TITRATE/PRN  
PRN Reason: Sedation  
Comments: RASS 0 -> -2  
RX #: 002232441

10/26/22 2085 Acknowledged Order DORIXAV  
2113 Edit or Verification ANOCCL  
2113 Edit or Verification ANOCCL

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/	STOP/
0700 10/26/22 to 0659 10/27/22 (continued)	STAGE	

Sodium Chloride 0.9% 500 MG/480 ML  
(0.9% Sodium Chloride 500 ml Bag)  
CARDENE 50 MG  
(Nicardipine 25 mg/10 ml Vial)  
50 MGS/HR IV TITRATE/PBN  
PRN Reason: Hypertension  
Comments: Conc. = 0.1 mg/ml  
Protect From Light  
RX #: Q02232555

110/26/22) 2209 Order Entry ANNOCLII  
2244 Acknowledged Order DOMIXAV  
2341 DOMIXAV at 2341 GAVE: 150 MGS/HR  
Barcode Medication: CARDENE  
NDC/DIN: 00143968910 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 500 ML  
NDC/DIN: 00338004903 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 500 Dose Rate: 15 Cumulative Elapsed Time (minutes): 0m  
Increase/Decrease: Started Infusion Rate: 150 Waste Amount: 0 IV Site: Left Antecubital  
2341 Intake: 150 mls, Cumulative Intake: 150 mls, Container Volume: 500 mls, Site:  
Queries  
Container Volume: 500 Dose Rate: 15 Cumulative Elapsed Time (minutes): 0m  
Increase/Decrease: started Infusion Rate: 150 Waste Amount: 0 IV Site: Left Antecubital  
2347 Transaction Rule PHABRC08  
MED1.WASTE - Medicare Waste  
2347 Transaction Rule PHABRC08  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 10/26/22 2341: NIC251 Amount Wasted: 0 MG; Drug Waste%: 4  
0000 Infusion In Progress 0000 DOMIXAV: Running/ Dose Rate: 15 MG/HR, Rate: 150 MGS/HR  
Intake: 47.5 mls, Cumulative Intake: 47.5 mls, Container Volume: 452.5 mls, Site:  
Queries  
Cumulative Dose: 4.75 Cumulative Intake (bag): 47.5 Cumulative Intake (RX): 47.5  
Container Volume: 452.5 Dose Rate: 15 Cumulative Elapsed Time (minutes): 19m  
Increase/Decrease: Running Infusion Intake: 47.5 Infusion Rate: 150 Waste Amount: 0  
0100 Infusion In Progress 0100 DOMIXAV: Running/ Dose Rate: 15 MG/HR, Rate: 150 MGS/HR  
Intake: 150 mls, Cumulative Intake: 197.5 mls, Container Volume: 302.5 mls, Site:  
Queries  
Cumulative Dose: 19.75 Cumulative Intake (bag): 197.5 Cumulative Intake (RX): 197.5  
Container Volume: 302.5 Dose Rate: 15 Cumulative Elapsed Time (minutes): 1h 19m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
0200 Infusion In Progress 0200 DOMIXAV: Running/ Dose Rate: 15 MG/HR, Rate: 150 MGS/HR  
Intake: 150 mls, Cumulative Intake: 347.5 mls, Container Volume: 152.5 mls, Site:  
Queries  
Cumulative Dose: 34.75 Cumulative Intake (bag): 347.5 Cumulative Intake (RX): 347.5  
Container Volume: 152.5 Dose Rate: 15 Cumulative Elapsed Time (minutes): 2h 19m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
0300 Infusion In Progress 0300 DOMIXAV: Running/ Dose Rate: 15 MG/HR, Rate: 150 MGS/HR  
Intake: 150 mls, Cumulative Intake: 497.5 mls, Container Volume: 2.5 mls, Site:  
Queries  
Cumulative Dose: 49.75 Cumulative Intake (bag): 497.5 Cumulative Intake (RX): 497.5

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/26/22 to 0659 10/27/22 (continued)		

Container Volume: 2.5 Dose Rate: 15 Cumulative Elapsed Time (minutes): 3h 19m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
0302 Infusion In Progress 0302 DMTXAV: Infused; Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 2.5 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 50 Cumulative Intake (bag): 500 Cumulative Intake (Rx): 500  
Container Volume: 0 Dose Rate: 15 Cumulative Elapsed Time (minutes): 3h 21m  
Increase/Decrease: Infused Infusion Intake: 2.5 Infusion Rate: 150 Waste Amount: 0  
0302 DMTXAV at 0302 GAVE: 150 MLS/HR  
Barcode Medication: CARDENE  
NDC/DIN: 00143968910 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 500 ML  
NDC/DIN: 0038004903 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 50 Cumulative Intake (Rx): 500 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 3h 21m Increase/Decrease: Started/Running  
Cumulative Elapsed Time (minutes): 0 IV Site: Left Antecubital  
Infusion Rate: 150 Waste Amount: 0  
0302 Infusion In Progress 0302 DMTXAV: Started/Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: / Container Volume: 500 mls, Site:  
Queries  
Cumulative Dose: 50 Cumulative Intake (Rx): 500 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 3h 21m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0 IV Site: Left Antecubital  
0314 Transaction Rule PHABRC0B  
MED1.WASFE - Medicare Waste  
Description: Debit Svc Dr/Fm 10/27/22 0302: NIC25I Amount Wasted: 0 MG; Drug Waste%: 0  
0314 Transaction Rule PHABRC0B  
MED1.WASFE - Medicare Waste  
Description: Debit Svc Dr/Fm 10/27/22 0302: NS500 Amount Wasted: 20 ML; Drug Waste%: 4  
0400 Infusion In Progress 0400 DMTXAV: Running; Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 145 mls, Cumulative Intake: 145 mls, Container Volume: 355 mls, Site:  
Queries  
Cumulative Dose: 64.5 Cumulative Intake (bag): 145 Cumulative Intake (Rx): 645  
Container Volume: 355 Dose Rate: 15 Cumulative Elapsed Time (minutes): 4h 19m  
Increase/Decrease: Running Infusion Intake: 145 Infusion Rate: 150 Waste Amount: 0  
0500 Infusion In Progress 0500 DMTXAV: Running; Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 150 mls, Cumulative Intake: 295 mls, Container Volume: 205 mls, Site:  
Queries  
Cumulative Dose: 79.5 Cumulative Intake (bag): 295 Cumulative Intake (Rx): 795  
Container Volume: 205 Dose Rate: 15 Cumulative Elapsed Time (minutes): 5h 19m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
0600 Infusion In Progress 0600 DMTXAV: Running; Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 150 mls, Cumulative Intake: 445 mls, Container Volume: 55 mls, Site:  
Queries



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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 10/26/22 to 0659 10/27/22 (continued)	START/STOP	

Cumulative Dose: 94.5 Cumulative Intake (bag): 445 Cumulative Intake (Rx): 945  
Container Volume: 55 Dose Rate: 15 Cumulative Elapsed Time (minutes): 6h 19m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0

Trandate (Labetalol 100 mg/20 ml Vial)

10 MG IV-Push Q4H/PN

PN Reason: Hypertension

Comments: SBP >140

RX #: Q0232792

10/26/22	2346	Edit of Verification ZPHA.RJB
	2346	Edit of Verification ZPHA.RJB
	0005	Edit Administration DOMIXAV at 0005 GAVE: 10 MG
		Barcode Medication: Trandate
		NDC/DIN: 0409226720 (SOURCE: eMAR)
10/27/22-0126		by DOMIXAV
10/27/22-0127		Edit Administration by DOMIXAV
		TIME changed from: 0030
		to: 0005
	0057	Acknowledged Order MARHEL
	0126	Acknowledged Order DOMIXAV
	0129	Transaction Rule PHABRG0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 10/27/22 0030: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL
		Barcode Medication: Trandate
		NDC/DIN: 0409226720 (SOURCE: eMAR)
	0630	Transaction Rule PHABRG0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 10/27/22 0545: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL

Vasotec (Enalapril 1.25 mg/ml Vial)

1.25 MG IV-Push Q6H/PN

PN Reason: Hypertension SBP > 150 mmHg

RX #: Q0233073

10/27/22	0501	Edit of Verification ZPHA.RJB
	0501	Edit of Verification ZPHA.RJB
	0504	Acknowledged Order DOMIXAV

ADMINISTRATION PERIOD:	START/STOP	
0700 10/27/22 to 0659 10/28/22	START/STOP	

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/
0700 10/27/22 to 0659 10/28/22 (continued)	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

110/18/221 0700 Infusion In Progress 0700 DONTXAV: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 500 mls, Container Volume: 500 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 500 Cumulative Intake (Rx):  
| 4500 Container Volume: 500 Cumulative Elapsed Time (minutes): 6d 0h 34m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0745 DONTXAV at 10/26/22 - 2100 GAVE: 50 MLS/HR  
| Barcode Medication: Sodium Chloride 0.9%  
| NDC/DIN: 038004904 (SOURCE: eMAR)  
| Admin Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (Rx): 4000 Container Volume: 1000  
| Cumulative Elapsed Time (minutes): 5d 14h 34m Increase/Decrease: Started/Running  
| Infusion Rate: 50 Waste Amount: 0 IV Site: Left Hand  
| 2000 Infusion In Progress 2000 BMS1ST: Running/ Dose Rate: / Rate: 50 MLS/HR  
| Intake: 350 mls, Cumulative Intake: 850 mls, Container Volume: 150 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 850 Cumulative Intake (Rx):  
| 4650 Container Volume: 150 Cumulative Elapsed Time (minutes): 6d 13h 34m  
| Increase/Decrease: Running Infusion Intake: 350 Infusion Rate: 50 Waste Amount: 0  
| 2100 Infusion In Progress 2100 BMS1ST: Running/ Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 900 mls, Container Volume: 100 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 900 Cumulative Intake (Rx):  
| 4900 Container Volume: 100 Cumulative Elapsed Time (minutes): 6d 14h 34m  
| Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 2200 Infusion In Progress 2200 BMS1ST: Running/ Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 950 mls, Container Volume: 50 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 950 Cumulative Intake (Rx):  
| 4950 Container Volume: 50 Cumulative Elapsed Time (minutes): 6d 15h 34m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 2300 Infusion In Progress 2300 BMS1ST: Infused/ Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
| 5000 Container Volume: 0 Cumulative Elapsed Time (minutes): 6d 16h 34m Increase/Decrease:  
| Infused Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 2300 Infusion In Progress 2300 BMS1ST: Started/Running, Dose Rate: / Rate: 50 MLS/HR  
| Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (Rx): 5000 Container Volume: 1000  
| Cumulative Elapsed Time (minutes): 6d 16h 34m Increase/Decrease: Started/Running  
| Infusion Rate: 50 Waste Amount: 0

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)	STAGE	STAGE

0000 Infusion In Progress 0000 BMS/STZ: Running, Dose Rate: , Rate: 50 mLs/HR  
Intake: 50 mlr, Cumulative Intake: 50 mlr, Container Volume: 950 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 50 Cumulative Intake (Rx):  
5050 Container Volume: 950 Cumulative Elapsed Time (minutes): 6d 17h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0045 Transaction Rule PHABRC08  
MEDL.MASRE - Medicate Waste  
Description: Dabit Svc Dr/Fm 10/27/22 2300: NS Amount Wasted: 0 ML; Drug Waste%: 0  
0100 Infusion In Progress 0100 BMS/STZ: Running, Dose Rate: , Rate: 50 mLs/HR  
Intake: 50 mlr, Cumulative Intake: 100 mlr, Container Volume: 900 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 100 Cumulative Intake (Rx):  
5100 Container Volume: 900 Cumulative Elapsed Time (minutes): 6d 18h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0200 Infusion In Progress 0200 BMS/STZ: Running, Dose Rate: , Rate: 50 mLs/HR  
Intake: 50 mlr, Cumulative Intake: 150 mlr, Container Volume: 850 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 150 Cumulative Intake (Rx):  
5150 Container Volume: 850 Cumulative Elapsed Time (minutes): 6d 19h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0300 Infusion In Progress 0300 BMS/STZ: Running, Dose Rate: , Rate: 50 mLs/HR  
Intake: 50 mlr, Cumulative Intake: 200 mlr, Container Volume: 800 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 200 Cumulative Intake (Rx):  
5200 Container Volume: 800 Cumulative Elapsed Time (minutes): 6d 20h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0345 BMS/STZ at 10/27/22 - 2300 GAVE: 50 mLs/HR  
Barcode Medication: sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 5000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 6d 18h 34m Increase/Decrease: started/Running  
Infusion Rate: 50 Waste Amount: 0  
0400 Infusion In Progress 0400 BMS/STZ: Running, Dose Rate: , Rate: 50 mLs/HR  
Intake: 50 mlr, Cumulative Intake: 250 mlr, Container Volume: 750 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 250 Cumulative Intake (Rx):  
5250 Container Volume: 750 Cumulative Elapsed Time (minutes): 6d 21h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0500 Infusion In Progress 0500 BMS/STZ: Running, Dose Rate: , Rate: 50 mLs/HR  
Intake: 50 mlr, Cumulative Intake: 300 mlr, Container Volume: 700 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 300 Cumulative Intake (Rx):

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Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A Unit Num ME01483046  
 Medication Discharge Summary  
 Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)	STAGE	

5300 Container Volume: 700 Cumulative Elapsed Time (minutes): 6d 23h 34m  
 Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 mL/HR  
 0600 Intake: 50 mls, Cumulative Intake: 350 mls, Container Volume: 650 mls, Site:  
 Queues  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 350 Cumulative Intake (RX):  
 530 Container Volume: 650 Cumulative Elapsed Time (minutes): 6d 23h 34m  
 Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 mL/HR Amount: 0

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG PO DAILY before breakfast  
 RX #: 002218666

10/20/22 0700 DMTXAV at 0703 GAVB: 112 MCG  
 Barcode Medication: Synthroid  
 NDC/DIN: 4229203901 (SOURCE: eMAR)  
 0714 Transaction Rule PHARMC08  
 MED: WASTE - Medicare Waste  
 Description: Debit Svc Dr/Tm 10/27/22 0703: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%:  
 0  
 0805 Discontinue ZPRA.AS  
 0834 Acknowledged Order HERNLEN

**Prinivil (Lisinopril 40 mg Tablet)**  
 40 MG PO DAILY  
 RX #: 002219192

10/20/22 0804 Discontinue ZPRA.AS  
 0834 Acknowledged Order HERNLEN

**Levemir (Insulin Detemir 100 units/mL 10mL Vial)**  
 35 UNIT SUB-Q DAILY  
 Comments: Ref approved sub for: Iantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: 002219569

10/20/22 0915 Transaction Rule PHARMC08  
 MED: WASTE - Medicare Waste  
 Description: Debit Svc Dr/Tm 10/27/22 0907: INSIEVI Amount Wasted: 0 UNIT; Amount  
 Given: 0.350 ML  
 1000 HERNLEN at 0907 CO-SIGNER: BANSERI SITE: Left PosteroLateral Arm GAVB: 35 UNIT  
 Barcode Medication: Levemir  
 NDC/DIN: 0169368712 (SOURCE: eMAR)  
 Admin Queues  
 MAR Injection site: 13  
 1104 Discontinue AMARA  
 1240 Acknowledged Order HERNLEN

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 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num ME01483046  
 Medication Discharge Summary  
 Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)		

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
 5 UNIT SUB-Q Three times daily with meals  
 Comments: Administer routine doses at same time as food.  
 DO NOT CONFUSE WITH NOVOLIN.  
 0-15 MINUTES BEFORE MEAL  
 \*HOLD AND CALL PHYSICIAN IF MEAL IS SKIPPED/ORAL INTAKE DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS BY PHYSICIAN ARE NOT MET.  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: 002224354

**Levemir (Insulin Detemir 100 units/ml 10ml Vial)**  
 10 UNIT SUB-Q once daily at bedtime  
 Comments: Not approved sub for: Iantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: 002225254

**Claritin-D 24 Hour (loratadine/pseudoephed 10/240 ER Tablet)**  
 1 TAB PO Q24H  
 Comments: Do not crush tablet.  
 RX #: 002229946

110/23/22 | 1104 Discontinue AMARUM  
 1240 Acknowledged Order HERNLEN  
 110/25/22 | 0804 Hold ZPHA.AS  
 0834 Acknowledged Order HERNLEN  
 1019 Discontinue BAPADG  
 1032 Acknowledged Order HERNLEN

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 10/27/22 to 0659 10/28/22 (continued)	

Route Change - PO to NG-Tube - Per Pharmacy (PO to NG-Tube - Ex Consult)  
1 EACH MISCELLANEOUS PER PROTOCOL  
RX #: 002233269

DATE	DESCRIPTION	AMOUNT	WASTED
10/27/22	0834 Acknowledged Order HERNLEN		
	0836 Edit or Verification ZPHA.AS		
	0836 Edit or Verification ZPHA.AS		
	0902 Cancel ZPHA.ANT		
	0947 Acknowledged Order HERNLEN		

Prinivil (Irisinopril 40 mg Tablet)  
40 MG NG-TUBE DAILY  
RX #: 002233224

DATE	DESCRIPTION	AMOUNT	WASTED
10/27/22	0804 Order Entry ZPHA.AS		
	0834 Acknowledged Order HERNLEN		
	1000 HERNLEN at 1037 GAVE: 40 MG		
	Barcode Medication: Prinivil		
	NDC/DIN: 0904720061 (SOURCE: eMAR)		
	1048 Transaction Rule PHARMC08		
	MDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 10/27/22 1037: ZRS40 Amount Wasted: 0 MG; Drug Waste%: 0		

Synthroid (Letrothyroxine 112 mcg Tablet)  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002233225

DATE	DESCRIPTION	AMOUNT	WASTED
10/27/22	0805 Order Entry ZPHA.AS		
	0834 Acknowledged Order HERNLEN		
	0646 Transaction Rule PHARMC08		
	MDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 10/28/22 0640: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%: 0		

Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)  
5 UNIT IV-Push NOW/ONE  
Comments: IA/SA warning: order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002233388

DATE	DESCRIPTION	AMOUNT	WASTED
10/27/22	0941 HERNLEN at 1036 CO-SIGNER: DEVEJUS GAVE: 5 UNIT		
	Barcode Medication: Novolin Regular		
	NDC/DIN: 0169183311 (SOURCE: eMAR)		
	0942 Edit or Verification ZPHA.AS		
	0942 Edit or Verification ZPHA.AS		
	0943 Discontinue PHARMC08		
	0947 Acknowledged Order HERNLEN		
	1048 Transaction Rule PHARMC08		
	MDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 10/27/22 1036: INSRB0 Amount Wasted: 0 UNIT; Amount Given: 0.050 ML		

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/27/22 to 0659 10/28/22 (continued)	STOP

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
15 ML NUCOUS MEX BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.

10/27/22	0947	Acknowledged Order HERNLEN
	0947	Edit or Verification ZPHA.IND.S
	2000	BMSYS at 1956 GAVE: 15 ML
		Barcode Medication: Peridex Oral Rinse
		NDC/DIN: 0011620016 (SOURCE: eMAR)
		Expiration Date: 04/14/23
	2004	Transaction Rule PHABRC08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 10/27/22 1956: PER15P Amount Wasted: 0 ML, Drug Waste%: 0

**Peppoid (Famotidine 20 mg/2 ml Vial)**

20 MG IV-Push TWICE A DAY  
Comments: Dilute with 10 ml Saline  
Give IV over at least 2 minutes  
RRRRCGRPARE  
RX #: Q02233393

10/27/22	0947	Acknowledged Order HERNLEN
	0947 <td>Edit or Verification ZPHA.IND.S</td>	Edit or Verification ZPHA.IND.S
	0947 <td>Edit or Verification ZPHA.IND.S</td>	Edit or Verification ZPHA.IND.S
	1000 <td>HERNLEN at 1036 GAVE: 20 MG</td>	HERNLEN at 1036 GAVE: 20 MG
		Barcode Medication: Peppoid
		NDC/DIN: 6745743300 (SOURCE: eMAR)
	1048	Transaction Rule PHABRC08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 10/27/22 1036: BP20I Amount Wasted: 0 MG, Drug Waste%: 0
	2049	Transaction Rule PHABRC08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 10/27/22 2042: BP20I Amount Wasted: 0 MG, Drug Waste%: 0
	2100	BMSYS at 2042 GAVE: 20 MG
		Barcode Medication: Peppoid
		NDC/DIN: 6745743300 (SOURCE: eMAR)



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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/27/22 to 0659 10/28/22 (continued)	STOP

Calcium Gluconate 10% 100 ML  
(Calcium Gluc 1000 mg in NS BAC)  
100 ML/HR IVPB ONCE/ONE  
Comments: Label matches overwrap. RPh \_\_\_\_\_  
RX #: Q02234862

110/27/22 2316 BENSJES at 2335 GAVE: 100 ML/HR  
110/28/22 Barcode Medication: Calcium Gluconate 10%  
NDC/DIN: 44567062201 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 100 Waste Amount: 0  
2323 Edit or Verification ZPRA.SUP  
2323 Acknowledged Order BENSJES  
2335 Infusion In Progress 2335 BENSJES: Started, Dose Rate: / Rate: 100 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mlr, Site:  
Queries  
Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 100 Waste Amount: 0  
2349 Transaction Rule PHABKJOB  
MED.WASTE - Medicate Waste  
Description: Debit Svc Dc/Rm 10/27/22 2335: CAUG1000I Amount Wasted: 0 MG; Drug Waste%:  
0  
0015 Discontinue PHABKJOB  
0035 Infusion In Progress 0035 BENSJES: Infused, Dose Rate: / Rate: 0 ML/HR  
Intake: 100 mlr, Cumulative Intake: 100 mlr, Container Volume: 0 mlr, Site:  
Queries  
Cumulative Dose: 1000 Cumulative Intake (bag) : 100 Cumulative Intake (RX) : 100  
Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 0m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0  
0037 Acknowledged Order BENSJES

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 10/27/22 to 0659 10/28/22 (continued)	STOP

KCL 20 mg in 100 ml Water 100 ML  
(KCL 20 mg in 100 ml Bag)  
50 mL/HR IVPB Q2H  
Total Bags: 2 (2 of 2 Given)  
Comments: Infuse 2 x 20 mg Pre-mix bags for a total of  
dose of 40 mg  
Label matches overwrap \_\_\_\_\_ Rph  
RX #: Q02234863

110/27/22	2323	Edit or Verification ZPHA.SUP
110/28/22	2323	Edit or Verification ZPHA.SUP
	2325	Acknowledged Order BNSJRS
	2330	BNSJRS at 10/28/22 - 0012 GAVE: 50 mL/HR
		Barcode Medication: KCL 20 mg in 100 ml Water
		NDC/DIN: 00338070548 (SOURCE: Default NDCs)
		Admin Queries
		Container Volume: 100 Dose Rate: 10 Cumulative Elapsed Time (minutes): 0m
		Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0
		Comments
		late entry waiting for pharmacy to dispense
		0012 Infusion In Progress 0012 BNSJRS: Started, Dose Rate: 10 MEG/HR, Rate: 50 MLS/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mL, Site:
		Queries
		Container Volume: 100 Dose Rate: 10 Cumulative Elapsed Time (minutes): 0m
		Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0
		0015 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit svc Dr/Tm 10/28/22 0012: KCL20RIDER Amount Wasted: 0 MEG: Drug
		Waste%: 0
		0130 BNSJRS at 0230 GAVE: 50 MLS/HR
		Barcode Medication: KCL 20 mg in 100 ml Water
		NDC/DIN: 00338070548 (SOURCE: Default NDCs)
		Admin Queries
		Cumulative Dose: 20 Cumulative Intake (Rx): 100 Container Volume: 100 Dose Rate: 10
		Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Started/Running Infusion Rate:
		50 Waste Amount: 0
		0212 Infusion In Progress 0212 BNSJRS: Infused, Dose Rate: 10 MEG/HR, Rate: 50 MLS/HR
		Intake: 100 mL, Cumulative Intake: 100 mL, Container Volume: 0 mL, Site:
		Queries
		Cumulative Dose: 20 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 100
		Container Volume: 0 Dose Rate: 10 Cumulative Elapsed Time (minutes): 2h 0m
		Increase/Decrease: Infused Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0
		0230 Infusion In Progress 0230 BNSJRS: Started/Running, Dose Rate: 10 MEG/HR, Rate: 50 MLS/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mL, Site:
		Queries
		Cumulative Dose: 20 Cumulative Intake (Rx): 100 Container Volume: 100 Dose Rate: 10
		Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Started/Running Infusion Rate:
		50 Waste Amount: 0
		0245 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit svc Dr/Tm 10/28/22 0230: KCL20RIDER Amount Wasted: 0 MEG: Drug

DATE: 12/03/22 @ 0013  
USER: PHABGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 10/27/22 to 0659 10/28/22 (continued)		

Waste%: 0  
0329 Discontinue PHABGJOB  
0430 Infusion In Progress 0430 BMSJTS: Infused, Dose Rate: 0 MEQ/HR, Rate: 0 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 40 Cumulative Intake (bag): 100 Cumulative Intake (RX): 200  
Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 4h 0m  
Increase/Decrease: Infused Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0  
0523 Acknowledged Order BMSJTS

Glucose 15 (Dextrose Gel 40% 1 each tube)

1 EACH PO PER PROTOCOL/PRN

PRN Reason: Hypoglycemia

Comments: 93.75 ml tube of Glucose 15 delivers 15 gms of glucose.  
Give if BG < 70 with or without symptoms of hypoglycemia.

RX #: 002217857

10/19/22 0805 Discontinue ZPHA.AS  
0834 Acknowledged Order HERNLEN

Novolin Regular (Insulin Regular (human) 100 units/ml vial)

See Dose Ins. SUB-Q with meals and at bedtime/PRN

PRN Reason: Glucosecan Coverage

Comments: LA/SA warning: order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002217868

10/19/22 1104 Discontinue AMRAM  
1240 Acknowledged Order HERNLEN

Catapres (Clonidine 0.1 mg Tablet)

0.1 MG PO Q6H/PRN

PRN Reason: sbp > 160

Comments: LA/SA warning: this order is for Clonidine(Catapres)

RX #: 002219197

10/19/22 0803 Discontinue ZPHA.AS  
0834 Acknowledged Order HERNLEN



DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/
0700 10/27/22 to 0659 10/28/22 (continued)	STOP

Sodium Chloride 0.9% 500 MG/480 ML  
(0.9% Sodium Chloride 500 ml Bag)

CARDENE 50 MG

(Nifedipine 25 mg/10 ml Vial)

50 Mls/Hr IV TTRATE/PRN

PRN Reason: Hypertension

Comments: Conc. = 0.1 mg/ml

Protect From Light

RX #: Q02232555

110/26/22 0700 Infusion In Progress 0700 DONTAV: Infused, Dose Rate: 15 MG/HR, Rate: 150 Mls/HR  
Intake: 55 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 100 Cumulative Intake (bag): 500 Cumulative Intake (Rx): 1000  
Container Volume: 0 Dose Rate: 15 Cumulative Elapsed Time (minutes): 7h 19m  
Increase/Decrease: Infused Infusion Intake: 55 Infusion Rate: 150 Waste Amount: 0  
0730 HERNLEN at 0730 GAVE: 150 Mls/HR  
Barcode Medication: CARDENE  
NDC/DIN: 00143968910 (SOURCE: Default NDCs)  
Barcode Medication: Sodium Chloride 0.9% 500 ML  
NDC/DIN: 00338004903 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 100 Cumulative Intake (Rx): 1000 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 7h 19m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0  
0730 Infusion In Progress 0730 HERNLEN: Started/Running, Dose Rate: 15 MG/HR, Rate: 150 Mls/HR  
Intake: , Cumulative Intake: , Container Volume: 500 mls, Site:  
Queries  
Cumulative Dose: 100 Cumulative Intake (Rx): 1000 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 7h 19m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0  
0800 Infusion In Progress 0800 HERNLEN: Running, Dose Rate: 15 MG/HR, Rate: 150 Mls/HR  
Intake: 75 mls, Cumulative Intake: 75 mls, Container Volume: 425 mls, Site:  
Queries  
Cumulative Dose: 107.5 Cumulative Intake (bag): 75 Cumulative Intake (Rx): 1075  
Container Volume: 425 Dose Rate: 15 Cumulative Elapsed Time (minutes): 7h 49m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 150 Waste Amount: 0  
0900 Infusion In Progress 0900 HERNLEN: Running, Dose Rate: 15 MG/HR, Rate: 150 Mls/HR  
Intake: 150 mls, Cumulative Intake: 225 mls, Container Volume: 275 mls, Site:  
Queries  
Cumulative Dose: 122.5 Cumulative Intake (bag): 225 Cumulative Intake (Rx): 1225  
Container Volume: 275 Dose Rate: 15 Cumulative Elapsed Time (minutes): 8h 49m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
1000 Infusion In Progress 1000 HERNLEN: Running, Dose Rate: 15 MG/HR, Rate: 150 Mls/HR  
Intake: 150 mls, Cumulative Intake: 375 mls, Container Volume: 125 mls, Site:  
Queries  
Cumulative Dose: 137.5 Cumulative Intake (bag): 375 Cumulative Intake (Rx): 1375  
Container Volume: 125 Dose Rate: 15 Cumulative Elapsed Time (minutes): 9h 49m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
1033 Transaction Rule PHABRC0B  
MED1.WASRE - Medicare Waste  
Description: Debit svc Dc/Tm 10/27/22 0730: NIC25I Amount Wasted: 0 MG; Drug Waste%: 0  
1033 Transaction Rule PHABRC0B

DATE: 12/03/22 @ 0013  
USER: PHABGJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)	STAGE	

MEDI WASTE - Medication Waste  
Description: Dabit Svc/Dm 10/27/22 0730: NS500 Amount Wasted: 20 ML; Drug Waste%: 4  
1100 Infusion In Progress 1100 HERNIEM: Infused, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 125 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 150 Cumulative Intake (Rx): 500 Cumulative Intake (Rx): 1500  
Container Volume: 0 Dose Rate: 15 Cumulative Elapsed Time (minutes): 10h 49m  
Increase/Decrease: Infused Infusion Intake: 125 Infusion Rate: 150 Waste Amount: 0  
1200 Infusion In Progress 1200 HERNIEM: Infused, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 0 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 150 Cumulative Intake (Rx): 500 Cumulative Intake (Rx): 1500  
Container Volume: 0 Dose Rate: 15 Cumulative Elapsed Time (minutes): 10h 49m  
Increase/Decrease: Infused Infusion Intake: 0 Infusion Rate: 150 Waste Amount: 0  
1200 HERNIEM at 1200 GAVE: 150 MLS/HR  
Barcode Medication: CARDENE  
NDC/DIN: 00143968910 (SOURCE: Default NDCs)  
Barcode Medication: Sodium Chloride 0.9% 500 ML  
NDC/DIN: 00338004903 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 150 Cumulative Intake (Rx): 1500 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 10h 49m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0  
1200 Infusion In Progress 1200 HERNIEM: Started/Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 500 mls, Site:  
Queries  
Cumulative Dose: 150 Cumulative Intake (Rx): 1500 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 10h 49m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0  
1300 Infusion In Progress 1300 HERNIEM: Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 150 mls, Cumulative Intake: 150 mls, Container Volume: 350 mls, Site:  
Queries  
Cumulative Dose: 165 Cumulative Intake (Rx): 150 Cumulative Intake (Rx): 1650  
Container Volume: 350 Dose Rate: 15 Cumulative Elapsed Time (minutes): 11h 49m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
1300 Infusion In Progress 1300 HERNIEM: Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 0 mls, Cumulative Intake: 150 mls, Container Volume: 350 mls, Site:  
Queries  
Cumulative Dose: 165 Cumulative Intake (Rx): 150 Cumulative Intake (Rx): 1650  
Container Volume: 350 Dose Rate: 15 Cumulative Elapsed Time (minutes): 11h 49m  
Increase/Decrease: Running Infusion Intake: 0 Infusion Rate: 150 Waste Amount: 0  
Edt Infusion 1300 HERNIEM Action - From: Running To: Running  
Intake - From: 150 mls To: 0 mls  
Cumulative Intake - From: 300 mls To: 150 mls

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 10/27/22 to 0659 10/28/22 (continued)

START/ STOP	
	Container Volume - From: 200 mls To: 350 mls
	<b>Old Quas:</b>
	Cumulative Dose: 180
	Cumulative Intake (bag): 300
	Cumulative Intake (Rx): 1800
	Container Volume: 200
	Cumulative Elapsed Time (minutes): 12h 49m
	Infusion Intake: 150
	<b>New Quas:</b>
	Cumulative Dose: 165
	Cumulative Intake (bag): 150
	Cumulative Intake (Rx): 1650
	Container Volume: 350
	Cumulative Elapsed Time (minutes): 11h 49m
	Infusion Intake: 0
	1333 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 10/27/22 1200: NIC251 Amount Wasted: 0 MG; Drug Waste%: 0
	1333 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 10/27/22 1200: NS500 Amount Wasted: 20 ML; Drug Waste%: 4
	1400 Infusion In Progress 1400 HERNIEM: Running; Dose Rate: 15 MG/HR, Rate: 150 MLS/HR
	Intake: 150 mls, Cumulative Intake: 300 mls, Container Volume: 200 mls, Site:
	Queries
	Cumulative Dose: 180 Cumulative Intake (bag): 300 Cumulative Intake (Rx): 1800
	Container Volume: 200 Dose Rate: 15 Cumulative Elapsed Time (minutes): 12h 49m
	Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0
	1520 Infusion In Progress 1520 HERNIEM: Infused; Dose Rate: 15 MG/HR, Rate: 150 MLS/HR
	Intake: 200 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: 200 Cumulative Intake (bag): 500 Cumulative Intake (Rx): 2000
	Container Volume: 0 Dose Rate: 15 Cumulative Elapsed Time (minutes): 14h 9m
	Increase/Decrease: Infused Infusion Intake: 200 Infusion Rate: 150 Waste Amount: 0
	Edt Infusion 1520 HERNIEM Action - From: Infused To: Infused
	Intake - From: 350 mls To: 200 mls
	<b>Old Quas:</b>
	Infusion Intake: 350
	<b>New Quas:</b>
	Infusion Intake: 200
	1520 HERNIEM at 1520 GAZE: 150 MLS/HR
	Barcode Medication: CARDENE
	NDC/DIN: 00143968910 (SOURCE: Default NDCs)
	Barcode Medication: sodium chloride 0.9% 500 ML
	NDC/DIN: 00338004903 (SOURCE: Default NDCs)

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)		

Admin Queries  
Cumulative Dose: 200 Cumulative Intake (Rx): 2000 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 14h 9m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0  
1520 Infusion In Progress 1520 HERNIEN: Started/Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 100 mls, Cumulative Intake: 500 mls, Site:  
Queries  
Cumulative Dose: 200 Cumulative Intake (Rx): 2000 Container Volume: 500 Dose Rate: 15  
Cumulative Elapsed Time (minutes): 14h 9m Increase/Decrease: Started/Running  
Infusion Rate: 150 Waste Amount: 0  
1600 Infusion In Progress 1600 HERNIEN: Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 400 mls, Site:  
Queries  
Cumulative Dose: 210 Cumulative Intake (Rx): 100 Cumulative Intake (Rx): 2100  
Container Volume: 400 Dose Rate: 15 Cumulative Elapsed Time (minutes): 14h 49m  
Increase/Decrease: Running Infusion Intake: 100 Infusion Rate: 150 Waste Amount: 0  
1618 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Dabit svc Dc/Tm 10/27/22 1520: NIC251 Amount Wasted: 0 MG; Drug Waste%: 0  
1618 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Dabit svc Dc/Tm 10/27/22 1520: NS500 Amount Wasted: 20 ML; Drug Waste%: 4  
1700 Infusion In Progress 1700 HERNIEN: Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 150 mls, Cumulative Intake: 250 mls, Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 225 Cumulative Intake (Rx): 250 Cumulative Intake (Rx): 2250  
Container Volume: 250 Dose Rate: 15 Cumulative Elapsed Time (minutes): 15h 49m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
1800 Infusion In Progress 1800 HERNIEN: Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 150 mls, Cumulative Intake: 400 mls, Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: 240 Cumulative Intake (Rx): 400 Cumulative Intake (Rx): 2400  
Container Volume: 100 Dose Rate: 15 Cumulative Elapsed Time (minutes): 16h 49m  
Increase/Decrease: Running Infusion Intake: 150 Infusion Rate: 150 Waste Amount: 0  
1900 Infusion In Progress 1900 HERNIEN: Running, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 0 mls, Cumulative Intake: 400 mls, Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: 240 Cumulative Intake (Rx): 400 Cumulative Intake (Rx): 2400  
Container Volume: 100 Dose Rate: 15 Cumulative Elapsed Time (minutes): 17h 49m  
Increase/Decrease: Running Infusion Intake: 0 Infusion Rate: 150 Waste Amount: 0  
1941 Infusion In Progress 1941 BENISJES: Infused, Dose Rate: 15 MG/HR, Rate: 150 MLS/HR  
Intake: 100 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 250 Cumulative Intake (Rx): 500 Cumulative Intake (Rx): 2500



DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 10/27/22 to 0659 10/28/22 (continued)	STOP

Container Volume: 0 Dose Rate: 15 Cumulative Elapsed Time (minutes): 18h 30m	
Increase/Decrease: Infused Infusion Intake: 100 Infusion Rate: 150 Waste Amount: 0	
2000 BMS188 at 2000 CAYE: 125 MLS/HR	
Barcode Medication: CARDENE	
NDC/DIN: 00143969910 (SOURCE: Default NDCs)	
Barcode Medication: Sodium Chloride 0.9% 500 ML	
NDC/DIN: 00338004903 (SOURCE: Default NDCs)	
Adultn Queries	
Cumulative Dose: 250 Cumulative Intake (Rx): 2500 Container Volume: 500 Dose Rate: 12.5	
Cumulative Elapsed Time (minutes): 18h 30m Increase/Decrease: Started/Decreased	
Infusion Rate: 125 Waste Amount: 0	
2000 Infusion In Progress 2000 BMS188: started/Decreased, Dose Rate: 12.5 MG/HR, Rate: 125 MLS/HR	
Intake: , Cumulative Intake: , Container Volume: 500 mls, Site:	
Queries	
Cumulative Dose: 250 Cumulative Intake (Rx): 2500 Container Volume: 500 Dose Rate:	
12.5 Cumulative Elapsed Time (minutes): 18h 30m Increase/Decrease: started/Decreased	
Infusion Rate: 125 Waste Amount: 0	
2049 Transaction Rule PHABRC0B	
MDI.WASTE - Medicare Waste	
Description: Debit Svc Dr/Fw 10/27/22 2000: NIC251 Amount Wasted: 0 MG; Drug Waste%: 0	
2049 Transaction Rule PHABRC0B	
MDI.WASTE - Medicare Waste	
Description: Debit Svc Dr/Fw 10/27/22 2000: NS500 Amount Wasted: 20 ML; Drug Waste%: 4	
2100 Infusion In Progress 2100 BMS188: Decreased, Dose Rate: 10 MG/HR, Rate: 100 MLS/HR	
Intake: 125 mls, Cumulative Intake: 125 mls, Container Volume: 375 mls, Site:	
Queries	
Cumulative Dose: 262.5 Cumulative Intake (bag): 125 Cumulative Intake (Rx): 2625	
Container Volume: 375 Dose Rate: 10 Cumulative Elapsed Time (minutes): 19h 30m	
Increase/Decrease: Decreased Infusion Intake: 125 Infusion Rate: 100 Waste Amount: 0	
2200 Infusion In Progress 2200 BMS188: Decreased, Dose Rate: 7.5 MG/HR, Rate: 75 MLS/HR	
Intake: 100 mls, Cumulative Intake: 225 mls, Container Volume: 275 mls, Site:	
Queries	
Cumulative Dose: 272.5 Cumulative Intake (bag): 225 Cumulative Intake (Rx): 2725	
Container Volume: 275 Dose Rate: 7.5 Cumulative Elapsed Time (minutes): 20h 30m	
Increase/Decrease: Decreased Infusion Intake: 100 Infusion Rate: 75 Waste Amount: 0	
2300 Infusion In Progress 2300 BMS188: Running, Dose Rate: 7.5 MG/HR, Rate: 75 MLS/HR	
Intake: 75 mls, Cumulative Intake: 300 mls, Container Volume: 200 mls, Site:	
Queries	
Cumulative Dose: 280 Cumulative Intake (bag): 300 Cumulative Intake (Rx): 2800	
Container Volume: 200 Dose Rate: 7.5 Cumulative Elapsed Time (minutes): 21h 30m	
Increase/Decrease: Running Infusion Intake: 75 Waste Amount: 0	
0000 Infusion In Progress 0000 BMS188: Decreased, Dose Rate: 5 MG/HR, Rate: 50 MLS/HR	
Intake: 75 mls, Cumulative Intake: 375 mls, Container Volume: 125 mls, Site:	
Queries	

DATE: 12/03/22 @ 0013  
USER: PHARMCOR

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Medication Discharge Summary Report

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)	STAGE	

Cumulative Dose: 287.5 Cumulative Intake (bag): 375 Cumulative Intake (Rx): 2875  
Container Volume: 125 Dose Rate: 5 Cumulative Elapsed Time (minutes): 22h 30m  
Increase/Decrease: Decreased Infusion Intake: 75 Infusion Rate: 50 Waste Amount: 0  
0100 Infusion In Progress 0100 BENSITES: Paused, Dose Rate: 0 MG/HR, Rate: 0 ML/HR  
Intake: 50 mls, Cumulative Intake: 425 mls, Container Volume: 75 mls, Site:  
Queles  
Cumulative Dose: 292.5 Cumulative Intake (bag): 425 Cumulative Intake (Rx): 2925  
Container Volume: 75 Dose Rate: 0 Cumulative Elapsed Time (minutes): 23h 30m  
Increase/Decrease: Paused Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0

**Catapres (clonidine 0.1 mg tablet)**

0.1 MG NG-TUBE Q6H/PRN

PRN Reason: sbp > 160

Comments: LA/SA warning; this order is for  
clonidine(catapres)

RX #: Q02233222

10/27/22 | 0803 Order Entry ZPWA,AS  
| 0834 Acknowledged Order HERNLEN

**Glucose 15 (Dextrose cel 40% 1 each tube)**

1 EACH MUOUS MEM PER PROCOOL/PRN

PRN Reason: Hypoglycemia

Comments: 93.75 ml tube of Glucose 15 delivers 15 gms  
of glucose.  
Give if BS < 70 with or without symptoms of  
hypoglycemia.

RX #: Q02233226

10/27/22 | 0805 Order Entry ZPWA,AS  
| 0834 Acknowledged Order HERNLEN

DATE: 12/03/22 @ 0013  
 USER: PHARMCROB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22 Unit Num MR01483046 Account Num QH0054940416  
 Name Lyons, Kathleen A Medication Discharge Summary

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/27/22 to 0659 10/28/22 (continued)	STAGE	STAGE

Sodium Chloride 0.9% 100 ml 99 ML  
 (0.9% Sodium Chloride 100 ml Bag)  
 Novolin Regular 100 UNIT  
 (Insulin Regular (Human) 100 units/ml Vial)  
 0 Mls/Hr IV TITRATE/PN  
 PRN Reason: Hyperglycemia  
 Comments: INSULIN CONC = 1 unit/ml  
 Dispense in "visiV" bag.  
 Please send missing med slip for each dose  
 \*Double check required\*  
 (1) \_\_\_\_\_ (2) \_\_\_\_\_  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
 RX #: 002233564

1106 Edit or Verification ZPHA:AS	1106 Edit or Verification ZPHA:AS	1106 Edit or Verification ZPHA:AS	1106 Edit or Verification ZPHA:AS
1121 Edit or Verification AMARAN	1121 Edit or Verification AMARAN	1121 Edit or Verification AMARAN	1121 Edit or Verification AMARAN
1231 HERNIMN at 1231 CO-STIGMER: DEVBUS GAVE: 9 MLS/HR	1231 HERNIMN at 1231 CO-STIGMER: DEVBUS GAVE: 9 MLS/HR	1231 HERNIMN at 1231 CO-STIGMER: DEVBUS GAVE: 9 MLS/HR	1231 HERNIMN at 1231 CO-STIGMER: DEVBUS GAVE: 9 MLS/HR
Barcode Medication: Novolin Regular	Barcode Medication: Novolin Regular	Barcode Medication: Novolin Regular	Barcode Medication: Novolin Regular
NDC/DIN: 0016918311 (SOURCE: Default NDCs)	NDC/DIN: 0016918311 (SOURCE: Default NDCs)	NDC/DIN: 0016918311 (SOURCE: Default NDCs)	NDC/DIN: 0016918311 (SOURCE: Default NDCs)
Barcode Medication: sodium chloride 0.9% 100 ml	Barcode Medication: sodium chloride 0.9% 100 ml	Barcode Medication: sodium chloride 0.9% 100 ml	Barcode Medication: sodium chloride 0.9% 100 ml
NDC/DIN: 0038004918 (SOURCE: Default NDCs)	NDC/DIN: 0038004918 (SOURCE: Default NDCs)	NDC/DIN: 0038004918 (SOURCE: Default NDCs)	NDC/DIN: 0038004918 (SOURCE: Default NDCs)
Admin Queries	Admin Queries	Admin Queries	Admin Queries
Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m	Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m	Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m	Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m
Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441	Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441	Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441	Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441
1231 Infusion In Progress 1231 HERNIMN: Started, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1231 Infusion In Progress 1231 HERNIMN: Started, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1231 Infusion In Progress 1231 HERNIMN: Started, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1231 Infusion In Progress 1231 HERNIMN: Started, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR
Intake: 9 mls, Cumulative Intake: 9 mls, Site:	Intake: 9 mls, Cumulative Intake: 9 mls, Site:	Intake: 9 mls, Cumulative Intake: 9 mls, Site:	Intake: 9 mls, Cumulative Intake: 9 mls, Site:
Queries	Queries	Queries	Queries
Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m	Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m	Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m	Container Volume: 100 Dose Rate: 9 Cumulative Elapsed Time (minutes): 0m
Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441	Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441	Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441	Increase/Decrease: Started Infusion Rate: 9 Waste Amount: 0 Finger Stick Blood Glucose: 441
1232 Acknowledged Order HERNIMN	1232 Acknowledged Order HERNIMN	1232 Acknowledged Order HERNIMN	1232 Acknowledged Order HERNIMN
1233 Transaction Rule PHARMCROB	1233 Transaction Rule PHARMCROB	1233 Transaction Rule PHARMCROB	1233 Transaction Rule PHARMCROB
MDT WASTE - Medicare Waste	MDT WASTE - Medicare Waste	MDT WASTE - Medicare Waste	MDT WASTE - Medicare Waste
Description: Debit Svc Dc/Tm 10/27/22 1231: NS100 Amount Wasted: 1 ML; Drug Waste: 1	Description: Debit Svc Dc/Tm 10/27/22 1231: NS100 Amount Wasted: 1 ML; Drug Waste: 1	Description: Debit Svc Dc/Tm 10/27/22 1231: NS100 Amount Wasted: 1 ML; Drug Waste: 1	Description: Debit Svc Dc/Tm 10/27/22 1231: NS100 Amount Wasted: 1 ML; Drug Waste: 1
1300 Infusion In Progress 1300 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1300 Infusion In Progress 1300 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1300 Infusion In Progress 1300 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1300 Infusion In Progress 1300 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR
Intake: 4.35 mls, Cumulative Intake: 4.35 mls, Container Volume: 95.65 mls, Site:	Intake: 4.35 mls, Cumulative Intake: 4.35 mls, Container Volume: 95.65 mls, Site:	Intake: 4.35 mls, Cumulative Intake: 4.35 mls, Container Volume: 95.65 mls, Site:	Intake: 4.35 mls, Cumulative Intake: 4.35 mls, Container Volume: 95.65 mls, Site:
Queries	Queries	Queries	Queries
Cumulative Dose: 4.35 Cumulative Intake (bag): 4.35 Cumulative Intake (Rx): 4.35	Cumulative Dose: 4.35 Cumulative Intake (bag): 4.35 Cumulative Intake (Rx): 4.35	Cumulative Dose: 4.35 Cumulative Intake (bag): 4.35 Cumulative Intake (Rx): 4.35	Cumulative Dose: 4.35 Cumulative Intake (bag): 4.35 Cumulative Intake (Rx): 4.35
Container Volume: 95.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 29m	Container Volume: 95.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 29m	Container Volume: 95.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 29m	Container Volume: 95.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 29m
Increase/Decrease: Running Infusion Intake: 4.35 Infusion Rate: 9 Waste Amount: 0	Increase/Decrease: Running Infusion Intake: 4.35 Infusion Rate: 9 Waste Amount: 0	Increase/Decrease: Running Infusion Intake: 4.35 Infusion Rate: 9 Waste Amount: 0	Increase/Decrease: Running Infusion Intake: 4.35 Infusion Rate: 9 Waste Amount: 0
Finger Stick Blood Glucose: 403	Finger Stick Blood Glucose: 403	Finger Stick Blood Glucose: 403	Finger Stick Blood Glucose: 403
1400 Infusion In Progress 1400 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1400 Infusion In Progress 1400 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1400 Infusion In Progress 1400 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR	1400 Infusion In Progress 1400 HERNIMN: Running, Dose Rate: 9 UNIT/HR, Rate: 9 MLS/HR
Intake: 9 mls, Cumulative Intake: 13.35 mls, Container Volume: 86.65 mls, Site:	Intake: 9 mls, Cumulative Intake: 13.35 mls, Container Volume: 86.65 mls, Site:	Intake: 9 mls, Cumulative Intake: 13.35 mls, Container Volume: 86.65 mls, Site:	Intake: 9 mls, Cumulative Intake: 13.35 mls, Container Volume: 86.65 mls, Site:
Queries	Queries	Queries	Queries
Cumulative Dose: 13.35 Cumulative Intake (bag): 13.35 Cumulative Intake (Rx): 13.35	Cumulative Dose: 13.35 Cumulative Intake (bag): 13.35 Cumulative Intake (Rx): 13.35	Cumulative Dose: 13.35 Cumulative Intake (bag): 13.35 Cumulative Intake (Rx): 13.35	Cumulative Dose: 13.35 Cumulative Intake (bag): 13.35 Cumulative Intake (Rx): 13.35
Container Volume: 86.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 1h 29m	Container Volume: 86.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 1h 29m	Container Volume: 86.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 1h 29m	Container Volume: 86.65 Dose Rate: 9 Cumulative Elapsed Time (minutes): 1h 29m
Increase/Decrease: Running Infusion Intake: 9 Infusion Rate: 9 Waste Amount: 0	Increase/Decrease: Running Infusion Intake: 9 Infusion Rate: 9 Waste Amount: 0	Increase/Decrease: Running Infusion Intake: 9 Infusion Rate: 9 Waste Amount: 0	Increase/Decrease: Running Infusion Intake: 9 Infusion Rate: 9 Waste Amount: 0
Finger Stick Blood Glucose: 427	Finger Stick Blood Glucose: 427	Finger Stick Blood Glucose: 427	Finger Stick Blood Glucose: 427
Edt Infusion 1400 HERNIMN Action - From: Decreased To: Running	Edt Infusion 1400 HERNIMN Action - From: Decreased To: Running	Edt Infusion 1400 HERNIMN Action - From: Decreased To: Running	Edt Infusion 1400 HERNIMN Action - From: Decreased To: Running
Dose Rate - From: 6 UNIT/HR To: 9 UNIT/HR	Dose Rate - From: 6 UNIT/HR To: 9 UNIT/HR	Dose Rate - From: 6 UNIT/HR To: 9 UNIT/HR	Dose Rate - From: 6 UNIT/HR To: 9 UNIT/HR
Rate - From: 6 MLS/HR To: 9 MLS/HR	Rate - From: 6 MLS/HR To: 9 MLS/HR	Rate - From: 6 MLS/HR To: 9 MLS/HR	Rate - From: 6 MLS/HR To: 9 MLS/HR

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DATE: 12/03/22 @ 0013  
USER: PHABRIGOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

PAGE 02

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:  
0700 10/27/22 to 0659 10/28/22 (continued)

START/ STOP	
	<b>Old Orders:</b>
	Dose Rate: 6
	Increase/Decrease: Decreased
	Infusion Rate: 6
	Finger Stick Blood Glucose: 366
	<b>New Orders:</b>
	Dose Rate: 9
	Increase/Decrease: Running
	Infusion Rate: 9
	Finger Stick Blood Glucose: 427
	1500 Infusion In Progress 1500 HERNIEN: Decreased, Dose Rate: 6 UNIT/HR, Rate: 6 MLS/HR
	Intake: 9 mls, Cumulative Intake: 22.35 mls, Container Volume: 77.65 mls, Site:
	<b>Queries:</b>
	Cumulative Dose: 22.35 Cumulative Intake (bag): 22.35
	Container Volume: 77.65 Dose Rate: 6 Cumulative Blapsed Time (minutes): 2h 29m
	Increase/Decrease: Decreased Infusion Intake: 9 Infusion Rate: 6 Waste Amount: 0
	Finger Stick Blood Glucose: 366
	Edit Infusion 1500 HERNIEN Action - From: Decreased To: Decreased
	Intake - From: 6 mls To: 9 mls
	Cumulative Intake - From: 19.35 mls To: 22.35 mls
	Dose Rate - From: 5 UNIT/HR To: 6 UNIT/HR
	Rate - From: 5 MLS/HR To: 6 MLS/HR
	Container Volume - From: 80.65 mls To: 77.65 mls
	<b>Old Orders:</b>
	Cumulative Dose: 19.35
	Cumulative Intake (bag): 19.35
	Cumulative Intake (R0): 19.35
	Container Volume: 80.65
	Dose Rate: 5
	Infusion Intake: 6
	Infusion Rate: 5
	Finger Stick Blood Glucose: 321
	<b>New Orders:</b>
	Cumulative Dose: 22.35
	Cumulative Intake (bag): 22.35
	Cumulative Intake (R0): 22.35
	Container Volume: 77.65
	Dose Rate: 6
	Infusion Intake: 9
	Infusion Rate: 6
	Finger Stick Blood Glucose: 366
	1600 Infusion In Progress 1600 HERNIEN: Decreased, Dose Rate: 5 UNIT/HR, Rate: 5 MLS/HR
	Intake: 6 mls, Cumulative Intake: 20.35 mls, Container Volume: 71.65 mls, Site:
	<b>Queries:</b>

DATE: 12/03/22 @ 0013  
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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 10/27/22 to 0659 10/28/22 (continued)

START/ STOP	
	Cumulative Dose: 28.35 Cumulative Intake (bag): 28.35 Cumulative Intake (Rx): 28.35
	Container Volume: 71.65 Dose Rate: 5 Cumulative Elapsed Time (minutes): 3h 29m
	Increase/Decrease: Decreased Infusion Intake: 6 Infusion Rate: 5 Waste Amount: 0
	Finger Stick Blood Glucose: 321
	1700 Infusion In Progress 1700 HERNIEN: Decreased, Dose Rate: 4 UNIT/HR, Rate: 4 MLS/HR
	Intake: 5 mls, Cumulative Intake: 33.35 mls, Container Volume: 66.65 mls, Site:
	Queries
	Cumulative Dose: 33.35 Cumulative Intake (bag): 33.35 Cumulative Intake (Rx): 33.35
	Container Volume: 66.65 Dose Rate: 4 Cumulative Elapsed Time (minutes): 4h 29m
	Increase/Decrease: Decreased Infusion Intake: 5 Infusion Rate: 4 Waste Amount: 0
	Finger Stick Blood Glucose: 277
	1800 Infusion In Progress 1800 HERNIEN: Running, Dose Rate: 4 UNIT/HR, Rate: 4 MLS/HR
	Intake: 4 mls, Cumulative Intake: 37.35 mls, Container Volume: 62.65 mls, Site:
	Queries
	Cumulative Dose: 37.35 Cumulative Intake (bag): 37.35 Cumulative Intake (Rx): 37.35
	Container Volume: 62.65 Dose Rate: 4 Cumulative Elapsed Time (minutes): 5h 29m
	Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 4 Waste Amount: 0
	Finger Stick Blood Glucose: 286
	1900 Infusion In Progress 1900 HERNIEN: Decreased, Dose Rate: 3 UNIT/HR, Rate: 3 MLS/HR
	Intake: 4 mls, Cumulative Intake: 41.35 mls, Container Volume: 58.65 mls, Site:
	Queries
	Cumulative Dose: 41.35 Cumulative Intake (bag): 41.35 Cumulative Intake (Rx): 41.35
	Container Volume: 58.65 Dose Rate: 3 Cumulative Elapsed Time (minutes): 6h 29m
	Increase/Decrease: Decreased Infusion Intake: 4 Infusion Rate: 3 Waste Amount: 0
	Finger Stick Blood Glucose: 227
	1950 Edit or Verification AMARAN
	2000 Infusion In Progress 2000 BENSJES: Increased, Dose Rate: 4 UNIT/HR, Rate: 4 MLS/HR
	Intake: 3 mls, Cumulative Intake: 44.35 mls, Container Volume: 55.65 mls, Site:
	Queries
	Cumulative Dose: 44.35 Cumulative Intake (bag): 44.35 Cumulative Intake (Rx): 44.35
	Container Volume: 55.65 Dose Rate: 4 Cumulative Elapsed Time (minutes): 7h 29m
	Increase/Decrease: Increased Infusion Intake: 3 Infusion Rate: 4 Waste Amount: 0
	Finger Stick Blood Glucose: 220
	2012 Acknowledged Order BENSJES
	2100 Infusion In Progress 2100 BENSJES: Running, Dose Rate: 4 UNIT/HR, Rate: 4 MLS/HR
	Intake: 4 mls, Cumulative Intake: 48.35 mls, Container Volume: 51.65 mls, Site:
	Queries
	Cumulative Dose: 48.35 Cumulative Intake (bag): 48.35 Cumulative Intake (Rx): 48.35
	Container Volume: 51.65 Dose Rate: 4 Cumulative Elapsed Time (minutes): 8h 29m
	Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 4 Waste Amount: 0
	Finger Stick Blood Glucose: 231
	2200 Infusion In Progress 2200 BENSJES: Decreased, Dose Rate: 3 UNIT/HR, Rate: 3 MLS/HR
	Intake: 4 mls, Cumulative Intake: 52.35 mls, Container Volume: 47.65 mls, Site:
	Queries

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:  
0700 10/27/22 to 0659 10/28/22 (continued)

START/ STOP	
	Cumulative Dose: 52.35 Cumulative Intake (bag): 52.35 Cumulative Intake (Rx): 52.35
	Container Volume: 47.65 Dose Rate: 3 Cumulative Elapsed Time (minutes): 9h 29m
	Increase/Decrease: Decreased Infusion Intake: 4 Infusion Rate: 3 Waste Amount: 0
	Finger Stick Blood Glucose: 156
	2300 Infusion In Progress 2300 BMS/STZ: Running, Dose Rate: 3 UNIT/HR, Rate: 3 MLS/HR
	Intake: 3 mls, Cumulative Intake: 55.35 mls, Container Volume: 44.65 mls, Site:
	Queries
	Cumulative Dose: 55.35 Cumulative Intake (bag): 55.35 Cumulative Intake (Rx): 55.35
	Container Volume: 44.65 Dose Rate: 3 Cumulative Elapsed Time (minutes): 10h 29m
	Increase/Decrease: Running Infusion Intake: 3 Infusion Rate: 3 Waste Amount: 0
	Finger Stick Blood Glucose: 157
	0000 Infusion In Progress 0000 BMS/STZ: Decreased, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR
	Intake: 3 mls, Cumulative Intake: 58.35 mls, Container Volume: 41.65 mls, Site:
	Queries
	Cumulative Dose: 58.35 Cumulative Intake (bag): 58.35 Cumulative Intake (Rx): 58.35
	Container Volume: 41.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 11h 29m
	Increase/Decrease: Decreased Infusion Intake: 3 Infusion Rate: 1 Waste Amount: 0
	Finger Stick Blood Glucose: 140
	0100 Infusion In Progress 0100 BMS/STZ: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR
	Intake: 1 mls, Cumulative Intake: 59.35 mls, Container Volume: 40.65 mls, Site:
	Queries
	Cumulative Dose: 59.35 Cumulative Intake (bag): 59.35 Cumulative Intake (Rx): 59.35
	Container Volume: 40.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 12h 29m
	Increase/Decrease: Running Infusion Intake: 1 Infusion Rate: 1 Waste Amount: 0
	Finger Stick Blood Glucose: 138
	0200 Infusion In Progress 0200 BMS/STZ: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR
	Intake: 1 mls, Cumulative Intake: 60.35 mls, Container Volume: 39.65 mls, Site:
	Queries
	Cumulative Dose: 60.35 Cumulative Intake (bag): 60.35 Cumulative Intake (Rx): 60.35
	Container Volume: 39.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 13h 29m
	Increase/Decrease: Running Infusion Intake: 1 Infusion Rate: 1 Waste Amount: 0
	Finger Stick Blood Glucose: 142
	0300 Infusion In Progress 0300 BMS/STZ: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR
	Intake: 1 mls, Cumulative Intake: 61.35 mls, Container Volume: 38.65 mls, Site:
	Queries
	Cumulative Dose: 61.35 Cumulative Intake (bag): 61.35 Cumulative Intake (Rx): 61.35
	Container Volume: 38.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 14h 29m
	Increase/Decrease: Running Infusion Intake: 1 Infusion Rate: 1 Waste Amount: 0
	Finger Stick Blood Glucose: 145
	0400 Infusion In Progress 0400 BMS/STZ: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR
	Intake: 1 mls, Cumulative Intake: 62.35 mls, Container Volume: 37.65 mls, Site:
	Queries
	Cumulative Dose: 62.35 Cumulative Intake (bag): 62.35 Cumulative Intake (Rx): 62.35
	Container Volume: 37.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 15h 29m

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 10/27/22 to 0659 10/28/22 (continued)	

Increase/Decrease: Running Infusion Intake: 1 Infusion Rate: 1 Waste Amount: 0  
Finger Stick Blood Glucose: 136  
0500 Infusion In Progress 0500 BMSJES: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR  
Intake: 1 mls, Cumulative Intake: 63.35 mls, Container Volume: 36.65 mls, Site:  
Queries  
Cumulative Dose: 63.35 Cumulative Intake (bag): 63.35 Cumulative Intake (Rx): 63.35  
Container Volume: 36.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 16H 29m  
Increase/Decrease: Running Infusion Intake: 1 Infusion Rate: 1 Waste Amount: 0  
Finger Stick Blood Glucose: 146  
0600 Infusion In Progress 0600 BMSJES: Increased, Dose Rate: 3 UNIT/HR, Rate: 3 MLS/HR  
Intake: 1 mls, Cumulative Intake: 64.35 mls, Container Volume: 35.65 mls, Site:  
Queries  
Cumulative Dose: 64.35 Cumulative Intake (bag): 64.35 Cumulative Intake (Rx): 64.35  
Container Volume: 35.65 Dose Rate: 3 Cumulative Elapsed Time (minutes): 17H 25m  
Increase/Decrease: Increased Infusion Intake: 1 Infusion Rate: 3 Waste Amount: 0  
Finger Stick Blood Glucose: 151

ADMINISTRATION PERIOD:	START/STOP
0700 10/28/22 to 0659 10/29/22	

DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/28/22 to 0659 10/29/22 (continued)	STAGE	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

110/18/221 0700 Infusion In Progress 0700 BMSSTS: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 400 mls, Container Volume: 600 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 400 Cumulative Intake (RX):  
5400 Container Volume: 600 Cumulative Elapsed Time (minutes): 7d 0h 34m Increase/Decrease:  
Running Intake: 50 mls, Rate: 50 MSL/HR  
1706 Infusion In Progress 1706 H0M5G5RA: Infused, Dose Rate: / Rate: 50 MSL/HR  
Intake: 505 mls, Cumulative Intake: 905 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 905 Cumulative Intake (RX):  
5905 Container Volume: 0 Cumulative Elapsed Time (minutes): 7d 10h 40m Increase/Decrease:  
Infused Intake: 505 mls, Rate: 50 MSL/HR  
1706 Infusion In Progress 1706 H0M5G5RA: Started/Running, Dose Rate: / Rate: 50 MSL/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 5905 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 7d 10h 40m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
1718 Transaction Rule PHAPRCOR  
MED: VASRB - Medicare Waste  
Description: Dabiv 500 DC/7m 10/28/22 1706: NS Amount Wasted: 0 ML, Drug Waste%: 0  
1900 Infusion In Progress 1900 L0P8ZNI: Running/ Dose Rate: / Rate: 50 MSL/HR  
Intake: 95 mls, Cumulative Intake: 95 mls, Container Volume: 905 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 95 Cumulative Intake (RX):  
6000 Container Volume: 905 Cumulative Elapsed Time (minutes): 7d 12h 34m  
Increase/Decrease: Running Intake: 95 mls, Rate: 50 MSL/HR  
2000 Infusion In Progress 2000 L0P8ZNI: Running/ Dose Rate: / Rate: 50 MSL/HR  
Intake: 50 mls, Cumulative Intake: 145 mls, Container Volume: 855 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 145 Cumulative Intake (RX):  
6050 Container Volume: 855 Cumulative Elapsed Time (minutes): 7d 13h 34m  
Increase/Decrease: Running Intake: 50 mls, Rate: 50 MSL/HR  
2100 Infusion In Progress 2100 L0P8ZNI: Running/ Dose Rate: / Rate: 50 MSL/HR  
Intake: 50 mls, Cumulative Intake: 195 mls, Container Volume: 805 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 195 Cumulative Intake (RX):  
6100 Container Volume: 805 Cumulative Elapsed Time (minutes): 7d 14h 34m  
Increase/Decrease: Running Intake: 50 mls, Rate: 50 MSL/HR  
2200 Infusion In Progress 2200 L0P8ZNI: Running/ Dose Rate: / Rate: 50 MSL/HR  
Intake: 50 mls, Cumulative Intake: 245 mls, Container Volume: 755 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 245 Cumulative Intake (RX):



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USER: PHARGOIB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/28/22 to 0659 10/29/22 (continued)		

6150 Container Volume: 755 Cumulative Elapsed Time (minutes): 7d 15h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 mL/HR  
0 Waste Amount: 0  
2300 Infusion In Progress 2300 LOPEZNI: Running/ Dose Rate: / Rate: 50 mL/HR  
Intake: 50 mls, Cumulative Intake: 295 mls, Container Volume: 705 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 295 Cumulative Intake (RX):  
6200 Container Volume: 705 Cumulative Elapsed Time (minutes): 7d 15h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 mL/HR  
2345 HONGSPA at 1706 GAVE: 50 MLS/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 5905 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 7d 10h 40m Increase/Decrease: Started/Running  
Intake: 50 mls, Cumulative Intake: 0  
0000 Infusion In Progress 0000 LOPEZNI: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 345 mls, Container Volume: 655 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 345 Cumulative Intake (RX):  
6250 Container Volume: 655 Cumulative Elapsed Time (minutes): 7d 17h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0100 Infusion In Progress 0100 LOPEZNI: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 395 mls, Container Volume: 605 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 395 Cumulative Intake (RX):  
6300 Container Volume: 605 Cumulative Elapsed Time (minutes): 7d 18h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0200 Infusion In Progress 0200 LOPEZNI: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 445 mls, Container Volume: 555 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 445 Cumulative Intake (RX):  
6350 Container Volume: 555 Cumulative Elapsed Time (minutes): 7d 19h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0300 Infusion In Progress 0300 LOPEZNI: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 495 mls, Container Volume: 505 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 495 Cumulative Intake (RX):  
6400 Container Volume: 505 Cumulative Elapsed Time (minutes): 7d 20h 34m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0400 Infusion In Progress 0400 LOPEZNI: Running/ Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 545 mls, Container Volume: 455 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 545 Cumulative Intake (RX):  
6450 Container Volume: 455 Cumulative Elapsed Time (minutes): 7d 21h 34m

DATE: 12/03/22 @ 0013  
 USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046

Medication Discharge Summary

Account Num 0H0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 10/28/22 to 0659 10/29/22 (continued)	

Increase/Decrease:	Running Infusion Intake:	50	Infusion Rate:	50	Waste Amount:	0
0500	Infusion In Progress 0500 LOPEZNI:	Running/	Dose Rate:	/	Rate:	50 NLS/HR
	Intake:	50 mls,	Cumulative Intake:	595	mls,	Site:
	Order:					
	Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	595	Cumulative Intake (Rx):	
	6500	Container Volume:	405	Cumulative Elapsed Time (minutes):	7d 22h 34m	
		Increase/Decrease:	Running Infusion Intake:	50	Infusion Rate:	50
	0600	Infusion In Progress 0600 LOPEZNI:	Running/	Dose Rate:	/	Rate:
		Intake:	50 mls,	Cumulative Intake:	645	mls,
		Order:				
		Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	645	Cumulative Intake (Rx):
		6550	Container Volume:	355	Cumulative Elapsed Time (minutes):	7d 23h 34m
		Increase/Decrease:	Running Infusion Intake:	50	Infusion Rate:	50

MRSA Decolonization Per Pharmacy (MRSA - Dosed by PHA)  
 1 EACH MISCELLANEOUS PER PROTOCOL  
 RX #: 002231091

10/26/22	1334	Discontinue ZPHA.GT				
10/26/22	1413	Acknowledged Order HONGSRA				
10/27/22	0700	BMSJRS at 0639 GAVE: 60 MG				
		Barcode Medication: Nimotop				
		NDC/DIN: 69452020913 (SOURCE: Default NDCEs)				
	1049	Transaction Rule PHABKJOB				
		MEDI.WASTE - Medicate Waste				
		Description: Dabit Svc Dc/Tm 10/26/22 1034: NIM30L Amount Wasted: 0 MG; Drug Waste%: 0				
	1100	HONGSRA at 1034 GAVE: 60 MG				
		Barcode Medication: Nimotop				
		NDC/DIN: 69452020913 (SOURCE: Default NDCEs)				
	1500	HONGSRA at 1504 GAVE: 60 MG				
		Barcode Medication: Nimotop				
		NDC/DIN: 69452020913 (SOURCE: Default NDCEs)				
	1518	Transaction Rule PHABKJOB				
		MEDI.WASTE - Medicate Waste				
		Description: Dabit Svc Dc/Tm 10/26/22 1504: NIM30L Amount Wasted: 0 MG; Drug Waste%: 0				
	1849	Transaction Rule PHABKJOB				
		MEDI.WASTE - Medicate Waste				
		Description: Dabit Svc Dc/Tm 10/28/22 1841: NIM30L Amount Wasted: 0 MG; Drug Waste%: 0				
	1900	HONGSRA at 1841 GAVE: 60 MG				
		Barcode Medication: Nimotop				
		NDC/DIN: 69452020913 (SOURCE: Default NDCEs)				
	2024	Acknowledged Order LOPEZNI				
		2024 Discontinue LOPEZNI				

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 10/28/22 to 0659 10/29/22 (continued)	

**Prinivall (Lisinhopril 40 mg Tablet)**  
40 MG NG-TUBE DAILY  
RX #: 002233224

10/27/22 0947 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/28/22 0942: ZBS40 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 HONGSRA at 0942 GAVE: 40 MG  
Barcode Medication: Prinivall  
NDC/DIN: 0904720061 (SOURCE: eMAR)

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002233225

10/27/22 0700 EBNJTSB at 0640 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0631 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/29/22 0624: SYNT112 Amount Wasted: 0 MCG; Drug Waste%: 0

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.

10/27/22 0800 HONGSRA at 0821 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 0011620016 (SOURCE: eMAR)  
Expiration Date: 04/14/23  
0831 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/28/22 0821: PER15 Amount Wasted: 0 ML; Drug Waste%: 0  
2000 LOPEZNI at 2044 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 0011620016 (SOURCE: eMAR)  
Expiration Date: 03/16/23  
2050 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/28/22 2044: PER15 Amount Wasted: 0 ML; Drug Waste%: 0



DATE: 12/03/22 @ 0013  
USER: PHARGT08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/28/22 to 0659 10/29/22 (continued)	STAGE	STAGE

Sodium Chloride 0.9% 100 ml 99 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Novolin Regular 100 UNIT  
(Insulin Regular (Human) 100 units/ml Vial)  
0 Mls/HR IV TITRATE/PN  
PNV Reason: Hyperglycemia  
Comments: INSULIN CONC = 1 unit/ml  
Dispense in "visiV" bag.  
Please send missing med slip for each dose  
\*Double check required\*  
(1) \_\_\_\_\_ (2) \_\_\_\_\_  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRE 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02233564

10/27/22	0700	Infusion In Progress	0700 BMSSTS: Decreased	Dose Rate: 1 UNIT/HR, Rate: 1 Mls/HR	Intake: 3 mls, Cumulative Intake: 67.35 mls, Container Volume: 32.65 mls, Site:
		Queries			
		Cumulative Dose: 67.35	Cumulative Intake (bag): 67.35	Cumulative Intake (Rx): 67.35	
		Container Volume: 32.65	Dose Rate: 1	Cumulative Elapsed Time (minutes): 15h 29m	
		Increase/Decrease: Decreased	Infusion Intake: 3	Infusion Rate: 1	Waste Amount: 0
		Finger Stick Blood Glucose: 134			
	0800	Infusion In Progress	0800 HONGSRA: Running	Dose Rate: 1 UNIT/HR, Rate: 1 Mls/HR	Intake: 1 mls, Cumulative Intake: 68.35 mls, Container Volume: 31.65 mls, Site:
		Queries			
		Cumulative Dose: 68.35	Cumulative Intake (bag): 68.35	Cumulative Intake (Rx): 68.35	
		Container Volume: 31.65	Dose Rate: 1	Cumulative Elapsed Time (minutes): 15h 29m	
		Increase/Decrease: Running	Infusion Intake: 1	Infusion Rate: 1	Waste Amount: 0
		Finger Stick Blood Glucose: 134			
	0900	Infusion In Progress	0900 HONGSRA: Running	Dose Rate: 1 UNIT/HR, Rate: 1 Mls/HR	Intake: 1 mls, Cumulative Intake: 69.35 mls, Container Volume: 30.65 mls, Site:
		Queries			
		Cumulative Dose: 69.35	Cumulative Intake (bag): 69.35	Cumulative Intake (Rx): 69.35	
		Container Volume: 30.65	Dose Rate: 1	Cumulative Elapsed Time (minutes): 20h 29m	
		Increase/Decrease: Running	Infusion Intake: 1	Infusion Rate: 1	Waste Amount: 0
		Finger Stick Blood Glucose: 136			
	1000	Infusion In Progress	1000 HONGSRA: Running	Dose Rate: 1 UNIT/HR, Rate: 1 Mls/HR	Intake: 1 mls, Cumulative Intake: 70.35 mls, Container Volume: 29.65 mls, Site:
		Queries			
		Cumulative Dose: 70.35	Cumulative Intake (bag): 70.35	Cumulative Intake (Rx): 70.35	
		Container Volume: 29.65	Dose Rate: 1	Cumulative Elapsed Time (minutes): 21h 29m	
		Increase/Decrease: Running	Infusion Intake: 1	Infusion Rate: 1	Waste Amount: 0
		Finger Stick Blood Glucose: 142			
	1200	Infusion In Progress	1200 HONGSRA: Running	Dose Rate: 1 UNIT/HR, Rate: 1 Mls/HR	Intake: 2 mls, Cumulative Intake: 72.35 mls, Container Volume: 27.65 mls, Site:
		Queries			
		Cumulative Dose: 72.35	Cumulative Intake (bag): 72.35	Cumulative Intake (Rx): 72.35	
		Container Volume: 27.65	Dose Rate: 1	Cumulative Elapsed Time (minutes): 23h 29m	
		Increase/Decrease: Running	Infusion Intake: 2	Infusion Rate: 1	Waste Amount: 0
		Finger Stick Blood Glucose: 141			
	1400	Infusion In Progress	1400 HONGSRA: Running	Dose Rate: 1 UNIT/HR, Rate: 1 Mls/HR	Intake: 2 mls, Cumulative Intake: 74.35 mls, Container Volume: 25.65 mls, Site:
		Queries			
		Cumulative Dose: 74.35	Cumulative Intake (bag): 74.35	Cumulative Intake (Rx): 74.35	
		Container Volume: 25.65	Dose Rate: 1	Cumulative Elapsed Time (minutes): 25h 29m	
		Increase/Decrease: Running	Infusion Intake: 2	Infusion Rate: 1	Waste Amount: 0
		Finger Stick Blood Glucose: 149			
		Edit Infusion 1400 HONGSRA Action - From: Running To: Running			

DATE: 12/03/22 @ 0013  
USER: PHABGTOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/28/22 to 0659 10/29/22 (continued)	STOP	STOP

Intake - From: 2.233 mls To: 2 mls  
Cumulative Intake - From: 74.583 mls To: 74.35 mls  
Container Volume - From: 25.417 mls To: 25.65 mls

Old Orders:

Cumulative Dose: 74.583  
Cumulative Intake (bag): 74.583  
Cumulative Intake (Rx): 74.583  
Container Volume: 25.417  
Cumulative Elapsed Time (minutes): 25h 43m  
Infusion Intake: 2.233

New Orders:

Cumulative Dose: 74.35  
Cumulative Intake (bag): 74.35  
Cumulative Intake (Rx): 74.35  
Container Volume: 25.65  
Cumulative Elapsed Time (minutes): 25h 29m  
Infusion Intake: 2

1800 Infusion In Progress 1800 HOMOCPK: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR  
Intake: 4 mls, Cumulative Intake: 78.35 mls, Container Volume: 21.65 mls, Site:  
Queries  
Cumulative Dose: 78.35 Cumulative Intake (bag): 78.35 Cumulative Intake (Rx): 78.35  
Container Volume: 21.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 25h 29m  
Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 1 Waste Amount: 0  
Finger Stick Blood Glucose: 133  
2000 Infusion In Progress 2000 IOPRZNI: Running, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR  
Intake: 2 mls, Cumulative Intake: 80.35 mls, Container Volume: 19.65 mls, Site:  
Queries  
Cumulative Dose: 80.35 Cumulative Intake (bag): 80.35 Cumulative Intake (Rx): 80.35  
Container Volume: 19.65 Dose Rate: 1 Cumulative Elapsed Time (minutes): 31h 29m  
Increase/Decrease: Running Infusion Intake: 2 Infusion Rate: 1 Waste Amount: 0  
Finger Stick Blood Glucose: 142  
2200 Infusion In Progress 2200 IOPRZNI: Increased, Dose Rate: 3 UNIT/HR, Rate: 3 MLS/HR  
Intake: 2 mls, Cumulative Intake: 82.35 mls, Container Volume: 17.65 mls, Site:  
Queries  
Cumulative Dose: 82.35 Cumulative Intake (bag): 82.35 Cumulative Intake (Rx): 82.35  
Container Volume: 17.65 Dose Rate: 3 Cumulative Elapsed Time (minutes): 33h 29m  
Increase/Decrease: Increased Infusion Intake: 2 Infusion Rate: 3 Waste Amount: 0  
Finger Stick Blood Glucose: 171  
0000 Infusion In Progress 0000 IOPRZNI: Paused, Dose Rate: 0 UNIT/HR, Rate: 0 MLS/HR  
Intake: 6 mls, Cumulative Intake: 88.35 mls, Container Volume: 11.65 mls, Site:  
Queries  
Cumulative Dose: 88.35 Cumulative Intake (bag): 88.35 Cumulative Intake (Rx): 88.35  
Container Volume: 11.65 Dose Rate: 0 Cumulative Elapsed Time (minutes): 35h 29m  
Increase/Decrease: Paused Infusion Intake: 6 Infusion Rate: 0 Waste Amount: 0



DATE: 12/03/22 @ 0013  
USER: PHARGOIB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 10/29/22 to 0659 10/30/22		





DATE: 12/03/22 @ 0013  
USER: PHARGO8

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 10/29/22 to 0659 10/30/22 (continued)

START/ STOP	
0	2200 Infusion In Progress 2200 DDMIXAV: Running, Dose Rate: 50 MLS/HR Intake: 50 mls, Cumulative Intake: 454.167 mls, Container Volume: 545.833 mls, site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 454.167 Cumulative Intake (Rx): 7350 Container Volume: 545.833 Cumulative Elapsed Time (minutes): 8d 15h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
0	2300 Infusion In Progress 2300 DDMIXAV: Running, Dose Rate: 50 MLS/HR Intake: 50 mls, Cumulative Intake: 504.167 mls, Container Volume: 495.833 mls, site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 504.167 Cumulative Intake (Rx): 7400 Container Volume: 495.833 Cumulative Elapsed Time (minutes): 8d 16h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
0	0000 Infusion In Progress 0000 DDMIXAV: Running, Dose Rate: 50 MLS/HR Intake: 50 mls, Cumulative Intake: 554.167 mls, Container Volume: 445.833 mls, site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 554.167 Cumulative Intake (Rx): 7450 Container Volume: 445.833 Cumulative Elapsed Time (minutes): 8d 17h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
0	0100 Infusion In Progress 0100 DDMIXAV: Running, Dose Rate: 50 MLS/HR Intake: 50 mls, Cumulative Intake: 604.167 mls, Container Volume: 395.833 mls, site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 604.167 Cumulative Intake (Rx): 7500 Container Volume: 395.833 Cumulative Elapsed Time (minutes): 8d 18h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
0	0200 Infusion In Progress 0200 DDMIXAV: Running, Dose Rate: 50 MLS/HR Intake: 50 mls, Cumulative Intake: 654.167 mls, Container Volume: 345.833 mls, site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 654.167 Cumulative Intake (Rx): 7550 Container Volume: 345.833 Cumulative Elapsed Time (minutes): 8d 19h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
0	0300 Infusion In Progress 0300 DDMIXAV: Running, Dose Rate: 50 MLS/HR Intake: 50 mls, Cumulative Intake: 704.167 mls, Container Volume: 295.833 mls, site: Queries Cumulative Dose: Not Applicable Cumulative Intake (bag): 704.167 Cumulative Intake (Rx): 7600 Container Volume: 295.833 Cumulative Elapsed Time (minutes): 8d 20h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
0	0400 Infusion In Progress 0400 DDMIXAV: Running, Dose Rate: 50 MLS/HR

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num 0H005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 10/29/22 to 0659 10/30/22 (continued)		

Intake: 50 mls, Cumulative Intake: 754.167 mls, Container Volume: 245.833 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 754.167  
 Cumulative Intake (RX): 7650 Container Volume: 245.833 Cumulative Elapsed Time (minutes):  
 8d 21h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:  
 0  
 0500 Infusion In Progress 0500 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
 Intake: 50 mls, Cumulative Intake: 804.167 mls, Container Volume: 195.833 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 804.167  
 Cumulative Intake (RX): 7700 Container Volume: 195.833 Cumulative Elapsed Time (minutes):  
 8d 22h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:  
 0  
 0600 Infusion In Progress 0600 DMTXAV: Running, Dose Rate: / Rate: 50 MLS/HR  
 Intake: 50 mls, Cumulative Intake: 854.167 mls, Container Volume: 145.833 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 854.167  
 Cumulative Intake (RX): 7750 Container Volume: 145.833 Cumulative Elapsed Time (minutes):  
 8d 23h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:  
 0

**Prinivil (Lisinopril 40 mg Tablet)**  
 40 MG NG-TUBE DAILY  
 RX #: 002233224

10/27/22 1000 HERNLEN at 1058 GAVE: 40 MG  
 Barcode Medication: Prinivil  
 NDC/DIN: 0904720061 (SOURCE: eMAR)  
 1103 Transaction Rule PHABRC08  
 MED.WASTE - Medication Waste  
 Description: Debit svc Dr/Tm 10/29/22 1058: ZES40 Amount Wasted: 0 MG; Drug Waste%: 0

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 002233225

10/27/22 0700 LOPEZMI at 0624 GAVE: 112 MCG  
 Barcode Medication: Synthroid  
 NDC/DIN: 4229203901 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
USER: PHABRG0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 10/29/22 to 0659 10/30/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: Q02233392

DATE	TIME	AMOUNT	WASTE
10/27/22	0800	HERRLEN at 0800 GAVE: 15 ML	
		Barcode Medication: Peridex Oral Rinse	
		NDC/DIN: 00116200116 (SOURCE: eMAR)	
		Expiration Date: 03/23/23	
		1018 Transaction Rule PHABRG0B	
		MEDI.WASTE - Medicare Waste	
		2000 DOKIXAV at 2007 GAVE: 15 ML	
		Description: Debit Svc Dr/Tm 10/29/22 0800: BERR15L Amount Wasted: 0 ML; Drug Waste%: 0	
		Barcode Medication: Peridex Oral Rinse	
		NDC/DIN: 00116200116 (SOURCE: eMAR)	
		Expiration Date: 04/14/23	
		2019 Transaction Rule PHABRG0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 10/29/22 2007: BERR15L Amount Wasted: 0 ML; Drug Waste%: 0	

**Pepcid (Famotidine 20 mg/2 ml Vial)**  
20 MG IV-Push TWICE A DAY  
Comments: Dilute with 10 ml Saline  
Give IV over at least 2 minutes  
RRRRGRRRME  
RX #: Q02233393

DATE	TIME	AMOUNT	WASTE
10/27/22	1000	HERRLEN at 1058 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6745743300 (SOURCE: eMAR)	
		1103 Transaction Rule PHABRG0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 10/29/22 1058: BRR20I Amount Wasted: 0 MG; Drug Waste%: 0	
		2100 DOKIXAV at 2113 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6745743300 (SOURCE: eMAR)	
		2119 Transaction Rule PHABRG0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 10/29/22 2113: BRR20I Amount Wasted: 0 MG; Drug Waste%: 0	

DATE: 12/03/22 @ 0013  
USER: PHARMC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/29/22 to 0659 10/30/22 (continued)	STOP

NOVOLIN N (Insulin NPH 100 units/mL 10 mL VIAL)  
8 UNITS SUB-Q Q8H  
RX #: 002237642

110/29/22	1155 Edit or Verification ZPHA,KT
	1155 Edit or Verification ZPHA,KT
	1200 HERNLEN at 1210 CO-SIGNER: RANOVES SITE: Abdomen GAVE: 8 UNITS
	Barcode Medication: Novolin N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 210 MAR Injection site: 11
	1206 Acknowledged Order HERNLEN
	1219 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 10/29/22 1210: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.080 ML
	2000 DOKIYAV at 2008 CO-SIGNER: KIMJESON SITE: Abdomen GAVE: 8 UNITS
	Barcode Medication: Novolin N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	MAR Injection site: 11
	2019 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 10/29/22 2008: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.080 ML
	0400 DOKIYAV at 0431 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 8 UNITS
	Barcode Medication: Novolin N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 259 MAR Injection site: 11
	0445 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 10/30/22 0431: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.080 ML



DATE: 12/03/22 @ 0013  
USER: PHARCOJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 10/29/22 to 0659 10/30/22 (continued)	

**Catapres (Clonidine 0.1 mg Tablet)**  
0.1 MG NG-TUBE Q6H/PRN  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for Clonidine (catapres)  
RX #: 002233222

110/27/22| 0236 DONTXAV at 0236 GAVE: 0.1 MG  
Barcode Medication: Catapres  
NDC/DIN: 6068711311 (SOURCE: eMAR)  
0245 Transaction Rule PHARCOJOB  
MED WASTE - Medication Waste  
Description: Debit Svc Dt/Tm 10/30/22 0236: CANT Amount Wasted: 0 MG; Drug Waste%: 0

**Sodium Chloride 0.9% 100 ml 99 ML**  
**(0.9% Sodium Chloride 100 ml Bag)**  
Novolin Regular 100 UNIT  
(Insulin Regular (Human) 100 units/ml Vial)  
0 MLS/HR IV TITRATE/PRN  
PRN Reason: Hyperglycemia  
Comments: INSULIN CONC = 1 unit/ml  
Dispense in "VISIV" bag.  
Please send missing med slip for each dose  
\*Double check required\*

110/27/22| 0800 Infusion In Progress: 0800 HERNLEN: Paused, Dose Rate: 0 UNIT/HR, Rate: 0 MLS/HR  
Intake: 6 mls, Cumulative Intake: 18.65 mls, Container Volume: 81.35 mls/ Site:  
Queries  
Cumulative Dose: 107 Cumulative Intake (bag): 18.65 Cumulative Intake (Rx): 107  
Container Volume: 81.35 Dose Rate: 0 Cumulative Elapsed Time (minutes): 41h 2m  
Increase/Decrease: Paused Infusion Intake: 6 Infusion Rate: 0 Waste Amount: 0  
Finger Stick Blood Glucose: 116  
1000 Infusion In Progress: 1000 HERNLEN: Resumed/Increased, Dose Rate: 4 UNIT/HR, Rate: 4 MLS/HR  
Intake: 0 mls, Cumulative Intake: 18.65 mls, Container Volume: 81.35 mls/ Site:  
Queries  
Cumulative Dose: 107 Cumulative Intake (bag): 18.65 Cumulative Intake (Rx): 107  
Container Volume: 81.35 Dose Rate: 4 Cumulative Elapsed Time (minutes): 41h 2m  
Increase/Decrease: Resumed/Increased Infusion Intake: 0 Infusion Rate: 4 Waste Amount: 0  
Finger Stick Blood Glucose: 202  
1147 Discontinue GRUA  
1200 Infusion In Progress: 1200 HERNLEN: Infused, Dose Rate: 0 UNIT/HR, Rate: 0 MLS/HR  
Intake: 8 mls, Cumulative Intake: 26.65 mls, Container Volume: 0 mls/ Site:  
Queries  
Cumulative Dose: 115 Cumulative Intake (bag): 26.65 Cumulative Intake (Rx): 115  
Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 43h 2m  
Increase/Decrease: Infused Infusion Intake: 8 Infusion Rate: 0 Waste Amount: 73.35  
Finger Stick Blood Glucose: 210  
1206 Acknowledged Order HERNLEN

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002233564

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/29/22 to 0659 10/30/22 (continued)	STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucose Coverage  
RX #: 002237641

110/29/22 1154 Edit of Verification ZPHA.KT  
1154 Edit of Verification ZPHA.KT  
1206 Acknowledged Order HERNLEN  
1211 HERNLEN at 1211 CO-SIGNER: RAMOBS SITE: Abdomen GAVE: 4 UNIT  
Barcode Medication: Novolog  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 210 MAR Injection site: 11  
1219 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 10/29/22 1211: INSNASP Amount Wasted: 0 UNIT; Amount Given:  
0.040 ML  
1637 Edit Administration HERNLEN at 1637 CO-SIGNER: RAMOBS SITE: Left PosteroLateral Arm GAVE: 2 UNIT  
Barcode Medication: Novolog  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 192 MAR Injection site: 13  
10/29/22-1638 by HERNLEN  
10/29/22-1642 Edit Administration by HERNLEN  
**Admin Queries changed**  
From:  
Finger Stick Blood Glucose: 175  
To:  
Finger Stick Blood Glucose: 192  
1648 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 10/29/22 1637: INSNASP Amount Wasted: 0 UNIT; Amount Given:  
0.020 ML  
1648 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Credit Svc Dt/Tm 10/29/22 1637: INSNASP Amount Wasted: 0 UNIT; Amount  
Given: -0.020 ML  
1648 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 10/29/22 1637: INSNASP Amount Wasted: 0 UNIT; Amount Given:  
0.020 ML  
2009 DOKIVAV at 2009 CO-SIGNER: KINJEBON SITE: Abdomen GAVE: 4 UNIT  
Barcode Medication: Novolog  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 225 MAR Injection site: 11  
2019 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste



DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
0700 10/29/22 to 0659 10/30/22 (continued)				

		Description: Debit Svc Dc/Tm 10/29/22 2009; INSRSP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML		
		0011 DORTIVAV at 0011 CO-SIGNER: LAMPHEN SITE: Abdomen GAVE: 6 UNIT		
		Barcode Medication: NOVLOG		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger stick Blood Glucose: 293 MAR Injection site: 11		
		0014 Transaction Rule PHABRC08		
		MBDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/30/22 0011; INSRSP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML		
		0431 DORTIVAV at 0431 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 6 UNIT		
		Barcode Medication: NOVLOG		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger stick Blood Glucose: 259 MAR Injection site: 11		
		0445 Transaction Rule PHABRC08		
		MBDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/30/22 0431; INSRSP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML		

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
0700 10/30/22 to 0659 10/31/22				

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 10/30/22 to 0659 10/31/22 (continued)	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 mL Bag)  
50 MLS/HR IV .020H  
RX #: 002217827

110/18/22 0700 Infusion In Progress 0700 DDMIXAV: Running, Dose Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 904.167 mls, Container Volume: 95.833 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 904.167  
Cumulative Intake (RX): 7800 Container Volume: 95.833 Cumulative Elapsed Time (minutes):  
9d 0h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:  
0  
0704 Infusion In Progress 0704 DDMIXAV: Infused, Dose Rate: 50 MLS/HR  
Intake: 3.333 mls, Cumulative Intake: 907.5 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 907.5 Cumulative Intake (Rx):  
7803.333 Container Volume: 0 Cumulative Elapsed Time (minutes): 9d 0h 38m  
Increase/Decrease: Infused Infusion Intake: 3.333 Infusion Rate: 50 Waste Amount: 92.5  
0704 Infusion In Progress 0704 DDMIXAV: Started/Running, Dose Rate: 50 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 7803.333 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 9d 0h 38m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
0716 Transaction Rule PHABRC08  
MED1 WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 10/30/22 0704: NS Amount Wasted: 0 Ml; Drug Waste\*: 0  
1545 DDMIXAV at 0704 GAVE: 50 MLS/HR  
Barcode Medication: sodium chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 7803.333 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 9d 0h 38m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
1900 Infusion In Progress 1900 DDMIXAV: Running, Dose Rate: 50 MLS/HR  
Intake: 596.667 mls, Cumulative Intake: 596.667 mls, Container Volume: 403.333 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 596.667  
Cumulative Intake (RX): 8400 Container Volume: 403.333 Cumulative Elapsed Time (minutes):  
9d 12h 34m Increase/Decrease: Running Infusion Intake: 596.667 Infusion Rate: 50  
Waste Amount: 0  
2000 Infusion In Progress 2000 DDMIXAV: Running, Dose Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 646.667 mls, Container Volume: 353.333 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 646.667  
Cumulative Intake (RX): 8450 Container Volume: 353.333 Cumulative Elapsed Time (minutes):  
9d 13h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:  
0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/30/22 to 0659 10/31/22 (continued)		

2100	Infusion In Progress	2100 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 696.667 mlst, Container Volume: 303.333 mlst, Site:			
			Queries			
			Cumulative Dose: Not Applicable Cumulative Intake (bag): 696.667			
			Cumulative Intake (RX): 8500 Container Volume: 303.333 Cumulative Elapsed Time (minutes):			
			9d 14h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:			
			0			
2200	Infusion In Progress	2200 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 746.667 mlst, Container Volume: 253.333 mlst, Site:			
			Queries			
			Cumulative Dose: Not Applicable Cumulative Intake (bag): 746.667			
			Cumulative Intake (RX): 8550 Container Volume: 253.333 Cumulative Elapsed Time (minutes):			
			9d 15h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:			
			0			
2300	Infusion In Progress	2300 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 796.667 mlst, Container Volume: 203.333 mlst, Site:			
			Queries			
			Cumulative Dose: Not Applicable Cumulative Intake (bag): 796.667			
			Cumulative Intake (RX): 8600 Container Volume: 203.333 Cumulative Elapsed Time (minutes):			
			9d 16h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:			
			0			
0000	Infusion In Progress	0000 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 846.667 mlst, Container Volume: 153.333 mlst, Site:			
			Queries			
			Cumulative Dose: Not Applicable Cumulative Intake (bag): 846.667			
			Cumulative Intake (RX): 8650 Container Volume: 153.333 Cumulative Elapsed Time (minutes):			
			9d 17h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:			
			0			
0100	Infusion In Progress	0100 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 896.667 mlst, Container Volume: 103.333 mlst, Site:			
			Queries			
			Cumulative Dose: Not Applicable Cumulative Intake (bag): 896.667			
			Cumulative Intake (RX): 8700 Container Volume: 103.333 Cumulative Elapsed Time (minutes):			
			9d 18h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:			
			0			
0200	Infusion In Progress	0200 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 946.667 mlst, Container Volume: 53.333 mlst, Site:			
			Queries			
			Cumulative Dose: Not Applicable Cumulative Intake (bag): 946.667			
			Cumulative Intake (RX): 8750 Container Volume: 53.333 Cumulative Elapsed Time (minutes):			
			9d 19h 34m Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount:			
			0			
0300	Infusion In Progress	0300 DCMIXAV	Running	Dose Rate: /	Rate: 50 mL8/HR	
			Intake: 50 mlst, Cumulative Intake: 996.667 mlst, Container Volume: 3.333 mlst, Site:			

\*\*\* Continued on Page 86 \*\*\*  
This document is part of the legal medical record.



DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num HB01483046  
 Medication Discharge Summary  
 Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/30/22 to 0659 10/31/22 (continued)		

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: Q022333225

DATE	TIME	AMOUNT	WASTED
10/27/22	0700	HERNLEN at 0843 GAVE: 112 MCG	
		Barcode Medication: Synthroid	
		NDC/DIN: 4229203901 (SOURCE: eMAR)	
		0846 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/30/22 0843: SYNT112 Amount Wasted: 0 MCG; Drug Waste%:	
		0	
		0647 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/31/22 0633: SYNT112 Amount Wasted: 0 MCG; Drug Waste%:	
		0	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
 15 ML MUCOUS MEM BID0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 protocol. Protocol continues until patient off ventilator.  
 RX #: Q022333392

DATE	TIME	AMOUNT	WASTED
10/27/22	0800	HERNLEN at 0844 GAVE: 15 ML	
		Barcode Medication: Peridex Oral Rinse	
		NDC/DIN: 0011620016 (SOURCE: eMAR)	
		Expiration Date: 03/16/23	
		0846 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/30/22 0844: PER15L Amount Wasted: 0 ML; Drug Waste%:	
		2000 DORTXAV at 2007 GAVE: 15 ML	
		Barcode Medication: Peridex Oral Rinse	
		NDC/DIN: 0011620016 (SOURCE: eMAR)	
		Expiration Date: 03/23/23	
		2022 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/30/22 2007: PER15L Amount Wasted: 0 ML; Drug Waste%:	
		0	

**Pepcid (Famotidine 20 mg/2 ml Vial)**  
 20 MG IV-Push TWICE A DAY  
 Comments: Dilute with 10 ml saline  
 Give IV over at least 2 minutes  
 RBRRCGRPAB  
 RX #: Q022333393

DATE	TIME	AMOUNT	WASTED
10/27/22	1000	HERNLEN at 1047 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6745743300 (SOURCE: eMAR)	
		1102 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/30/22 1047: PEP20I Amount Wasted: 0 MG; Drug Waste%:	
		2100 DORTXAV at 2115 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6745743300 (SOURCE: eMAR)	
		2122 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 10/30/22 2115: PEP20I Amount Wasted: 0 MG; Drug Waste%:	
		0	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 10/30/22 to 0659 10/31/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)  
8 UNITS SUB-Q Q8H  
RX #: 002237642

10/29/22 | 1125 Discontinue GEUA  
| | 1126 Order Entry GEUA  
| | 1147 Acknowledged Order HERRLEN

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/30/22 to 0659 10/31/22 (continued)	STAGE	STAGE

**Magnesium Sulfate 100 ML**  
 (Magnesium Sulfate 1 gm/100 ml Premix Bag)  
 100 MLS/HR IVPB QIH  
 Total Bags: 2 (2 of 2 Given)  
 Comments: Label matches overwrap. RPH \_\_\_\_\_  
 RX #: Q02238884

110/30/22 1100 HERNLEN at 1134 GAVE: 100 MLS/HR  
 110/30/22 Barcode Medication: Magnesium sulfate  
 NDC/DIN: 00409672723 (SOURCE: Default NDCs)  
 Admin Queries  
 Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
 Infusion Rate: 100 Waste Amount: 0  
 1102 Edit or Verification ZPMA.NGM  
 1102 Edit or Verification ZPMA.NGM  
 1134 Acknowledged Order HERNLEN  
 1134 Infusion In Progress 1134 HERNLEN: Started, Dose Rate: / Rate: 100 MLS/HR  
 Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
 Queries  
 Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
 Infusion Rate: 100 Waste Amount: 0  
 1148 Transaction Rule PHABRC08  
 MEDT.WASTE - Medicate Waste  
 Description: Dabite Svc Dc/Tm 10/30/22 1134: MAGIIBB Amount Wasted: 0 GM; Drug Waste%: 0  
 1200 HERNLEN at 1230 GAVE: 100 MLS/HR  
 Barcode Medication: Magnesium sulfate  
 NDC/DIN: 00409672723 (SOURCE: Default NDCs)  
 Admin Queries  
 Cumulative Dose: 0.9333 Cumulative Intake (RM): 93.333 Container Volume: 100  
 Cumulative Elapsed Time (minutes): 56m Increase/Decrease: Started/Running Infusion Rate:  
 100 Waste Amount: 0  
 1230 Infusion In Progress 1230 HERNLEN: Infused, Dose Rate: / Rate: 100 MLS/HR  
 Intake: 93.333 mls, Cumulative Intake: 93.333 mls, Container Volume: 0 mls, Site:  
 Queries  
 Cumulative Dose: 0.9333 Cumulative Intake (RM): 93.333 Container Volume: 100  
 Container Volume: 0 Cumulative Elapsed Time (minutes): 56m Increase/Decrease: Infused  
 Infusion Intake: 93.333 Infusion Rate: 100 Waste Amount: 6.667  
 1230 Infusion In Progress 1230 HERNLEN: Started/Running, Dose Rate: / Rate: 100 MLS/HR  
 Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
 Queries  
 Cumulative Dose: 0.9333 Cumulative Intake (RM): 93.333 Container Volume: 100  
 Cumulative Elapsed Time (minutes): 56m Increase/Decrease: Started/Running Infusion Rate:  
 100 Waste Amount: 0  
 1232 Transaction Rule PHABRC08  
 MEDT.WASTE - Medicate Waste  
 Description: Dabite Svc Dc/Tm 10/30/22 1230: MAGIIBB Amount Wasted: 0 GM; Drug Waste%: 0  
 1259 Discontinue PHABRC08  
 1304 Acknowledged Order RAMORS  
 1332 Infusion In Progress 1332 HERNLEN: Infused, Dose Rate: / Rate: 0 MLS/HR  
 Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:

DATE: 12/03/22 @ 0013  
USER: PHARCTOR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 10/30/22 to 0659 10/31/22 (continued)		

Queries  
Cumulative Dose: 1.9333 Cumulative Intake (Bag): 100 Cumulative Intake (RX): 193.333  
Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 58m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0

NOVOLIN N (Insulin NPH 100 units/ml 10 mL Vial)  
12 UNITS SUB-Q O8H  
RX #: Q02238931

110/30/22| 1125 HERNLEN at 1251 CO-SIGNER: RANOUZ SITE: Left Posterolateral Arm GAVE: 12 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 244 MAR Injection site: 13  
1126 Order Entry GRUA  
1132 Edit or Verification ZPHA.SAK  
1132 Edit or Verification ZPHA.SAK  
1147 Acknowledged Order HERNLEN  
1303 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 10/30/22 1251: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.120 ML  
1925 DORTXAV at 2007 CO-SIGNER: SAN CHE SITE: Abdomen GAVE: 12 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 248 MAR Injection site: 11  
2022 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 10/30/22 2007: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.120 ML  
0325 DORTXAV at 0337 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 12 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger stick Blood Glucose: 211 MAR Injection site: 11  
0346 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 10/31/22 0337: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.120 ML



DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 10/30/22 to 0659 10/31/22 (continued)	STOP

**Trandate (labetalol 100 mg/20 ml Vial)**  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: 002232792

START/	STOP	DESCRIPTION
10/26/22	0855	HERNLEN at 0855 GAVE: 10 MG Barcode Medication: Trandate NDC/DIN: 0409226720 (SOURCE: eMAR)
	0902	Transaction Rule PHABRCJOB MED:WASTE - Medicare Waste Description: Debit Svc Dc/Tm 10/30/22 0855: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL
	2138	DOMIXAV at 2138 GAVE: 10 MG Barcode Medication: Trandate NDC/DIN: 0409226720 (SOURCE: eMAR)
		Comments SBP >140
	2153	Transaction Rule PHABRCJOB MED:WASTE - Medicare Waste Description: Debit Svc Dc/Tm 10/30/22 2138: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL

**Vasotec (Enalapril 1.25 mg/ml Vial)**  
1.25 MG IV-Push Q6H/PRN  
PRN Reason: Hypertension SBP > 150 mmHg  
RX #: 002233073

START/	STOP	DESCRIPTION
10/27/22	0516	DOMIXAV at 0516 GAVE: 1.25 MG Barcode Medication: Vasotec NDC/DIN: 0143978701 (SOURCE: eMAR)
		Comments sbp 160
	0518	Transaction Rule PHABRCJOB MED:WASTE - Medicare Waste Description: Debit Svc Dc/Tm 10/31/22 0516: VA8125I Amount Wasted: 0 MG; Drug Waste%: 0

**Catapres (clonidine 0.1 mg Tablet)**  
0.1 MG NG-TUBE Q6H/PRN  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for  
clonidine(catapres)  
RX #: 002233222

START/	STOP	DESCRIPTION
10/27/22	1224	HERNLEN at 1224 GAVE: 0.1 MG Barcode Medication: Catapres NDC/DIN: 6068711311 (SOURCE: eMAR)
	1232	Transaction Rule PHABRCJOB MED:WASTE - Medicare Waste Description: Debit Svc Dc/Tm 10/30/22 1224: CAR1 Amount Wasted: 0 MG; Drug Waste%: 0
	0515	DOMIXAV at 0515 GAVE: 0.1 MG Barcode Medication: Catapres NDC/DIN: 6068711311 (SOURCE: eMAR)
	0518	Transaction Rule PHABRCJOB MED:WASTE - Medicare Waste Description: Debit Svc Dc/Tm 10/31/22 0515: CAR1 Amount Wasted: 0 MG; Drug Waste%: 0

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 10/30/22 to 0659 10/31/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	0843	HERNLEN at 0843 CO-SIGNER: RAMOJES	SITE: Left Posterolateral Arm	GAVE: 4 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	230 MAR Injection site:	13
		0846 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/30/22 0843:	INSASP Amount Wasted:	0 UNITF
		0.040 ML		Amount Given:
		1251 HERNLEN at 1251 CO-SIGNER: RAMOJES	SITE: Left Posterolateral Arm	GAVE: 4 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	244 MAR Injection site:	13
		1303 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/30/22 1251:	INSASP Amount Wasted:	0 UNITF
		0.040 ML		Amount Given:
		1655 HERNLEN at 1655 CO-SIGNER: RAMOJES	SITE: Left Posterolateral Arm	GAVE: 4 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	249 MAR Injection site:	13
		1705 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/30/22 1655:	INSASP Amount Wasted:	0 UNITF
		0.040 ML		Amount Given:
		2008 DORTKAV at 2008 CO-SIGNER: SAN CHE	SITE: Abdomen	GAVE: 4 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	248 MAR Injection site:	11
		2022 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 10/30/22 2008:	INSASP Amount Wasted:	0 UNITF
		0.040 ML		Amount Given:
		2347 DORTKAV at 2347 CO-SIGNER: BENJES	SITE: Abdomen	GAVE: 6 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	256 MAR Injection site:	11
		2352 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:

0700 10/30/22 to 0659 11/01/22 (continued)

START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
	0.060 ML	0 UNIT	
	0337 DOMIXAV at 0337 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 4 UNIT		
	Barcode Medication: NOVOLIG		
	NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries		
	Finger Stick Blood Glucose: 211 MAR Injection site: 11		
	0346 Transaction Rule PHABRC08		
	MPDI WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 10/31/22 0337; INRSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML		

ADMINISTRATION PERIOD:

0700 10/31/22 to 0659 11/01/22

START/STOP



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Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/31/22 to 0659 11/01/22 (continued)	STAGE	

Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 9803.333 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 104 18h 33m Increase/Decrease: started/Running  
Infusion Rate: 50 Waste Amount: 0  
0300 Infusion In Progress 0300 THOMSON: Running, Dose Rate: /, Rate: 50 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 900 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 100 Cumulative Intake (Rx):  
9903.333 Container Volume: 900 Cumulative Elapsed Time (minutes): 104 20h 33m  
Increase/Decrease: Running Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0  
0500 Infusion In Progress 0500 THOMSON: Running, Dose Rate: /, Rate: 50 MLS/HR  
Intake: 100 mls, Cumulative Intake: 200 mls, Container Volume: 800 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 200 Cumulative Intake (Rx):  
10003.333 Container Volume: 800 Cumulative Elapsed Time (minutes): 104 22h 33m  
Increase/Decrease: Running Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0

Prinivil (Lisinopril 40 mg Tablet)  
40 MG NG-TUBE DAILY  
RX #: 002233224

10/27/22 0921 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 10/31/22 0913: Z8840 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 ORDACI at 0913 GAVE: 40 MG  
Barcode Medication: Prinivil  
NDC/DIN: 0904720061 (SOURCE: eMAR)

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002233225

10/27/22 0700 DMTXAV at 0633 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0644 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/01/22 0631: SYNT112 Amount Wasted: 0 MCG; Drug Waste%:  
0

DATE: 12/03/22 @ 0013  
 USER: PHARMCOR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/31/22 to 0659 11/01/22 (continued)		

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
 15 ML MUCOUS MEM BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.

110/27/221 0800 ORDACRI at 0830 GAVE: 15 ML		
Barcode Medication: Peridex Oral Rinse		
NDC/DIN: 0011620016 (SOURCE: eMAR)		
Expiration Date: 04/14/23		
110/27/221 0921 Transaction Rule PHARMCOR		
MEDI.WASTE - Medicare Waste		
2000 THOMSON at 2007 GAVE: 15 ML		
Description: Debit Svc Dc/Tm 10/31/22 0830: PER15L Amount Wasted: 0 ML; Drug Waste%: 0		
Barcode Medication: Peridex Oral Rinse		
NDC/DIN: 0011620016 (SOURCE: eMAR)		
Expiration Date: 03/16/23		
110/27/221 2122 Transaction Rule PHARMCOR		
MEDI.WASTE - Medicare Waste		
Description: Debit Svc Dc/Tm 10/31/22 2007: PER15L Amount Wasted: 0 ML; Drug Waste%: 0		

**Depoid (Famotidine 20 mg/2 ml Vial)**  
 20 MG IV-Push TWICE A DAY  
 Comments: Dilute with 10 ml Saline  
 Give IV over at least 2 minutes  
 RRRICERRAME

110/27/221 0921 Transaction Rule PHARMCOR		
MEDI.WASTE - Medicare Waste		
Description: Debit Svc Dc/Tm 10/31/22 0913: DEP20I Amount Wasted: 0 MG; Drug Waste%: 0		
1000 ORDACRI at 0913 GAVE: 20 MG		
Barcode Medication: Depoid		
NDC/DIN: 6745743300 (SOURCE: eMAR)		
2100 THOMSON at 2108 GAVE: 20 MG		
Barcode Medication: Depoid		
NDC/DIN: 6745743300 (SOURCE: eMAR)		
2122 Transaction Rule PHARMCOR		
MEDI.WASTE - Medicare Waste		
Description: Debit Svc Dc/Tm 10/31/22 2108: DEP20I Amount Wasted: 0 MG; Drug Waste%: 0		

**NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)**  
 12 UNITS SUB-Q Q8H  
 RX #: Q02238931

110/30/221 1125 ORDACRI at 1154 CO-SIGNER: FERRERS SITE: Left Deltoid GAVE: 12 UNITS		
Barcode Medication: Novolin N		
NDC/DIN: 0169183411 (SOURCE: eMAR)		
Admin Queries		
Finger Stick Blood Glucose: 143 MAR Injection site: 1		
1208 Transaction Rule PHARMCOR		
MEDI.WASTE - Medicare Waste		
Description: Debit Svc Dc/Tm 10/31/22 1154: INSNPH Amount Wasted: 0 UNITS; Amount GAVE: 0.120 ML		
1643 Discontinue AMARAM		
1643 Order Entry AMARAM		
1652 Acknowledged Order ORDACRI		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/	STOP/
0700 10/31/22 to 0659 11/01/22 (continued)	STAGE	

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml Vial)  
15 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PG WITHHELD.  
RX #: 002240831

10/31/22	1643 Order Entry ANARM	11
	1646 Edit or Verification ZPHA.GP	
	1646 Edit or Verification ZPHA.GP	
	1652 Acknowledged Order ORDACR1	
	2200 THOMSON at 2340 CO-SIGNER: CONDDLI SITE: Abdomen GAVE: 15 UNITS	
	Barcode Medication: NOVOLIN N	
	NDC/DIN: 0169183411 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 254 MAR Injection Site: 11	
	2353 Transaction Rule PHABKJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Dabit svc Dc/Tm 10/31/22 2340: INSNPH Amount Wasted: 0 UNITS; Amount	
	Given: 0.150 ML	
	0544 Transaction Rule PHABKJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Dabit svc Dc/Tm 11/01/22 0536: INSNPH Amount Wasted: 0 UNITS; Amount	
	Given: 0.150 ML	
	0600 THOMSON at 0536 CO-SIGNER: CONDDLI SITE: Abdomen GAVE: 15 UNITS	
	Barcode Medication: NOVOLIN N	
	NDC/DIN: 0169183411 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 237 MAR Injection Site: 11	

Trandate (labetalol 100 mg/20 ml Vial)  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: 002232792

10/26/22	2129 THOMSON at 2129 GAVE: 10 MG	11
	Barcode Medication: Trandate	
	NDC/DIN: 4778158629 (SOURCE: eMAR)	
	2138 Transaction Rule PHABKJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Dabit svc Dc/Tm 10/31/22 2129: NOR100I Amount Wasted: 0 MG; Amount Given:	
	0.100 VIAL	
	0626 THOMSON at 0626 GAVE: 10 MG	
	Barcode Medication: Trandate	
	NDC/DIN: 4778158629 (SOURCE: eMAR)	
	0629 Transaction Rule PHABKJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Dabit svc Dc/Tm 11/01/22 0626: NOR100I Amount Wasted: 0 MG; Amount Given:	
	0.100 VIAL	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/31/22 to 0659 11/01/22 (continued)	STOP/	STOP/

Vasotec (Enalapril 1.25 mg/ml Vial)  
1.25 MG IV-Push Q6H/PRN  
PRN Reason: Hypertension SBP > 150 mmHg  
RX #: Q02233073

10/27/22 1204 ORDACRI at 1204 GAVE: 1.25 MG  
Barcode Medication: Vasotec  
NDC/DIN: 0143978701 (SOURCE: eMAR)  
Comments  
159/58  
1208 Transaction Rule PHABRC08  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 10/31/22 1204: VASIST Amount Wasted: 0 MG; Drug Waste%: 0

Catapres (Clonidine 0.1 mg Tablet)  
0.1 MG NG-TUBE Q6H/PRN  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for  
clonidine(catapres)  
RX #: Q02233222

10/27/22 1449 ORDACRI at 1449 GAVE: 0.1 MG  
Barcode Medication: Catapres  
NDC/DIN: 6068711311 (SOURCE: eMAR)  
1452 Transaction Rule PHABRC08  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 10/31/22 1449: CAT1 Amount Wasted: 0 MG; Drug Waste%: 0



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 10/31/22 to 0659 11/01/22 (continued)	STAGE	STAGE

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	0815 ORDACRI at 0815 CO-SIGNER: FERRJES SITE: Abdomen GAVE: 2 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 191 MAR Injection site: 11
	Transaction Rule PHABRC08
	0921 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/31/22 0815: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
	1658 ORDACRI at 1658 CO-SIGNER: FERRJES SITE: Right Deltoid GAVE: 2 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 196 MAR Injection site: 5
	Transaction Rule PHABRC08
	1707 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/31/22 1658: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
	2130 THOMSON at 2130 CO-SIGNER: PANAJAI SITE: Abdomen GAVE: 6 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 254 MAR Injection site: 11
	Transaction Rule PHABRC08
	2138 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 10/31/22 2130: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML
	0023 THOMSON at 0023 CO-SIGNER: MARKHEI SITE: Left PosteroLateral Arm GAVE: 6 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 299 MAR Injection site: 13
	Transaction Rule PHABRC08
	0029 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/01/22 0023: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML
	0407 THOMSON at 0407 CO-SIGNER: CORDOLI SITE: Right PosteroLateral Arm GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 237 MAR Injection site: 16
	Transaction Rule PHABRC08
	0414 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION:
0700 11/01/22 to 0659 11/01/22 (continued)	START/STOP	Debit svc Dc/Rm 11/01/22 0407; INVSASP Amount Wasted: 0 UNITP Amount Given: 0.040 ML

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION:
0700 11/01/22 to 0659 11/02/22	START/STOP	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
50 Mls/Hr IV .020H  
RX #: 002217827

10/18/22 0700 Infusion In Progress 0700 THOMSON; Running; Dose Rate: , Rate: 50 Mls/HR  
Intake: 100 mls, Cumulative Intake: 300 mls, Container Volume: 700 mls, Site:  
--- Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (bag): 300 Cumulative Intake (Rx):  
10103.333 Container Volume: 700 Cumulative Elapsed Time (minutes): 11d 0h 33m  
Increase/Decrease: Running Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0  
0730 Transaction Rule PHABRCJOB  
MED:WASTE - Medicate Waste  
Description: Debit svc Dc/Rm 11/01/22 0100; NS Amount Wasted: 0 ML; Drug Waste%: 0  
0745 THOMSON at 0100 GAVE: 50 Mls/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
--- Admin Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (Rx): 9603.333 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 10d 18h 33m Increase/Decrease: Stated/Running  
Infusion Rate: 50 Waste Amount: 0  
0800 Infusion In Progress 0800 DONSRRU; Running; Dose Rate: , Rate: 50 Mls/HR  
Intake: 50 mls, Cumulative Intake: 350 mls, Container Volume: 650 mls, Site:  
--- Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (bag): 350 Cumulative Intake (Rx):  
10153.333 Container Volume: 650 Cumulative Elapsed Time (minutes): 11d 1h 33m  
Increase/Decrease: Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0842 Discontinue LAUTSAN  
0900 Infusion In Progress 0900 DONSRRU; Paused; Dose Rate: , Rate: 0 Mls/HR  
Intake: 50 mls, Cumulative Intake: 400 mls, Container Volume: 600 mls, Site:  
--- Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (bag): 400 Cumulative Intake (Rx):  
10203.333 Container Volume: 600 Cumulative Elapsed Time (minutes): 11d 2h 33m  
Increase/Decrease: Paused Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0  
1024 Acknowledged Order DONSRRU

DATE: 12/03/22 @ 0013  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/01/22 to 0659 11/02/22 (continued)	

Prinivil (Lisinopril 40 mg Tablet)  
40 MG NG-TUBE DAILY  
RX #: 002233224

10/27/22	1000	DONSRTM at 1001 GAVE: 40 MG
		Barcode Medication: Prinivil
		NDC/DIN: 0904720061 (SOURCE: eMAR)
		1015 Transaction Rule PHARCTOR
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/01/22 1001: Z8840 Amount Wasted: 0 MG; Drug Waste%: 0

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002233225

10/27/22	0700	THOMSON at 0631 GAVE: 112 MCG
		Barcode Medication: Synthroid
		NDC/DIN: 4229203901 (SOURCE: eMAR)
		0630 Transaction Rule PHARCTOR
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/02/22 0622: SYNT112 Amount Wasted: 0 MCG; Drug Waste%: 0

Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml ODCUP)  
15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator:  
RX #: 002233392

10/27/22	0759	Transaction Rule PHARCTOR
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/01/22 0746: PER15L Amount Wasted: 0 ML; Drug Waste%: 0
		0800 DONSRTM at 0746 GAVE: 15 ML
		Barcode Medication: Peridex Oral Rinse
		NDC/DIN: 0011620016 (SOURCE: eMAR)
		Expiration Date: 04/14/23
		2000 THOMSON at 2020 GAVE: 15 ML
		Barcode Medication: Peridex Oral Rinse
		NDC/DIN: 0011620016 (SOURCE: eMAR)
		Expiration Date: 04/14/23
		2032 Transaction Rule PHARCTOR
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/01/22 2020: PER15L Amount Wasted: 0 ML; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/01/22 to 0659 11/02/22 (continued)	STAGE	

**Peppid (Famotidine 20 mg/2 ml Vial)**  
20 MG IV-Push TWICE A DAY  
Comments: Dilute with 10 ml saline  
Give IV over at least 2 minutes  
REFERENCE

START/	STOP/	DESCRIPTION	AMOUNT	WASTE
11/01/22	11/02/22	1000 DONSRRM at 1001 GAVE: 20 MG Barcode Medication: Peppid NDC/DIN: 6745743300 (SOURCE: eMAR)	15 UNITS	0 MG; Drug Waste%: 0
11/01/22	11/01/22	1015 Transaction Rule PHABKJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 1001: PEP20I Amount Wasted: 0 MG; Drug Waste%: 0		
11/01/22	11/01/22	2100 THOMSON at 2120 GAVE: 20 MG Barcode Medication: Peppid NDC/DIN: 6745743300 (SOURCE: eMAR)		
11/01/22	11/01/22	2133 Transaction Rule PHABKJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 2120: PEP20I Amount Wasted: 0 MG; Drug Waste%: 0		

**Novolin N (Insulin NPH 100 units/ml 10 ml Vial)**  
15 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PE WITHHELD.  
RX #: 002240831

START/	STOP/	DESCRIPTION	AMOUNT	WASTE
11/01/22	11/01/22	1400 DONSRRM at 1413 co-SIGNER: BANSERI SITE: Abdomen GAVE: 15 UNITS Barcode Medication: Novolin N NDC/DIN: 0169183411 (SOURCE: eMAR)	15 UNITS	0 MG; Drug Waste%: 0
11/01/22	11/01/22	Admin Queries Finger Stick Blood Glucose: 277 MAR Injection site: 11 1416 Transaction Rule PHABKJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 1413: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.150 ML 1603 Discontinue AMARAN 1604 Order Entry AMARAN		

**Novvasc (Amlodipine 5 mg Tablet)**  
5 MG NG-TUBE DAILY  
RX #: 002242175

START/	STOP/	DESCRIPTION	AMOUNT	WASTE
11/01/22	11/01/22	1048 Edit or Verification LAUREAN 1050 Edit or Verification PHA.LTR 1050 Edit or Verification PHA.LTR 1100 DONSRRM at 1210 GAVE: 5 MG Barcode Medication: Novvasc NDC/DIN: 0904637061 (SOURCE: eMAR)		
11/01/22	11/01/22	1210 Acknowledged Order DONSRRM 1216 Transaction Rule PHABKJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 1210: NOVVS Amount Wasted: 0 MG; Drug Waste%: 0		

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/01/22 to 0659 11/02/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL)  
20 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PR WITHHELD.  
RX #: 002242757

11/01/22 1604 Order Entry AMARM  
1624 Edit or Verification IEBERIN  
1624 Edit or Verification IEBERIN  
2023 Acknowledged Order THOMSON  
2200 THOMSON at 2259 CO-SIGNER: CHOMREI SITE: Abdomen GAVE: 20 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 255 MAR Injection Site: 11  
2303 Transaction Rule PHABRCJOB  
MED:WASTE - Med:care Waste  
Description: Dabit svc Dr/Tm 11/01/22 2259: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.200 ML  
0546 Transaction Rule PHABRCJOB  
MED:WASTE - Med:care Waste  
Description: Dabit svc Dr/Tm 11/02/22 0533: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.200 ML  
0600 THOMSON at 0533 CO-SIGNER: CHOMREI SITE: Abdomen GAVE: 20 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 230 MAR Injection Site: 11

Sodium Chloride 0.9% 500 ML 480 ML  
(0.9% Sodium Chloride 500 ml Bag)  
CARDENE 50 MG  
(Nifedipine 25 mg/10 ml vial)  
50 MLS/HR IV TITRATE/PRN  
PRN Reason: Hypertension  
Comments: Conc. = 0.1 mg/ml  
Protect from light  
RX #: 002232555  
11/02/22 0700 Infusion In Progress 0700 DONSRT: Infused, Dose Rate: 0 MG/HR, Rate: 0 MLS/HR  
Intake: 0 mls, Cumulative Intake: 425 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 292.5 Cumulative Intake (bag): 425 Cumulative Intake (Rx): 2925  
Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 23h 30m  
Increase/Decrease: Infused Infusion Intake: 0 Infusion Rate: 0 Waste Amount: 75

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/01/22 to 0659 11/02/22 (continued)	

Trandate (labetalol 100 mg/20 ml Vial)  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: Q02232792

START/STOP	DESCRIPTION	AMOUNT
11/26/22	1335 DONSRTM at 1335 GAVE: 10 MG Barcode Medication: Trandate NDC/DIN: 4778158629 (SOURCE: eMAR)	
	1346 Transaction Rule PHABRCJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 1335; NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL	
	2237 THOMSON at 2237 GAVE: 10 MG Barcode Medication: Trandate NDC/DIN: 4778158629 (SOURCE: eMAR)	
	2249 Transaction Rule PHABRCJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 2237; NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL	
	0336 THOMSON at 0336 GAVE: 10 MG Barcode Medication: Trandate NDC/DIN: 4778158629 (SOURCE: eMAR)	
	0345 Transaction Rule PHABRCJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/02/22 0336; NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL	

Vasotec (Enalapril 1.25 mg/ml Vial)  
1.25 MG IV-Push Q6H/PRN  
PRN Reason: Hypertension SBP > 150 mmHg  
RX #: Q02233073

START/STOP	DESCRIPTION	AMOUNT
11/27/22	2134 THOMSON at 2134 GAVE: 1.25 MG Barcode Medication: Vasotec NDC/DIN: 0143978701 (SOURCE: eMAR)	
	2148 Transaction Rule PHABRCJOB MED: WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/01/22 2134; VAS125I Amount Wasted: 0 MG; Dcvg Waste\$: 0	



DATE: 12/03/22 @ 0013  
USER: PHARMC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:

0700 11/01/22 to 0659 11/02/22 (continued)

START/STOP	STAFF/STAGE
0700 11/01/22	0114 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/02/22 0111: INSNAP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML
	0419 THOMSON at 0419 CO-STIGER: DIZONJE SITE: Left PosteroLateral Arm GAVE: 6 UNIT
	Barcode Medication: NOVODIG
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 230 MAR Injection site: 13
	0431 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/02/22 0419: INSNAP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML

ADMINISTRATION PERIOD:

0700 11/02/22 to 0659 11/03/22

START/STOP	STAFF/STAGE
10/27/22	0916 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/02/22 0905: ZBS40 Amount Wasted: 0 MG; Drug Waste%: 0
	1000 COMTELS at 0905 GAVE: 40 MG
	Barcode Medication: Prilivil
	NDC/DIN: 0904720061 (SOURCE: eMAR)

Prilivil (Tishopril 40 mg Tablet)

40 MG NG-TUBE DAILY

RX #: Q02233224

Synthroid (Liothyroxine 112 mcg Tablet)

112 MCG NG-TUBE DAILY before breakfast

RX #: Q02233225

START/STOP	STAFF/STAGE
10/27/22	0700 THOMSON at 0622 GAVE: 112 MCG
	Barcode Medication: Synthroid
	NDC/DIN: 4229203901 (SOURCE: eMAR)
	0647 Transaction Rule PHARMC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/03/22 0631: SYNW112 Amount Wasted: 0 MCG; Drug Waste%: 0





DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/02/22 to 0659 11/03/22 (continued)		

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
20 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PR WITHHELD.  
RX #: Q02243851

11/01/22 0730 Discontinue AMARM  
1 0730 Order Entry AMARM  
1 0844 Acknowledged Order COMPELS

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
30 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PR WITHHELD.  
RX #: Q02243851

11/02/22 0730 Order Entry AMARM  
1 0733 Edit or Verification ZPRA.NGM  
1 0733 Edit or Verification ZPRA.NGM  
1 0844 Acknowledged Order COMPELS  
1 1400 COMPELS at 1359 CO-SIGNER: RANOUSS SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 11  
1403 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/02/22 1359: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
2119 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/02/22 2107: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
2200 LAMPHEN at 2107 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 11  
0600 LAMPHEN at 0631 CO-SIGNER: SAN CHE SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 11  
0647 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/03/22 0631: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML

DATE: 12/03/22 @ 0013  
USER: PHARJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 11/02/22 to 0659 11/03/22 (continued)

START/  
STOP

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL)  
10 UNITS SUB-Q NOD/ONE  
RX #: 002243852

START/STOP	DESCRIPTION
11/02/22	CONTROLS at 0800 CO-SIGNER: RANCOES SITE: Abdomen GAVE: 10 UNITS
11/02/22	Barcode Medication: NOVOLIN N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 215 MAR Injection Site: 11
	0733 Edit or Verification ZPRA.NEM
	0734 Discontinue PHARJOB
	0844 Acknowledged Order CONTROLS
	0916 Transaction Rule PHARJOB
	MEDI.WASTE - Medicate Waste
	Description: Dabit Svc Dc/Tm 11/02/22 0800: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.100 ML

TYLENOL (Acetaminophen 650 mg Supp)

650 MG PR Q6H/ERN  
ERN Reason: Fever >100.4  
Comments: Maximum acetaminophen (in any form) allowable  
in 24 hours is  
4gm.  
RX #: 002217855

Trandate (labetalol 100 mg/20 ml Vial)

START/STOP	DESCRIPTION
10/26/22	0146 LAMPHEM at 0146 GAVE: 10 MG
	Barcode Medication: Trandate
	NDC/DIN: 4778158629 (SOURCE: eMAR)
	0159 Transaction Rule PHARJOB
	MEDI.WASTE - Medicate Waste
	Description: Dabit Svc Dc/Tm 11/03/22 0146: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD: 0700 11/02/22 to 0659 11/03/22 (continued)

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

START/STOP	
11/29/22	0906 CONTENS at 0906 CO-SIGNER: RAMOUERS SITE: Abdomen GAVE: 6 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries Finger Stick Blood Glucose: 215 MAR Injection site: 11
	0916 Transaction Rule PHABRC0B MED1.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/02/22 0906: INSASP Amount Wasted: 0 UNITF, Amount Given: 0.060 ML
	1200 CONTENS at 1200 CO-SIGNER: RAMOUERS SITE: Abdomen GAVE: 3 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries Finger Stick Blood Glucose: 173 MAR Injection site: 11
	1318 Transaction Rule PHABRC0B MED1.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/02/22 1200: INSASP Amount Wasted: 0 UNITF, Amount Given: 0.030 ML
	1627 CONTENS at 1627 CO-SIGNER: RAMOUERS SITE: Left Posterolateral Arm GAVE: 3 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries Finger Stick Blood Glucose: 185 MAR Injection site: 13
	1634 Transaction Rule PHABRC0B MED1.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/02/22 1627: INSASP Amount Wasted: 0 UNITF, Amount Given: 0.030 ML
	2106 LAMPHEN at 2106 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 3 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries Finger Stick Blood Glucose: 171 MAR Injection site: 11
	2119 Transaction Rule PHABRC0B MED1.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/02/22 2106: INSASP Amount Wasted: 0 UNITF, Amount Given: 0.030 ML
	0012 Edit Administration LAMPHEN at 0012 CO-SIGNER: BENJITES SITE: Abdomen GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries Finger Stick Blood Glucose: 185 MAR Injection site: 11
	11/03/22-0014 by LAMPHEN 11/03/22-2039 Edit Administration by LAMPHEN

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This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/03/22 to 0659 11/03/22 (continued)	STOP	STOP

CO-STIGER changed from BENSDOS to SAN CHE  
DOSE changed from 3 UNIT to 4 UNIT  
0029 Transaction Rule PHABRCJOB  
MEDT.WASTE - Medicare Waste  
Description: Dabite Svc Dc/Tm 11/03/22 0012: INSA5P Amount Wasted: 0 UNIT; Amount Given: 0.030 ML  
0441 LAMPHEM at 0441 CO-STIGER: SAN CHE SITE: Abdomen GAVE: 6 UNIT  
Barcode Medication: NOVOLG  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 223 MAR Injection site: 11  
0445 Transaction Rule PHABRCJOB  
MEDT.WASTE - Medicare Waste  
Description: Dabite Svc Dc/Tm 11/03/22 0441: INSA5P Amount Wasted: 0 UNIT; Amount Given: 0.060 ML

Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UDCUP)  
650 MG FBSD TUBE Q6H/PRN  
PRN Reason: Pain or Fever (>100.4)  
Comments: Maximum acetaminophen (in any form) allowable  
in 24 hours is  
4gm.  
RX #: 002244363

11/02/22 1112 Edit or Verification PHA.LTR  
1112 Edit or Verification PHA.LTR  
1211 Acknowledged Order CONTELS  
1313 Acknowledged Order CONTELS  
1319 CONTELS at 1319 GAVE: 650 MG  
Barcode Medication: Tylenol Liquid  
NDC/DIN: 0121197121 (SOURCE: eMAR)  
Admin Queries  
MAR Pain Assessment Reason Not Required: 3  
Pain Management Goal/Pain Tolerated as This Number or Less: 3  
1332 Transaction Rule PHABRCJOB  
MEDT.WASTE - Medicare Waste  
Description: Dabite Svc Dc/Tm 11/02/22 1319: TYL650L Amount Wasted: 0 MG; Drug Waste\$: 0  
1418 Discontinue ZPRA.IKD.8  
1515 Acknowledged Order CONTELS

Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UDCUP)  
650 MG NG-TUBE Q6H/PRN  
PRN Reason: Pain or Fever (>100.4)  
Comments: Maximum acetaminophen (in any form) allowable  
in 24 hours is  
4gm.  
RX #: 002244670

DATE: 12/03/22 @ 0013  
 USER: PHARMC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A Unit Num MR01483046 Medication Discharge Summary Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/03/22 to 0659 11/04/22	

**Sodium Chloride 0.9% 1,000 ML (0.9% Sodium Chloride 1,000 ml Bag)**  
 50 MLS/HR IV .020H  
 RX #: 002217827

11/18/22 0935 Infusion In Progress 0935 ORDACR: Infused, Dose Rate: / Rate: 0 MLS/HR  
 Intake: 0 mls, Cumulative Intake: 400 mls, Container Volume: 0 mls, Site:  
 Quies  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 400 Cumulative Intake (RX):  
 10203.333 Container Volume: 0 Cumulative Elapsed Time (minutes): 11d 2h 33m  
 Increase/Decrease: Infused Infusion Intake: 0 Infusion Rate: 0 Waste Amount: 600

**Prinivil (Lisinopril 40 mg Tablet)**  
 40 MG NG-TUBE DAILY  
 RX #: 002233224

11/07/22 0948 Transaction Rule PHARMC08  
 MEDI.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/03/22 0933: ZRS40 Amount Wasted: 0 MG; Drug Waste%: 0  
 1000 ORDACR at 0933 GAVE: 40 MG  
 Barcode Medication: Prinivil  
 NDC/DIN: 0904720061 (SOURCE: eMAR)

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY Before breakfast  
 RX #: 002233225

11/07/22 0700 LAMPHEH at 0631 GAVE: 112 MCG  
 Barcode Medication: Synthroid  
 NDC/DIN: 4229203901 (SOURCE: eMAR)  
 0632 Transaction Rule PHARMC08  
 MEDI.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/04/22 0627: SYNT112 Amount Wasted: 0 MCG; Drug Waste%:  
 0

**Petidex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCRP)**  
 15 ML MUCOUS MEM BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.

11/07/22 0800 ORDACR at 0833 GAVE: 15 ML  
 Barcode Medication: Petidex Oral Rinse  
 NDC/DIN: 0011620016 (SOURCE: eMAR)  
 0847 Transaction Rule PHARMC08  
 MEDI.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/03/22 0833: PPR15 Amount Wasted: 0 ML; Drug Waste%: 0  
 2000 LAMPHEH at 2053 GAVE: 15 ML  
 Barcode Medication: Petidex Oral Rinse  
 NDC/DIN: 0011620016 (SOURCE: eMAR)  
 Expiration Date: 03/23/23  
 2106 Transaction Rule PHARMC08  
 MEDI.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/03/22 2053: PPR15 Amount Wasted: 0 ML; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/03/22 to 0659 11/04/22 (continued)	

**Pepcid (Famotidine 20 mg/2 ml Vial)**  
20 MG IV-Push TWICE A DAY  
Comments: Dilute with 10 ml saline  
Give IV over at least 2 minutes  
REFRIGERATE  
RX #: 002233393

START/STOP	DESCRIPTION	AMOUNT WASTED
11/02/22	Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/03/22 0932: BRP20I Amount Wasted: 0 MG; Drug Waste%: 0	
	1000 ORDACRI at 0932 GAVE: 20 MG	
	Barcode Medication: Pepcid	
	NDC/DIN: 6745743300 (SOURCE: eMAR)	
	2100 LAMPHEN at 2053 GAVE: 20 MG	
	Barcode Medication: Pepcid	
	NDC/DIN: 6745743300 (SOURCE: eMAR)	
	2106 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/03/22 2053: BRP20I Amount Wasted: 0 MG; Drug Waste%: 0	

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG NG-TUBE DAILY  
RX #: 002242175

START/STOP	DESCRIPTION	AMOUNT WASTED
11/01/22	Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/03/22 0933: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0	
	1000 ORDACRI at 0933 GAVE: 5 MG	
	Barcode Medication: Norvasc	
	NDC/DIN: 0904637061 (SOURCE: eMAR)	

**Novolin N (Insulin NPH 100 units/ml 10 ml Vial)**  
30 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PE WITHHELD.  
RX #: 002243851

START/STOP	DESCRIPTION	AMOUNT WASTED
11/02/22	Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/03/22 0933: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0	
	1110 Order Entry AMARAV	
	1111 Acknowledged Order ORDACRI	

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/03/22 to 0659 11/04/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)  
35 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PG WITHHELD.  
RX #: 002246199

11/03/22	1110	Order Entry AMARM
	1111	Acknowledged Order ORDACRI
	1115	Edit or Verification ZPRA.ANL
	1115	Edit or Verification ZPRA.ANL
	1348	Transaction Rule PHABKJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/03/22 1338: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.350 ML
	1400	ORDACRI at 1338 CO-SIGNER: RAMOES SITE: Abdomen GAVE: 35 UNITS
		Barcode Medication: Novolin N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 195 MAR Injection site: 11
	2106	Transaction Rule PHABKJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/03/22 2054: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.350 ML
	2200	IMPHEM at 2054 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 35 UNITS
		Barcode Medication: Novolin N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		MAR Injection Site: 11
	0600	IMPHEM at 0627 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 35 UNITS
		Barcode Medication: Novolin N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		MAR Injection Site: 11
	0632	Transaction Rule PHABKJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/04/22 0627: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.350 ML

Trandate (labetalol 100 mg/20 ml Vial)  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: 002232792

10/26/22	1103	ORDACRI at 1103 GAVE: 10 MG
		Barcode Medication: Trandate
		NDC/DIN: 4778158629 (SOURCE: eMAR)
	1118	Transaction Rule PHABKJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/03/22 1103: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL

\*\*\* Continued on Page 115 \*\*\*  
This document is part of the legal medical record.





DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/03/22 to 0659 11/04/22 (continued)		

MBDI.WASTE - Medicare Waste			
Description: Debit Svc Dc/Tm 11/03/22 2058; INSASP Amount Wasted: 0 UNIT; Amount Given:			
0.040 ML			
0035 LAMPHEN at 0035 CO-STOMER: CANDIAL SITE: Abdomen GAVE: 4 UNIT			
Barcode Medication: NovoLOG			
NDC/DIN: 0169750111 (SOURCE: eMAR)			
Admin Queries			
Finger Stick Blood Glucose: 174 MAR Injection site: 11			
0045 Transaction Rule PHARCTOR			
MBDI.WASTE - Medicare Waste			
Description: Debit Svc Dc/Tm 11/04/22 0035; INSASP Amount Wasted: 0 UNIT; Amount Given:			
0.040 ML			
0444 LAMPHEN at 0444 CO-STOMER: CANDIAL SITE: Abdomen GAVE: 4 UNIT			
Barcode Medication: NovoLOG			
NDC/DIN: 0169750111 (SOURCE: eMAR)			
Admin Queries			
Finger Stick Blood Glucose: 167 MAR Injection site: 11			
0500 Transaction Rule PHARCTOR			
MBDI.WASTE - Medicare Waste			
Description: Debit Svc Dc/Tm 11/04/22 0444; INSASP Amount Wasted: 0 UNIT; Amount Given:			
0.040 ML			

DATE: 12/03/22 @ 0013  
 USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	
0700 11/03/22 to 0659 11/04/22 (continued)		

**Tylenol Liquid (Acetaminophen 650 mg/20.3 mL UDCUR)**  
 650 MG NG-TUBE Q6H/PRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 In 24 hours is 4gm.  
 RX #: 002244670

11/02/22	0834	ORDACR1 at 0834 GAVE: 650 MG Barcode Medication: Tylenol Liquid NDC/DIN: 0121197121 (SOURCE: eMAR)
		Admin Queries
		Pain Assessment Type: 1 BPS: Facial Expression: 4 BPS: Upper Limbs: 1 BPS Score: 7
		BPS: Compliance with Ventilation: 2 Level of Consciousness: 13
		Pain Level: 3 - 12 BPS Scale: MODERATE Pain
		Pain Management Goal/Pain Tolerated as This Number or Less: 3 Pain Scale Used: 6
		0847 Transaction Rule PHARMCIOB
		MEDI.WASTE - Medicare Waste
		Description: Dabit Svc Dr/Tm 11/03/22 0834: TYL650L Amount Wasted: 0 MG; Drug Waste%: 0
		0919 Reassessment by ORDACR1 at 0919
		Reassessment: NAR Pain Assessment
		Pain Assessment Type: 2
		BPS: Facial Expression: 1
		BPS: Upper Limbs: 1
		BPS Score: 3
		BPS: Compliance with Ventilation: 1
		Level of Consciousness: 13
		Pain Level: 3 - 12 BPS Scale: No Pain
		Pain Management Goal/Pain Tolerated as This Number or Less: 3
		Pain Scale Used: 6

ADMINISTRATION PERIOD:	START/STOP	
0700 11/04/22 to 0659 11/05/22		

**Prinivil (Lisinopril 40 mg Tablet)**  
 40 MG NG-TUBE DAILY  
 RX #: 002233224

11/02/22 0948 Transaction Rule PHARMCIOB  
 MEDI.WASTE - Medicare Waste  
 Description: Dabit Svc Dr/Tm 11/04/22 0946: ZES40 Amount Wasted: 0 MG; Drug Waste%: 0  
 1000 ORDACR1 at 0946 GAVE: 40 MG  
 Barcode Medication: Prinivil  
 NDC/DIN: 0904720061 (SOURCE: eMAR)

11/02/22 0700 LANPHEM at 0627 GAVE: 112 MCG  
 Barcode Medication: Synthroid  
 NDC/DIN: 4229203901 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
 USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/04/22 to 0659 11/06/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
 15 ML MUCOUS MEM BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.  
 RX #: Q02233392

110/27/221	0800	ORDACR1	at 0807 GAVE: 15 ML						
			Barcode Medication: Peridex Oral Rinse						
			NDC/DIN: 0011620016 (SOURCE: eMAR)						
			Expiration Date: 04/14/23						
			0818	Transaction Rule PHABRCIOB					
				MEDI.WASTE - Medicare Waste					
			2000	CHOWR1	at 2035 GAVE: 15 ML				
				Description: Debit Svc Dr/Tm 11/04/22 0807: PER15L Amount Wasted: 0 ML; Drug Waste%: 0					
				Barcode Medication: Peridex Oral Rinse					
				NDC/DIN: 0011620016 (SOURCE: eMAR)					
				Expiration Date: 04/14/23					
			2050	Transaction Rule PHABRCIOB					
				MEDI.WASTE - Medicare Waste					
				Description: Debit Svc Dr/Tm 11/04/22 2035: PER15L Amount Wasted: 0 ML; Drug Waste%: 0					

**Depcid (Famotidine 20 mg/2 ml Vial)**  
 20 MG IV-Push TWICE A DAY  
 Comments: Dilute with 10 ml Saline  
 Give IV over at least 2 minutes  
 RRRRCGRAME  
 RX #: Q02233393

110/27/221	0948	Transaction Rule PHABRCIOB							
			MEDI.WASTE - Medicare Waste						
			Description: Debit Svc Dr/Tm 11/04/22 0946: DEP20I Amount Wasted: 0 MG; Drug Waste%: 0						
			1000	ORDACR1	at 0946 GAVE: 20 MG				
				Barcode Medication: Depcid					
				NDC/DIN: 6745743300 (SOURCE: eMAR)					
			2050	Transaction Rule PHABRCIOB					
				MEDI.WASTE - Medicare Waste					
				Description: Debit Svc Dr/Tm 11/04/22 2035: DEP20I Amount Wasted: 0 MG; Drug Waste%: 0					
			2100	CHOWR1	at 2035 GAVE: 20 MG				
				Barcode Medication: Depcid					
				NDC/DIN: 6745743300 (SOURCE: eMAR)					

**Norvasc (Amlodipine 5 mg Tablet)**  
 5 MG NG-TWICE DAILY  
 RX #: Q02242175

111/01/221	0948	Transaction Rule PHABRCIOB							
			MEDI.WASTE - Medicare Waste						
			Description: Debit Svc Dr/Tm 11/04/22 0947: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0						
			1000	ORDACR1	at 0947 GAVE: 5 MG				
				Barcode Medication: Norvasc					
				NDC/DIN: 0904637061 (SOURCE: eMAR)					

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/04/22 to 0659 11/05/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
35 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PB WITHHELDS.  
RX #: 002246199

11/03/22	1348	Transaction Rule PHABRC0B	STAFF/STGE
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/04/22 1333: INSNPH Amount Wasted: 0 UNITS; Amount	
		Given: 0.350 ML	
		1400 ORDACR1 at 1333 CO-SIGNER: HERNIMN SITE: Right Deltoid GAVE: 35 UNITS	
		Barcode Medication: Novolin N	
		NDC/DIN: 0169183411 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 171 MAR Injection Site: 5	
		2200 CHOWRPI at 2232 CO-SIGNER: CANDIAL SITE: Left Posterolateral Arm GAVE: 35 UNITS	
		Barcode Medication: Novolin N	
		NDC/DIN: 0169183411 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 271 MAR Injection Site: 13	
		2234 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/04/22 2232: INSNPH Amount Wasted: 0 UNITS; Amount	
		Given: 0.350 ML	
		0600 CHOWRPI at 0603 CO-SIGNER: CANDIAL SITE: Left Posterolateral Arm GAVE: 35 UNITS	
		Barcode Medication: Novolin N	
		NDC/DIN: 0169183411 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 273 MAR Injection Site: 13	
		0615 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/05/22 0603: INSNPH Amount Wasted: 0 UNITS; Amount	
		Given: 0.350 ML	

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/04/22 to 0659 11/05/22 (continued)		

Septira DS (TAB 160 mg-SMZ 800 mg Tablet)  
1 TAB NG-TUBE Every twelve hours  
RX #: 002247735

START/	STOP	DESCRIPTION
11/04/22	0856	Edit or Verification ZPHA,IE
11/11/22	0856	Edit or Verification ZPHA,IE
	0900	ORDACR1 at 1008 GAVE: 1 TAB
		Barcode Medication: Septira DS
		NDC/DIN: 0904272561 (SOURCE: eMAR)
		0918 Acknowledged Order ORDACR1
		1017 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/04/22 1008: SEPD Amount Wasted: 0 TAB; Drug Waste%: 0
		2050 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/04/22 2035: SEPD Amount Wasted: 0 TAB; Drug Waste%: 0
		2100 CHOWMRL at 2035 GAVE: 1 TAB
		Barcode Medication: Septira DS
		NDC/DIN: 0904272561 (SOURCE: eMAR)

Catapres (Clonidine 0.1 mg Tablet)  
0.1 MG NG-TUBE Q6H/PRN  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for  
Clonidine (catapres)  
RX #: 002233222

START/	STOP	DESCRIPTION
10/27/22	0807	ORDACR1 at 0807 GAVE: 0.1 MG
		Barcode Medication: Catapres
		NDC/DIN: 6068711311 (SOURCE: eMAR)
		0818 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/04/22 0807: CANT Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/04/22 to 0659 11/05/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
 See Dose Ins. SUB-Q Qd/PRN  
 PRN Reason: Glucosecan Coverage  
 RX #: 002237641

110/29/22	0815 ORDACRI at 0815 CO-SIGNER: HERNIMEN SITE: Abdomen GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 156 MAR Injection site: 11	
	Transaction Rule PHARMCOR	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/04/22 0815: INRSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	
	1214 ORDACRI at 1214 CO-SIGNER: HERNIMEN SITE: Right Deltoid GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 171 MAR Injection site: 5	
	1217 Transaction Rule PHARMCOR	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/04/22 1214: INRSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	
	1659 ORDACRI at 1659 CO-SIGNER: HERNIMEN SITE: Left Deltoid GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 173 MAR Injection site: 1	
	1704 Transaction Rule PHARMCOR	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/04/22 1659: INRSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML	
	2233 CHOWKRI at 2233 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 8 UNIT Barcode Medication: Novolog NDC/DIN: 00169750111 (SOURCE: Default NDOS)	
	Admin Queries	
	Finger Stick Blood Glucose: 271 MAR Injection site: 11	
	0140 CHOWKRI at 0140 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 10 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 319 MAR Injection site: 11	
	0144 Transaction Rule PHARMCOR	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/05/22 0140: INRSASP Amount Wasted: 0 UNIT; Amount Given: 0.100 ML	
	0512 CHOWKRI at 0512 CO-SIGNER: CANDIAL SITE: Abdomen GAVE: 8 UNIT Barcode Medication: Novolog	

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 This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/04/22 to 0659 11/06/22 (continued)		

NDC/DIN: 0169750111 (SOURCE: eMAR)  
 Admin Queries  
 Finger Stick Blood Glucose: 273 MAR Injection site: 11  
 0515 Transaction Rule PHABRC08  
 MEDT.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/05/22 0512: INSBSP Amount Wasted: 0 UNITF; Amount Given: 0.080 ML

**Tylenol Liquid (Acetaminophen 650 mg/20.3 mL UDCUP)**  
**650 MG NG-TUBE Q6H/PRN**  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 In 24 hours is  
 4gm.  
 RX #: 002244670

11/02/22] 2035 CHOWKRI at 2035 GAVE: 650 MG  
 Barcode Medication: Tylenol Liquid  
 NDC/DIN: 0121197121 (SOURCE: eMAR)  
 Admin Queries  
 MAR Pain Assessment Reason Not Required: 3  
 Pain Management Goal/Pain Tolerated as This Number or Less: 3  
 2050 Transaction Rule PHABRC08  
 MEDT.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/04/22 2035: TR1650L Amount Wasted: 0 MG; Drug Waste%: 0  
 2120 Reassessment by CHOWKRI at 2120  
 Reassessment: MAR Pain Assessment  
 MAR Pain Assessment Reason Not Required: 3  
 Pain Management Goal/Pain Tolerated as This Number or Less: 3  
 0512 CHOWKRI at 0512 GAVE: 650 MG  
 Barcode Medication: Tylenol Liquid  
 NDC/DIN: 00121197100 (SOURCE: Default NDCs)  
 Admin Queries  
 MAR Pain Assessment Reason Not Required: 3  
 Pain Management Goal/Pain Tolerated as This Number or Less: 3  
 0515 Transaction Rule PHABRC08  
 MEDT.WASTE - Medicare Waste  
 Description: Debit Svc Dc/Tm 11/05/22 0512: TR1650L Amount Wasted: 0 MG; Drug Waste%: 0  
 0557 Reassessment by CHOWKRI at 0557  
 Reassessment: MAR Pain Assessment  
 MAR Pain Assessment Reason Not Required: 3  
 Pain Management Goal/Pain Tolerated as This Number or Less: 3

ADMINISTRATION PERIOD:	START/STOP	
0700 11/05/22 to 0659 11/06/22		



DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/05/22 to 0659 11/06/22 (continued)	

Prinivil (Lisinopril 40 mg Tablet)  
40 MG NG-TUBE DAILY  
RX #: 002233224

START/STOP	DESCRIPTION	AMOUNT WASTED
11/05/22 0700	Transaction Rule PHABRCJOB	
11/05/22 0659	MEDI.WASTE - Medicare Waste	
11/05/22 0659	Description: Debit Svc Dc/Tm 11/05/22 0927: Z8840 Amount Wasted: 0 MG; Drug Waste%: 0	
11/05/22 0659	1000 FERRIES at 0927 GAVE: 40 MG	
11/05/22 0659	Description: Prinivil	
11/05/22 0659	Barcode Medication: Prinivil	
11/05/22 0659	NDC/DIN: 0904720061 (SOURCE: eMAR)	

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002233225

START/STOP	DESCRIPTION	AMOUNT WASTED
11/05/22 0700	Not Administered CHOWRRL at 0636 NPO	
11/05/22 0659	0645 Transaction Rule PHABRCJOB	
11/05/22 0659	MEDI.WASTE - Medicare Waste	
11/05/22 0659	Description: Debit Svc Dc/Tm 11/06/22 0635: SYN112 Amount Wasted: 0 MCG; Drug Waste%: 0	

Petidek Oral Rinse (Chlorhexidine 0.12% 15 ml UDCRP)  
15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol. Protocol continues until patient off ventilator.  
RX #: 002233392

START/STOP	DESCRIPTION	AMOUNT WASTED
11/05/22 0800	FERRIES at 0837 GAVE: 15 ML	
11/05/22 0800	Barcode Medication: Petidek Oral Rinse	
11/05/22 0800	NDC/DIN: 0011620016 (SOURCE: eMAR)	
11/05/22 0800	Expiration Date: 04/14/23	
11/05/22 0800	0846 Transaction Rule PHABRCJOB	
11/05/22 0800	MEDI.WASTE - Medicare Waste	
11/05/22 0800	Description: Debit Svc Dc/Tm 11/05/22 0837: PER15L Amount Wasted: 0 ML; Drug Waste%: 0	
11/05/22 0800	2000 CHOWRRL at 2005 GAVE: 15 ML	
11/05/22 0800	Barcode Medication: Petidek Oral Rinse	
11/05/22 0800	NDC/DIN: 0011620016 (SOURCE: eMAR)	
11/05/22 0800	Expiration Date: 03/16/23	
11/05/22 0800	2021 Transaction Rule PHABRCJOB	
11/05/22 0800	MEDI.WASTE - Medicare Waste	
11/05/22 0800	Description: Debit Svc Dc/Tm 11/05/22 2005: PER15L Amount Wasted: 0 ML; Drug Waste%: 0	

DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22  
Name Lyons, Kathleen A  
Unit Num MR01483046

Medication Discharge Summary  
Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/05/22 to 0659 11/06/22 (continued)		

**Pepcid (Famotidine 20 mg/2 ml Vial)**  
20 MG IV-Push TWICE A DAY  
Comments: Dilute with 10 ml saline  
Give IV over at least 2 minutes  
REFRIGERATE  
RX #: 002233393

11/27/22	0931	Transaction Rule PHABRCIOB			
		MEDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/05/22 0927; BEP20I Amount Wasted: 0 MG; Drug Waste%: 0			
		1000 FERRURS at 0927 GAVE: 20 MG			
		Barcode Medication: Pepcid			
		NDC/DIN: 6745743300 (SOURCE: eMAR)			
		2050 Transaction Rule PHABRCIOB			
		MEDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/05/22 2037; BEP20I Amount Wasted: 0 MG; Drug Waste%: 0			
		2100 CHOWRI at 2037 GAVE: 20 MG			
		Barcode Medication: Pepcid			
		NDC/DIN: 6745743300 (SOURCE: eMAR)			

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG NG-TUBE DAILY  
RX #: 002242175

11/01/22	0931	Transaction Rule PHABRCIOB			
		MEDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/05/22 0927; NORV5 Amount Wasted: 0 MG; Drug Waste%: 0			
		1000 FERRURS at 0927 GAVE: 5 MG			
		Barcode Medication: Norvasc			
		NDC/DIN: 0904637061 (SOURCE: eMAR)			

**NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)**  
35 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PE WITHHELD.  
RX #: 002246199

11/03/22	0803	Discontinue AMARM			
		0803 Order Entry AMARM			
		0817 Acknowledged Order FERRURS			

**Septra DS (TMP 160 mg-SMZ 800 mg Tablet)**  
1 TAB NG-TUBE Every twelve hours  
RX #: 002247735

11/04/22	0900	FERRURS at 0927 GAVE: 1 TAB			
		Barcode Medication: Septca DS			
		NDC/DIN: 0904272561 (SOURCE: eMAR)			
		0931 Transaction Rule PHABRCIOB			
		MEDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/05/22 0927; BEPD Amount Wasted: 0 TAB; Drug Waste%: 0			
		2050 Transaction Rule PHABRCIOB			
		MEDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/05/22 2037; BEPD Amount Wasted: 0 TAB; Drug Waste%: 0			
		2100 CHOWRI at 2037 GAVE: 1 TAB			
		Barcode Medication: Septca DS			
		NDC/DIN: 0904272561 (SOURCE: eMAR)			

DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/05/22 to 0659 11/06/22 (continued)	STOP

NOVOLIN N (Insulin NPH 100 units/ml 10 mL VIAL)  
40 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PG WITHHELD.  
RX #: 002249859

11/05/22 0803 Order Entry ERRORS  
1 0808 Edit or Verification ZPHA.KT  
1 0808 Edit or Verification ZPHA.KT  
0820 Acknowledged Order ERRORS  
1027 Discontinue ERRORS  
1027 Order Entry ERRORS  
1044 Acknowledged Order ERRORS

NOVOLIN N (Insulin NPH 100 units/ml 10 mL VIAL)  
37 UNITS SUB-Q 8HR  
Comments: HOLD IF THE PG WITHHELD.  
RX #: 002249815

11/05/22 1027 Order Entry ERRORS  
1 1027 Edit or Verification ZPHA.GT  
1044 Acknowledged Order ERRORS  
1400 ERRORS at 1352 CO-SIGNER: DEVENUS SITE: Abdomen GAVE: 37 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 133 MAR Injection site: 11  
1405 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/05/22 1352: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.370 ML  
2200 CHOWRI at 2156 CO-SIGNER: CANDIAL SITE: Left PosteroLateral Arm GAVE: 37 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 154 MAR Injection site: 13  
2205 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/05/22 2156: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.370 ML  
0600 CHOWRI at 0627 CO-SIGNER: CANDIAL SITE: Left PosteroLateral Arm GAVE: 37 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 143 MAR Injection site: 13  
0645 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 0627: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.370 ML

DATE: 12/03/22 @ 0013  
USER: PHABRG08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/05/22 to 0659 11/06/22 (continued)	

**Vancomycin per Pharmacy (Vancomycin - Dosed by PH)**  
1 EACH MISCELLANEOUS PER PROTOCOL  
Dose Inst: DC Vancomycin after last dose if given on 11/13  
RX #: 002250120

Dextrose 5% 250 ml 250 mL  
(Dextrose 5% 250 ml Bag)

Vancomycin 1,250 Mg  
(Vancomycin 1,000 mg Vial)

125 Mls/Hr IVB 024H

Comments: \*Refigerate\*

RX TO DOSE

RX #: 002250136

11/05/22	1417	Edit or Verification THONHUN
11/13/22	1417	Edit or Verification THONHUN
	1456	Acknowledged Order FERRRS
	1456	Infusion In Progress 1456 FERRRS; Started; Dose Rate: / Rate: 125 Mls/Hr
		Intake: / Cumulative Intake: / Container Volume: 250 mls, Site:
		Queries
		Container Volume: 250 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started
		Infusion Rate: 125 Waste Amount: 0
		1500 FERRRS at 1456 GAVE: 125 Mls/Hr
		Barcode Medication: Dextrose 5% 250 ml
		NDC/DIN: 00389001702 (SOURCE: Default NDCs)
		Barcode Medication: Vancomycin
		NDC/DIN: 67457034001 (SOURCE: Default NDCs)
		Admin Queries
		Container Volume: 250 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started
		Infusion Rate: 125 Waste Amount: 0
		1505 Transaction Rule PHABRG08
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/05/22 1456; D5W250 Amount Wasted: 0 ML; Drug Waste%: 0
		1505 Transaction Rule PHABRG08
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/05/22 1456; VANIP Amount Wasted: 0 MG; Amount Given: 1.25 VIAL
		1656 Infusion In Progress 1656 FERRRS; Infused; Dose Rate: / Rate: 0 Mls/Hr
		Intake: 250 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:
		Queries
		Cumulative Dose: 1250 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 250
		Container Volume: 0 Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Infused
		Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/05/22 to 0659 11/06/22 (continued)	STOP

Trandate (labetalol 100 mg/20 ml VIAL)  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: Q02232792

110/26/22	0030	Undo Administration Not Administered	CHOMKRI	at 0030 change in condition, pt no longer needs
		Barcode Medication: Trandate		
		NDC/DIN: 7226610201 (SOURCE: eMAR)		
		11/06/22-0030	by CHOMKRI	
		11/06/22-0035	Undo Administration by CHOMKRI	
		0044	Transaction Rule PHABRCJOB	
			MEDI.WASTE - Medicate Waste	
			Description: Debit Svc Dt/Tm 11/06/22 0030: NOR1001 Amount Wasted: 0 MG; Amount Given:	
			0.100 VIAL	
		0044	Transaction Rule PHABRCJOB	
			MEDI.WASTE - Medicate Waste	
			Description: Credit Svc Dt/Tm 11/06/22 0030: NOR1001 Amount Wasted: 0 MG; Amount Given:	
			-0.100 VIAL	

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/05/22 to 0659 11/06/22 (continued)

START/  
STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucose Coverage  
RX #: Q02237641

START/STOP	DESCRIPTION	AMOUNT	WASTED	GIVEN
11/29/22	0716 Transaction Rule PHABRCJOB MEDT.WASTE - Medicare Waste			
	Description: Debt Svc Dc/Tm 11/04/22 2233:	INSASBP Amount Wasted: 0 UNIT		Amount Given:
	0.090 ML			
	1039 FERRUS at 1039 CO-SIGNER: DEVENUS SITE: Abdomen GAVE: 4 UNIT			
	Barcode Medication: Novolog			
	NDC/DIN: 0169750111 (SOURCE: eMAR)			
	Admin Queries			
	Finger Stick Blood Glucose: 175 MAR Injection site: 11			
	1048 Transaction Rule PHABRCJOB MEDT.WASTE - Medicare Waste			
	Description: Debt Svc Dc/Tm 11/05/22 1039:	INSASBP Amount Wasted: 0 UNIT		Amount Given:
	0.040 ML			
	1816 FERRUS at 1816 CO-SIGNER: DEVENUS SITE: Abdomen GAVE: 4 UNIT			
	Barcode Medication: Novolog			
	NDC/DIN: 0169750111 (SOURCE: eMAR)			
	Admin Queries			
	Finger Stick Blood Glucose: 170 MAR Injection site: 11			
	1820 Transaction Rule PHABRCJOB MEDT.WASTE - Medicare Waste			
	Description: Debt Svc Dc/Tm 11/05/22 1816:	INSASBP Amount Wasted: 0 UNIT		Amount Given:
	0.040 ML			
	2156 CHOWRI at 2156 CO-SIGNER: CANDIAL SITE: Left PosteroLateral Arm GAVE: 4 UNIT			
	Barcode Medication: Novolog			
	NDC/DIN: 0169750111 (SOURCE: eMAR)			
	Admin Queries			
	Finger Stick Blood Glucose: 154 MAR Injection site: 13			
	2205 Transaction Rule PHABRCJOB MEDT.WASTE - Medicare Waste			
	Description: Debt Svc Dc/Tm 11/05/22 2156:	INSASBP Amount Wasted: 0 UNIT		Amount Given:
	0.040 ML			
	0259 CHOWRI at 0259 CO-SIGNER: CANDIAL SITE: Right PosteroLateral Arm GAVE: 6 UNIT			
	Barcode Medication: Novolog			
	NDC/DIN: 0169750111 (SOURCE: eMAR)			
	Admin Queries			
	Finger Stick Blood Glucose: 224 MAR Injection site: 16			
	0314 Transaction Rule PHABRCJOB MEDT.WASTE - Medicare Waste			
	Description: Debt Svc Dc/Tm 11/06/22 0259:	INSASBP Amount Wasted: 0 UNIT		Amount Given:
	0.060 ML			

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/06/22 to 0659 11/07/22 (continued)		

**Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UDCUP)**  
 650 MG NG-TUBE Q6H/PRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 In 24 hours is  
 4gm.  
 RX #: 002244670

START/STOP	
11/02/22 0029	CHOWRPI at 0029 GAVE: 650 MG Barcode Medication: Tylenol Liquid NDC/DIN: 0121197121 (SOURCE: eMAR)
	Admin Queries
	MAR Pain Assessment Reason Not Required: 3
	Pain Management Goal/Pain Tolerated as This Number or Less: 3
	0044 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/06/22 0029: TYL650L Amount Wasted: 0 MG; Drug Waste%: 0
	0114 Reassessment by CHOWRPI at 0114
	Reassessment: MAR Pain Assessment
	MAR Pain Assessment Reason Not Required: 3
	Pain Management Goal/Pain Tolerated as This Number or Less: 3

ADMINISTRATION PERIOD:	START/STOP	
0700 11/06/22 to 0659 11/07/22		

**Prinivil (Lisinopril 40 mg Tablet)**  
 40 MG NG-TUBE DAILY  
 RX #: 002233224

START/STOP	
10/27/22 1000	FERRER at 1015 GAVE: 40 MG Barcode Medication: Prinivil NDC/DIN: 0904720061 (SOURCE: eMAR)
	1030 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/06/22 1015: ZFS40 Amount Wasted: 0 MG; Drug Waste%: 0

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 002233225

START/STOP	
10/27/22 0700	CHOWRPI at 0635 GAVE: 112 MCG Barcode Medication: Synthroid NDC/DIN: 4229203901 (SOURCE: eMAR)
	0647 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/07/22 0630: SYN112 Amount Wasted: 0 MCG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/06/22 to 0659 11/07/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
 15 ML NUCOUS MEB BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.  
 RX #: Q02233392

DATE	DESCRIPTION	AMOUNT WASTED
11/07/22	FERRIES at 0824 GAVE: 15 ML	
	Barcode Medication: Peridex Oral Rinse	
	NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/14/23	
	0830 Transaction Rule PHARMCOR	
	MBDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/06/22 0824: FERRIS Amount Wasted: 0 ML; Drug Waste%: 0	
	2000 CHOWREI at 2014 GAVE: 15 ML	
	Barcode Medication: Peridex Oral Rinse	
	NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/28/23	
	2017 Transaction Rule PHARMCOR	
	MBDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/06/22 2014: FERRIS Amount Wasted: 0 ML; Drug Waste%: 0	

**Pepcid (Famotidine 20 mg/2 ml Vial)**  
 20 MG IV-Push TWICE A DAY  
 Comments: Dilute with 10 ml Saline  
 Give IV over at least 2 minutes  
 RRRRCERRARE  
 RX #: Q02233393

DATE	DESCRIPTION	AMOUNT WASTED
11/07/22	FERRIES at 1015 GAVE: 20 MG	
	Barcode Medication: Pepcid	
	NDC/DIN: 6745743300 (SOURCE: eMAR)	
	1030 Transaction Rule PHARMCOR	
	MBDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/06/22 1015: PEP20I Amount Wasted: 0 MG; Drug Waste%: 0	
	1541 Discontinue ZPMA.IE	
	1546 Acknowledged Order FERRIES	

**Norvasc (Amlodipine 5 mg Tablet)**  
 5 MG NG-TUBE DAILY  
 RX #: Q02242175

DATE	DESCRIPTION	AMOUNT WASTED
11/07/22	FERRIES at 1015 GAVE: 5 MG	
	Barcode Medication: Norvasc	
	NDC/DIN: 0904637061 (SOURCE: eMAR)	
	1030 Transaction Rule PHARMCOR	
	MBDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/06/22 1015: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0	



DATE: 12/03/22 @ 0013  
USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/06/22 to 0659 11/07/22 (continued)		

Septira DS (TAB 160 mg-SMZ 800 mg Tablet)  
1 TAB NG-TUBE Every twelve hours  
RX #: 002247735

11/04/22 0900 FERRURS at 0930 GAVE: 1 TAB  
Barcode Medication: Septira DS  
NDC/DIN: 0904272561 (SOURCE: eMAR)  
1030 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 0930: SEPD Amount Wasted: 0 TAB; Drug Waste%: 0  
2100 CHOWREI at 2115 GAVE: 1 TAB  
Barcode Medication: Septira DS  
NDC/DIN: 0904272561 (SOURCE: eMAR)  
2118 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 2115: SEPD Amount Wasted: 0 TAB; Drug Waste%: 0

Novolin N (Insulin NPH 100 units/ml 10 ml Vial)

37 UNITS SUB-Q Q8H  
Comments: HOLD IF THE PE WITHHELD.  
RX #: 002249815

11/05/22 1400 FERRURS at 1432 CO-SIGNER: DEVEJUS SITE: Abdomen GAVE: 37 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 167 MAR Injection site: 11  
1447 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 1432: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.370 ML  
2200 CHOWREI at 2219 CO-SIGNER: TABLR0G SITE: Abdomen GAVE: 37 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 190 MAR Injection site: 11  
2233 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 2219: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.370 ML  
0600 CHOWREI at 0657 CO-SIGNER: TABLR0G SITE: Left PosteroLateral Arm GAVE: 37 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 130 MAR Injection site: 13  
0616 Transaction Rule PHARMCOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 0557: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.370 ML

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/06/22 to 0659 11/07/22 (continued)		

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
11/05/22 1433 Infusion In Progress 1433 ERRORS: Started/Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
11/13/22  
Vancocycin 1,000 MG  
(Vancocycin 1,000 mg Vial)  
125 MLS/HR IV#8 Q24H  
Cumulative Dose: 1250 Cumulative Intake (RX): 250 Container Volume: 250  
125 Waste Amount: 0  
Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Started/Running Infusion Rate:  
Comments: \*Refrigerate\*  
1447 Transaction Rule PHABRCJOB  
125 Waste Amount: 0  
1447 Transaction Rule PHABRCJOB  
NBDI.WASTE - Medicare Waste  
1447 Transaction Rule PHABRCJOB  
NBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 1433: D5W250 Amount Wasted: 0 ML; Drug Waste%: 0  
RX #: Q02250136  
1500 ERRORS at 1433 GAVE: 125 MLS/HR  
Description: Debit Svc Dc/Tm 11/06/22 1433: VANILP Amount Wasted: 0 MG; Amount Given:  
1.25 VIAL  
1500 ERRORS at 1433 GAVE: 125 MLS/HR  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 00388001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancocycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 1250 Cumulative Intake (RX): 250 Container Volume: 250  
Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1633 Infusion In Progress 1633 ERRORS: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 2500 Cumulative Intake (Bag): 250 Cumulative Intake (RX): 500  
Container Volume: 0 Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Infused  
Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

Pepcid (Famotidine 20 mg Tablet)  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: Q02251619

11/06/22 1544 Edit of Verification ZPHA.RV  
1544 Edit of Verification ZPHA.RV  
1546 Acknowledged Order ERRORS  
2100 CHOWKI at 2115 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2118 Transaction Rule PHABRCJOB  
NBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/06/22 2115: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/06/22 to 0659 11/07/22 (continued)	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
999 MLS/HR IV - QIHM  
Total Volume to Infuse: 1,000 mls  
Total Bags: 1  
RX #: 002252161

11/06/22	2244	Infusion In Progress	2244	CHOWKRI	Started	Dose Rate: / Rate: 999 MLS/HR
11/06/22		Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:				
		Queries				
		Cumulative Dose: Not Applicable Container Volume: 1000				
		Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 999				
		Waste Amount: 0				
	2245	CHOWKRI at 2244 GAVE: 999 MLS/HR				
		Barcode Medication: Sodium Chloride 0.9%				
		NDC/DIN: 0338004904 (SOURCE: eMAR)				
		Admin Queries				
		Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed Time (minutes):				
		0m Increase/Decrease: Started Infusion Rate: 999 Waste Amount: 0				
	2249	Edit of Verification TRANSFE				
	2249	Edit of Verification TRANSFE				
	2252	Acknowledged Order CHOWKRI				
	2345	Infusion In Progress 2345 CHOWKRI: Infused; Dose Rate: / Rate: 0 MLS/HR				
		Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:				
		Queries				
		Cumulative Dose: Not Applicable Cumulative Intake (Bag): 1000 Cumulative Intake (Rx):				
		1000 Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 1m Increase/Decrease:				
		Infused Infusion Intake: 1000 Infusion Rate: 0 Waste Amount: 0				
	2345	Discontinue PHABKJOB				
	2348	Transaction Rule PHABKJOB				
		MEDI.WASTE - Medicare Waste				
		Description: Debit svc DC/Tm 11/06/22 2244: BOJUSNS Amount Wasted: 0 ML; Drug Waste%: 0				
	2349	Acknowledged Order CHOWKRI				

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

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Medication Discharge Summary Report

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/06/22 to 0659 11/07/22 (continued)	STOP

Dextrose 5% 50 ml 50 ML  
(Dextrose 5% 50 ml Bag)  
Rocephin 1 GM  
(ceftriaxone 1 gm vial)  
100 MLS/HR IVB Q24H  
Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refill/gerate  
RX #: Q02252160

11/06/22) 2245 CHOWKRI at 2344 GAVE: 100 MLS/HR  
Barcode Medication: Dextrose 5% 50 ml  
NDC/DIN: 00388001711 (SOURCE: Default NDCs)  
Barcode Medication: Rocephin  
NDC/DIN: 00409733201 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 50 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: started  
Infusion Rate: 100 Waste Amount: 0  
2248 Edit or Verification TRANSFE  
2248 Edit or Verification TRANSFE  
2252 Acknowledged Order CHOWKRI  
2344 Infusion In Progress 2344 CHOWKRI: started, Dose Rate: / Rate: 100 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 50 mls, Site:  
Queries  
Container Volume: 50 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: started  
Infusion Rate: 100 Waste Amount: 0  
2348 Transaction Rule PHARMCIOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/06/22 2344: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0  
2348 Transaction Rule PHARMCIOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/06/22 2344: ROCEP Amount Wasted: 0 GM; Drug Waste%: 0  
0014 Infusion In Progress 0014 CHOWKRI: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 1 Cumulative Intake (bag) : 50 Cumulative Intake (Rx) : 50  
Container Volume: 0 Cumulative Elapsed Time (minutes): 30m Increase/Decrease: Infused  
Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/06/22 to 0659 11/07/22 (continued)	

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucocan Coverage  
RX #: 002237641

110/29/22	1432	FERRUES at 1432 CO-SIGNER: DEVEJUS SITE: Abdomen GAVE: 4 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 167 MAR Injection site: 11
		1447 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 11/06/22 1432: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
		1816 Edit Administration FERRUES at 1816 CO-SIGNER: DEVEJUS SITE: Abdomen GAVE: 6 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 204 MAR Injection site: 11
		11/06/22-1816 by FERRUES
		11/06/22-1817 Edit Administration by FERRUES
		<b>Admin Queries changed</b>
		<b>Exam:</b>
		Finger stick Blood Glucose: 203
		<b>Doc:</b>
		Finger stick Blood Glucose: 204
		1817 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 11/06/22 1816: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML
		1833 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Credit Svc Dt/Tm 11/06/22 1816: INSASP Amount Wasted: 0 UNIT; Amount Given: -0.060 ML
		1833 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 11/06/22 1816: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML
		2220 CHOWKRI at 2220 CO-SIGNER: TABIROG SITE: Abdomen GAVE: 4 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 190 MAR Injection site: 11
		2233 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dt/Tm 11/06/22 2220: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/06/22 to 0659 11/07/22 (continued)		

**Tylenol Liquid (Acetaminophen 650 mg/20.3 mL UDCUP)**  
 650 MG NG-TUBE Q6H/PRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 In 24 hours is  
 4gm.  
 RX #: 002244670

START/STOP	
11/02/22	2014 CHOWKRI at 2014 GAVE: 650 MG Barcode Medication: Tylenol Liquid NDC/DIN: 0121197121 (SOURCE: eMAR)
	Admin Queries
	MAR Pain Assessment Reason Not Required: 3
	Pain Management Goal/Pain Tolerated as This Number or Less: 3
	2017 Transaction Rule PHABRC08
	MDI WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/06/22 2014: TYL650L Amount Wasted: 0 MG; Drug Waste%: 0
	2059 Reassessment by CHOWKRI at 2059
	Reassessment: MAR Pain Assessment
	MAR Pain Assessment Reason Not Required: 3
	Pain Management Goal/Pain Tolerated as This Number or Less: 3

ADMINISTRATION PERIOD:	START/STOP	
0700 11/07/22 to 0659 11/08/22		

**Prinivil (Lisinopril 40 mg Tablet)**  
 40 MG NG-TUBE DAILY  
 RX #: 002233224

START/STOP	
10/27/22	0842 Discontinue BATAUG
	0959 Acknowledged Order RAMOUER

**Synthroid (Lewthyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before Breakfast  
 RX #: 002233225

START/STOP	
10/27/22	0700 CHOWKRI at 0630 GAVE: 112 MCG Barcode Medication: Synthroid NDC/DIN: 4229203901 (SOURCE: eMAR)
	0648 Transaction Rule PHABRC08
	MDI WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/08/22 0643: SYN112 Amount Wasted: 0 MCG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRG08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num ME01483046  
 Medication Discharge Summary  
 Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/07/22 to 0659 11/08/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL DUCUP)**  
 15 ML NUCOUS MEM BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.  
 RX #: Q02233392

DATE	DESCRIPTION	AMOUNT	WASTED
11/07/22	0800 DONSRRM at 0751 GAVE: 15 ML		
	Barcode Medication: Peridex Oral Rinse		
	NDC/DIN: 00116200116 (SOURCE: eMAR)		
	Expiration Date: 04/28/23		
	0801 Transaction Rule PHABRG08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/07/22 0751: BER15: Amount Wasted: 0 ML; Drug Waste%: 0		
	1951 Transaction Rule PHABRG08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/07/22 1948: BER15: Amount Wasted: 0 ML; Drug Waste%: 0		
	2000 SAN CHR at 1948 GAVE: 15 ML		
	Barcode Medication: Peridex Oral Rinse		
	NDC/DIN: 00116200116 (SOURCE: eMAR)		
	Expiration Date: 04/28/23		

**Norvasc (Ramoldipine 5 mg Tablet)**  
 5 MG NG-TUBE DAILY  
 RX #: Q02242175

DATE	DESCRIPTION	AMOUNT	WASTED
11/01/22	1000 DONSRRM at 0948 GAVE: 5 MG		
	Barcode Medication: Norvasc		
	NDC/DIN: 0904637061 (SOURCE: eMAR)		
	1002 Transaction Rule PHABRG08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/07/22 0948: NORV5: Amount Wasted: 0 MG; Drug Waste%: 0		

**Septra DS (TMP 160 mg-SMZ 800 mg Tablet)**  
 1 TAB NG-TUBE Every Twelve Hours  
 RX #: Q02247735

DATE	DESCRIPTION	AMOUNT	WASTED
11/04/22	0947 Transaction Rule PHABRG08		
11/11/22	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/07/22 0842: SEPD: Amount Wasted: 0 TAB; Drug Waste%: 0		
	0900 DONSRRM at 0842 GAVE: 1 TAB		
	Barcode Medication: Septra DS		
	NDC/DIN: 0904272561 (SOURCE: eMAR)		
	2100 SAN CHR at 2101 GAVE: 1 TAB		
	Barcode Medication: Septra DS		
	NDC/DIN: 0904272561 (SOURCE: eMAR)		
	2106 Transaction Rule PHABRG08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/07/22 2101: SEPD: Amount Wasted: 0 TAB; Drug Waste%: 0		

DATE: 12/03/22 @ 0013  
USER: PHARGTOR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/07/22 to 0659 11/08/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial) | 11/05/22 | 1400 Not Administered DONSRTU at 1408 PRAM, PROT  
37 UNITS SUB-Q Q8H | | Admin Queries  
Comments: HOLD IF THE TP WITHHELD. | | Finger Stick Blood Glucose: 88  
RX #: 002249815 | | 1639 Discontinue AMARAN  
| | 1639 Order Entry AMARAN  
| | 1649 Acknowledged Order DONSRTU



DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/07/22 to 0659 11/08/22 (continued)	STOP	STOP

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 MLS/HR IVB8 Q24H  
Comments: \*Refrigerate\*  
RX TO DOSE  
RX #: Q02250136

11/05/22 1500 DONSRRU at 1514 GAVE: 125 MLS/HR  
11/13/22  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 00388001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 2500 Cumulative Intake (Rx): 500 Container Volume: 250  
Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1514 Infusion In Progress 1514 DONSRRU: Started/Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 2500 Cumulative Intake (Rx): 500 Container Volume: 250  
Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1521 Transaction Rule PHABRC08  
1521 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 1514: D5W250 Amount Wasted: 0 ML, Drug Waste%: 0  
1521 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 1514: VAN11P Amount Wasted: 0 MG, Amount Given:  
1.25 VIAL  
1600 Infusion In Progress 1600 DONSRRU: Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: 95.833 mLs, Cumulative Intake: 95.833 mLs, Container Volume: 154.167 mLs, Site:  
Queries  
Cumulative Dose: 2979.165 Cumulative Intake (bag): 95.833 Cumulative Intake (Rx):  
595.833 Container Volume: 154.167 Cumulative Elapsed Time (minutes): 4h 46m  
Increase/Decrease: Running Infusion Intake: 95.833 Infusion Rate: 125 Waste Amount: 0  
1700 Infusion In Progress 1700 DONSRRU: Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: 125 mLs, Cumulative Intake: 220.833 mLs, Container Volume: 29.167 mLs, Site:  
Queries  
Cumulative Dose: 3604.165 Cumulative Intake (bag): 220.833 Cumulative Intake (Rx):  
720.833 Container Volume: 29.167 Cumulative Elapsed Time (minutes): 5h 46m  
Increase/Decrease: Running Infusion Intake: 125 Infusion Rate: 125 Waste Amount: 0  
1717 Infusion In Progress 1717 DONSRRU: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 29.167 mLs, Cumulative Intake: 250 mLs, Container Volume: 0 mLs, Site:  
Queries  
Cumulative Dose: 3750 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 750  
Container Volume: 0 Cumulative Elapsed Time (minutes): 6h 3m Increase/Decrease: Infused  
Infusion Intake: 29.167 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/07/22 to 0659 11/08/22 (continued)	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22 1000 DONSRTM at 0948 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
1002 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 0948: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 SAN CHB at 2101 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2106 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 2101: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0

**Dextrose 5% 50 ml 50 ML**  
(Dextrose 5% 50 ml Bag)  
**Rocophin 1 GM**  
(Ceftriaxone 1 gm Vial)  
100 MLS/HR IVBE Q24H  
Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refrigerate  
RX #: 002252160

11/06/22 2226 Infusion In Progress 2226 SAN CHB: started/Running, Dose Rate: / Rate: 100 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 50 mls, Site:  
Queries  
Cumulative Dose: 1 Cumulative Intake (Rx): 50 Container Volume: 50  
Cumulative Elapsed Time (minutes): 30m Increase/Decrease: Started/Running Infusion Rate:  
100 Waste Amount: 0  
2237 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 2226: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0  
2237 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/07/22 2226: ROCLII Amount Wasted: 0 GM; Drug Waste%: 0  
2245 SAN CHB at 2226 GAVE: 100 MLS/HR  
Barcode Medication: Dextrose 5% 50 ml  
NDC/DIN: 00388001711 (SOURCE: Default NDCs)  
Barcode Medication: Rocophin  
NDC/DIN: 00409733201 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 1 Cumulative Intake (Rx): 50 Container Volume: 50  
Cumulative Elapsed Time (minutes): 30m Increase/Decrease: Started/Running Infusion Rate:  
100 Waste Amount: 0  
2256 Infusion In Progress 2256 SAN CHB: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 2 Cumulative Intake (bag): 50 Cumulative Intake (Rx): 100  
Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 0m Increase/Decrease: Infused  
Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHARMC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/07/22 to 0659 11/08/22 (continued)	STAGE	STAGE

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: Q02252577

11/07/22	0858 Edit or Verification ZPHA.TD	
	0858 Edit or Verification ZPHA.TD	
	0948 Acknowledged Order DONSRUP	
	1000 DONSRUP at 0948 GAVE: 25 MG	
	Barcode Medication: Apresoline	
	NDC/DIN: 625947311 (SOURCE: eMAR)	
	1002 Transaction Rule PHARMC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/07/22 0948: APR25 Amount Wasted: 0 MG; Drug Waste%: 0	
	2100 SAM CHB at 2101 GAVE: 25 MG	
	Barcode Medication: Apresoline	
	NDC/DIN: 090644161 (SOURCE: eMAR)	
	2106 Transaction Rule PHARMC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/07/22 2101: APR25 Amount Wasted: 0 MG; Drug Waste%: 0	

**Novolin N (Insulin NPH 100 units/mL 10 mL Vial)**  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHELD.  
RX #: Q02253367

11/07/22	1639 Order Entry AMARMM	
	1640 Edit or Verification ZPHA.DSH	
	1640 Edit or Verification ZPHA.DSH	
	1649 Acknowledged Order DONSRUP	
	1751 Transaction Rule PHARMC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/07/22 1736: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.300 ML	
	1800 DONSRUP at 1736 CO-SIGNER: RAMOJES SITE: Abdomen GAVE: 30 UNITS	
	Barcode Medication: Novolin N	
	NDC/DIN: 0169183411 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 156 MAR Injection site: 11	
	0600 SAM CHB at 0614 CO-SIGNER: APAMARY SITE: Abdomen GAVE: 30 UNITS	
	Barcode Medication: Novolin N	
	NDC/DIN: 0169183411 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 140 MAR Injection site: 11	
	Comments	
	140	
	0617 Transaction Rule PHARMC08	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/08/22 0614: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.300 ML	

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/07/22 to 0659 11/08/22 (continued)	STOP	

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
 See Dose Ins. SUB-Q Qd/PRN  
 PRN Reason: Glucosecan Coverage  
 RX #: 002237641

110/29/22	1736 DMSRPM at 1736 CO-SIGNER: RANCOES SITE: Abdomen GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 156 MAR Injection site: 11
	1751 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dt/Fm 11/07/22 1736: INSNASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	0152 SAN CHB at 0152 CO-SIGNER: APANARY SITE: Abdomen GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 157 MAR Injection site: 11
	Comments
	157
	0159 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dt/Fm 11/08/22 0152: INSNASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML

ADMINISTRATION PERIOD:	START/STOP	
0700 11/08/22 to 0659 11/09/22	STOP	

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 002233225

110/27/22	0700 SAN CHB at 0643 GAVE: 112 MCG
	Barcode Medication: Synthroid
	NDC/DIN: 4229303901 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
USER: PHABRGTOB

Citrus Valley \*Live\* - PHA  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/08/22 to 0659 11/09/22 (continued)		

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL ODCUP)**

15 ML NUCOUS MEM BID@0800,2000

Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care

Protocol: Protocol continues until patient off ventilator.

RX #: Q02233392

DATE	DESCRIPTION	AMOUNT	WASTED
11/01/22	0948 Transaction Rule PHABRGTOB	0830 GAVE: 15 ML	0 ML; Drug Waste%: 0
	DEVEJUS at 0830 GAVE: 15 ML		
	MDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/08/22 0934: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0		
	NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 04/14/23		
	0948 Transaction Rule PHABRGTOB		
	DEVEJUS at 0934 GAVE: 5 MG		
	MDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/08/22 1946: BER15 Amount Wasted: 0 ML; Drug Waste%: 0		
	NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 04/14/23		

**Norvasc (Ramoldipine 5 mg Tablet)**

5 MG NG-TUBE DAILY

RX #: Q02242175

DATE	DESCRIPTION	AMOUNT	WASTED
11/01/22	0948 Transaction Rule PHABRGTOB		
	DEVEJUS at 0934 GAVE: 5 MG		
	MDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/08/22 0934: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0		
	NDC/DIN: 0904637061 (SOURCE: eMAR)		

**Septia DS (TMP 160 mg-SMZ 800 mg Tablet)**

1 TAB NG-TUBE Every twelve hours

RX #: Q02247735

DATE	DESCRIPTION	AMOUNT	WASTED
11/04/22	0900 Not Administered DEVEJUS at 0933 HDDC		
11/11/22	0909 Discontinue BATA09		
	0932 Acknowledged Order DEVEJUS		

DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/08/22 to 0659 11/09/22 (continued)		

Dextrose 5% 250 mL 250 ML  
 (Dextrose 5% 250 mL Bag)  
 Vancomycin 1,250 MG  
 (Vancomycin 1,000 mg Vial)  
 125 ML/HR IV#8 Q24H  
 Comments: \*Refrigerate\*  
 RX TO DOSE  
 RX #: Q02250136

11/05/22	1500	DEVBUS at 1509 GAVE: 125 ML/HR		
11/13/22		Barcode Medication: Dextrose 5% 250 mL		
		NDC/DIN: 00388001702 (SOURCE: Default NDCs)		
		Barcode Medication: Vancomycin		
		NDC/DIN: 67457034001 (SOURCE: Default NDCs)		
		Admin Queries		
		Cumulative Dose: 3750 Cumulative Intake (Rx): 750 Container Volume: 250		
		Cumulative Elapsed Time (minutes): 6h 3m Increase/Decrease: Started/Running Infusion Rate:		
		125 Waste Amount: 0		
		1509 Infusion In Progress 1509 DEVBUS: Started/Running, Dose Rate: / Rate: 125 ML/HR		
		Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:		
		Queries		
		Cumulative Dose: 3750 Cumulative Intake (Rx): 750 Container Volume: 250		
		Cumulative Elapsed Time (minutes): 6h 3m Increase/Decrease: Started/Running Infusion Rate:		
		125 Waste Amount: 0		
		1518 Transaction Rule PHABRC0B		
		MDTI.WASTE - Medicare Waste		
		1518 Transaction Rule PHABRC0B		
		Description: Debit Svc Dc/Tm 11/08/22 1509: D5M250 Amount Wasted: 0 ML, Drug Waste%: 0		
		MDTI.WASTE - Medicare Waste		
		1.25 VIAL		
		1709 Infusion In Progress 1709 DEVBUS: Infused, Dose Rate: / Rate: 0 ML/HR		
		Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:		
		Queries		
		Cumulative Dose: 5000 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 1000		
		Container Volume: 0 Cumulative Elapsed Time (minutes): 6h 3m Increase/Decrease: Infused		
		Infusion Intake: 250 Refusion Rate: 0 Waste Amount: 0		

Pepcid (Famotidine 20 mg Tablet)  
 20 MG NG-TUBE TWICE A DAY  
 Comments: IV TO NG PER PROTOCOL  
 RX #: Q02251619

11/06/22	0948	Transaction Rule PHABRC0B		
		MDTI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/08/22 0934: BEP20 Amount Wasted: 0 MG, Drug Waste%: 0		
		1000 DEVBUS at 0934 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
		2035 Transaction Rule PHABRC0B		
		MDTI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/08/22 2029: BEP20 Amount Wasted: 0 MG, Drug Waste%: 0		
		2100 SAM CHB at 2029 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		

DATE: 12/03/22 @ 0013  
 USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046

Medication Discharge Summary

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/08/22 to 0659 11/09/22 (continued)	

Dextrose 5% 50 ml 50 ML  
 (Dextrose 5% 50 ml Bag)  
 Rocophin 1 GM  
 (ceftriaxone 1 gm vial)  
 100 MLS/HR IVB Q24H  
 Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
 Comments: Refill/gerate  
 RX #: Q02252160

11/06/22 2245 SAN CHE at 2245 GAVE: 100 MLS/HR  
 Barcode Medication: Dextrose 5% 50 ml  
 NDC/DIN: 00388001711 (SOURCE: Default NDCs)  
 Barcode Medication: Rocophin  
 NDC/DIN: 00409733201 (SOURCE: Default NDCs)  
 Admin Queries  
 Cumulative Dose: 2 Cumulative Intake (Rx): 100 Container Volume: 50  
 Cumulative Elapsed Time (minutes): 1h 0m Increase/Decrease: Started/Running Infusion Rate:  
 100 Waste Amount: 0  
 2245 Infusion In Progress 2245 SAN CHE: Started/Running, Dose Rate: / Rate: 100 MLS/HR  
 Intake: / Cumulative Intake: / Container Volume: 50 mlr, site:  
 Queries  
 Cumulative Dose: 2 Cumulative Intake (Rx): 100 Container Volume: 50  
 Cumulative Elapsed Time (minutes): 1h 0m Increase/Decrease: Started/Running Infusion Rate:  
 100 Waste Amount: 0  
 2250 Transaction Rule PHARMCOR  
 MED1.WASTE - Medicare Waste  
 Description: Dabit svc Dc/Tm 11/08/22 2245: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0  
 2250 Transaction Rule PHARMCOR  
 MED1.WASTE - Medicare Waste  
 Description: Dabit svc Dc/Tm 11/08/22 2245: ROCLII Amount Wasted: 0 GM; Drug Waste%: 0  
 2315 Infusion In Progress 2315 SAN CHE: Infused, Dose Rate: / Rate: 0 MLS/HR  
 Intake: 50 mlr, Cumulative Intake: 50 mlr, Container Volume: 0 mlr, site:  
 Queries  
 Cumulative Dose: 3 Cumulative Intake (bag): 50 Cumulative Intake (Rx): 150  
 Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 30m Increase/Decrease: Infused  
 Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0

11/07/22 0948 Transaction Rule PHARMCOR  
 MED1.WASTE - Medicare Waste  
 Description: Dabit svc Dc/Tm 11/08/22 0934: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
 1000 DEXEJUS at 0934 GAVE: 25 MG  
 Barcode Medication: Apreosoline  
 NDC/DIN: 090464161 (SOURCE: eMAR)  
 2035 Transaction Rule PHARMCOR  
 MED1.WASTE - Medicare Waste  
 Description: Dabit svc Dc/Tm 11/08/22 2029: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
 2100 SAN CHE at 2029 GAVE: 25 MG  
 Barcode Medication: Apreosoline  
 NDC/DIN: 090464161 (SOURCE: eMAR)

Apreosoline (Hydralazine 25 mg Tablet)  
 25 MG NG-TUBE TWICE A DAY  
 Dose Ins: HOLD IF SBP<130  
 RX #: Q02252577

\*\*\* Continued on Page 146 \*\*\*  
 This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/08/22 to 0659 11/09/22 (continued)	

**NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)**  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PB WITHHELDS.  
RX #: 002233967

11/07/22) 1800 DEVBUS at 1830 CO-SIGNER: FERRIES SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 145 MAR Injection site: 11  
1904 Transaction Rule PHABRC08  
MEDL.WASTE - Medicate Waste  
Description: Debit svc Dc/Tm 11/08/22 1830: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
0600 Not Administered SAN CHE at 0627 NPO  
Admin Queries  
Finger Stick Blood Glucose: 169

**NOVOLOS (Insulin Aspart 100 units/ml 10ml Vial)**  
See Dose Dts. SUB-Q Q4H/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22) 2151 SAN CHE at 2151 CO-SIGNER: APAMARY SITE: Abdomen GAVE: 4 UNIT  
Barcode Medication: NOVOLOS  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 181 MAR Injection site: 11  
Comments  
181  
2205 Transaction Rule PHABRC08  
MEDL.WASTE - Medicate Waste  
Description: Debit svc Dc/Tm 11/08/22 2151: INSNAP Amount Wasted: 0 UNITS; Amount Given:  
0.040 ML

ADMINISTRATION PERIOD:	START/STOP
0700 11/08/22 to 0659 11/10/22	

Route Change - PO to NG-Tube - Per Pharmacy (PO to NG-Tube - RX Consult)  
I EACH MISCELLANEOUS PER PROTOCOL  
RX #: 002232592

110/28/22) 0309 Acknowledged Order APAMARY



DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A Unit Num MR01483046  
 Medication Discharge Summary  
 Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/09/22 to 0659 11/10/22 (continued)		

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 0022333225

110/27/221	0700	DEVEBUS at 0700 GAVE: 112 MCG	
		Barcode Medication: Synthroid	
		NDC/DIN: 4229203901 (SOURCE: eMAR)	
		1522 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/09/22 0700: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%:	
		0	
		0309 Acknowledged Order APAMARY	
		0631 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/10/22 0630: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%:	
		0	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCRP)**  
 15 ML MUCOUS MEM BID@0800,2000

Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 protocol. Protocol continues until patient off ventilator.  
 RX #: 002233392

110/27/221	0800	DEVEBUS at 0830 GAVE: 15 ML	
		Barcode Medication: Peridex Oral Rinse	
		NDC/DIN: 00116200116 (SOURCE: eMAR)	
		Expiration Date: 04/14/23	
		1036 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/09/22 0830: PER15I Amount Wasted: 0 ML; Drug Waste%: 0	
		2000 MILDPRY at 2033 GAVE: 15 ML	
		Barcode Medication: Peridex Oral Rinse	
		NDC/DIN: 00116200116 (SOURCE: eMAR)	
		Expiration Date: 04/28/23	
		2036 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/09/22 2033: PER15I Amount Wasted: 0 ML; Drug Waste%: 0	
		0309 Acknowledged Order APAMARY	

**Notvasc (Amlodipine 5 mg Tablet)**  
 5 MG NG-TUBE DAILY  
 RX #: 002242175

111/01/221	1000	Not Administered DEVEBUS at 1026 HELDP	
		0309 Acknowledged Order APAMARY	

**Vancomycin per Pharmacy (Vancomycin - Dosed by PHA)**  
 1 EACH MISCELLANEOUS PER PROTOCOL  
 Dose Inst: DC Vancomycin after last dose if given on 11/13  
 RX #: 002250120

111/05/221	0309	Acknowledged Order APAMARY	
111/13/221			

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/09/22 to 0659 11/10/22 (continued)	STOP	STOP

Dextrose 5% 250 mL 250 ML 11/05/22 1500 DEVBUS at 1512 GAVE: 125 MLS/HR  
(Dextrose 5% 250 ml Bag) 11/13/22  
Barcode Medication: Dextrose 5% 250 ml  
NDC/DIN: 00388001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 5000 Cumulative Intake (Rx): 1000 Container Volume: 250  
Cumulative Elapsed Time (minutes): 8h 3m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1512 Infusion in Progress 1512 DEVBUS: Started/Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 5000 Cumulative Intake (Rx): 1000 Container Volume: 250  
Cumulative Elapsed Time (minutes): 8h 3m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1522 Transaction Rule PHABRC08  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/09/22 1512: D5W250 Amount Wasted: 0 ML, Drug Waste%: 0  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/09/22 1512: VAN11P Amount Wasted: 0 MG, Amount Given:  
1.25 VIAL  
1712 Infusion in Progress 1712 DEVBUS: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 6250 Cumulative Intake (Bag): 250 Cumulative Intake (Rx): 1250  
Container Volume: 0 Cumulative Elapsed Time (minutes): 10h 3m Increase/Decrease: Infused  
Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0  
0309 Acknowledged Order APAMARY

Pepcid (Pantolidine 20 mg Tablet) 11/06/22 1000 Not Administered DEVBUS at 1026 HELDP  
20 MG NG-TUBE TWICE A DAY 2100 APAMARY at 2128 GAVE: 20 MG  
Comments: IV TO NS PER PROTOCOL Barcode Medication: Pepcid  
RX #: Q02251619 NDC/DIN: 6373964510 (SOURCE: eMAR)  
2137 Transaction Rule PHABRC08  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/09/22 2128: BP20 Amount Wasted: 0 MG, Drug Waste%: 0  
0309 Acknowledged Order APAMARY

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/09/22 to 0659 11/10/22 (continued)	STOP

Dextrose 5% 50 ml 50 ML  
(Dextrose 5% 50 ml Bag)  
Rocephin 1 GM  
(ceftriaxone 1 gm vial)  
100 Mls/HR IVB8 Q24H  
Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refill/gerate  
RX #: 002252160

11/06/22 2218 Infusion In Progress 2218 APPMARI: Started/Running, Dose Rate: / Rate: 100 Mls/HR  
Intake: / Container Volume: 50 mls, site:  
Queries  
Cumulative Dose: 3 Cumulative Intake (Rx): 150 Container Volume: 50  
Cumulative Elapsed Time (minutes): 1h 30m Increase/Decrease: Started/Running  
Infusion Rate: 100 Waste Amount: 0  
2222 Transaction Rule PHABRC08  
NBDI Waste - Medicare Waste  
Description: Debit Svc Dr/Tm 11/09/22 2218: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0  
2222 Transaction Rule PHABRC08  
NBDI Waste - Medicare Waste  
Description: Debit Svc Dr/Tm 11/09/22 2218: ROCL1 Amount Wasted: 0 GM; Drug Waste%: 0  
2245 APPMARI at 2218 GAVB: 100 Mls/HR  
Barcode Medication: Dextrose 5% 50 ml  
NDC/DIN: 0038001711 (SOURCE: Default NDCs)  
Barcode Medication: Rocephin  
NDC/DIN: 0040973201 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 3 Cumulative Intake (Rx): 150 Container Volume: 50  
Cumulative Elapsed Time (minutes): 1h 30m Increase/Decrease: Started/Running  
Infusion Rate: 100 Waste Amount: 0  
2252 Infusion In Progress 2252 APPMARI: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, site:  
Queries  
Cumulative Dose: 4 Cumulative Intake (bag): 50 Cumulative Intake (Rx): 200  
Container Volume: 0 Cumulative Elapsed Time (minutes): 2h 4m Increase/Decrease: Infused  
Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0  
0309 Acknowledged Order APPMARI

11/07/22 1000 Not Administered DEVR08 at 1026 HBLDP  
2100 Not Administered APPMARI at 2124 BP 121/50  
0309 Acknowledged Order APPMARI

Apresoline (Hydralazine 25 mg Tablet)  
25 MG NG-TUBE TWICE A DAY  
Dose Ins: HOLD if SBP<130  
RX #: 002252577

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This document is part of the legal medical record.

DATE: 12/09/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/09/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:  
0700 11/09/22 to 0659 11/10/22 (continued)

START/  
STOP

NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE RP WITHHELDS.  
RX #: 002253367

11/07/22 1800 DEVBUS at 1806 CO-SIGNER: ORDACRI SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 242 MAR Injection Site: 11  
1821 Transaction Rule PHABRC08  
MEDL WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/09/22 1806: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
0309 Acknowledged Order APAMARY  
0600 Not Administered APAMARY at 0551 HELDP  
Comments  
Patient is NPO for BSG placement today. Per MD order.

0.9% Sodium Chloride 50 ml MINI-Bag 50 ML  
(0.9% Sodium Chloride 50 ml MINI-Bag)  
Ancel 1 GM  
(Cefazolin 1 gm Vial)  
100 MG/HR IVPB PRE OP/ONE  
Comments: Give 30 minutes prior to procedure.  
RX #: 002257014

11/10/22 1231 Edit or Verification ZPHA.HH  
11/10/22 1231 Edit or Verification ZPHA.HH  
1312 Acknowledged Order DEVBUS  
0308 Acknowledged Order APAMARY  
11/09/22 1224  
11/09/22 2249 Discontinue STR MED  
2249 Order Entry JOANHAR  
2252 Transaction Rule PHABRC08  
MEDL WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/09/22 1224: ZHNSOI Amount Wasted: 0 MG; Drug Waste: 0

Inactivated Ringer's (Lactated Ringer's 1,000 ml Bag)  
1,000 ML IV .STR-MED/ONE  
RX #: 002257964

11/09/22 1224  
11/09/22 2249 Order Entry JOANHAR  
11/09/22 2249 Discontinue STR MED  
2252 Transaction Rule PHABRC08  
MEDL WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/09/22 1224: IR Amount Wasted: 0 ML; Drug Waste: 0

DATE: 12/03/22 @ 0013  
USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:

0700 11/09/22 to 0659 11/10/22 (continued)

START/ STOP

Zofran (Ondansetron 4 mg/2 ml Vial)

11/18/22 0309 Acknowledged Order APPARRY

4 MG IV-Push Q6H/PRN

PRN Reason: Nausea And Vomiting

RX #: Q02217854

Dulcolax (Bisacodyl 10 mg supp)

11/18/22 0309 Acknowledged Order APPARRY

10 MG PR DAILY/PRN

PRN Reason: Constipation

RX #: Q02217856

Dextrose 50% (Dextrose 50% 50 ml Syringe)

11/19/22 0308 Acknowledged Order APPARRY

50 ML IV-Push As Directed/PRN

PRN Reason: See Comments

Comments: Give if BS < 70 and/or patient has any altered level of consciousness

RX #: Q02219545

Dextrose 10% 250 ml 250 ML

11/19/22 0308 Acknowledged Order APPARRY

(Dextrose 10% 250 ml Bag)

999 ML/HR IV . Q18M/PRN

PRN Reason: Hypoglycemia [IV Backup]

Comments: Run D10% 250 ml bag at 999 ml/hr per hypoglycemia protocol #IDP-19

Give if BS < 70 and/or patient has any altered level of consciousness

Give if BS < 50 after 2 oral CHO Treatments

\*If Dextrose 50% Syringe unobtainable

RX #: Q02219546

Dilpivan 100 ML

11/26/22 0309 Acknowledged Order APPARRY

(Propofol 1,000 mg/100 ml Vial)

3.3 ML/HR IV TITRATE/PRN

PRN Reason: Sedation

Comments: RASS 0 -> -2

RX #: Q02232441

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This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
 USER: PHABGT08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/09/22 to 0659 11/10/22 (continued)	

Sodium Chloride 0.9% 500 ML 480 ML  
 (0.9% Sodium Chloride 500 ml Bag)

CARDENE 50 MG

(Nifedipine 25 mg/10 ml Vial)

50 MGS/HR IV TITRATE/PRN

PRN Reason: Hypertension

Comments: Conc. = 0.1 mg/ml

Protect from light

RX #: Q02232595

Trandate (Labetalol 100 mg/20 ml Vial)

10 MG IV-Bush Q4H/PRN

PRN Reason: Hypertension

Comments: SBP >140

RX #: Q02232792

Vasotec (Enalapril 1.25 mg/ml Vial)

1.25 MG IV-Bush Q6H/PRN

PRN Reason: Hypertension SBP > 150 mmHg

RX #: Q02233073

Catapres (Clonidine 0.1 mg Tablet)

0.1 MG NG-TUBE Q6H/PRN

PRN Reason: sbp > 160

Comments: I.A./S.A warning: this order is for

CLONIDINE(catapres)

RX #: Q02233222

Glucose 15 (Dextrose gel 40% 1 each tube)

1 EACH HUCOUS RNH FR PROTOCOL/PRN

PRN Reason: Hypoglycemia

Comments: 93.75 ml tube of Glucose 15 delivers 15 gms

of glucose.

Give if BG < 70 with or without symptoms of

hypoglycemia.

RX #: Q02233226

11/26/22	0309	Acknowledged Order APAMARY
11/27/22	0309	Acknowledged Order APAMARY
11/27/22	0308	Acknowledged Order APAMARY
11/27/22	0309	Acknowledged Order APAMARY
11/27/22	0309	Acknowledged Order APAMARY

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 This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/09/22 to 0659 11/10/22 (continued)	STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	1430	Edit Administration	DEVJUS	at 1430	CO-SIGNER: ORDACRI	SITE: Abdomen	GAVE: 4	UNIT					
					Barcode Medication: Novolog								
					NDC/DIN: 0169750111 (SOURCE: eMAR)								
					Admin Queries								
					Finger Stick Blood Glucose: 188	MAR	Injection	Site: 11					
					11/09/22-1650	by DEVJUS							
					11/09/22-1810	Edit Administration	by DEVJUS						
					TIME changed from: 1650								
					1651	Transaction Rule	PHABRC0B						
						MEDI.WASTE - Medicare Waste							
					Description: Debit Svc Dc/Tm	11/09/22	1650:	INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML					
					1809	DEVJUS	at 1809	CO-SIGNER: ORDACRI	SITE: Abdomen	GAVE: 6	UNIT		
						Barcode Medication: Novolog							
						NDC/DIN: 0169750111 (SOURCE: eMAR)							
						Admin Queries							
						Finger Stick Blood Glucose: 242	MAR	Injection	Site: 11				
						Rule: INSDOSE - Checks insulin dose during ADM							
						1821	Transaction Rule	PHABRC0B					
							MEDI.WASTE - Medicare Waste						
						Description: Debit Svc Dc/Tm	11/09/22	1809:	INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML				
						1821	Transaction Rule	PHABRC0B					
							MEDI.WASTE - Medicare Waste						
						Description: Credit Svc Dc/Tm	11/09/22	1650:	INSASP Amount Wasted: 0 UNIT; Amount Given: -0.040 ML				
						1821	Transaction Rule	PHABRC0B					
							MEDI.WASTE - Medicare Waste						
						Description: Debit Svc Dc/Tm	11/09/22	1430:	INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML				
						2214	APPMARY	at 2214	CO-SIGNER: MILLPHY	SITE: Left	Deltoid	GAVE: 8	UNIT
							Barcode Medication: Novolog						
							NDC/DIN: 0169750111 (SOURCE: eMAR)						
							Admin Queries						
							Finger Stick Blood Glucose: 300	MAR	Injection	Site: 1			
						2222	Transaction Rule	PHABRC0B					
							MEDI.WASTE - Medicare Waste						
						Description: Debit Svc Dc/Tm	11/09/22	2214:	INSASP Amount Wasted: 0 UNIT; Amount Given: 0.080 ML				
						0150	APPMARY	at 0150	CO-SIGNER: MILLPHY	SITE: Right	Deltoid	GAVE: 8	UNIT
							Barcode Medication: Novolog						
							NDC/DIN: 0169750111 (SOURCE: eMAR)						
							Admin Queries						

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION
0700 11/09/22 to 0659 11/10/22 (continued)		

11/02/22   0309	APAMARY	0.080 ML
	Comments	
	295 blood sugar	
	0151 Acknowledged Order APAMARY	
	0200 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/10/22 0150: INRSASP Amount Wasted: 0 UNIT; Amount Given:	

**Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UCUP)**  
 650 MG NG-TUBE Q6H/PRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 in 24 hours is  
 4gm.  
 RX #: 002244670

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION
0700 11/10/22 to 0659 11/11/22		

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 002233225

11/02/22   0700	APAMARY at 0630 GAVE: 112 MCG	
	Barcode Medication: Synthroid	
	NDC/DIN: 4229203901 (SOURCE: eMAR)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UCUP)**  
 15 ML MUCOUS MEM BID@800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 protocol. Protocol continues until patient off ventilator.  
 RX #: 002233392

11/02/22   0800	NCWICH at 0930 GAVE: 15 ML	
	Barcode Medication: Peridex Oral Rinse	
	NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/14/23	
	0933 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/10/22 0930: PER151 Amount Wasted: 0 ML; Drug Waste%: 0	
	2000 VENTPAR at 2018 GAVE: 15 ML	
	Barcode Medication: Peridex Oral Rinse	
	NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/14/23	
	2019 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/10/22 2018: PER151 Amount Wasted: 0 ML; Drug Waste%: 0	



DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/18/22 to 0659 11/11/22 (continued)	

**Norvasc (amlodipine 5 mg Tablet)**  
5 MG NG-RUBE DAILY  
RX #: 002242175  
11/01/22 0930 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/10/22 0930: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 NCMTCH at 0930 GAVE: 5 MG  
Barcode Medication: Norvasc  
NDC/DIN: 0904637061 (SOURCE: eMAR)

11/05/22 1455 Infusion In Progress 1455 NCMTCH: Started/Running, Dose Rate: / Rate: 125 MLS/HR  
11/13/22 Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 6250 Cumulative Intake (RX): 1250 Container Volume: 250  
Cumulative Elapsed Time (minutes): 10h 3m Increase/Decrease: Started/Running  
Infusion Rate: 125 Waste Amount: 0  
1500 NCMTCH at 1455 GAVE: 125 MLS/HR  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 00388001702 (SOURCE: Default NDCEs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCEs)  
Admin Queries  
Cumulative Dose: 6250 Cumulative Intake (RX): 1250 Container Volume: 250  
Cumulative Elapsed Time (minutes): 10h 3m Increase/Decrease: Started/Running  
Infusion Rate: 125 Waste Amount: 0  
1504 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/10/22 1455: D5W250 Amount Wasted: 0 ML; Drug Waste%: 0  
1504 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/10/22 1455: VAN11P Amount Wasted: 0 MG; Amount Given: 1.25 VIAL

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/18/22 to 0659 11/11/22 (continued)	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22 0933 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/10/22 0930: BR20 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 NSMICH at 0930 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2100 VENTPAP at 2121 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2134 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/10/22 2121: BR20 Amount Wasted: 0 MG; Drug Waste%: 0

**Dextrose 5% 50 ml 50 ML**  
(Dextrose 5% 50 ml Bag)  
**Rocephin 1 GM**  
(ceftriaxone 1 gm Vial)  
100 MLS/HR IVB 024H  
Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refrigerate  
RX #: 002252160

11/06/22 2220 Infusion In Progress 2220 VENTPAP: started/Running, Dose Rate: / Rate: 100 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 50 mls, Site:  
Queries  
Cumulative Dose: 4 Cumulative Intake (Rx): 200 Container Volume: 50  
Cumulative Elapsed Time (minutes): 2h 4m Increase/Decrease: Started/Running Infusion Rate:  
100 Waste Amount: 0  
2235 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/10/22 2220: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0  
2235 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/10/22 2220: ROCLII Amount Wasted: 0 GM; Drug Waste%: 0  
2245 VENTPAP at 2220 GAVE: 100 MLS/HR  
Barcode Medication: Dextrose 5% 50 ml  
NDC/DIN: 00388001711 (SOURCE: Default NDCs)  
Barcode Medication: Rocephin  
NDC/DIN: 00409733201 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 4 Cumulative Intake (Rx): 200 Container Volume: 50  
Cumulative Elapsed Time (minutes): 2h 4m Increase/Decrease: Started/Running Infusion Rate:  
100 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/18/22 to 0659 11/11/22 (Continued)	

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

START/STOP	DESCRIPTION
11/07/22	1000 Not Administered NGMICH at 0930 SBP 125
	2100 VENTPAP at 2121 GAVE: 25 MG
	Barcode Medication: Apresoline
	NDC/DIN: 0904644161 (SOURCE: eMAR)
	2134 Transaction Rule PHABKJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit svc Dr/Tm 11/10/22 2121: APR25 Amount Wasted: 0 MG; Drug Waste%: 0

**Novolin N (Insulin NPH 100 units/ml 10 mL Vial)**  
30 UNITS SUB-Q Q13HR 06 18  
Comments: HOLD IF THE PR WITHHELD.  
RX #: 002253367

START/STOP	DESCRIPTION
11/07/22	1800 Not Administered NGMICH at 1800 TUBE FEEDINGS ARP OFF
	0600 VENTPAP at 0644 co-SIGNER: LANGDIA SITE: Abdomen GAVE: 30 UNITS
	Barcode Medication: Novolin N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger stick Blood Glucose: 312 MAR Injection site: 11
	0648 Transaction Rule PHABKJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit svc Dr/Tm 11/11/22 0644: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.300 ML

**0.9% Sodium Chloride 50 mL MINI-Bag 50 ML (0.9% Sodium Chloride 50 mL MINI-Bag) Amed I GM**  
(Cefazolin 1 gm Vial)  
100 MLS/HR IVFB PRE OP/ONE  
Comments: Give 30 minutes prior to procedure.  
RX #: 002257014

START/STOP	DESCRIPTION
11/10/22	1000 Not Administered NGMICH at 1340 DO NOT GIVE PER DR SHARMA
	11/10/22 1029 Discontinue PHABKJOB
	1056 Acknowledged Order NGMICH
	1340 Infusion In Progress 1340 NGMICH: Not Given, Dose Rate: , Rate: Intake: , Cumulative Intake: , Container Volume: , Site:
	11/10/22 1402 Edit of Verification ZPHA.DAV
	1402 Edit of Verification ZPHA.DAV
	1411 Acknowledged Order NGMICH
	1455 Acknowledged Order NGMICH
	1500 Not Administered NGMICH at 1846 NPOIM
	2100 VENTPAP at 2120 GAVE: 1 GM
	Barcode Medication: Sodium Chloride
	NDC/DIN: 00223176001 (SOURCE: eMAR)
	Expiration Date: 03/23/23
	2134 Transaction Rule PHABKJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit svc Dr/Tm 11/10/22 2120: SODI Amount Wasted: 0 GM; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC08

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/18/22 to 0659 11/11/22 (continued)

START/  
STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 mL Bag)  
75 ML/HR IV .013R20M  
RX #: 002259057

11/10/22 1430 NSUMICH at 1455 GAVE: 75 ML/HR  
Barcode Medication: sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed time (minutes):  
0m Increase/Decrease: started Infusion Rate: 75 Waste Amount: 0  
1431 Edit or Verification ZPBA,IND,S  
1431 Edit or Verification ZPBA,IND,S  
1455 Acknowledged Order NSUMICH  
1455 Infusion In Progress 1455 NSUMICH: Started, Dose Rate: / Rate: 75 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 ml/, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed time (minutes): 0m Increase/Decrease: started Infusion Rate: 75  
Waste Amount: 0  
1504 Transaction Rule PHABRC08  
MBDT.WASTE - Medicare Waste  
Description: Debt Svc Dc/Tm 11/10/22 1455: NS Amount Wasted: 0 ML, Drug Waste%: 0  
1509 Discontinue LAHEMAR  
1509 Order Entry LAHEMAR  
1512 Acknowledged Order NSUMICH

DATE: 12/03/22 @ 0013  
USER: PHARMC08

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/10/22 to 0659 11/11/22 (continued)	11/10/22	11/10/22

Sodium Chloride 0.9% 250 ml 250 ML  
(0.9% Sodium Chloride 250 ml Bag)  
999 MLS/HR IV . Q1GM/ONE  
RX #: Q02259127

11/10/22 1508 LAHEMAR at 1510 GAVE: 999 MLS/HR  
Barcode Medication: sodium Chloride 0.9% 250 ml  
NDC/DIN: 0038004902 (SOURCE: Default NDCS)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 250 Cumulative Elapsed Time (minutes):  
0m Increase/Decrease: Started Infusion Rate: 999 waste Amount: 0  
1510 Acknowledged Order LAHEMAR  
1510 Infusion In Progress 1510 LAHEMAR: Started, Dose Rate: , Rate: 999 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 250 ml, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 250  
Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 999  
Waste Amount: 0  
1510 Edit or Verification ZPRA.DAV  
1510 Edit or Verification ZPRA.DAV  
1519 Transaction Rule PHARMC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/10/22 1510: NS250 Amount Wasted: 0 ML; Drug Waste%: 0  
1523 Discontinue PHARMC08  
1537 Acknowledged Order NGUMTCH

Sublimaze Incremental dosing (Fentanyl 100 mcg/2 ml Increment)  
100 MCG IV-Push ONCE/ONE  
Dose Tns: Incremental dosing determined by MD during procedure  
Comments: Check parameters for Incremental dosing  
RX #: Q02259128

11/10/22 1400 LAHEMAR at 1410 GAVE: 25 MCG incrementally  
Barcode Medication: sublimaze Incremental dosing  
NDC/DIN: 0040990932 (SOURCE: Default NDCS)  
11/10/22  
Location: QITCU Admin Source: SUR  
1400 LAHEMAR at 1510 Marked as Last Increment  
Location: QITCU Admin Source: SUR  
1510 Acknowledged Order LAHEMAR  
1510 Edit or Verification ZPRA.DAV  
1510 Edit or Verification ZPRA.DAV  
1510 Discontinue PHARMC08  
1519 Acknowledged Order NGUMTCH  
1519 Transaction Rule PHARMC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/10/22 1410: SUB100INC Amount Wasted: 75 MCG; Drug  
Waste%: 75

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/18/22 to 0659 11/11/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .013R20M  
RX #: 002259129

11/10/22 1509 NSUMICH at 1509 GAVE: 75 MLS/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed time (minutes):  
0m Increase/Decrease: started Infusion Rate: 75 Waste Amount: 0  
1509 Infusion In Progress 1509 NSUMICH: started, Dose Rate: / Rate: 75 MLS/HR  
Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed time (minutes): 0m Increase/Decrease: started Infusion Rate: 75  
Waste Amount: 0  
1509 Order Entry LAHMRAR  
1510 Edit of Verification ZPRA.DAV  
1510 Edit of Verification ZPRA.DAV  
1512 Acknowledged order NSUMICH  
1635 Transaction Rule PHARMCIOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/10/22 1509: NS Amount Wasted: 0 ML; Drug Waste%: 0  
0429 Infusion In Progress 0429 VENTART: Infused, Dose Rate: / Rate: 75 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
1000 Container Volume: 0 Cumulative Elapsed time (minutes): 13h 20m Increase/Decrease:  
Infused Infusion Intake: 1000 Infusion Rate: 75 Waste Amount: 0  
0429 VENTART at 0505 GAVE: 75 MLS/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Container Volume: 1000  
Cumulative Elapsed time (minutes): 13h 20m Increase/Decrease: started/Running  
Infusion Rate: 75 Waste Amount: 0  
0505 Infusion In Progress 0505 VENTART: started/Running, Dose Rate: / Rate: 75 MLS/HR  
Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Container Volume: 1000  
Cumulative Elapsed time (minutes): 13h 20m Increase/Decrease: started/Running  
Infusion Rate: 75 Waste Amount: 0  
0516 Transaction Rule PHARMCIOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/11/22 0505: NS Amount Wasted: 0 ML; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/18/22 to: 0659 11/11/22 (continued)		

**versed incremental dosing (Midazolam 5 mg/5 mL Increment)**  
5 MG IV-Push ONCE/ONE  
Dose Inst: Incremental dosing to be determined by MD during procedure  
RX #: Q02259133

11/10/22	1400	LAHEMAR at 1410 GAVE: 1 MG incrementally
11/10/22		Barcode Medication: Versed Incremental dosing
		NDC/DIN: 00409230505 (SOURCE: Default NDCs)
		Location: Q1ICU Admin Source: SUR
		1400 LAHEMAR at 1514 Marked as Last Increment
		Location: Q1ICU Admin Source: SUR
		1514 Acknowledged Order LAHEMAR
		1514 Edit or Verification ZPMA.DAV
		1514 Edit or Verification ZPMA.DAV
		1514 Discontinue PHARMCIOB
		1519 Transaction Rule PHARMCIOB
		MBDI WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/10/22 1410: VERSINC Amount Wasted: 4 MG; Drug Waste%:
		80

**Trandate (Labetalol 100 mg/20 mL Vial)**  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: Q02232792

10/26/22	1625	NSUNICH at 1625 GAVE: 10 MG
		Barcode Medication: Trandate
		NDC/DIN: 7226610201 (SOURCE: eMAR)
		1635 Transaction Rule PHARMCIOB
		MBDI WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/10/22 1625: NOR100I Amount Wasted: 0 MG; Amount Given:
		0.100 VIAL

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/18/22 to 0659 11/11/22 (continued)

START/  
STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	0943	NGM1CH	at 0943	CO-SIGNER: GORRIMA	SITE: Abdomen GAVE: 4 UNIT
				Barcode Medication: Novolog	
				NDC/DIN: 0169750111 (SOURCE: eMAR)	
				Admin Queries	
				MAR Injection Site: 11	
				Transaction Rule PHABRC0B	
				0948	Transaction Rule PHABRC0B
				MEDI.WASTE - Medicare Waste	
				Description: Debit Svc Dc/Tm 11/10/22 0943: INSASP Amount Wasted: 0 UNIT; Amount Given:	
				0.040 ML	
				1528	NGM1CH at 1528
				CO-SIGNER: GORRIMA	SITE: Abdomen GAVE: 6 UNIT
				Barcode Medication: Novolog	
				NDC/DIN: 0169750111 (SOURCE: eMAR)	
				Admin Queries	
				MAR Injection Site: 11	
				1534	Transaction Rule PHABRC0B
				MEDI.WASTE - Medicare Waste	
				Description: Debit Svc Dc/Tm 11/10/22 1528: INSASP Amount Wasted: 0 UNIT; Amount Given:	
				0.060 ML	
				1854	NGM1CH at 1854
				CO-SIGNER: NSC.FRN7	SITE: Abdomen GAVE: 6 UNIT
				Barcode Medication: Novolog	
				NDC/DIN: 0169750111 (SOURCE: eMAR)	
				Admin Queries	
				MAR Injection Site: 11	
				1904	Transaction Rule PHABRC0B
				MEDI.WASTE - Medicare Waste	
				Description: Debit Svc Dc/Tm 11/10/22 1854: INSASP Amount Wasted: 0 UNIT; Amount Given:	
				0.060 ML	
				2238	VENPAPT at 2238
				CO-SIGNER: CORDOLI	SITE: Left PosteroLateral Arm GAVE: 6 UNIT
				Barcode Medication: Novolog	
				NDC/DIN: 0169750111 (SOURCE: eMAR)	
				Admin Queries	
				Finger Stick Blood Glucose: 230	MAR Injection site: 13
				2250	Transaction Rule PHABRC0B
				MEDI.WASTE - Medicare Waste	
				Description: Debit Svc Dc/Tm 11/10/22 2238: INSASP Amount Wasted: 0 UNIT; Amount Given:	
				0.060 ML	
				0228	VENPAPT at 0228
				CO-SIGNER: NSC.FRN214	SITE: Abdomen GAVE: 8 UNIT
				Barcode Medication: Novolog	
				NDC/DIN: 0169750111 (SOURCE: eMAR)	
				Admin Queries	
				Finger Stick Blood Glucose: 251	MAR Injection site: 11
				0244	Transaction Rule PHABRC0B
				MEDI.WASTE - Medicare Waste	



DATE: 12/03/22 @ 0013  
 USER: PHARCTOR

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
0700 11/18/22 to 0659 11/12/22 (continued)				

0.080 ML	Description: Debit Svc Dc/Tm 11/11/22 0228: INRSASP Amount Wasted: 0 UNITF, Amount Given:
0644 VENTPAP at 0644 CO-SIGNER: LANGDIA SITE: Abdomen GAVE: 10 UNIT	
Barcode Medication: NOVOLIG	
NDC/DIN: 0169750111 (SOURCE: eMAR)	
Admin Queries	
Finger Stick Blood Glucose: 312 MAR Injection site: 11	
0648 Transaction Rule PHARCTOR	
MBDI WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 11/11/22 0644: INRSASP Amount Wasted: 0 UNITF, Amount Given: 0.100 ML	

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
0700 11/11/22 to 0659 11/12/22				

10/27/21 0700 VENTPAP at 0656 GAVE: 112 MCG	
Barcode Medication: Synthroid	
NDC/DIN: 4229203901 (SOURCE: eMAR)	
0704 Transaction Rule PHARCTOR	
MBDI WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 11/11/22 0656: SYNTH112 Amount Wasted: 0 MCG, Drug Waste%:	
0	
0644 Transaction Rule PHARCTOR	
MBDI WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 11/12/22 0633: SYNTH112 Amount Wasted: 0 MCG, Drug Waste%:	
0	

Synthroid (Levothyroxine 112 mcg Tablet)  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: Q02233225

DATE: 12/03/22 @ 0013  
USER: PHABRGTOB

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Medication Discharge Summary

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ADMINISTRATION PERIOD:	START/	STOP/
0700 11/11/22 to 0659 11/12/22 (continued)	STAGE	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL UDCUP)**  
15 ML NUCCOUS MEX BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: Q02233392

11/01/22	0904	Transaction Rule PHABRGTOB	11/01/22	0904	Transaction Rule PHABRGTOB
		MDI.WASTE - Medicare Waste			MDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/11/22 0848: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0			Description: Debit Svc Dr/Tm 11/11/22 0848: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0
		1000 NUCCMCH at 0848 GAVE: 5 MG			1000 NUCCMCH at 0848 GAVE: 5 MG
		Barcode Medication: Norvasc			Barcode Medication: Norvasc
		NDC/DIN: 0904637061 (SOURCE: eMAR)			NDC/DIN: 0904637061 (SOURCE: eMAR)

**Norvasc (Ramelteplene 5 mg Tablet)**  
5 MG NG-TUBB DAILY  
RX #: Q02242175

11/01/22	0904	Transaction Rule PHABRGTOB	11/01/22	0904	Transaction Rule PHABRGTOB
		MDI.WASTE - Medicare Waste			MDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/11/22 0848: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0			Description: Debit Svc Dr/Tm 11/11/22 0848: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0
		1000 NUCCMCH at 0848 GAVE: 5 MG			1000 NUCCMCH at 0848 GAVE: 5 MG
		Barcode Medication: Norvasc			Barcode Medication: Norvasc
		NDC/DIN: 0904637061 (SOURCE: eMAR)			NDC/DIN: 0904637061 (SOURCE: eMAR)

12/03/22

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Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/STOP
0700 11/11/22 to 0659 11/12/22 (continued)	

Dextrose 5% 250 mL 250 ML  
 (Dextrose 5% 250 ml Bag)  
 11/05/22 1100 Infusion In Progress 1100 NSWMICH: Infused, Dose Rate: / Rate: 0 ML/HR  
 11/13/22 Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
 Queries  
 Cumulative Dose: 7500 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 1500  
 Container Volume: 0 Cumulative Elapsed Time (minutes): 30h 8m Increase/Decrease: Infused  
 Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0  
 1440 Infusion In Progress 1440 NSWMICH: Started/Running, Dose Rate: / Rate: 125 ML/HR  
 Intake: / Container Volume: 250 mL, Site:  
 Queries  
 Cumulative Dose: 7500 Cumulative Intake (Rx): 1500 Container Volume: 250  
 Cumulative Elapsed Time (minutes): 30h 8m Increase/Decrease: Started/Running  
 Infusion Rate: 125 Waste Amount: 0  
 1450 Transaction Rule PHABRC08  
 MED:WASTE - Medicare Waste  
 Description: Debit svc DC/Tw 11/11/22 1440: D5W250 Amount Wasted: 0 ML; Drug Waste: 0  
 1450 Transaction Rule PHABRC08  
 MED:WASTE - Medicare Waste  
 Description: Debit svc DC/Tw 11/11/22 1440: VANILP Amount Wasted: 0 MG; Amount Given:  
 1.25 VIAL  
 1500 NSWMICH at 1440 GAVE: 125 ML/HR  
 Barcode Medication: Dextrose 5% 250 ML  
 NDC/DIN: 0038001702 (SOURCE: DEFAULT NDCs)  
 Barcode Medication: Vancomycin  
 NDC/DIN: 67457034001 (SOURCE: DEFAULT NDCs)  
 Admin Queries  
 Cumulative Dose: 7500 Cumulative Intake (Rx): 1500 Container Volume: 250  
 Cumulative Elapsed Time (minutes): 30h 8m Increase/Decrease: Started/Running  
 Infusion Rate: 125 Waste Amount: 0  
 1640 Infusion In Progress 1640 SAN CHR: Infused, Dose Rate: / Rate: 0 ML/HR  
 Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
 Queries  
 Cumulative Dose: 8750 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 1750  
 Container Volume: 0 Cumulative Elapsed Time (minutes): 32h 8m Increase/Decrease: Infused  
 Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Unit Num HB01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/11/22 to 0659 11/12/22 (continued)	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22	0904	Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/11/22 0848: PE20 Amount Wasted: 0 MG; Drug Waste%: 0	
		1000 NSMICH at 0848 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6373964510 (SOURCE: eMAR)	
		2051 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/11/22 2040: PE20 Amount Wasted: 0 MG; Drug Waste%: 0	
		2100 SAN CHB at 2040 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6373964510 (SOURCE: eMAR)	

**Dextrose 5% 50 ml 50 ML**  
(Dextrose 5% 50 ml Bag)  
**Roccephin 1 GM**  
(Ceftriaxone 1 gm Vial)  
100 MLS/HR IVB 024H  
Spec Inst: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refrigerate  
RX #: 002252160

11/06/22	1100	Infusion In Progress	1100 NSMICH: Infused, Dose Rate: / Rate: 0 MLS/HR
		Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, Site:	
		Queries	
		Cumulative Dose: 5 Cumulative Intake (bag) : 50 Cumulative Intake (Rx) : 250	
		Container Volume: 0 Cumulative Elapsed Time (minutes) : 14h 44m Increase/Decrease: Infused	
		Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0	
		2202 Infusion In Progress	2202 SAN CHB: Started/Running, Dose Rate: / Rate: 100 MLS/HR
		Intake: / Cumulative Intake: / Container Volume: 50 mls, Site:	
		Queries	
		Cumulative Dose: 5 Cumulative Intake (Rx) : 250 Container Volume: 50	
		Cumulative Elapsed Time (minutes): 14h 44m Increase/Decrease: Started/Running	
		Infusion Rate: 100 Waste Amount: 0	
		2207 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/11/22 2202: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0	
		2207 Transaction Rule PHABRC0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/11/22 2202: ROCII Amount Wasted: 0 GM; Drug Waste%: 0	
		2245 SAN CHB at 2202 GAVE: 100 MLS/HR	
		Barcode Medication: Dextrose 5% 50 ml	
		NDC/DIN: 00338001711 (SOURCE: Default NDCs)	
		Barcode Medication: Roccephin	
		NDC/DIN: 00409732201 (SOURCE: Default NDCs)	
		Admin Queries	
		Cumulative Dose: 5 Cumulative Intake (Rx) : 250 Container Volume: 50	
		Cumulative Elapsed Time (minutes): 14h 44m Increase/Decrease: Started/Running	
		Infusion Rate: 100 Waste Amount: 0	

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/11/22 to 0659 11/12/22 (continued)	STAGE	

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22	1000	Not Administered NGMICH at 0849 PRAM PROT		
	2051	Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/11/22 2040: APR25 Amount Wasted: 0 MG; Drug Waste%: 0		
	2100	SNV CHB at 2040 GAVE: 25 MG		
		Barcode Medication: Apresoline		
		NDC/DIN: 625847311 (SOURCE: eMAR)		

**Novolin N (Insulin NPH 100 units/ml 10 mL Vial)**  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PF WITHHELD.  
RX #: 002253367

11/07/22	1317	Discontinue AMARM		
	1317	Order Entry AMARM		
	1325	Acknowledged Order NGMICH		

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**

1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22	0904	Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/11/22 0849: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	1000	NGMICH at 0849 GAVE: 1 GM		
		Barcode Medication: Sodium Chloride		
		NDC/DIN: 00223176001 (SOURCE: eMAR)		
	1450	Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/11/22 1441: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	1500	NGMICH at 1441 GAVE: 1 GM		
		Barcode Medication: Sodium Chloride		
		NDC/DIN: 00223176001 (SOURCE: eMAR)		
		Expiration Date: 05/08/23		
	2051	Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/11/22 2040: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	2100	SNV CHB at 2040 GAVE: 1 GM		
		Barcode Medication: Sodium Chloride		
		NDC/DIN: 00223176001 (SOURCE: eMAR)		
		Expiration Date: 05/08/23		

DATE: 12/03/22 @ 0013  
USER: PHARGTOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/11/22 to 0659 11/12/22 (continued)	STOP	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .Q13H20M  
RX #: 002259057

11/10/22 1133 Infusion In Progress 1133 NGMICH: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
| | |  
| | | Queries  
| | | Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
| | | 1000 Container Volume: 0 Cumulative Elapsed Time (minutes): 20h 36m Increase/Decrease:  
| | | Infused Infusion Intake: 1000 Infusion Rate: 0 Waste Amount: 0

Sodium Chloride 0.9% 250 ml 250 ML  
(0.9% Sodium Chloride 250 ml Bag)  
999 MLS/HR IV .Q16M/ONE  
RX #: 002259127

11/10/22 1131 Infusion In Progress 1131 NGMICH: Infused, Dose Rate: / Rate: 0 MLS/HR  
11/10/22 Intake: 250 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
| | |  
| | | Queries  
| | | Cumulative Dose: Not Applicable Cumulative Intake (bag): 250 Cumulative Intake (Rx):  
| | | 250 Container Volume: 0 Cumulative Elapsed Time (minutes): 20h 21m Increase/Decrease:  
| | | Infused Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .Q13H20M  
RX #: 002259129

11/10/22 1100 Infusion In Progress 1100 NGMICH: Paused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 443.75 mls, Cumulative Intake: 443.75 mls, Container Volume: 556.25 mls, Site:  
| | |  
| | | Queries  
| | | Cumulative Dose: Not Applicable Cumulative Intake (bag): 443.75 Cumulative Intake (Rx):  
| | | 1443.75 Container Volume: 556.25 Cumulative Elapsed Time (minutes): 19h 15m  
| | | Increase/Decrease: Paused Infusion Intake: 443.75 Infusion Rate: 0 Waste Amount: 0  
| | | 1133 Acknowledged Order NGMICH  
| | | 1133 Discontinue NGMICH

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/11/22 to 0659 11/12/22 (continued)

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
33 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE RP WITHHELD.  
RX #: 002261100

STAR#/ SITE	
11/11/22	1317 Order Entry AMARM
	1324 Edit or Verification ZPHA.DSH
	1324 Edit or Verification ZPHA.DSH
	1325 Acknowledged Order NGWHCH
	1800 NGWHCH at 1826 CO-SIGNER: GORRINA SITE: Abdomen GAVE: 33 UNITS
	Barcode Medication: NOVOLIN N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	MAF Injection Site: 11
	1834 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicate Waste
	Description: Dabit svc Dr/Tm 11/11/22 1826: INSNPH Amount Wasted: 0 UNITS; Amount
	GIVEN: 0.330 ML
	0559 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicate Waste
	Description: Dabit svc Dr/Tm 11/12/22 0557: INSNPH Amount Wasted: 0 UNITS; Amount
	GIVEN: 0.330 ML
	0600 SAM CHB at 0557 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 33 UNITS
	Barcode Medication: NOVOLIN N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 129 MAR Injection site: 11
	Comments
	129

LOVENOX (Enoxaparin 40 mg/0.4 mL Syringe)  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22	1515 NGWHCH at 1531 SITE: Abdomen GAVE: 40 MG
	Barcode Medication: LOVENOX
	NDC/DIN: 6332356421 (SOURCE: eMAR)
	Admin Queries
	MAF Injection Site: 11
	1521 Edit or Verification ZPHA.DSH
	1521 Edit or Verification ZPHA.DSH
	1523 Acknowledged Order NGWHCH
	1534 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicate Waste
	Description: Dabit svc Dr/Tm 11/11/22 1531: LOV40I Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/11/22 to 0659 11/12/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

START/STOP		
110/29/221	1023 NCMITCH at 1023 CO-SIGNER: FERRRBS SITE: Abdomen GAVE: 6 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	MAR Injection Site: 11	
	Transaction Rule PHABRC0B	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/11/22 1023: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML	
	1531 NCMITCH at 1531 CO-SIGNER: GORRUMA SITE: Abdomen GAVE: 6 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	MAR Injection Site: 11	
	Transaction Rule PHABRC0B	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/11/22 1531: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML	
	1827 NCMITCH at 1827 CO-SIGNER: GORRUMA SITE: Abdomen GAVE: 8 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	MAR Injection Site: 11	
	Transaction Rule PHABRC0B	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/11/22 1827: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.080 ML	
	2142 SAN CHB at 2142 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 6 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger stick Blood Glucose: 214 MAR Injection site: 11	
	Transaction Rule PHABRC0B	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/11/22 2142: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML	

ADMINISTRATION PERIOD:	START/STOP	
0700 11/12/22 to 0659 11/13/22		



DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/12/22 to 0659 11/13/22 (continued)	STAGE	

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002233225

110/27/22 0700 SAN CHB at 0633 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0647 Transaction Rule PHARMCIOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 0631: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%: 0

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCAF)**  
15 ML MUGOBS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 002233392

110/27/22 0800 ORDACFI at 0908 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 0011620016 (SOURCE: eMAR)  
Expiration Date: 04/14/23  
0915 Transaction Rule PHARMCIOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 0908: PER15L Amount Wasted: 0 ML; Drug Waste%: 0  
2000 BNSYBS at 1950 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 0011620016 (SOURCE: eMAR)  
Expiration Date: 04/14/23  
2004 Transaction Rule PHARMCIOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 1950: PER15L Amount Wasted: 0 ML; Drug Waste%: 0

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG NG-TUBE DAILY  
RX #: 002242175

111/01/22 1000 ORDACFI at 0951 GAVE: 5 MG  
Barcode Medication: Norvasc  
NDC/DIN: 0904637061 (SOURCE: eMAR)  
1000 Transaction Rule PHARMCIOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 0951: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/12/22 to 0659 11/13/22 (continued)	STOP

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 ML/HR IV#8 Q24H  
Comments: \*Refrigerate\*  
RX TO DOSE  
RX #: Q02250136

11/05/22 1500 ORDACRT at 1503 GAVE: 125 ML/HR  
11/13/22  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 00388001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 8750 Cumulative Intake (Rx): 1750 Container Volume: 250  
Cumulative Elapsed Time (minutes): 32h 8m Increase/Decrease: Started/Running  
Infusion Rate: 125 Waste Amount: 0  
1503 Infusion In Progress 1503 ORDACRT: Started/Running, Dose Rate: / Rate: 125 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 8750 Cumulative Intake (Rx): 1750 Container Volume: 250  
Cumulative Elapsed Time (minutes): 32h 8m Increase/Decrease: Started/Running  
Infusion Rate: 125 Waste Amount: 0  
1515 Transaction Rule PHABRC08  
1515 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 1503: D5M250 Amount Wasted: 0 ML, Drug Waste%: 0  
1515 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 1503: VAN11P Amount Wasted: 0 MG, Amount Given:  
1.25 VIAL  
1740 Infusion In Progress 1740 ORDACRT: Infused, Dose Rate: / Rate: 0 ML/HR  
Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 10000 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 2000  
Container Volume: 0 Cumulative Elapsed Time (minutes): 34h 45m Increase/Decrease: Infused  
Infusion Intake: 250 Refusion Rate: 0 Waste Amount: 0

Pepcid (Famotidine 20 mg Tablet)  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: Q02251619

11/06/22 1000 ORDACRT at 0951 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
1000 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 0951: BEP20 Amount Wasted: 0 MG, Drug Waste%: 0  
2049 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/12/22 2040: BEP20 Amount Wasted: 0 MG, Drug Waste%: 0  
2100 BENSTY8 at 2040 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
USER: PHABRG0B

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/12/22 to 0659 11/13/22 (continued)	

Dextrose 5% 50 ml 50 ML  
(Dextrose 5% 50 ml Bag)  
Rocephin 1 GM  
(ceftriaxone 1 gm vial)  
100 Mls/HR IVB Q24H  
Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refill/gerate  
RX #: Q02252160

11/06/22 0735 Infusion In Progress 0735 ORDACRI: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 6 Cumulative Intake (bag): 50 Cumulative Intake (Rx): 300  
Container Volume: 0 Cumulative Elapsed Time (minutes): 24h 17m Increase/Decrease: Infused  
Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0  
2225 Infusion In Progress 2225 BMSJTS: started/Running, Dose Rate: / Rate: 100 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 50 mls, Site:  
Queries  
Cumulative Dose: 6 Cumulative Intake (Rx): 300 Container Volume: 50  
Cumulative Elapsed Time (minutes): 24h 17m Increase/Decrease: started/Running  
Infusion Rate: 100 Waste Amount: 0  
2234 Transaction Rule PHABRG0B  
MDI.WASTE - Medicare Waste  
Description: Debt Svc Dr/Tm 11/12/22 2225: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0  
2234 Transaction Rule PHABRG0B  
MDI.WASTE - Medicare Waste  
Description: Debt Svc Dr/Tm 11/12/22 2225: ROCLII Amount Wasted: 0 GM; Drug Waste%: 0  
2245 BMSJTS at 2225 GAVE: 100 Mls/HR  
Barcode Medication: Dextrose 5% 50 ml  
NDC/DIN: 00388001711 (SOURCE: Default NDCs)  
Barcode Medication: Rocephin  
NDC/DIN: 00409733201 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 6 Cumulative Intake (Rx): 300 Container Volume: 50  
Cumulative Elapsed Time (minutes): 24h 17m Increase/Decrease: started/Running  
Infusion Rate: 100 Waste Amount: 0  
2255 Infusion In Progress 2255 BMSJTS: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 7 Cumulative Intake (bag): 50 Cumulative Intake (Rx): 350  
Container Volume: 0 Cumulative Elapsed Time (minutes): 24h 47m Increase/Decrease: Infused  
Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0

Apresoline (Hydralazine 25 mg Tablet)  
25 MG NG-TUBE TWICE A DAY  
Dose Ins: HOLD if SBRC130  
RX #: Q02252577

11/07/22 1000 ORDACRI at 0951 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 625947311 (SOURCE: eMAR)  
1000 Transaction Rule PHABRG0B  
MDI.WASTE - Medicare Waste  
Description: Debt Svc Dr/Tm 11/12/22 0951: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 Not Administered BMSJTS at 2040 SBP 112

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/12/22 to 0659 11/13/22 (continued)	

Sodium Chloride (Sodium Chloride 1 gm Tablet)  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22 1000 ORDACRI at 0951 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1000 Transaction Rule PHABRC0B  
MED.WASTE - Medicate Waste  
Description: Debit Svc Dc/Tm 11/12/22 0951: SODI Amount Wasted: 0 GM; Drug Waste%: 0  
1500 ORDACRI at 1503 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1515 Transaction Rule PHABRC0B  
MED.WASTE - Medicate Waste  
Description: Debit Svc Dc/Tm 11/12/22 1503: SODI Amount Wasted: 0 GM; Drug Waste%: 0  
2049 Transaction Rule PHABRC0B  
MED.WASTE - Medicate Waste  
Description: Debit Svc Dc/Tm 11/12/22 2040: SODI Amount Wasted: 0 GM; Drug Waste%: 0  
2100 BMSURS at 2040 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23

Sodium Chloride 0.9% 1,000 MC  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .Q13H20M  
RX #: 002259129

11/10/22 0741 Infusion In Progress 0741 ORDACRI: Infused; Dose Rate: / Rate: 0 MLS/HR  
Intake: 0 mls, Cumulative Intake: 443.75 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 443.75 Cumulative Intake (Rx):  
1443.75 Container Volume: 0 Cumulative Elapsed Time (minutes): 19h 15m Increase/Decrease:  
Infused Infusion Intake: 0 Infusion Rate: 0 Waste Amount: 556.25

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/12/22 to 0659 11/13/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
33 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PB WITHHELD.  
RX #: 002261100

11/11/22 1746 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/12/22 1736: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.330 ML  
1800 ORDACR at 1736 CO-SIGNER: RAMOJES SITE: Abdomen GAVE: 33 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 211 MAR Injection Site: 11  
0600 BENJSES at 0618 CO-SIGNER: DOMIXAV SITE: Abdomen GAVE: 33 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 103 MAR Injection Site: 11  
0631 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/13/22 0618: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.330 ML

LOVENOX (Enoxaparin 40 mg/0.4 mL Syringe)  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22 1515 ORDACR at 1503 SITE: Right Deltoid GAVE: 40 MG  
Barcode Medication: LOVENOX  
NDC/DIN: 6332356421 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 5  
1515 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/12/22 1503: LOV40I Amount Wasted: 0 MG; Drug Waste%: 0

NOVOLOG (Insulin Aspart 100 units/mL 10mL Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: GLUCOSCAN Coverage  
RX #: 002237641

11/02/21 1737 ORDACR at 1737 CO-SIGNER: RAMOJES SITE: Abdomen GAVE: 6 UNIT  
Barcode Medication: NOVOLOG  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 211 MAR Injection Site: 11  
1746 Transaction Rule PHABRC0B  
MED.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/12/22 1737: INSNAP Amount Wasted: 0 UNITF; Amount Given: 0.060 ML

DATE: 12/03/22 @ 0013  
USER: PHARMC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/13/22 to 0659 11/14/22		

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 0022333225

DATE	DESCRIPTION	AMOUNT	WASTED
11/02/22	0700 BENUSERS at 0631 GAVE: 112 MCG		
	Barcode Medication: Synthroid		
	NDC/DIN: 4229203901 (SOURCE: eMAR)		
	0645 Transaction Rule PHARMC08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/14/22 0635: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%:		
	0		

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCAF)**

15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 0022333392

DATE	DESCRIPTION	AMOUNT	WASTED
11/02/22	0800 ORDACRI at 0944 GAVE: 15 ML		
	Barcode Medication: Peridex Oral Rinse		
	NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 04/14/23		
	0946 Transaction Rule PHARMC08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/13/22 0944: PER15L Amount Wasted: 0 ML; Drug Waste%: 0		
	2000 LAMPHEN at 2048 GAVE: 15 ML		
	Barcode Medication: Peridex Oral Rinse		
	NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 04/28/23		
	2103 Transaction Rule PHARMC08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/13/22 2048: PER15L Amount Wasted: 0 ML; Drug Waste%: 0		

**Norvasc (Amlodipine 5 mg Tablet)**

5 MG NG-TUBE DAILY  
RX #: 002242175

DATE	DESCRIPTION	AMOUNT	WASTED
11/01/22	0946 Transaction Rule PHARMC08		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/13/22 0944: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0		
	1000 ORDACRI at 0944 GAVE: 5 MG		
	Barcode Medication: Norvasc		
	NDC/DIN: 0904637061 (SOURCE: eMAR)		

**Vancomycin per Pharmacy (Vancomycin - Dosed by PHA)**

1 EACH MISCELLANEOUS PER PROTOCOL  
Dose Inst: DC Vancomycin after last dose IF given on 11/13  
RX #: 002250120

DATE	DESCRIPTION	AMOUNT	WASTED
11/05/22	0843 Edit of Verification BANAUS		
11/13/22	0848 Edit of Verification ZPRA,IE		
	0906 Acknowledged Order ORDACRI		
	1155 Edit of Verification ZPRA,SUP		
	1158 Acknowledged Order ORDACRI		
	1700 Discontinue PHARMC08		
	1706 Acknowledged Order ORDACRI		

DATE: 12/03/22 @ 0013  
USER: PHARMC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/13/22 to 0659 11/14/22 (continued)	

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 MLS/HR IVB8 Q24H  
Comments: \*Refrigerate\*  
RX TO DOSE  
RX #: Q02250136

11/05/22 0849 Edit or Verification ZPHA.IE  
11/13/22 0906 Acknowledged Order ORDACRI  
1433 Infusion In Progress 1433 ORDACRI started/Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 10000 Cumulative Intake (RX): 2000 Container Volume: 250  
Cumulative Elapsed Time (minutes): 34h 45m Increase/Decrease: started/Running  
Infusion Rate: 125 Waste Amount: 0  
1447 Transaction Rule PHARMC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/13/22 1433; D5W250 Amount Wasted: 0 ML; Drug Waste%: 0  
1447 Transaction Rule PHARMC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/13/22 1433; VANILP Amount Wasted: 0 MG; Amount Given:  
1.25 VIAL  
1500 ORDACRI at 1433 GAVE: 125 MLS/HR  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 0038001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 10000 Cumulative Intake (RX): 2000 Container Volume: 250  
Cumulative Elapsed Time (minutes): 34h 45m Increase/Decrease: started/Running  
Infusion Rate: 125 Waste Amount: 0  
1700 Discontinue PHARMC08  
1706 Acknowledged Order ORDACRI  
1808 Infusion In Progress 1808 ORDACRI Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 11250 Cumulative Intake (bag): 250 Cumulative Intake (RX): 2250  
Container Volume: 0 Cumulative Elapsed Time (minutes): 38h 20m Increase/Decrease: Infused  
Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

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 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	
0700 11/13/22 to 0659 11/14/22 (continued)		

**Pepcid (Famotidine 20 mg Tablet)**  
 20 MG NG-TUBE TWICE A DAY  
 Comments: IV TO NG PER PROTOCOL  
 RX #: 002251619

11/06/22	0946	Transaction Rule PHABRCJOB	0944:	MR20	Amount	Masterd:	0 MG;	Drug	Masterd%:	0
		MEDI.WASTE - Medicare Waste								
		Description: Debit Svc Dr/Tm 11/13/22								
		1000 ORDPACKI at 0944								
		Barcode Medication: Pepcid								
		NDC/DIN: 6373964510 (SOURCE: eMAR)								
		2100 LAMPHEN at 2049								
		Barcode Medication: Pepcid								
		NDC/DIN: 6373964510 (SOURCE: eMAR)								
		2103 Transaction Rule PHABRCJOB								
		MEDI.WASTE - Medicare Waste								
		Description: Debit Svc Dr/Tm 11/13/22								
		2049:								
		MR20								
		Amount								
		Masterd:								
		0 MG;								
		Drug								
		Masterd%:								
		0								



DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/13/22 to 0659 11/14/22 (continued)	

Dextrose 5% 50 ml 50 ML  
(Dextrose 5% 50 ml Bag)  
Rocephin 1 GM  
(ceftriaxone 1 gm vial)  
100 MLS/HR IVB8 Q24H  
Spec Ins: PER DR. BAROU, D/C ABX AFTER TODAY 11/13  
Comments: Refill gerate  
RX #: Q02252160

11/06/22	1441 Edit or Verification ZPRA.SUP
2210	Infusion In Progress 2210 IAMPHEN: started/Running, Dose Rate: / Rate: 100 MLS/HR Intake: / Cumulative Intake: / Container Volume: 50 mls, Site:
	Queries
	Cumulative Dose: 7 Cumulative Intake (Rx): 350 Container Volume: 50 Cumulative Elapsed Time (minutes): 24h 47m Increase/Decrease: started/Running
	Infusion Rate: 100 Waste Amount: 0
2219	Transaction Rule PHABRCIOB MBDI.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/13/22 2210: D5W50 Amount Wasted: 0 ML; Drug Waste%: 0 Transaction Rule PHABRCIOB MBDI.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/13/22 2210: ROCLII Amount Wasted: 0 GM; Drug Waste%: 0 2244 Discontinue RENNW STOP 2245 IAMPHEN at 2210 GAVE: 100 MLS/HR Barcode Medication: Dextrose 5% 50 ml NDC/DIN: 00388001711 (SOURCE: Default NDCs) Barcode Medication: Rocephin NDC/DIN: 00409733201 (SOURCE: Default NDCs) Admin Queries Cumulative Dose: 7 Cumulative Intake (Rx): 350 Container Volume: 50 Cumulative Elapsed Time (minutes): 24h 47m Increase/Decrease: started/Running Infusion Rate: 100 Waste Amount: 0 2309 Acknowledged Order IAMPHEN 2309 Infusion In Progress 2309 IAMPHEN: Infused, Dose Rate: / Rate: 0 MLS/HR Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 0 mls, Site: Queries Cumulative Dose: 8 Cumulative Intake (Bag): 50 Cumulative Intake (Rx): 400 Container Volume: 0 Cumulative Elapsed Time (minutes): 25h 46m Increase/Decrease: Infused Infusion Intake: 50 Infusion Rate: 0 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/13/22 to 0659 11/14/22 (continued)	STOP

**Aprisoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22 0946 Transaction Rule PHABKJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 0944: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 ORDACRI at 0944 GAVE: 25 MG  
Barcode Medication: Aprisoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)  
2100 LAMPHEN at 2049 GAVE: 25 MG  
Barcode Medication: Aprisoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)  
2103 Transaction Rule PHABKJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 2049: APR25 Amount Wasted: 0 MG; Drug Waste%: 0

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22 0946 Transaction Rule PHABKJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 0944: SODI Amount Wasted: 0 GM; Drug Waste%: 0  
1000 ORDACRI at 0944 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1447 Transaction Rule PHABKJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 1433: SODI Amount Wasted: 0 GM; Drug Waste%: 0  
1500 ORDACRI at 1433 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
2100 LAMPHEN at 2050 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
2103 Transaction Rule PHABKJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 2050: SODI Amount Wasted: 0 GM; Drug Waste%: 0

**Novolin N (Insulin NPH 100 units/ml 10 ml Vial)**  
33 UNIDS SUB-Q QIDHR 06 18  
Comments: HOLD IF THE RP WITHHOLDS.  
RX #: 002261100

11/11/22 1407 Discontinue AMARM  
1408 Order Entry AMARM  
1423 Acknowledged Order ORDACRI

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/13/22 to 0659 11/14/22 (continued)	

Novolin N (Insulin NPH 100 units/ml 10 ml Vial)  
25 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PE WITHHOLDS OR BLOOD SUGAR  
BELOW 100 MG/DL.  
RX #: 002264448

11/11/22 1447 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 1433: JOV40I Amount Wasted: 0 MG; Drug Waste\*: 0  
1515 ORDACR at 1433 SITE: Left Deltoid GAVE: 40 MG  
Barcode Medication: Lovemonx  
NDC/DIN: 6332356421 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 1

Novolin N (Insulin NPH 100 units/ml 10 ml Vial)  
25 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PE WITHHOLDS OR BLOOD SUGAR  
BELOW 100 MG/DL.  
RX #: 002264448

11/13/22 1407 Not Administered ORDACR at 1822 NOT SCHEDULED  
1408 Order Entry AMARM  
1411 Edit of Verification VUCHRIS  
1411 Edit of Verification VUCHRIS  
1423 Acknowledged Order ORDACR  
1800 ORDACR at 1808 CO-SIGNER: RANOGES SITE: Left Deltoid GAVE: 25 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 138 MAR Injection site: 1  
1818 Edit of Verification AMARM  
1818 Edit of Verification AMARM  
1819 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/13/22 1808: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.250 ML  
1821 Acknowledged Order ORDACR  
0600 IAMPBR at 0636 CO-SIGNER: DOMIXAV SITE: Abdomen GAVE: 25 UNITS  
Barcode Medication: Novolin N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 11  
0645 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/14/22 0636: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.250 ML

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/13/22 to 0659 11/14/22 (continued)

START/  
STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)

See Dose Ins. SUB-Q Q4H/PRN

PRN Reason: Glucosecan Coverage

RX #: 002237641

110/29/22| 1407 Edit or Verification AMARIM  
| 1423 Acknowledged Order ORDACRI  
| 0635 AMPHEN at 0635 CO-SIGNER: DOMIXAV SITE: Abdomen GAVE: 2 UNIT  
| Barcode Medication: Novolog  
| NDC/DIN: 016975011 (SOURCE: eMAR)  
| Admin Queries  
| Finger Stick Blood Glucose: 164 MAR Injection site: 11  
| 0645 Transaction Rule PHARMCIOB  
| MBDI.WASTE - Medicare Waste  
| Description: Debit Svc Dc/Tm 11/14/22 0635; INSASP Amount Wasted: 0 UNIT; Amount Given:  
| 0.020 ML

ADMINISTRATION PERIOD:  
0700 11/14/22 to 0659 11/15/22

START/  
STOP

Synthroid (Levothyroxine 112 mcg Tablet)

112 MCG NG-TUBE DAILY before breakfast

RX #: 002233225

110/27/22| 0700 AMPHEN at 0635 GAVE: 112 MCG  
| Barcode Medication: Synthroid  
| NDC/DIN: 4229203901 (SOURCE: eMAR)  
| 0645 Transaction Rule PHARMCIOB  
| MBDI.WASTE - Medicare Waste  
| Description: Debit Svc Dc/Tm 11/15/22 0641; SYNTH12 Amount Wasted: 0 MCG; Drug Waste%:  
| 0

Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)

15 ML MUCOUS MEM BID@0800,2000

Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care

Protocol: Protocol continues until patient off ventilator.

RX #: 002233392

110/27/22| 0800 FERRIERS at 0804 GAVE: 15 ML  
| Barcode Medication: Peridex Oral Rinse  
| NDC/DIN: 0011620016 (SOURCE: eMAR)  
| Expiration Date: 04/14/23  
| 0815 Transaction Rule PHARMCIOB  
| MBDI.WASTE - Medicare Waste  
| Description: Debit Svc Dc/Tm 11/14/22 0804; FERR15 Amount Wasted: 0 ML; Drug Waste%: 0  
| 2000 APHARM at 2014 GAVE: 15 ML  
| Barcode Medication: Peridex Oral Rinse  
| NDC/DIN: 0011620016 (SOURCE: eMAR)  
| Expiration Date: 04/14/23  
| 2018 Transaction Rule PHARMCIOB  
| MBDI.WASTE - Medicare Waste  
| Description: Debit Svc Dc/Tm 11/14/22 2014; PER15 Amount Wasted: 0 ML; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/14/22 to 0659 11/15/22 (continued)	

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG NG-TUBE DAILY  
RX #: 002242175

11/01/22 1000 ERRORS at 1018 GAVE: 5 MG  
Barcode Medication: Norvasc  
NDC/DIN: 0904637061 (SOURCE: eMAR)  
1031 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/14/22 1018: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22 1000 ERRORS at 1018 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
1031 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/14/22 1018: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 APPMAY at 2054 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2104 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/14/22 2054: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0

**Apreosoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Tst: HOLD if SBPC130  
RX #: 002252577

11/07/22 1000 ERRORS at 1018 GAVE: 25 MG  
Barcode Medication: Apreosoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)  
1031 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/14/22 1018: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 Not Administered APPMAY at 2209 BP 124/59

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/14/22 to 0659 11/15/22 (continued)	

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

DATE	DESCRIPTION	AMOUNT WASTED	DRUG WASTE %
11/10/22	1000 FERRURES at 1018 GAVE: 1 GM Barcode Medication: Sodium Chloride NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/08/23		
	1031 Transaction Rule PHABRCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/14/22 1018: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	1500 FERRURES at 1457 GAVE: 1 GM Barcode Medication: Sodium Chloride NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/08/23		
	1503 Transaction Rule PHABRCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/14/22 1457: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	2100 APPMARRY at 2054 GAVE: 1 GM Barcode Medication: Sodium Chloride NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 03/23/23		
	2104 Transaction Rule PHABRCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/14/22 2054: SODI Amount Wasted: 0 GM; Drug Waste%: 0		

DATE	DESCRIPTION	AMOUNT WASTED	DRUG WASTE %
11/11/22	1503 Transaction Rule PHABRCJOB		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/14/22 1457: IOV40I Amount Wasted: 0 MG; Drug Waste%: 0		
	1515 FERRURES at 1457 SITE: Abdomen GAVE: 40 MG Barcode Medication: Iovenox NDC/DIN: 6332356421 (SOURCE: eMAR)		
	Admin Queries		
	MAP Injection Site: 11		

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD: 0700 11/14/22 to 0659 11/15/22 (continued)

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL)  
25 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.  
RX #: Q02264448

START/STOP	DESCRIPTION
11/13/22	1800 ERRORS at 1748 CO-SIGNER: GORRIMA SITE: Abdomen GAVE: 25 UNITS Barcode Medication: Novolin N NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 149 MAR Injection site: 11
	1802 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/14/22 1748: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.250 ML
	0600 APPMAY at 0550 CO-SIGNER: CHOMERI SITE: Right Deltoid GAVE: 25 UNITS Barcode Medication: Novolin N NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 221 MAR Injection site: 5
	Comments
	B8 221
	0600 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/15/22 0550: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.250 ML

DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/14/22 to 0659 11/15/22 (continued)	STOP	STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

10/29/22	1019	FERRUES at 1019 CO-SIGNER: GORRINA	SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 176 MAR Injection site: 11	
		1031 Transaction Rule PHABRCIOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/14/22 1019: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:	
		0.020 ML	
		1353 FERRUES at 1353 CO-SIGNER: TINADES	SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 176 MAR Injection site: 11	
		1402 Transaction Rule PHABRCIOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/14/22 1353: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:	
		0.020 ML	
		2215 APPMAY at 2215 CO-SIGNER: LANGDIA	SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 188 MAR Injection site: 11	
		2218 Transaction Rule PHABRCIOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/14/22 2215: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:	
		0.020 ML	
		0228 APPMAY at 0228 CO-SIGNER: CHOMKRI	SITE: Right Deltoid GAVE: 2 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 193 MAR Injection site: 5	
		0245 Transaction Rule PHABRCIOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/15/22 0228: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:	
		0.020 ML	
		0550 APPMAY at 0550 CO-SIGNER: CHOMKRI	SITE: Right Deltoid GAVE: 4 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 221 MAR Injection site: 5	
		0615 Transaction Rule PHABRCIOB	
		MBDI.WASTE - Medicare Waste	

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:

0700 11/14/22 to 0659 11/15/22 (continued)

START/STOP	DESCRIPTION
START/STOP	0.040 ML
	Description: Debit Svc Dc/Tm 11/15/22 0550: INVSASP Amount Wasted: 0 UNITP Amount Given:

ADMINISTRATION PERIOD:

0700 11/15/22 to 0659 11/16/22

Synthroid (Levothyroxine 112 mcg Tablet)

112 MCG NG-TUBE DAILY before breakfast

RX #: Q02233225

START/STOP	DESCRIPTION
10/27/22	0700 APPRAX at 0641 GAVE: 112 MCG
	Barcode Medication: Synthroid
	NDC/DIN: 4229203901 (SOURCE: eMAR)
	0630 Transaction Rule PHARMCOR
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/16/22 0626: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%: 0

Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDOPF)

15 ML MUCOUS MEM BID@0800/2000

Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care

RX #: Q02233392

START/STOP	DESCRIPTION
10/27/22	0800 DONSRUP at 0751 GAVE: 15 ML
	Barcode Medication: Peridex Oral Rinse
	NDC/DIN: 0011620016 (SOURCE: eMAR)
	Expiration Date: 04/14/23
	0800 Transaction Rule PHARMCOR
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/15/22 0751: PER15 Amount Wasted: 0 ML; Drug Waste%: 0
	2000 CHOWRRI at 2026 GAVE: 15 ML
	Barcode Medication: Peridex Oral Rinse
	NDC/DIN: 0011620016 (SOURCE: eMAR)
	Expiration Date: 04/14/23
	2035 Transaction Rule PHARMCOR
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/15/22 2026: PER15 Amount Wasted: 0 ML; Drug Waste%: 0

Norvasc (Amlodipine 5 mg Tablet)

5 MG NG-TUBE DAILY

RX #: Q02242175

START/STOP	DESCRIPTION
11/01/22	1000 DONSRUP at 1015 GAVE: 5 MG
	Barcode Medication: Norvasc
	NDC/DIN: 0904637061 (SOURCE: eMAR)
	1016 Transaction Rule PHARMCOR
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/15/22 1015: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/15/22 to 0659 11/16/22 (continued)	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22	1000	DONSRRM at 1015 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6373964510 (SOURCE: eMAR)	
		1016 Transaction Rule PHABRCJOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/15/22 1015: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0	
		2100 CHOWPRI at 2055 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 6373964510 (SOURCE: eMAR)	
		2105 Transaction Rule PHABRCJOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/15/22 2055: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0	

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22	1000	DONSRRM at 1015 GAVE: 25 MG	
		Barcode Medication: Apresoline	
		NDC/DIN: 0904644161 (SOURCE: eMAR)	
		1016 Transaction Rule PHABRCJOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/15/22 1015: APR25 Amount Wasted: 0 MG; Drug Waste%: 0	
		2100 CHOWPRI at 2055 GAVE: 25 MG	
		Barcode Medication: Apresoline	
		NDC/DIN: 0904644161 (SOURCE: eMAR)	
		2105 Transaction Rule PHABRCJOB	
		MBDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/15/22 2055: APR25 Amount Wasted: 0 MG; Drug Waste%: 0	

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 USER: PHABRG0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num HB01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/15/22 to 0659 11/16/22 (continued)	

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
 1 GM NG-TUBE Three Times Daily  
 RX #: 002259013

11/10/22   1000 DONSRRM at 1015 GAVF: 1 GM			
	Barcode Medication: sodium Chloride		
	NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/08/23		
	1016 Transaction Rule PHABRG0B		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/15/22 1015: 8001 Amount Wasted: 0 GM; Drug Waste%: 0		
	1450 Transaction Rule PHABRG0B		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/15/22 1447: 8001 Amount Wasted: 0 GM; Drug Waste%: 0		
	1500 DONSRRM at 1447 GAVF: 1 GM		
	Barcode Medication: sodium Chloride		
	NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/08/23		
	2100 CHOWRFI at 2054 GAVF: 1 GM		
	Barcode Medication: sodium Chloride		
	NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/08/23		
	2105 Transaction Rule PHABRG0B		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/15/22 2054: 8001 Amount Wasted: 0 GM; Drug Waste%: 0		

**Iovenox (Enoxaparin 40 mg/0.4 ml Syringe)**

40 MG SUB-Q Q24H  
 RX #: 002261325

11/11/22   1450 Transaction Rule PHABRG0B			
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/15/22 1447: 10V40I Amount Wasted: 0 MG; Drug Waste%: 0		
	1515 DONSRRM at 1447 SITE: Abdomen GAVF: 40 MG		
	Barcode Medication: Iovenox		
	NDC/DIN: 6332356421 (SOURCE: eMAR)		
	Admin Queries		
	MAP Injection Site: 11		

**Novolin N (Insulin NPH 100 units/ml 10 ml Vial)**

25 UNITS SUB-Q Q12HR 06 18  
 Comments: HOLD IF THE TP WITHHOLDS OR BLOOD SUGAR

BELOW 100 MG/DL.  
 RX #: 002264448

11/13/22   1659 Discontinue AMARM			
	1659 Order Entry AMARM		
	2054 Acknowledged Order CHOWRFI		

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/15/22 to 0659 11/16/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 mL/HR IV .013H20M  
RX #: 002268252

11/15/22 1603 Edit or Verification ZPRA,AS  
1603 Edit or Verification ZPRA,AS  
1615 DONSRRU at 1639 GAVE: 75 mL/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed Time (minutes):  
0m Increase/Decrease: Started Infusion Rate: 75 Waste Amount: 0  
1639 Acknowledged Order DONSRRU  
1639 Infusion In Progress 1639 DONSRRU: Started, Dose Rate: / Rate: 75 mL/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 75  
Waste Amount: 0  
1650 Transaction Rule PHABRGT0B  
MEDI.WASTE - Medicare Waste  
Description: Debt Svc Dc/Tm 11/15/22 1639: NS Amount Wasted: 0 ML/ Drug Waste%: 0  
1700 Infusion In Progress 1700 DONSRRU: Running, Dose Rate: / Rate: 75 mL/HR  
Intake: 26.25 mlr, Cumulative Intake: 26.25 mlr, Container Volume: 973.75 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 26.25 Cumulative Intake (Rx):  
26.25 Container Volume: 973.75 Cumulative Elapsed Time (minutes): 21m Increase/Decrease:  
Running Infusion Intake: 26.25 Infusion Rate: 75 Waste Amount: 0  
1800 Infusion In Progress 1800 DONSRRU: Running, Dose Rate: / Rate: 75 mL/HR  
Intake: 75 mlr, Cumulative Intake: 101.25 mlr, Container Volume: 898.75 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 101.25 Cumulative Intake (Rx):  
101.25 Container Volume: 898.75 Cumulative Elapsed Time (minutes): 1h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1900 Infusion In Progress 1900 DONSRRU: Running, Dose Rate: / Rate: 75 mL/HR  
Intake: 75 mlr, Cumulative Intake: 176.25 mlr, Container Volume: 823.75 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 176.25 Cumulative Intake (Rx):  
176.25 Container Volume: 823.75 Cumulative Elapsed Time (minutes): 2h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
0535 CHOWERR at 0555 GAVE: 75 mL/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 995 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 13h 16m Increase/Decrease: started/Running  
Infusion Rate: 75 Waste Amount: 0

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/15/22 to 0659 11/16/22 (continued)	

0555 Infusion In Progress 0555 CHOWKRI: Infused, Dose Rate: / Rate: 75 mL/HR  
Intake: 818.75 mL, Cumulative Intake: 995 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 995 Cumulative Intake (Rx):  
995 Container Volume: 0 Cumulative Elapsed Time (minutes): 13h 16m Increase/Decrease:  
Infused Infusion Intake: 818.75 Infusion Rate: 75 Waste Amount: 5  
0555 Infusion In Progress 0555 CHOWKRI: Started/Running, Dose Rate: / Rate: 75 mL/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 995 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 13h 16m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
0600 Transaction Rule PHABRCIOB  
MDI.WASTE - Medication Waste  
Description: Debit Svc Dt/Tm 11/16/22 0555: NS Amount Wasted: 0 ML; Drug Waste%: 0

11/15/22 1659 Order Entry AMARM  
1709 Edit of Verification ZPHA.SUP  
1709 Edit of Verification ZPHA.SUP  
1747 Acknowledged Order DONSRUN  
1749 Transaction Rule PHABRCIOB  
MDI.WASTE - Medication Waste  
Description: Debit Svc Dt/Tm 11/15/22 1747: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
1800 DONSRUN at 1747 CO-STIGMER: HONGERA SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 198 MAR Injection Site: 11  
0600 CHOWKRI at 0614 CO-STIGMER: LANGSDA SITE: Left PosteroLateral Arm GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 205 MAR Injection Site: 13  
0630 Transaction Rule PHABRCIOB  
MDI.WASTE - Medication Waste  
Description: Debit Svc Dt/Tm 11/16/22 0614: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML

NOVOLIN N (Insulin NPH 100 units/mL 10 mL Vial)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHEIDS OR BLOOD SUGAR  
BELOW 100 MG/DL.  
RX #: Q02268330

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/15/22 to 0659 11/16/22 (continued)	STOP	STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	1049	DONSRTM at 1049 CO-SIGNER: HONGERA SITE: Abdomen GAVE: 4 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 230 MAR Injection site: 11
		1102 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/15/22 1049: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:
		0.040 ML
		1443 DONSRTM at 1443 CO-SIGNER: HONGERA SITE: Abdomen GAVE: 4 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 222 MAR Injection site: 11
		1450 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/15/22 1443: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:
		0.040 ML
		1747 DONSRTM at 1747 CO-SIGNER: HONGERA SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 198 MAR Injection site: 11
		1749 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/15/22 1747: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:
		0.020 ML
		2200 CHOWRPI at 2200 CO-SIGNER: MILLIPPY SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 198 MAR Injection site: 11
		2205 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/15/22 2200: IN\$ASP Amount Wasted: 0 UNITF, Amount Given:
		0.020 ML
		0250 CHOWRPI at 0250 CO-SIGNER: LANGIDA SITE: Abdomen GAVE: 2 UNIT
		Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 200 MAR Injection site: 11
		0259 Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste

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 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
0700 11/15/22 to 0659 11/16/22 (continued)				

11/02/22	1202 DONSRRM at 1202 GAVE: 650 MG			
	Barcode Medication: Tylenol liquid			
	NDC/DIN: 0121197121 (SOURCE: eMAR)			
	Admin Queries			
	MAR Pain Assessment Reason Not Required: 3			
	Pain Management Goal/Pain Tolerated as This Number or Less: 3			
	1218 Transaction Rule PHABRCIOB			
	MEDI.WASTE - Medicare Waste			
	Description: Debit svc Dc/Tm 11/15/22 1202: TYL650L Amount Wasted: 0 MG; Drug Waste%: 0			
	1247 Reassessment by DONSRRM at 1443			
	Reassessment: MAR Pain Assessment			
	MAR Pain Assessment Reason Not Required: 3			
	Pain Management Goal/Pain Tolerated as This Number or Less: 3			

**Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UDCUP)**  
 650 MG NG-TUBE Q6H/BRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 in 24 hours is  
 4gm.  
 RX #: Q02244670

ADMINISTRATION PERIOD:	START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
0700 11/16/22 to 0659 11/17/22				

11/02/22	110/27/22	0700 CHOWRI at 0626 GAVE: 112 MCG		
		Barcode Medication: Synthroid		
		NDC/DIN: 4229203901 (SOURCE: eMAR)		
		0631 Transaction Rule PHABRCIOB		
		MEDI.WASTE - Medicare Waste		
		Description: Debit svc Dc/Tm 11/17/22 0628: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%: 0		

**Synthroid (Letrothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: Q02233225

DATE: 12/03/22 @ 0013  
USER: PHABKG0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/16/22 to 0659 11/17/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL UDCUP)**  
15 ML NUOIOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 002233392

11/02/22	0800	FERRYS	at 0827 GAVE: 15 ML	
			Barcode Medication: Peridex Oral Rinse	
			NDC/DIN: 0011620016 (SOURCE: eMAR)	
			Expiration Date: 03/16/23	
			0831 Transaction Rule PHABKG0B	
			MEDI.WASTE - Medicare Waste	
			Description: Debit Svc Dc/Tm 11/16/22 0827: PER15: Amount Wasted: 0 ML; Drug Waste%: 0	
			2000 SAN CHR at 1957 GAVE: 15 ML	
			Barcode Medication: Peridex Oral Rinse	
			NDC/DIN: 0011620016 (SOURCE: eMAR)	
			Expiration Date: 03/23/23	
			2003 Transaction Rule PHABKG0B	
			MEDI.WASTE - Medicare Waste	
			Description: Debit Svc Dc/Tm 11/16/22 1957: PER15: Amount Wasted: 0 ML; Drug Waste%: 0	

**Norvasc (Ramoldipine 5 mg Tablet)**  
5 MG NG-TUBE DAVID  
RX #: 002242175

11/01/22	1000	FERRYS	at 1024 GAVE: 5 MG	
			Barcode Medication: Norvasc	
			NDC/DIN: 0904637061 (SOURCE: eMAR)	
			1033 Transaction Rule PHABKG0B	
			MEDI.WASTE - Medicare Waste	
			Description: Debit Svc Dc/Tm 11/16/22 1024: NORV5: Amount Wasted: 0 MG; Drug Waste%: 0	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22	1000	FERRYS	at 1024 GAVE: 20 MG	
			Barcode Medication: Pepcid	
			NDC/DIN: 6373964510 (SOURCE: eMAR)	
			1033 Transaction Rule PHABKG0B	
			MEDI.WASTE - Medicare Waste	
			Description: Debit Svc Dc/Tm 11/16/22 1024: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0	
			2034 Transaction Rule PHABKG0B	
			MEDI.WASTE - Medicare Waste	
			Description: Debit Svc Dc/Tm 11/16/22 2031: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0	
			2100 SAN CHR at 2031 GAVE: 20 MG	
			Barcode Medication: Pepcid	
			NDC/DIN: 6373964510 (SOURCE: eMAR)	



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Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/16/22 to 0659 11/17/22 (continued)	

**Apresoline (HYDRAZINE 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22 1000 FERRURS at 1024 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 625847311 (SOURCE: eMAR)  
1033 Transaction Rule PHARCTOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 1024: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
2034 Transaction Rule PHARCTOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 2031: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 SAM CHB at 2031 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 625847311 (SOURCE: eMAR)

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22 1000 FERRURS at 1032 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1048 Transaction Rule PHARCTOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 1032: SOD1 Amount Wasted: 0 GM; Drug Waste%: 0  
1500 FERRURS at 1513 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1517 Transaction Rule PHARCTOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 1513: SOD1 Amount Wasted: 0 GM; Drug Waste%: 0  
2034 Transaction Rule PHARCTOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 2031: SOD1 Amount Wasted: 0 GM; Drug Waste%: 0  
2100 SAM CHB at 2031 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/16/22 to 0659 11/17/22 (continued)	

Lovenox (Enoxaparin 40 mg/0.4 ml Syringe)  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22 1515 ERRORS at 1513 SITE: Abdomen GAVE: 40 MG  
Barcode Medication: Lovenox  
NDC/DIN: 6332356421 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 11  
1517 Transaction Rule PHABRCJOB  
MEDL.MASPE - Medicate Waste  
Description: Debit Svc Dt/Fm 11/16/22 1513: IOV40I Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/16/22 to 0659 11/17/22 (continued)		

Sodium Chloride 0.9% 1,000 ML  
 (0.9% Sodium Chloride 1,000 ml Bag)  
 75 MLS/HR IV .013H2DM  
 RX #: 002268252

11/15/22 1855 SAN CHR at 1915 GAVE: 75 MLS/HR  
 Barcode Medication: sodium Chloride 0.9%  
 NDC/DIN: 0338004904 (SOURCE: eMAR)

Admin Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1995 Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 26h 36m Increase/Decrease: started/Running  
 Infusion Rate: 75 Waste Amount: 0

1900 Infusion In Progress 1900 SAN CHR: Running, Dose Rate: / Rate: 75 MLS/HR  
 Intake: 981.25 mls, Cumulative Intake: 981.25 mls, Container Volume: 18.75 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 981.25 Cumulative Intake (Rx):  
 1976.25 Container Volume: 18.75 Cumulative Elapsed Time (minutes): 26h 21m  
 Increase/Decrease: Running Infusion Intake: 981.25 Infusion Rate: 75 Waste Amount: 0

1915 Infusion In Progress 1915 SAN CHR: Infused, Dose Rate: / Rate: 75 MLS/HR  
 Intake: 18.75 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
 1995 Container Volume: 0 Cumulative Elapsed Time (minutes): 26h 36m Increase/Decrease:  
 Infused Infusion Intake: 18.75 Infusion Rate: 75 Waste Amount: 0

1915 Infusion In Progress 1915 SAN CHR: started/Running, Dose Rate: / Rate: 75 MLS/HR  
 Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1995 Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 26h 36m Increase/Decrease: started/Running  
 Infusion Rate: 75 Waste Amount: 0

2000 Infusion In Progress 2000 SAN CHR: Running, Dose Rate: / Rate: 75 MLS/HR  
 Intake: 56.25 mls, Cumulative Intake: 56.25 mls, Container Volume: 943.75 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 56.25 Cumulative Intake (Rx):  
 2051.25 Container Volume: 943.75 Cumulative Elapsed Time (minutes): 27h 21m  
 Increase/Decrease: Running Infusion Intake: 56.25 Infusion Rate: 75 Waste Amount: 0

2003 Transaction Rule PHABRCIOB  
 MED.MASTR - Medicate Waste

Description: Dablt Svc Dc/Rm 11/16/22 1915: NS Amount Wasted: 0 ML, Drug Waste%: 0

2100 Infusion In Progress 2100 SAN CHR: Running, Dose Rate: / Rate: 75 MLS/HR  
 Intake: 75 mls, Cumulative Intake: 131.25 mls, Container Volume: 868.75 mls, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 131.25 Cumulative Intake (Rx):  
 2126.25 Container Volume: 868.75 Cumulative Elapsed Time (minutes): 28h 21m  
 Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0

2200 Infusion In Progress 2200 SAN CHR: Running, Dose Rate: / Rate: 75 MLS/HR  
 Intake: 75 mls, Cumulative Intake: 206.25 mls, Container Volume: 793.75 mls, Site:  
 Queries

DATE: 12/03/22 @ 0013  
USER: PHABGJOB

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num 0H0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/16/22 to 0659 11/17/22 (continued)		

2201.25 Container Volume: 793.75 Cumulative Elapsed Time (minutes): 29h 21m			Cumulative Dose: Not Applicable Cumulative Intake (bag): 206.25 Cumulative Intake (Rx):
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
2300 Infusion In Progress 2300 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 281.25 mls, Container Volume: 718.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 281.25 Cumulative Intake (Rx):			
2276.25 Container Volume: 718.75 Cumulative Elapsed Time (minutes): 30h 21m			
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
0000 Infusion In Progress 0000 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 356.25 mls, Container Volume: 643.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 356.25 Cumulative Intake (Rx):			
2351.25 Container Volume: 643.75 Cumulative Elapsed Time (minutes): 31h 21m			
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
0100 Infusion In Progress 0100 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 431.25 mls, Container Volume: 568.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 431.25 Cumulative Intake (Rx):			
2426.25 Container Volume: 568.75 Cumulative Elapsed Time (minutes): 32h 21m			
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
0200 Infusion In Progress 0200 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 506.25 mls, Container Volume: 493.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 506.25 Cumulative Intake (Rx):			
2501.25 Container Volume: 493.75 Cumulative Elapsed Time (minutes): 33h 21m			
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
0300 Infusion In Progress 0300 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 581.25 mls, Container Volume: 418.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 581.25 Cumulative Intake (Rx):			
2576.25 Container Volume: 418.75 Cumulative Elapsed Time (minutes): 34h 21m			
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
0400 Infusion In Progress 0400 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 656.25 mls, Container Volume: 343.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 656.25 Cumulative Intake (Rx):			
2651.25 Container Volume: 343.75 Cumulative Elapsed Time (minutes): 35h 21m			
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0			
0500 Infusion In Progress 0500 SAN CHR: Running, Dose Rate: / Rate: 75 mL8/HR			
Intake: 75 mls, Cumulative Intake: 731.25 mls, Container Volume: 268.75 mls, Site:			
Queries			
Cumulative Dose: Not Applicable Cumulative Intake (bag): 731.25 Cumulative Intake (Rx):			
2726.25 Container Volume: 268.75 Cumulative Elapsed Time (minutes): 36h 21m			

DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/16/22 to 0659 11/17/22 (continued)	

Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
0600 Infusion In Progress 0600 SAN CHE: Running/ Dose Rate: / Rate: 75 ML/HR  
Intake: 75 mlr, Cumulative Intake: 806.25 mlr, Container Volume: 193.75 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 806.25 Cumulative Intake (Rx):  
2801.25 Container Volume: 193.75 Cumulative Elapsed Time (minutes): 37h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml Vial)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PF WITHHEIDS OR BLOOD SUGAR  
BELOW 100 MG/DL.  
RX #: 002268390

11/15/22) 1748 Transaction Rule PHARCTOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 1743: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
1800 FERRORS at 1743 CO-SIGNER: HONGSRA SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 114 MAR Injection site: 11  
0600 SAN CHE at 0552 CO-SIGNER: MILDREY SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 132 MAR Injection site: 11  
Comments  
132  
0600 Transaction Rule PHARCTOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/17/22 0552: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML

NOVOLOC (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: GLUCOSCAN Coverage  
RX #: 002237641

11/02/21) 1024 FERRORS at 1024 CO-SIGNER: HONGSRA SITE: Abdomen GAVE: 2 UNIT  
Barcode Medication: NOVOLOC  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 163 MAR Injection site: 11  
1033 Transaction Rule PHARCTOR  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/16/22 1024: INSNAP Amount Wasted: 0 UNIT; Amount Given:  
0.020 ML

DATE: 12/03/22 @ 0013  
USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/17/22 to 0659 11/18/22	

**Synthroid (Letrothyroxine 112 mcg Tablet)**  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 0022333225

110/27/22| 0700 SAN CHB at 0628 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
1948 Transaction Rule PHARMCOR  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/18/22 0623: SYNT112 Amount Wasted: 0 MCG; Drug Waste%: 0

**Perider Oral Rinse (Chlorhexidine 0.12% 15 ml UDCCP)**  
15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 0022333392

110/27/22| 0800 RMT190A at 0757 GAVE: 15 ML  
Barcode Medication: Perider Oral Rinse  
NDC/DIN: 0011620016 (SOURCE: eMAR)  
Expiration Date: 04/14/23  
0800 Transaction Rule PHARMCOR  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/17/22 0757: PER15L Amount Wasted: 0 ML; Drug Waste%: 0  
1948 Transaction Rule PHARMCOR  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/17/22 1947: PER15L Amount Wasted: 0 ML; Drug Waste%: 0  
2000 SAN CHB at 1947 GAVE: 15 ML  
Barcode Medication: Perider Oral Rinse  
NDC/DIN: 0011620016 (SOURCE: eMAR)  
Expiration Date: 04/14/23

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG NG-TUBE DAILY  
RX #: 002242175

111/01/22| 0800 Transaction Rule PHARMCOR  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/17/22 0758: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 RMT190A at 0758 GAVE: 5 MG  
Barcode Medication: Norvasc  
NDC/DIN: 0904637061 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/17/22 to 0659 11/18/22 (continued)		

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22 0800 Transaction Rule PHABRC0B  
MED:WASTP - Med:care Waste  
Description: Debit svc Dr/Tm 11/17/22 0758: BR20 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 RMTI0A at 0758 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2100 SMI CHB at 2048 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2104 Transaction Rule PHABRC0B  
MED:WASTP - Med:care Waste  
Description: Debit svc Dr/Tm 11/17/22 2048: BR20 Amount Wasted: 0 MG; Drug Waste%: 0

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22 1000 Not Administered RMTI0A at 0758 shp 100  
2100 SMI CHB at 2048 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 090464161 (SOURCE: eMAR)  
2104 Transaction Rule PHABRC0B  
MED:WASTP - Med:care Waste  
Description: Debit svc Dr/Tm 11/17/22 2048: APR25 Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/17/22 to 0659 11/18/22 (continued)	

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
 1 GM NG-TUBE Three Times Daily  
 RX #: 002259013

11/10/22	0816 Transaction Rule PHABRC0B			
	MEDI.WASTE - Medicare Waste			
	Description: Debit Svc Dc/Tm 11/17/22 0759: SODI Amount Wasted: 0 GM; Drug Waste%: 0			
	1000 RMTIOX at 0759 GAVE: 1 GM			
	Barcode Medication: Sodium Chloride			
	NDC/DIN: 00223176001 (SOURCE: eMAR)			
	Expiration Date: 05/08/23			
	1431 Transaction Rule PHABRC0B			
	MEDI.WASTE - Medicare Waste			
	Description: Debit Svc Dc/Tm 11/17/22 1417: SODI Amount Wasted: 0 GM; Drug Waste%: 0			
	1500 RMTIOX at 1417 GAVE: 1 GM			
	Barcode Medication: sodium chloride			
	NDC/DIN: 00223176001 (SOURCE: eMAR)			
	Expiration Date: 05/08/23			
	2100 SAN CH8 at 2048 GAVE: 1 GM			
	Barcode Medication: sodium chloride			
	NDC/DIN: 00223176001 (SOURCE: eMAR)			
	Expiration Date: 05/08/23			
	2104 Transaction Rule PHABRC0B			
	MEDI.WASTE - Medicare Waste			
	Description: Debit Svc Dc/Tm 11/17/22 2048: SODI Amount Wasted: 0 GM; Drug Waste%: 0			

11/11/22	1431 Transaction Rule PHABRC0B			
	MEDI.WASTE - Medicare Waste			
	Description: Debit Svc Dc/Tm 11/17/22 1417: IOV40I Amount Wasted: 0 MG; Drug Waste%: 0			
	1515 RMTIOX at 1417 SITE: Abdomen GAVE: 40 MG			
	Barcode Medication: Iovenox			
	NDC/DIN: 6332356421 (SOURCE: eMAR)			
	Admin Queries			
	MAP Injection Site: 11			

**Iovenox (Enoxaparin 40 mg/0.4 ml Syringe)**  
 40 MG SUB-Q Q24H  
 RX #: 002261325



DATE: 12/03/22 @ 0013  
USER: PHARGT08

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/
0700 11/17/22 to 0659 11/18/22 (continued)	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .013H20M  
RX #: 002268252

11/15/22 0700 Infusion In Progress 0700 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 75 mls, Cumulative Intake: 881.25 mls, Container Volume: 118.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 881.25 Cumulative Intake (Rx):  
2876.25 Container Volume: 118.75 Cumulative Elapsed Time (minutes): 38h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
0800 Infusion In Progress 0800 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 0.75 mls, Cumulative Intake: 882 mls, Container Volume: 118 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 882 Cumulative Intake (Rx):  
2877 Container Volume: 118 Cumulative Elapsed Time (minutes): 39h 21m Increase/Decrease:  
Running Infusion Intake: 0.75 Infusion Rate: 75 Waste Amount: 0  
0815 RMTDOK at 1227 GAVS: 75 MLS/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 2910.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 43h 46m Increase/Decrease: started/Running  
Infusion Rate: 75 Waste Amount: 0  
0900 Infusion In Progress 0900 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 0 mls, Cumulative Intake: 882 mls, Container Volume: 118 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 882 Cumulative Intake (Rx):  
2877 Container Volume: 118 Cumulative Elapsed Time (minutes): 40h 21m Increase/Decrease:  
Running Infusion Intake: 0 Infusion Rate: 75 Waste Amount: 0  
1000 Infusion In Progress 1000 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 0 mls, Cumulative Intake: 882 mls, Container Volume: 118 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 882 Cumulative Intake (Rx):  
2877 Container Volume: 118 Cumulative Elapsed Time (minutes): 41h 21m Increase/Decrease:  
Running Infusion Intake: 0 Infusion Rate: 75 Waste Amount: 0  
1100 Infusion In Progress 1100 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 0 mls, Cumulative Intake: 882 mls, Container Volume: 118 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 882 Cumulative Intake (Rx):  
2877 Container Volume: 118 Cumulative Elapsed Time (minutes): 42h 21m Increase/Decrease:  
Running Infusion Intake: 0 Infusion Rate: 75 Waste Amount: 0  
1200 Infusion In Progress 1200 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 0 mls, Cumulative Intake: 882 mls, Container Volume: 118 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 882 Cumulative Intake (Rx):  
2877 Container Volume: 118 Cumulative Elapsed Time (minutes): 43h 21m Increase/Decrease:  
Running Infusion Intake: 0 Infusion Rate: 75 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/17/22 to 0659 11/18/22 (continued)	STAGE	

1227 Infusion In Progress 1227 RMTDOK: Infused, Dose Rate: 75 mL8/HR  
Intake: 33.75 mL8, Cumulative Intake: 915.75 mL8, Container Volume: 0 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 915.75 Cumulative Intake (Rx):  
2910.75 Container Volume: 0 Cumulative Elapsed Time (minutes): 43h 48m Increase/Decrease:  
Infused Infusion Intake: 33.75 Infusion Rate: 75 Waste Amount: 84.25  
1227 Infusion In Progress 1227 RMTDOK: Started/Running, Dose Rate: 75 mL8/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 2910.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 43h 48m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
1231 Transaction Rule PHABRC0B  
MEDI.WASTE - Medication Waste  
Description: Dablt svc DC/Tm 11/17/22 1227: NS Amount Wasted: 0 Ml; Drug Waste%: 0  
1300 Infusion In Progress 1300 RMTDOK: Running, Dose Rate: 75 mL8/HR  
Intake: 41.25 mL8, Cumulative Intake: 41.25 mL8, Container Volume: 958.75 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 41.25 Cumulative Intake (Rx):  
2952 Container Volume: 958.75 Cumulative Elapsed Time (minutes): 44h 21m  
Increase/Decrease: Running Infusion Intake: 41.25 Infusion Rate: 75 Waste Amount: 0  
1400 Infusion In Progress 1400 RMTDOK: Running, Dose Rate: 75 mL8/HR  
Intake: 75 mL8, Cumulative Intake: 116.25 mL8, Container Volume: 883.75 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 116.25 Cumulative Intake (Rx):  
3027 Container Volume: 883.75 Cumulative Elapsed Time (minutes): 45h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1500 Infusion In Progress 1500 RMTDOK: Running, Dose Rate: 75 mL8/HR  
Intake: 75 mL8, Cumulative Intake: 191.25 mL8, Container Volume: 808.75 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 191.25 Cumulative Intake (Rx):  
3102 Container Volume: 808.75 Cumulative Elapsed Time (minutes): 46h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1600 Infusion In Progress 1600 RMTDOK: Running, Dose Rate: 75 mL8/HR  
Intake: 75 mL8, Cumulative Intake: 266.25 mL8, Container Volume: 733.75 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 266.25 Cumulative Intake (Rx):  
3177 Container Volume: 733.75 Cumulative Elapsed Time (minutes): 47h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1900 Infusion In Progress 1900 SAN CHR: Running, Dose Rate: 75 mL8/HR  
Intake: 225 mL8, Cumulative Intake: 491.25 mL8, Container Volume: 508.75 mL8, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 491.25 Cumulative Intake (Rx):  
3402 Container Volume: 508.75 Cumulative Elapsed Time (minutes): 50h 21m

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:

0700 11/17/22 to 0659 11/18/22 (continued)

START/ STOP	
	Increase/Decrease: Running Infusion Intake: 225 Infusion Rate: 75 Waste Amount: 0
	2000 Infusion In Progress 2000 SAN CHE: Running/ Dose Rate: / Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 566.25 mls, Container Volume: 433.75 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 566.25 Cumulative Intake (Rx):
	3477 Container Volume: 433.75 Cumulative Elapsed Time (minutes): 51h 21m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	2100 Infusion In Progress 2100 SAN CHE: Running/ Dose Rate: / Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 641.25 mls, Container Volume: 358.75 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 641.25 Cumulative Intake (Rx):
	3552 Container Volume: 358.75 Cumulative Elapsed Time (minutes): 52h 21m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	2135 Not Administered SAN CHE at 2135 CBST
	2135 Infusion In Progress 2135 SAN CHE: Not Given, Dose Rate: / Rate:
	Intake: / Cumulative Intake: / Container Volume: / Site:
	2200 Infusion In Progress 2200 SAN CHE: Running/ Dose Rate: / Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 716.25 mls, Container Volume: 283.75 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 716.25 Cumulative Intake (Rx):
	3627 Container Volume: 283.75 Cumulative Elapsed Time (minutes): 53h 21m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	2300 Infusion In Progress 2300 SAN CHE: Running/ Dose Rate: / Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 791.25 mls, Container Volume: 208.75 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 791.25 Cumulative Intake (Rx):
	3702 Container Volume: 208.75 Cumulative Elapsed Time (minutes): 54h 21m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	0000 Infusion In Progress 0000 SAN CHE: Running/ Dose Rate: / Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 866.25 mls, Container Volume: 133.75 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 866.25 Cumulative Intake (Rx):
	3777 Container Volume: 133.75 Cumulative Elapsed Time (minutes): 55h 21m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	0100 Infusion In Progress 0100 SAN CHE: Running/ Dose Rate: / Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 941.25 mls, Container Volume: 58.75 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 941.25 Cumulative Intake (Rx):
	3852 Container Volume: 58.75 Cumulative Elapsed Time (minutes): 56h 21m Increase/Decrease:
	Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	0147 Infusion In Progress 0147 SAN CHE: Infused, Dose Rate: / Rate: 75 MLS/HR
	Intake: 58.75 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/17/22 to 0659 11/18/22 (continued)	

3910.75 Container Volume: 0	Cumulative Elapsed Time (minutes): 57h 8m	Increase/Decrease:	
Infused Infusion Intake: 58.75	Infusion Rate: 75	Waste Amount: 0	
0147 Infusion In Progress 0147 SAN CHE: Started/Running, Dose Rate: / Rate: 75	ML8/HR		
Intake: / Cumulative Intake: / Container Volume: 1000	mls, Site:		
Queries			
Cumulative Dose: Not Applicable	Cumulative Intake (Rx): 3910.75	Container Volume: 1000	
Cumulative Elapsed Time (minutes): 57h 8m	Increase/Decrease: Started/Running		
Infusion Rate: 75	Waste Amount: 0		
0159 Transaction Rule PHABRC08			
MBDI.WASTE - Medicare Waste			
0200 Description: Debit Svc Dc/Tm 11/18/22 0147: NS Amount Wasted: 0	ML Drug Waste%: 0		
Infusion In Progress 0200 SAN CHE: Running, Dose Rate: / Rate: 75	ML8/HR		
Intake: 16.25	mls, Cumulative Intake: 16.25	mls, Container Volume: 983.75	mls, Site:
Queries			
Cumulative Dose: Not Applicable	Cumulative Intake (Rx): 16.25	Cumulative Intake (Rx):	
3927 Container Volume: 983.75	Cumulative Elapsed Time (minutes): 57h 21m		
Increase/Decrease: Running	Infusion Intake: 16.25	Infusion Rate: 75	Waste Amount: 0
0300 Infusion In Progress 0300 SAN CHE: Running, Dose Rate: / Rate: 75	ML8/HR		
Intake: 75	mls, Cumulative Intake: 91.25	mls, Container Volume: 908.75	mls, Site:
Queries			
Cumulative Dose: Not Applicable	Cumulative Intake (Rx): 91.25	Cumulative Intake (Rx):	
4002 Container Volume: 908.75	Cumulative Elapsed Time (minutes): 58h 21m		
Increase/Decrease: Running	Infusion Intake: 75	Infusion Rate: 75	Waste Amount: 0
0400 Infusion In Progress 0400 SAN CHE: Running, Dose Rate: / Rate: 75	ML8/HR		
Intake: 75	mls, Cumulative Intake: 166.25	mls, Container Volume: 833.75	mls, Site:
Queries			
Cumulative Dose: Not Applicable	Cumulative Intake (Rx): 166.25	Cumulative Intake (Rx):	
4077 Container Volume: 833.75	Cumulative Elapsed Time (minutes): 59h 21m		
Increase/Decrease: Running	Infusion Intake: 75	Infusion Rate: 75	Waste Amount: 0
0500 Infusion In Progress 0500 SAN CHE: Running, Dose Rate: / Rate: 75	ML8/HR		
Intake: 75	mls, Cumulative Intake: 241.25	mls, Container Volume: 758.75	mls, Site:
Queries			
Cumulative Dose: Not Applicable	Cumulative Intake (Rx): 241.25	Cumulative Intake (Rx):	
4152 Container Volume: 758.75	Cumulative Elapsed Time (minutes): 60h 21m		
Increase/Decrease: Running	Infusion Intake: 75	Infusion Rate: 75	Waste Amount: 0
0600 Infusion In Progress 0600 SAN CHE: Running, Dose Rate: / Rate: 75	ML8/HR		
Intake: 75	mls, Cumulative Intake: 316.25	mls, Container Volume: 683.75	mls, Site:
Queries			
Cumulative Dose: Not Applicable	Cumulative Intake (Rx): 316.25	Cumulative Intake (Rx):	
4227 Container Volume: 683.75	Cumulative Elapsed Time (minutes): 61h 21m		
Increase/Decrease: Running	Infusion Intake: 75	Infusion Rate: 75	Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/17/22 to 0659 11/18/22 (continued)

NOVOLIN N (Insulin NPH 100 units/mL) 10 mL VIAL)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHELD OR BLOOD SUGAR  
BELOW 100 MG/DL.  
RX #: Q02268330

START/STOP	DESCRIPTION	AMOUNT	WASTED	AMOUNT
11/15/22	1748 Transaction Rule PHABRCJOB			
	MEDI.WASTE - Medicare Waste			
	Description: Debit svc Dr/Tm 11/17/22 1738: INSNPH Amount Wasted: 0 UNITS; Amount			
	Given: 0.300 ML			
	1800 RATIOA at 1738 CO-SIGNER: RANOGES SITE: Abdomen GAVE: 30 UNITS			
	Barcode Medication: NOVOLIN N			
	NDC/DIN: 0169183411 (SOURCE: eMAR)			
	Admin Queries			
	MAV Injection Site: 11			
	0545 Transaction Rule PHABRCJOB			
	MEDI.WASTE - Medicare Waste			
	Description: Debit svc Dr/Tm 11/18/22 0537: INSNPH Amount Wasted: 0 UNITS; Amount			
	Given: 0.300 ML			
	0600 SAV CHR at 0537 CO-SIGNER: LAMPHBN SITE: Abdomen GAVE: 30 UNITS			
	Barcode Medication: NOVOLIN N			
	NDC/DIN: 0169183411 (SOURCE: eMAR)			
	Admin Queries			
	Finger Stick Blood Glucose: 166 MAR Injection site: 11			
	Comments			
	166			

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 USER: PHABRCJOB

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 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	START/STOP
0700 11/17/22 to 0659 11/18/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
 See Dose Ins. SUB-Q Qd/PRN  
 PRN Reason: Glucosecan Coverage  
 RX #: 002237641

110/29/22	1118 RAVIOLA at 1118 CO-SIGNER: RANOCES SITE: Abdomen GAVE: 2 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 156 MAR Injection site: 11	
	1131 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/17/22 1118: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML	
	0136 SAN CHB at 0136 CO-SIGNER: LAMPHEN SITE: Abdomen GAVE: 2 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 158 MAR Injection site: 11	
	Comments	
	156	
	0144 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/18/22 0136: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML	
	0534 SAN CHB at 0534 CO-SIGNER: LAMPHEN SITE: Abdomen GAVE: 2 UNIT	
	Barcode Medication: Novolog	
	NDC/DIN: 0169750111 (SOURCE: eMAR)	
	Admin Queries	
	Finger Stick Blood Glucose: 166 MAR Injection site: 11	
	Comments	
	166	
	0545 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/18/22 0534: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML	

ADMINISTRATION PERIOD:	START/STOP	START/STOP
0700 11/18/22 to 0659 11/19/22		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/18/22 to 0659 11/19/22 (continued)	

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 0022333225

110/27/221	0700 SAN CHB at 0623 GAVE: 112 MCG		
	Barcode Medication: Synthroid		
	NDC/DIN: 4229203901 (SOURCE: eMAR)		
	0659 Transaction Rule PHARMCIOB		
	MBDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/19/22 0651: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%: 0		

**Perider Oral Rinse (Chlorhexidine 0.12% 15 ml UDOP)**

15 ML MUCOUS MEM BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.  
 RX #: 0022333392

110/27/221	0800 TONGVAL at 1016 GAVE: 15 ML		
	Barcode Medication: Perider Oral Rinse		
	NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 04/14/23		
	1033 Transaction Rule PHARMCIOB		
	MBDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/18/22 1016: PER15L Amount Wasted: 0 ML; Drug Waste%: 0		
	2000 CHOWHRT at 2021 GAVE: 15 ML		
	Barcode Medication: Perider Oral Rinse		
	NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 04/28/23		
	2034 Transaction Rule PHARMCIOB		
	MBDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/18/22 2021: PER15L Amount Wasted: 0 ML; Drug Waste%: 0		

**Norvasc (Amlodipine 5 mg Tablet)**

5 MG NG-TUBE DAILY  
 RX #: 0022424175

111/01/221	1000 TONGVAL at 1017 GAVE: 5 MG		
	Barcode Medication: Norvasc		
	NDC/DIN: 0904637061 (SOURCE: eMAR)		
	1033 Transaction Rule PHARMCIOB		
	MBDI.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/18/22 1017: NORV5L Amount Wasted: 0 MG; Drug Waste%: 0		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/18/22 to 0659 11/19/22 (continued)		

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22	1000	TONGVAL at 1017 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
	1033	Transaction Rule PHABRCJOB		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/18/22 1017: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0		
	2100	CHOWRRI at 2054 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
	2104	Transaction Rule PHABRCJOB		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/18/22 2054: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0		

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22	1000	TONGVAL at 1017 GAVE: 25 MG		
		Barcode Medication: Apresoline		
		NDC/DIN: 0904644161 (SOURCE: eMAR)		
	1033	Transaction Rule PHABRCJOB		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/18/22 1017: APR25 Amount Wasted: 0 MG; Drug Waste%: 0		
	2100	Not Administered CHOWRRI at 2053 SBP <130		



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/18/22 to 0659 11/19/22 (continued)		

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
 1 GM NG-TUBE Three Times Daily  
 RX #: 002259013

11/10/22	1000	TONGVAL at 1017 GAVE: 1 GM		
		Barcode Medication: Sodium Chloride		
		NDC/DIN: 00223176001 (SOURCE: eMAR)		
		Expiration Date: 05/08/23		
	1033	Transaction Rule PHABRCJOB		
		MBDI.WASTE - Medicare Waste		
	1500	RMTIOX at 1524 GAVE: 1 GM		
		Description: Debit Svc Dc/Tm 11/18/22 1017: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
		Barcode Medication: Sodium Chloride		
		NDC/DIN: 00223176001 (SOURCE: eMAR)		
		Expiration Date: 05/08/23		
	1533	Transaction Rule PHABRCJOB		
		MBDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/18/22 1524: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	2100	CHOWPRI at 2053 GAVE: 1 GM		
		Barcode Medication: Sodium Chloride		
		NDC/DIN: 00223176001 (SOURCE: eMAR)		
		Expiration Date: 05/08/23		
	2104	Transaction Rule PHABRCJOB		
		MBDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/18/22 2053: SODI Amount Wasted: 0 GM; Drug Waste%: 0		

**Iovenox (Enoxaparin 40 mg/0.4 ml Syringe)**  
 40 MG SUB-Q Q24H  
 RX #: 002261325

11/11/22	1515	RMTIOX at 1524 SITE: Abdomen GAVE: 40 MG		
		Barcode Medication: Iovenox		
		NDC/DIN: 6332356421 (SOURCE: eMAR)		
		Admin Queries		
		MAR Injection Site: 11		
	1533	Transaction Rule PHABRCJOB		
		MBDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/18/22 1524: IOVA01 Amount Wasted: 0 MG; Drug Waste%: 0		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/18/22 to 0659 11/19/22 (continued)	STOP	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .013H20M  
RX #: 002268252

11/15/22 0700 Infusion In Progress 0700 TONGHAL: Running, Dose Rate: 75 MLS/HR  
Intake: 75 mls, Cumulative Intake: 391.25 mls, Container Volume: 608.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 391.25 Cumulative Intake (Rx):  
4302 Container Volume: 608.75 Cumulative Elapsed Time (minutes): 62h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
0800 Infusion In Progress 0800 TONGHAL: Running, Dose Rate: 75 MSL/HR  
Intake: 75 mls, Cumulative Intake: 466.25 mls, Container Volume: 533.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 466.25 Cumulative Intake (Rx):  
4377 Container Volume: 533.75 Cumulative Elapsed Time (minutes): 63h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
0900 Infusion In Progress 0900 TONGHAL: Running, Dose Rate: 75 MSL/HR  
Intake: 75 mls, Cumulative Intake: 541.25 mls, Container Volume: 458.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 541.25 Cumulative Intake (Rx):  
4452 Container Volume: 458.75 Cumulative Elapsed Time (minutes): 64h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1000 Infusion In Progress 1000 TONGHAL: Running, Dose Rate: 75 MSL/HR  
Intake: 75 mls, Cumulative Intake: 616.25 mls, Container Volume: 383.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 616.25 Cumulative Intake (Rx):  
4527 Container Volume: 383.75 Cumulative Elapsed Time (minutes): 65h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1055 SAN CHR at 0147 GAVE: 75 MSL/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 3910.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 57h 0m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
1100 Infusion In Progress 1100 TONGHAL: Running, Dose Rate: 75 MSL/HR  
Intake: 75 mls, Cumulative Intake: 691.25 mls, Container Volume: 308.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 691.25 Cumulative Intake (Rx):  
4602 Container Volume: 308.75 Cumulative Elapsed Time (minutes): 66h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1200 Infusion In Progress 1200 RMTTOK: Running, Dose Rate: 75 MSL/HR  
Intake: 75 mls, Cumulative Intake: 766.25 mls, Container Volume: 233.75 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 766.25 Cumulative Intake (Rx):  
4677 Container Volume: 233.75 Cumulative Elapsed Time (minutes): 67h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/18/22 to 0659 11/19/22 (continued)		

1300 Infusion In Progress 1300 RAMITOK; Dose Rate: , Rate: 75 mL8/HR  
Intake: 75 mL; Cumulative Intake: 841.25 mL; Container Volume: 158.75 mL; Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 841.25 Cumulative Intake (Rx):  
4752 Container Volume: 158.75 Cumulative Elapsed Time (minutes): 68h 21m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1400 Infusion In Progress 1400 RAMITOK; Dose Rate: , Rate: 75 mL8/HR  
Intake: 75 mL; Cumulative Intake: 916.25 mL; Container Volume: 83.75 mL; Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 916.25 Cumulative Intake (Rx):  
4827 Container Volume: 83.75 Cumulative Elapsed Time (minutes): 69h 21m Increase/Decrease:  
Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1500 Infusion In Progress 1500 RAMITOK; Dose Rate: , Rate: 75 mL8/HR  
Intake: 75 mL; Cumulative Intake: 991.25 mL; Container Volume: 6.75 mL; Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 991.25 Cumulative Intake (Rx):  
4902 Container Volume: 6.75 Cumulative Elapsed Time (minutes): 70h 21m Increase/Decrease:  
Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1508 Infusion In Progress 1508 RAMITOK; Infused; Dose Rate: , Rate: 75 mL8/HR  
Intake: 8.75 mL; Cumulative Intake: 1000 mL; Container Volume: 0 mL; Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
4910.75 Container Volume: 0 Cumulative Elapsed Time (minutes): 70h 29m Increase/Decrease:  
Infused Infusion Intake: 8.75 Infusion Rate: 75 Waste Amount: 0  
Edt Infusion 1508 RAMITOK Action - From: Infused To: Infused  
Intake - From: 308.75 mL To: 8.75 mL  
Old Queries:  
Infusion Intake: 308.75  
New Queries:  
Infusion Intake: 8.75  
1525 Infusion In Progress 1525 RAMITOK; Started/Running; Dose Rate: , Rate: 75 mL8/HR  
Intake: , Cumulative Intake: , Container Volume: 1000 mL; Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 4910.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 70h 29m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
1533 Transaction Rule PHAPRCOR  
MED1.WASRE - Medicate Waste  
Description: Dablt Svc Dc/Rm 11/18/22 1525; NS Amount Wasted: 0 ML; Drug Waste%: 0  
1600 Infusion In Progress 1600 RAMITOK; Running; Dose Rate: , Rate: 75 mL8/HR  
Intake: 43.75 mL; Cumulative Intake: 43.75 mL; Container Volume: 956.25 mL; Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 43.75 Cumulative Intake (Rx):  
4954.5 Container Volume: 956.25 Cumulative Elapsed Time (minutes): 71h 4m

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/18/22 to 0659 11/19/22 (continued)		

Increase/Decrease:	Running Infusion Intake:	43.75	Infusion Rate:	75	Waste Amount:	0
1700	Infusion In Progress 1700 RAMITDQ:	Running/	Dose Rate:	75	ML/HR	
	Intake:	75	mls,	Cumulative Intake:	118.75	mls, Container Volume: 881.25
	mls,	Container Volume:	881.25	mls,	Site:	
	Queries					
	Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	118.75	Cumulative Intake (Rx):	
	5029.5	Container Volume:	881.25	Cumulative Elapsed Time (minutes):	34	0h 4m
	Increase/Decrease:	Running Infusion Intake:	75	Infusion Rate:	75	Waste Amount:
	1800	Infusion In Progress 1800 RAMITDQ:	Running/	Dose Rate:	75	ML/HR
		Intake:	75	mls,	Cumulative Intake:	193.75
		mls,	Container Volume:	806.25	mls,	Site:
		Queries				
		Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	193.75	Cumulative Intake (Rx):
		5104.5	Container Volume:	806.25	Cumulative Elapsed Time (minutes):	34
		Increase/Decrease:	Running Infusion Intake:	75	Infusion Rate:	75
		0015	RAMITDQ at 11/18/22 - 1525	QAVE:	75	ML/HR
			Barcode Medication:	Sodium Chloride	0.9%	
			NDC/DIN:	0338004904	(SOURCE: eMAR)	
			Admin Queries			
			Cumulative Dose:	Not Applicable	Cumulative Intake (Rx):	4910.75
			Cumulative Elapsed Time (minutes):	70h 29m	Increase/Decrease:	Started/Running
			Infusion Rate:	75	Waste Amount:	0

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml vial)  
 30 UNITS SUB-Q Q12HR 06 18  
 Comments: HOLD IF THE TP WITHHELD OR BLOOD SUGAR  
 BELOW 100 MG/DL.  
 RX #: Q02268330

11/15/22	1800	RAMITDQ at 1804	CO-SIGNER:	RAMOGES	SITE:	Abdomen	GAVE:	30	UNITS
			Barcode Medication:	Novolin N					
			NDC/DIN:	0169183411	(SOURCE: eMAR)				
			Admin Queries						
			Finger Stick Blood Glucose:	106	MAR	Injection site:	11		
			1819	Transaction Rule PHABRCJOB					
				MEDI.WASTE - Medicate Waste					
				Description:	Dabit Svc Dc/Tm	11/18/22	1804:	INSNPH	Amount Wasted: 0
				Given:	0.300	ML			Amount
				0600	CHOWRI at 0618	CO-SIGNER:	LOPEZMI	SITE:	Abdomen
				Barcode Medication:	Novolin N				
				NDC/DIN:	0169183411	(SOURCE: eMAR)			
				Admin Queries					
				Finger Stick Blood Glucose:	142	MAR	Injection site:	11	
				0629	Transaction Rule PHABRCJOB				
				MEDI.WASTE - Medicate Waste					
				Description:	Dabit Svc Dc/Tm	11/19/22	0618:	INSNPH	Amount Wasted: 0
				Given:	0.300	ML			Amount

DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/18/22 to 0659 11/19/22 (continued)	STOP	

Zofran (Ondansetron 4 mg/2 ml Vial)  
4 MG IV-Push Q6H/PRN  
PRN Reason: Nausea And Vomiting  
RX #: 002217854

110/18/22 2357 Discontinue RENEW STOP  
110/18/22 0151 Acknowledged Order CHOWKRI

Dulcolax (Bisacodyl 10 mg supp)  
10 MG PR DAILY/PRN  
PRN Reason: Constipation  
RX #: 002217856

110/18/22 2358 Discontinue RENEW STOP  
110/18/22 0151 Acknowledged Order CHOWKRI

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucoscan Coverage  
RX #: 002237641

110/29/22 1018 TONGKAL at 1018 CO-STEMER: RAMOBS SITE: Abdomen GAVE: 2 UNIT  
Barcode Medication: Novolog  
NDC/DIN: 0169750111 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 166 MAR Injection site: 11  
1033 Transaction Rule PHARMCIOB  
MED1.WASTE - Medicare Waste  
Description: Debit svc DR/Tm 11/18/22 1018: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML

ADMINISTRATION PERIOD:	START/STOP	
0700 11/19/22 to 0659 11/20/22	STOP	

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG BIC-TUBE DAILY before breakfast  
RX #: 002233225

110/27/22 0700 CHOWKRI at 0651 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0648 Transaction Rule PHARMCIOB  
MED1.WASTE - Medicare Waste  
Description: Debit svc DR/Tm 11/20/22 0637: SYNTH112 Amount Wasted: 0 MCG; Dug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/19/22 to 0659 11/20/22 (continued)		

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL DDCUP)**  
 15 ML NUOUS MEB BID@0800,2000  
 Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
 Protocol: Protocol continues until patient off ventilator.  
 RX #: Q02233392

11/02/22	0759	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/19/22 0752: PER15: Amount Wasted: 0 ML; Drug Waste%: 0		
		0800 DONSNUM at 0752 GAVE: 15 ML		
		Barcode Medication: Peridex Oral Rinse		
		NDC/DIN: 0011620016 (SOURCE: eMAR)		
		Expiration Date: 04/28/23		
		2000 CHOWPRI at 2024 GAVE: 15 ML		
		Barcode Medication: Peridex Oral Rinse		
		NDC/DIN: 0011620016 (SOURCE: eMAR)		
		Expiration Date: 04/28/23		
		2030 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/19/22 2024: PER15: Amount Wasted: 0 ML; Drug Waste%: 0		

**Norvasc (Ramoldipine 5 mg Tablet)**  
 5 MG NG-TUBE DAILY  
 RX #: Q02242175

11/01/22	1000	DONSNUM at 0954 GAVE: 5 MG		
		Barcode Medication: Norvasc		
		NDC/DIN: 0904637061 (SOURCE: eMAR)		
		1000 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/19/22 0954: NORV5: Amount Wasted: 0 MG; Drug Waste%: 0		

**Pepcid (Famotidine 20 mg Tablet)**  
 20 MG NG-TUBE TWICE A DAY  
 Comments: IV TO NG PER PROTOCOL  
 RX #: Q02251619

11/06/22	1000	DONSNUM at 0954 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
		1000 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/19/22 0954: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0		
		2100 CHOWPRI at 2103 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
		2116 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/19/22 2103: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0		

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/19/22 to 0659 11/20/22 (continued)	

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22 1000 DONSRRM at 0954 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)  
1000 Transaction Rule PHABRC0B  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/19/22 0954: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 CHOWRPT at 2103 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)  
2116 Transaction Rule PHABRC0B  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/19/22 2103: APR25 Amount Wasted: 0 MG; Drug Waste%: 0

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22 1000 DONSRRM at 0954 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1000 Transaction Rule PHABRC0B  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/19/22 0954: SOD1 Amount Wasted: 0 GM; Drug Waste%: 0  
1500 DONSRRM at 1542 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1544 Transaction Rule PHABRC0B  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/19/22 1542: SOD1 Amount Wasted: 0 GM; Drug Waste%: 0  
2100 CHOWRPT at 2103 GAVE: 1 GM  
Barcode Medication: sodium chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
2116 Transaction Rule PHABRC0B  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/19/22 2103: SOD1 Amount Wasted: 0 GM; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/19/22 to 0659 11/20/22 (continued)	STOP

Lovenox (Enoxaparin 40 mg/0.4 ml Syringe)  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22 1515 DONSRRU at 1542 SITE: Abdomen GAVE: 40 MG  
Barcode Medication: Lovenox  
NDC/DIN: 6332356421 (SOURCE: eMAR)  
Admin Queries  
MAR Injection Site: 11  
1544 Transaction Rule PHABRCJOB  
MEDL.MASTR - Medicate Waste  
Description: Dablt Svc Dc/Tm 11/19/22 1542: LOV40I Amount Wasted: 0 MG; Drug Waste%: 0

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .Q13R20M  
RX #: 002268252

11/15/22 0700 Infusion In Progress 0700 DONSRRU: Infused; Dose Rate: / Rate: 75 MLS/HR  
Intake: 806.25 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Cumulative Intake (Rx):  
Increase/Decrease: Infused Infusion Elapsed Time (minutes): 3d 14h 4m  
1335 Not Administered DONSRRU at 1343 CBST  
1343 Infusion In Progress 1343 DONSRRU: Not Given; Dose Rate: / Rate:  
Intake: / Cumulative Intake: / Container Volume: / Site:  
1902 Infusion In Progress 1902 DONSRRU: Started/Running; Dose Rate: / Rate: 75 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 5910.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 3d 14h 4m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
1915 Transaction Rule PHABRCJOB  
MEDL.MASTR - Medicate Waste  
Description: Dablt Svc Dc/Tm 11/19/22 1902: NS Amount Wasted: 0 ML; Drug Waste%: 0  
0255 DONSRRU at 11/19/22 - 1902 GAVE: 75 MLS/HR  
Barcode Medication: Sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 5910.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 3d 14h 4m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0



DATE: 12/03/22 @ 0013  
USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/19/22 to 0659 11/20/22 (continued)	11/19/22 0904

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.  
RX #: Q02268330

11/15/22 0904 Discontinue AMARM  
0904 Order Entry AMARM  
1107 Acknowledged Order DONSRUR

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
22 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.  
RX #: Q02275817

11/19/22 0904 Order Entry AMARM  
0920 Edit of Verification ZPHA,AMD  
0920 Edit of Verification ZPHA,AMD  
1107 Acknowledged Order DONSRUR  
1800 DONSRUR at 1809 CO-STONER; HONGSRA SITE; Abdomen GAVE: 22 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger stick Blood Glucose: 137 MAR Injection site: 11  
1816 Transaction Rule PHARMCIOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/19/22 1809; INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.220 ML  
0600 CHOMKRI at 0625 CO-STONER; BAIBRI SITE; Abdomen GAVE: 22 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger stick Blood Glucose: 264 MAR Injection site: 11  
0632 Transaction Rule PHARMCIOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/20/22 0625; INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.220 ML

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/19/22 to 0659 11/20/22 (continued)		

**Novolog (Insulin Aspart 100 units/ml 10ml Vial)**  
 See Dose Ins. SUB-Q Qd/PRN  
 PRN Reason: Glucosecan Coverage  
 RX #: 002237641

110/29/22	2218	CHOWRI at 2218 CO-SIGNER: BAIERI	SITE: Left PosteroLateral Arm	GAVE: 2 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	162 MAR	Injection site: 13
		2231 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/19/22 2218:	INSASP Amount Wasted: 0 UNIT	Amount Given:
		0.020 ML		
		0202 CHOWRI at 0202 CO-SIGNER: BAIERI	SITE: Abdomen	GAVE: 2 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	200 MAR	Injection site: 11
		0215 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/20/22 0202:	INSASP Amount Wasted: 0 UNIT	Amount Given:
		0.020 ML		
		0624 CHOWRI at 0624 CO-SIGNER: BAIERI	SITE: Abdomen	GAVE: 6 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:	264 MAR	Injection site: 11
		0632 Transaction Rule PHABRC08		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dc/Tm 11/20/22 0624:	INSASP Amount Wasted: 0 UNIT	Amount Given:
		0.060 ML		

ADMINISTRATION PERIOD:	START/STOP	
0700 11/20/22 to 0659 11/21/22		

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG NG-TUBE DAILY before breakfast  
 RX #: 002233225

110/27/22	0700	CHOWRI at 0637	GAVE: 112 MCG
		Barcode Medication: Synthroid	
		NDC/DIN: 4229203901 (SOURCE: eMAR)	

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 This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/28/22 to 0659 11/21/22 (continued)		

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL DDCUP)**  
15 ML NUOUCS MEB BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: Q02233392

DATE	TIME	DESCRIPTION	AMOUNT	WASTED
11/27/22	0800	RAMIYOK at 0811 GAVE: 15 ML		
		Barcode Medication: Peridex Oral Rinse		
		NDC/DIN: 0011620016 (SOURCE: eMAR)		
		Expiration Date: 03/16/23		
		0818 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/20/22 0811: PER15: Amount Wasted: 0 ML; Drug Waste%: 0		
		2000 CHOWKRI at 2020 GAVE: 15 ML		
		Barcode Medication: Peridex Oral Rinse		
		NDC/DIN: 0011620016 (SOURCE: eMAR)		
		Expiration Date: 03/16/23		
		2022 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/20/22 2020: PER15: Amount Wasted: 0 ML; Drug Waste%: 0		

**Norvasc (Ramoldipine 5 mg Tablet)**  
5 MG NG-TUBE DAVID  
RX #: Q02242175

DATE	TIME	DESCRIPTION	AMOUNT	WASTED
11/01/22	0818	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/20/22 0811: NORV5: Amount Wasted: 0 MG; Drug Waste%: 0		
		1000 RAMIYOK at 0811 GAVE: 5 MG		
		Barcode Medication: Norvasc		
		NDC/DIN: 0904637061 (SOURCE: eMAR)		

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: Q02251619

DATE	TIME	DESCRIPTION	AMOUNT	WASTED
11/06/22	0818	Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/20/22 0811: PEP20: Amount Wasted: 0 MG; Drug Waste%: 0		
		1000 RAMIYOK at 0811 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
		2036 Transaction Rule PHABRC0B		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/20/22 2034: PEP20: Amount Wasted: 0 MG; Drug Waste%: 0		
		2100 CHOWKRI at 2034 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		

DATE: 12/03/22 @ 0013  
USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/28/22 to 0659 11/21/22 (continued)	STOP

**Aprisoline (HYDRAIZINE 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22	1000	Not Administered RMTIOX at 0811 SBP119/57			
		2036 Transaction Rule PHARCTOR			
		MDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/20/22 2034: APR25 Amount Wasted: 0 MG; Drug Waste%: 0			
		2100 CHOMRI at 2034 GAVE: 25 MG			
		Description: Debit Svc Dc/Tm 11/20/22 2034: APR25 Amount Wasted: 0 MG; Drug Waste%: 0			
		Barcode Medication: Aprisoline			
		NDC/DIN: 0904644161 (SOURCE: eMAR)			

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22	0818	Transaction Rule PHARCTOR			
		MDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/20/22 0813: SODI Amount Wasted: 0 GM; Drug Waste%: 0			
		1000 RMTIOX at 0813 GAVE: 1 GM			
		Barcode Medication: Sodium Chloride			
		NDC/DIN: 0022317601 (SOURCE: eMAR)			
		Expiration Date: 05/08/23			
		1404 Transaction Rule PHARCTOR			
		MDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/20/22 1354: SODI Amount Wasted: 0 GM; Drug Waste%: 0			
		1500 RMTIOX at 1354 GAVE: 1 GM			
		Barcode Medication: Sodium Chloride			
		NDC/DIN: 0022317601 (SOURCE: eMAR)			
		Expiration Date: 05/08/23			
		2036 Transaction Rule PHARCTOR			
		MDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/20/22 2034: SODI Amount Wasted: 0 GM; Drug Waste%: 0			
		2100 CHOMRI at 2034 GAVE: 1 GM			
		Barcode Medication: Sodium Chloride			
		NDC/DIN: 0022317601 (SOURCE: eMAR)			
		Expiration Date: 05/08/23			

**Lovenox (Enoxaparin 40 mg/0.4 ml Syringe)**  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22	1404	Transaction Rule PHARCTOR			
		MDI.WASTE - Medicare Waste			
		Description: Debit Svc Dc/Tm 11/20/22 1354: IOV40I Amount Wasted: 0 MG; Drug Waste%: 0			
		1515 RMTIOX at 1354 SITE: Abdomen GAVE: 40 MG			
		Barcode Medication: Lovenox			
		NDC/DIN: 6332356421 (SOURCE: eMAR)			
		Admin Queries			
		MAR Injection Site: 11			

DATE: 12/03/22 @ 0013  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/28/22 to 0659 11/21/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 mL/HR IV .013H20M  
RX #: 002268252

11/15/22 0700 Infusion In Progress 0700 RMTDOK: Running, Dose Rate: 75 mL/HR  
Intake: 897.5 mL, Cumulative Intake: 897.5 mL, Container Volume: 102.5 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 897.5 Cumulative Intake (RX):  
6808.25 Container Volume: 102.5 Cumulative Elapsed Time (minutes): 44 2h 2m  
Increase/Decrease: Running Infusion Intake: 897.5 Infusion Rate: 75 Waste Amount: 0  
0800 Infusion In Progress 0800 RMTDOK: Infused, Dose Rate: 75 mL/HR  
Intake: 75 mL, Cumulative Intake: 972.5 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 972.5 Cumulative Intake (RX):  
6883.25 Container Volume: 0 Cumulative Elapsed Time (minutes): 44 3h 2m Increase/Decrease:  
Infused Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 27.5  
0900 Infusion In Progress 0900 RMTDOK: Started/Running, Dose Rate: 75 mL/HR  
Intake: 1000 mL, Cumulative Intake: 1000 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 6883.25 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 44 3h 2m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
0918 Transaction Rule PHAPRCOR  
MED: VASRB - Medicate Waste  
Description: Dabit svc DC/Rm 11/20/22 0900: NS Amount Wasted: 0 ML, Drug Waste%: 0  
1000 Infusion In Progress 1000 RMTDOK: Running, Dose Rate: 75 mL/HR  
Intake: 75 mL, Cumulative Intake: 925 mL, Container Volume: 925 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 75 Cumulative Intake (RX):  
6958.25 Container Volume: 925 Cumulative Elapsed Time (minutes): 44 4h 2m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1100 Infusion In Progress 1100 RMTDOK: Running, Dose Rate: 75 mL/HR  
Intake: 75 mL, Cumulative Intake: 150 mL, Container Volume: 850 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 150 Cumulative Intake (RX):  
7033.25 Container Volume: 850 Cumulative Elapsed Time (minutes): 44 5h 2m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1200 Infusion In Progress 1200 RMTDOK: Running, Dose Rate: 75 mL/HR  
Intake: 75 mL, Cumulative Intake: 225 mL, Container Volume: 775 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 225 Cumulative Intake (RX):  
7108.25 Container Volume: 775 Cumulative Elapsed Time (minutes): 44 6h 2m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1300 Infusion In Progress 1300 RMTDOK: Running, Dose Rate: 75 mL/HR  
Intake: 75 mL, Cumulative Intake: 300 mL, Container Volume: 700 mL, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 300 Cumulative Intake (RX):

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:  
0700 11/28/22 to 0659 11/21/22 (continued)

START/STOP	
	7183.25 Container Volume: 700 Cumulative Blapsed Time (minutes): 4d 7h 2m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	1400 Infusion In Progress 1400 RAMITOK: Running, Dose Rate: , Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 375 mls, Container Volume: 625 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 375 Cumulative Intake (Rx):
	7258.25 Container Volume: 625 Cumulative Blapsed Time (minutes): 4d 8h 2m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	1500 Infusion In Progress 1500 RAMITOK: Running, Dose Rate: , Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 450 mls, Container Volume: 550 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 450 Cumulative Intake (Rx):
	7333.25 Container Volume: 550 Cumulative Blapsed Time (minutes): 4d 9h 2m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	1600 Infusion In Progress 1600 RAMITOK: Running, Dose Rate: , Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 525 mls, Container Volume: 475 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 525 Cumulative Intake (Rx):
	7408.25 Container Volume: 475 Cumulative Blapsed Time (minutes): 4d 10h 2m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	1615 RAMITOK at 0900 GAVE: 75 MLS/HR
	Barcode Medication: sodium Chloride 0.9%
	NDC/DIN: 0338004904 (SOURCE: eMAR)
	Admin Queries
	Cumulative Dose: Not Applicable Cumulative Intake (Rx): 6883.25 Container Volume: 1000
	Cumulative Blapsed Time (minutes): 4d 3h 2m Increase/Decrease: Started/Running
	1700 Infusion In Progress 1700 RAMITOK: Running, Dose Rate: , Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 600 mls, Container Volume: 400 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 600 Cumulative Intake (Rx):
	7483.25 Container Volume: 400 Cumulative Blapsed Time (minutes): 4d 11h 2m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	1800 Infusion In Progress 1800 RAMITOK: Running, Dose Rate: , Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 675 mls, Container Volume: 325 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 675 Cumulative Intake (Rx):
	7558.25 Container Volume: 325 Cumulative Blapsed Time (minutes): 4d 12h 2m
	Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0
	1900 Infusion In Progress 1900 CHOWKRI: Running, Dose Rate: , Rate: 75 MLS/HR
	Intake: 75 mls, Cumulative Intake: 750 mls, Container Volume: 250 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 750 Cumulative Intake (Rx):
	7633.25 Container Volume: 250 Cumulative Blapsed Time (minutes): 4d 13h 2m

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/21/22 (continued)	STOP	STOP

Increase/Decrease:	Running Infusion Intake:	75	Infusion Rate:	75	Waste Amount:	0					
2000	Infusion In Progress	2000	CHOWKRI	Running/	Dose Rate:	75	MLB/HR				
	Intake:	75	mLs,	Cumulative Intake:	825	mLs,	Container Volume:	175	mLs,	Site:	
	Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	825	Cumulative Intake (Rx):						
	7708.25	Container Volume:	175	Cumulative Elapsed Time (minutes):	4d 14h 2m						
	Increase/Decrease:	Running Infusion Intake:	75	Infusion Rate:	75	Waste Amount:	0				
	2100	Infusion In Progress	2100	CHOWKRI	Running/	Dose Rate:	75	MLB/HR			
	Intake:	75	mLs,	Cumulative Intake:	900	mLs,	Container Volume:	100	mLs,	Site:	
	Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	900	Cumulative Intake (Rx):						
	7783.25	Container Volume:	100	Cumulative Elapsed Time (minutes):	4d 15h 2m						
	Increase/Decrease:	Running Infusion Intake:	75	Infusion Rate:	75	Waste Amount:	0				
	2200	Infusion In Progress	2200	CHOWKRI	Running/	Dose Rate:	75	MLB/HR			
	Intake:	75	mLs,	Cumulative Intake:	975	mLs,	Container Volume:	25	mLs,	Site:	
	Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	975	Cumulative Intake (Rx):						
	7858.25	Container Volume:	25	Cumulative Elapsed Time (minutes):	4d 16h 2m						
	Increase/Decrease:	Running Infusion Intake:	75	Infusion Rate:	75	Waste Amount:	0				
	2220	Infusion In Progress	2220	CHOWKRI	Infused/	Dose Rate:	75	MLB/HR			
	Intake:	25	mLs,	Cumulative Intake:	1000	mLs,	Container Volume:	0	mLs,	Site:	
	Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (bag):	1000	Cumulative Intake (Rx):						
	7883.25	Container Volume:	0	Cumulative Elapsed Time (minutes):	4d 16h 22m						
	Increase/Decrease:	Infused Infusion Intake:	25	Infusion Rate:	75	Waste Amount:	0				
	2220	Infusion In Progress	2220	CHOWKRI	Started/Running/	Dose Rate:	75	MLB/HR			
	Intake:	75	mLs,	Cumulative Intake:	1000	mLs,	Container Volume:	1000	mLs,	Site:	
	Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (Rx):	7883.25	Container Volume:	1000					
	Cumulative Elapsed Time (minutes):	4d 16h 22m	Increase/Decrease:	Started/Running							
	Infusion Rate:	75	Waste Amount:	0							
	0130	Transaction Rule	PHABRCJOB								
	MEPI.WASTP	-	Medicare Waste								
	Description:	Dabit svc DR/Tm 11/20/22 2220:	NS Amount Wasted:	0	ML: Drug Waste%:	0					
	0535	CHOWKRI	at 11/20/22 - 2220	GNVB:	75	MLB/HR					
	Barcode Medication:	Sodium Chloride 0.9%									
	NDC/DIN:	0338004904 (SOURCE: eMAR)									
	Admin Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (Rx):	7883.25	Container Volume:	1000					
	Cumulative Elapsed Time (minutes):	4d 16h 22m	Increase/Decrease:	Started/Running							
	Infusion Rate:	75	Waste Amount:	0							
	0535	CHOWKRI	at 11/20/22 - 2220	GNVB:	75	MLB/HR					
	Barcode Medication:	Sodium Chloride 0.9%									
	NDC/DIN:	0338004904 (SOURCE: eMAR)									
	Admin Queries										
	Cumulative Dose:	Not Applicable	Cumulative Intake (Rx):	7883.25	Container Volume:	1000					
	Cumulative Elapsed Time (minutes):	4d 16h 22m	Increase/Decrease:	Started/Running							
	Infusion Rate:	75	Waste Amount:	0							

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/28/22 to 0659 11/21/22 (continued)	

**NOVOLIN N (Insulin NPH 100 units/ml) 10 ml Vial)**  
 22 UNITS SUB-Q Q12HR 06 18  
 Comments: HOLD IF PHE FB WITHHELD OR BLOOD SUGAR BELOW  
 100 MG/DL.  
 RX #: Q02275917

11/19/22	1800 RANITOL at 1756 CO-SIGNER: TONGVAL SITE: Abdomen GAVE: 22 UNITS
	Barcode Medication: Novolin N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 186 MAR Injection site: 11
	1805 Transaction Rule PHABRC08
	MEDI.WASTE - Medicate Waste
	Description: Debit Svc Dc/Tm 11/20/22 1756: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.220 ML
	0600 CHOWRI at 0639 CO-SIGNER: CORDOLI SITE: Abdomen GAVE: 22 UNITS
	Barcode Medication: Novolin N
	NDC/DIN: 0169183411 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 242 MAR Injection site: 11
	0645 Transaction Rule PHABRC08
	MEDI.WASTE - Medicate Waste
	Description: Debit Svc Dc/Tm 11/21/22 0639: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.220 ML

**Cathflo Activase (Alteplase 2 mg Vial)**

2 MG INFRACATH ONCE/ONE  
 Dose Insr: Reconstitute each vial with 2.2 ml sterile water.  
 Retain in occluded catheter for 0.5 to 2 hours.  
 Comments: Clotted p/cc line  
 RX #: Q02277415

11/20/22	1118 RANITOL at 1244 CO-SIGNER: TONGVAL GAVE: 2 MG
	Barcode Medication: Cathflo Activase
	NDC/DIN: 50242004164 (SOURCE: Default NDCs)
	1132 Edit or Verification DAMOUAN
	1132 Edit or Verification DAMOUAN
	1132 Discontinue PHABRC08
	1206 Acknowledged Order RANITOL
	1304 Transaction Rule PHABRC08
	MEDI.WASTE - Medicate Waste
	Description: Debit Svc Dc/Tm 11/20/22 1244: CATH21 Amount Wasted: 0 MG; Drug Waste\$: 0



DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/28/22 to 0659 11/21/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	1119 RMT10A at 1119 CO-SIGNER: TONGVAL SITE: Abdomen GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	MAR Injection Site: 11
	1133 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/20/22 1119: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	1422 RMT10A at 1422 CO-SIGNER: TONGVAL SITE: Abdomen GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 213 MAR Injection site: 11
	1433 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/20/22 1422: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	1756 RMT10A at 1756 CO-SIGNER: TONGVAL SITE: Abdomen GAVE: 2 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 186 MAR Injection site: 11
	1805 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/20/22 1756: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
	2145 CHOWRI at 2145 CO-SIGNER: CORDOLI SITE: Left PosteroLateral Arm GAVE: 2 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 197 MAR Injection site: 13
	2152 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/20/22 2145: IN\$ASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
	0248 CHOWRI at 0248 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 215 MAR Injection site: 11
	0301 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste

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This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:

0700 11/28/22 to 0659 11/21/22 (continued)

START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
	Description: Debit Svc Dc/Tm 11/21/22 0248: INRSASP	0 UNIT	
	0.040 ML		
	0639 CHOWREI at 0639 CO-SIGNER: CORDOLI SITE: Abdomen GAVE: 4 UNIT		
	Barcode Medication: NOVOLIG		
	NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries		
	Finger Stick Blood Glucose: 242 MAR Injection site: 11		
	0645 Transaction Rule PHARCTOR		
	MDI WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/21/22 0639: INRSASP	0 UNIT	
	0.040 ML		

ADMINISTRATION PERIOD:

0700 11/21/22 to 0659 11/22/22

START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
	10/26/22 1238 Discontinuing IANFSAN		
	1240 Acknowledged order RAMITOA		

Route Change - PO to NG-Tube - Per Pharmacy (PO to NG-Tube - Rx Consult)  
1 EACH MISCELLANEOUS PER PROTOCOL  
RX #: 002232592

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG NG-TUBE DAILY before breakfast  
RX #: 002232592

10/27/22 0700 CHOWREI at 0651 GAVE: 112 MCG			
Barcode Medication: Synthroid			
NDC/DIN: 4229203901 (SOURCE: eMAR)			
0701 Transaction Rule PHARCTOR			
MDI WASTE - Medicare Waste			
Description: Debit Svc Dc/Tm 11/21/22 0651: SYNTH112	Amount Wasted: 0 MCG	Drug Waste%:	
0			
1243 Discontinuing ZPHA.DX			
1419 Acknowledged order RAMITOA			

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/21/22 to 0659 11/25/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL DUXUP)**  
15 ML MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 002233392

11/27/22	0800 RAMITOA at 0759 GAVE: 15 ML	
	Barcode Medication: Peridex Oral Rinse	
	NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/26/23	
	0800 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/21/22 0759: PER15: Amount Wasted: 0 ML; Drug Waste%: 0	
	2000 CHOWREI at 2027 GAVE: 15 ML	
	Barcode Medication: Peridex Oral Rinse	
	NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 03/16/23	
	2033 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/21/22 2027: PER15: Amount Wasted: 0 ML; Drug Waste%: 0	

**Norvasc (Ramoldipine 5 mg Tablet)**  
5 MG NG-TUBE DAVID  
RX #: 002242175

11/01/22	0845 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/21/22 0832: NORV5: Amount Wasted: 0 MG; Drug Waste%: 0	
	1000 RAMITOA at 0832 GAVE: 5 MG	
	Barcode Medication: Norvasc	
	NDC/DIN: 0904637061 (SOURCE: eMAR)	
	1243 Discontinued ZPHA.DAV	
	1419 Acknowledged Order RAMITOA	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG NG-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002251619

11/06/22	0845 Transaction Rule PHABRCJOB	
	MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dr/Tm 11/21/22 0833: BEB20: Amount Wasted: 0 MG; Drug Waste%: 0	
	1000 RAMITOA at 0833 GAVE: 20 MG	
	Barcode Medication: Pepcid	
	NDC/DIN: 6373964510 (SOURCE: eMAR)	
	1243 Discontinued ZPHA.DAV	
	1419 Acknowledged Order RAMITOA	

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/21/22 to 0659 11/22/22 (continued)	

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG NG-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002252577

11/07/22| 0845 Transaction Rule PHABRCJOB  
| MEDI.WASTE - Medicare Waste  
| Description: Debit Svc Dr/Tm 11/21/22 0834: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
| 1000 RMTIOA at 0834 GAVE: 25 MG  
| Barcode Medication: Apresoline  
| NDC/DIN: 0904644161 (SOURCE: eMAR)  
| 1243 Discontinue ZPBA.DAV  
| 1419 Acknowledged Order RMTIOA

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM NG-TUBE Three Times Daily  
RX #: 002259013

11/10/22| 0845 Transaction Rule PHABRCJOB  
| MEDI.WASTE - Medicare Waste  
| Description: Debit Svc Dr/Tm 11/21/22 0833: SODI Amount Wasted: 0 GM; Drug Waste%: 0  
| 1000 RMTIOA at 0833 GAVE: 1 GM  
| Barcode Medication: Sodium Chloride  
| NDC/DIN: 0022317601 (SOURCE: eMAR)  
| Expiration Date: 05/08/23  
| 1244 Discontinue ZPBA.DAV  
| 1419 Acknowledged Order RMTIOA

**Lovenox (Enoxaparin 40 mg/0.4 ml Syringe)**  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22| 1515 RMTIOA at 1540 SITE: Abdomen GAVE: 40 MG  
| Barcode Medication: Lovenox  
| NDC/DIN: 6332356421 (SOURCE: eMAR)  
| Admin Queries  
| MAJ Injection Site: 11  
| 1548 Transaction Rule PHABRCJOB  
| MEDI.WASTE - Medicare Waste  
| Description: Debit Svc Dr/Tm 11/21/22 1540: LOV40I Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHARMCROB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/21/22 to 0659 11/22/22 (continued)	

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
75 MLS/HR IV .013H2OM  
RX #: 002268252

11/15/22 0700 Infusion In Progress 0700 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 650 mls, Cumulative Intake: 650 mls, Container Volume: 350 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 650 Cumulative Intake (Rx):  
853.25 Container Volume: 350 Cumulative Elapsed Time (minutes): 54 1h 2m  
Increase/Decrease: Running Infusion Intake: 650 Infusion Rate: 75 Waste Amount: 0  
0800 Infusion In Progress 0800 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 75 mls, Cumulative Intake: 725 mls, Container Volume: 275 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 725 Cumulative Intake (Rx):  
860.25 Container Volume: 275 Cumulative Elapsed Time (minutes): 54 2h 2m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
0900 Infusion In Progress 0900 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 75 mls, Cumulative Intake: 800 mls, Container Volume: 200 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 800 Cumulative Intake (Rx):  
860.25 Container Volume: 200 Cumulative Elapsed Time (minutes): 54 3h 2m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1000 Infusion In Progress 1000 RMTDOK: Running, Dose Rate: 75 MLS/HR  
Intake: 75 mls, Cumulative Intake: 875 mls, Container Volume: 125 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 875 Cumulative Intake (Rx):  
875.25 Container Volume: 125 Cumulative Elapsed Time (minutes): 54 4h 2m  
Increase/Decrease: Running Infusion Intake: 75 Infusion Rate: 75 Waste Amount: 0  
1102 Infusion In Progress 1102 RMTDOK: Infused, Dose Rate: 75 MLS/HR  
Intake: 77.5 mls, Cumulative Intake: 952.5 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 952.5 Cumulative Intake (Rx):  
883.75 Container Volume: 0 Cumulative Elapsed Time (minutes): 54 5h 4m Increase/Decrease:  
Infused Infusion Intake: 77.5 Infusion Rate: 75 Waste Amount: 47.5  
1102 Infusion In Progress 1102 RMTDOK: Started/Running, Dose Rate: 75 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 883.75 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 5d 5h 4m Increase/Decrease: Started/Running  
Infusion Rate: 75 Waste Amount: 0  
1117 Transaction Rule PHARMCROB  
MEDT WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/21/22 1102: NS Amount Wasted: 0 Ml, Drug Waste\*: 0  
1200 Infusion In Progress 1200 RMTDOK: Infused, Dose Rate: 0 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):

DATE: 12/03/22 @ 0013  
 USER: PHARGOIB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/21/22 to 0659 11/25/22 (continued)	STAGE	

9835.75 Container Volume: 0 Cumulative Elapsed Time (minutes): 54 6h 2m Increase/Decrease:  
 Infused Infusion Intake: 1000 Infusion Rate: 0 Waste Amount: 0  
 Edit Infusion 1200 RAMITIOA Action - From: Infused To: Infused  
 Rate - From: 75 ML/HR To: 0 ML/HR  
 Old Quarters:  
 Infusion Rate: 75  
 New Quarters:  
 Infusion Rate: 0  
 1238 Discontinue LAUTSAN  
 1240 Acknowledged Order RAMITIOA  
 1855 RAMITIOA at 1102 GAVE: 75 ML/HR  
 Barcode Medication: Sodium Chloride 0.9%  
 NDC/DIN: 0338004904 (SOURCE: eMAR)  
 Admin Quarters  
 Cumulative Dose: Not Applicable Cumulative Intake (Rx): 8835.75 Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 54 5h 4m Increase/Decrease: started/Running  
 Infusion Rate: 75 Waste Amount: 0

Novolin N (Insulin NPH 100 units/ml) 10 ml VIAL) | 11/19/22 | 1411 Discontinue AMARM  
 22 UNITS SUB-Q Q12HR 06 18 | | 1411 Order Entry AMARM  
 Comments: HOLD IF THE PF WITHHELD OR BLOOD SUGAR BELOW | | 1419 Acknowledged Order RAMITIOA  
 100 MG/DL. | |  
 RX #: 002275817 | |

Synthroid (Levothyroxine 112 mcg Tablet) | 11/21/22 | 1243 Order Entry ZPHA.DAV  
 112 MCG PO DAILY before breakfast | | 1320 Discontinue ZPHA.SAR  
 RX #: 002279322 | | 1419 Acknowledged Order RAMITIOA

Norvasc (Amlodipine 5 mg Tablet) | 11/21/22 | 1243 Order Entry ZPHA.DAV  
 5 MG PO DAILY | | 1320 Discontinue ZPHA.SAR  
 RX #: 002279323 | | 1419 Acknowledged Order RAMITIOA

Pepcid (Famotidine 20 mg Tablet) | 11/21/22 | 1243 Order Entry ZPHA.DAV  
 20 MG PO TWICE A DAY | | 1320 Discontinue ZPHA.SAR  
 Comments: IV TO NS PER PROTOCOL | | 1419 Acknowledged Order RAMITIOA  
 RX #: 002279325 | |

DATE: 12/03/22 @ 0013  
 USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/21/22 to 0659 11/26/22 (continued)	

**Apresoline (Hydralazine 25 mg Tablet)**  
 25 MG PO TWICE A DAY  
 Dose Inst: HOLD if SBP<130  
 RX #: 002279326

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
 1 GM PO Three Times Daily  
 RX #: 002279327

**Route Change - PO to G-Tube - Per Pharmacy (PO to G-Tube - Rx Consult)**  
 1 ECH MISCELLANEOUS PER PROTOCOL  
 Comments: PATIENT HAS ECG1  
 RX #: 002279423

**Synthroid (Levothyroxine 112 mcg Tablet)**  
 112 MCG G-TUBE DAILY before breakfast  
 RX #: 002279429

**Norvasc (Amlodipine 5 mg Tablet)**  
 5 MG G-TUBE DAILY  
 RX #: 002279431

**Pepcid (Famotidine 20 mg Tablet)**  
 20 MG G-TUBE TWICE A DAY  
 Comments: IV TO NG PER PROTOCOL  
 RX #: 002279432

DATE	DESCRIPTION	AMOUNT WASTED
11/21/22	1320 Order Entry ZPHA.SAK	
11/21/22	1419 Acknowledged Order RAMITOA	
11/21/22	2100 CHOMERI at 2049 GAVE: 20 MG	
11/21/22	Barcode Medication: Pepcid	
11/21/22	NDC/DIN: 6373964510 (SOURCE: eMAR)	
11/21/22	2103 Transaction Rule PHABRCJOB	
11/21/22	MEDI.WASTE - Medicare Waste	
11/21/22	Description: Debit Svc Dc/Tm	
11/21/22	1320 Amount Wasted: 0 MG; Drug Waste%: 0	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/21/22 to 0659 11/26/22 (continued)		

**Apresoline (HYDRAZINE 25 mg Tablet)**  
25 MG G-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002279435

11/21/22 | 1321 Order Entry ZPHA.SAK | 0 MG; Drug Waste%: 0  
1419 Acknowledged Order RARITOA  
2100 CHOWKRI at 2049 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 090464161 (SOURCE: eMAR)  
2103 Transaction Rule PHARCTOR  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/21/22 2049; APR25 Amount Wasted: 0 MG; Drug Waste%: 0

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM G-TUBE three Times Daily  
RX #: 002279435

11/21/22 | 1321 Order Entry ZPHA.SAK | 0 GM; Drug Waste%: 0  
1419 Acknowledged Order RARITOA  
1500 RARITOA at 1540 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
1548 Transaction Rule PHARCTOR  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/21/22 1540; SOD1 Amount Wasted: 0 GM; Drug Waste%: 0  
2100 CHOWKRI at 2049 GAVE: 1 GM  
Barcode Medication: Sodium Chloride  
NDC/DIN: 00223176001 (SOURCE: eMAR)  
Expiration Date: 05/08/23  
2104 Transaction Rule PHARCTOR  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/21/22 2049; SOD1 Amount Wasted: 0 GM; Drug Waste%: 0



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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/21/22 to 0659 11/22/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
26 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE TP WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: 002279586

11/21/22	1411	Order Entry AMARM
	1419	Acknowledged Order RAMITOA
	1419	Edit or Verification ZPHA.DAV
	1419	Edit or Verification ZPHA.DAV
	1800	RAMIOA at 1750 CO-SIGNER: RAMOGES SITE: Abdomen GAVE: 26 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 235 MAR Injection Site: 11
	1803	Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicate Waste
		Description: Dabit svc Dt/Tm 11/21/22 1750: INSNPH Amount Wasted: 0 UNITS; Amount
		GIVEN: 0.260 ML
	0600	CHOWRI at 0645 CO-SIGNER: SAN CHE SITE: Abdomen GAVE: 26 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 289 MAR Injection Site: 11

Diprivan 100 ML  
(Propofol 1,000 mg/100 mL VIAL)  
3.3 ML/HR IV TITRATE/PRN  
PRN Reason: Sedation  
Comments: RASS 0 -> -2  
RX #: 002232441

10/26/22	1238	Discontinue LAUFSAN
	1240 <td>Acknowledged Order RAMITOA</td>	Acknowledged Order RAMITOA

Sodium Chloride 0.9% 500 ML 480 ML  
(0.9% Sodium Chloride 500 mL Bag)  
CARDENE 50 MG  
(Nifedipine 25 mg/10 mL VIAL)  
50 ML/HR IV TITRATE/PRN  
PRN Reason: Hypertension  
Comments: Conc. = 0.1 mg/mL  
Protect from light  
RX #: 002232555

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Medication Discharge Summary

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Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/	STOP/
0700 11/21/22 to 0659 11/25/22 (continued)	STAGE	

Catapres (clonidine 0.1 mg Tablet) | 10/27/22 | 1243 Discontinue ZPHA.DAV  
0.1 MG NG-TUBE Q6H/PRN | | 1419 Acknowledged Order RARITOA  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for  
clonidine(catapres)  
RX #: 002333222

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:  
0700 11/21/22 to 0659 11/22/22 (continued)

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

START/STOP	
11/29/22	1043 RMTIOA at 1043 CO-SIGNER: RANOUZ SITE: Abdomen GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 242 MAR Injection site: 11
	1046 Transaction Rule PHABRC0B
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/21/22 1043: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	1539 RMTIOA at 1539 CO-SIGNER: RANOUZ SITE: Abdomen GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	MAR Injection Site: 11
	1548 Transaction Rule PHABRC0B
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/21/22 1539: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	1750 RMTIOA at 1750 CO-SIGNER: RANOUZ SITE: Abdomen GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 235 MAR Injection site: 11
	1803 Transaction Rule PHABRC0B
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/21/22 1750: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML
	2200 CHOWREI at 2200 CO-SIGNER: SAN CHE SITE: Abdomen GAVE: 2 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 169 MAR Injection site: 11
	2204 Transaction Rule PHABRC0B
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/21/22 2200: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML
	0644 CHOWREI at 0644 CO-SIGNER: SAN CHE SITE: Abdomen GAVE: 6 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 289 MAR Injection site: 11

DATE: 12/03/22 @ 0013  
 USER: PHABRC08

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046  
 Medication Discharge Summary  
 Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/21/22 to 0659 11/25/22 (continued)	

**Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UDCUP)**  
 650 MG NG-TUBE Q6H/PRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 In 24 hours is 4gm.  
 RX #: 002244670

11/02/22	0834 RMTJDA at 0834 GAVE: 650 MG Barcode Medication: Tylenol Liquid NDC/DIN: 0121197121 (SOURCE: eMAR)
	Admin Queries
	MAR Pain Assessment Reason Not Required: 3
	Pain Management Goal/Pain Tolerated as This Number or Less: 3
	0845 Transaction Rule PHABRC08
	NEPTI WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/21/22 0834: TYL650L Amount Wasted: 0 MG; Drug Waste\$: 0
	0919 Reassessment by RMTJDA at 0919
	Reassessment: MAR Pain Assessment
	Pain Assessment Type: 2
	Level of Consciousness:
	5
	Pain Intensity: 0
	Pain Level: 0 - 10 Scales: No Pain
	Pain Management Goal/Pain Tolerated as This Number or Less: 3
	Pain Scale Used: 3
	1243 Discontinue ZPHA.DAV
	1419 Acknowledged Order RMTJDA

**Catapres (Clonidine 0.1 mg Tablet)**  
 0.1 MG PO Q6H/PRN  
 PRN Reason: sbp > 160  
 Comments: LA/SA warning: this order is for  
 clonidine(catapres)  
 RX #: 002279321

11/21/22	1243 Order Entry ZPHA.DAV
	1320 Discontinue ZPHA.SAR
	1419 Acknowledged Order RMTJDA

**Tylenol (Acetaminophen 325 mg Tablet)**  
 650 MG PO Q6H/PRN  
 PRN Reason: Pain or Fever (>100.4)  
 Comments: Maximum acetaminophen (in any form) allowable  
 In 24 hours is 4gm.  
 RX #: 002279324

DATE: 12/03/22 @ 0013  
USER: PHARMGJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/21/22 to 0659 11/22/22 (continued)	11/21/22	1315 Order Entry ZPHA.SAK

Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UDCUP)  
650 MG G-TUBE Q6H/PBN  
PBN Reason: Pain or Fever (>100.4)  
RX #: 002279425

11/21/22 1315 Order Entry ZPHA.SAK  
1419 Acknowledged Order PAMT0A

Catapres (Clonidine 0.1 mg Tablet)  
0.1 MG G-TUBE Q6H/PBN  
PBN Reason: sbp > 160  
Comments: LA/SA warning; this order is for clonidine(catapres)  
RX #: 002279428

11/21/22 1320 Order Entry ZPHA.SAK  
1419 Acknowledged Order PAMT0A

ADMINISTRATION PERIOD:	START/STOP	
0700 11/22/22 to 0659 11/23/22	11/22/22	0800 RAN008 at 0804 GAVE: 15 ML

Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)  
15 ML MUCOUS MEM BID/0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 002233392

11/22/22 0800 RAN008 at 0804 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 00116200116 (SOURCE: eMAR)  
Expiration Date: 04/28/23  
0816 Transaction Rule PHARMGJOB  
MED.WASTE - Medication Waste  
Description: Debit Svc Dr/Tm 11/22/22 0804: PER15Y Amount Wasted: 0 ML; Drug Waste%: 0  
2000 BMS008 at 2013 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 00116200116 (SOURCE: eMAR)  
Expiration Date: 04/28/23  
2019 Transaction Rule PHARMGJOB  
MED.WASTE - Medication Waste  
Description: Debit Svc Dr/Tm 11/22/22 2013: PER15Y Amount Wasted: 0 ML; Drug Waste%: 0

Lovenox (Enoxaparin 40 mg/0.4 ml Syringe)  
40 MG SUB-Q Q24H  
RX #: 002261325

11/11/22 1347 Discontinue AMTRAM  
1410 Acknowledged Order NSC.TRM131

Synthroid (Levothyroxine 112 mcg Tablet)  
112 MCG G-TUBE DAILY before breakfast  
RX #: 002279429

11/21/22 0700 CHOWR1 at 0634 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229303901 (SOURCE: eMAR)

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Citrus Valley \*Live\* - PHA  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/29/22 (continued)	

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG G-TUBE DAILY  
RX #: 002279431

11/21/22 0816 Transaction Rule PHABRC0B  
MEDL.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/22/22 0804: NORV5 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 RMOJBS at 0804 GAVE: 5 MG  
Barcode Medication: Norvasc  
NDC/DIN: 0904637061 (SOURCE: eMAR)

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

11/21/22 0816 Transaction Rule PHABRC0B  
MEDL.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/22/22 0804: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 RMOJBS at 0804 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2050 Transaction Rule PHABRC0B  
MEDL.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/22/22 2047: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 BMSJBS at 2047 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG G-TUBE TWICE A DAY  
Dose Tps: HOLD if SBPC130  
RX #: 002279435

11/21/22 0816 Transaction Rule PHABRC0B  
MEDL.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/22/22 0804: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 RMOJBS at 0804 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)  
2050 Transaction Rule PHABRC0B  
MEDL.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/22/22 2047: APR25 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 BMSJBS at 2047 GAVE: 25 MG  
Barcode Medication: Apresoline  
NDC/DIN: 0904644161 (SOURCE: eMAR)

DATE: 12/03/22 @ 0013  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/29/22 (continued)	

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM G-RUBE Three Times Daily  
RX #: 002279436

START/STOP	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
11/21/22	0816 Transaction Rule PHABRCJOB MED.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/22/22 0804: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	1000 RMOUSE at 0804 GAVE: 1 GM		
	Barcode Medication: Sodium Chloride NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/06/23		
	1500 NSC.FRM131 at 1515 GAVE: 1 GM		
	Barcode Medication: Sodium Chloride NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/06/23		
	1550 Transaction Rule PHABRCJOB MED.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/22/22 1515: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	2050 Transaction Rule PHABRCJOB MED.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/22/22 2047: SODI Amount Wasted: 0 GM; Drug Waste%: 0		
	2100 BMSUS8 at 2047 GAVE: 1 GM		
	Barcode Medication: Sodium Chloride NDC/DIN: 00223176001 (SOURCE: eMAR)		
	Expiration Date: 05/06/23		

START/STOP	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
11/21/22	0701 Transaction Rule PHABRCJOB MED.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/22/22 0645: INSNSH Amount Wasted: 0 UNITS; Amount Given: 0.260 ML		
	1401 Discontinuing AMARAN		
	1401 Order Entry AMARAN		
	1410 Acknowledged Order NSC.FRM131		

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This document is part of the legal medical record.

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/22/22 to 0659 11/23/22 (continued)	STOP

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE PP WITHHELD OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: Q02281709

11/22/22	1401	Order Entry AMARM
	1402	Edit or Verification ZPHA.DAV
	1402	Edit or Verification ZPHA.DAV
	1410	Acknowledged Order NSC.TRN131
	1800	NSC.TRN131 at 1759 CO-STGMR: RMOUES SITE: Abdomen GAVE: 30 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 195 MAR Injection Site: 11
	1804	Transaction Rule PHARGJOB
		MDI.WASTE - Medicate Waste
		Description: Dabit svc Dt/Tm 11/22/22 1759: INSNPH Amount Wasted: 0 UNITS; Amount
		GIVEN: 0.300 ML
		0600 Not Administered BENSURS at 0624 NPO AFTER MIDNIGHT FOR SURGERY



DATE: 12/03/22 @ 0013  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/25/22 to 0659 11/23/22 (continued)

START/  
STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucose Coverage  
RX #: 002237641

11/29/22	0701	Transaction Rule PHABRCJOB	11/29/22	0701	Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste			MEDI.WASTE - Medicare Waste
		Description: Debit svc Dc/Tm 11/22/22 0644: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.060 ML			Description: Debit svc Dc/Tm 11/22/22 0644: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.060 ML
		1157 NDC:TRN131 at 1157 CO-SIGNER: RMOJUS SITE: Abdomen GAVE: 4 UNITF			1157 NDC:TRN131 at 1157 CO-SIGNER: RMOJUS SITE: Abdomen GAVE: 4 UNITF
		Barcode Medication: Novolog			Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)			NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries			Admin Queries
		Finger Stick Blood Glucose: 225 MAR Injection site: 11			Finger Stick Blood Glucose: 225 MAR Injection site: 11
		1203 Transaction Rule PHABRCJOB			1203 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste			MEDI.WASTE - Medicare Waste
		Description: Debit svc Dc/Tm 11/22/22 1157: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.040 ML			Description: Debit svc Dc/Tm 11/22/22 1157: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.040 ML
		1604 NDC:TRN131 at 1604 CO-SIGNER: RMOJUS SITE: Abdomen GAVE: 2 UNITF			1604 NDC:TRN131 at 1604 CO-SIGNER: RMOJUS SITE: Abdomen GAVE: 2 UNITF
		Barcode Medication: Novolog			Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)			NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries			Admin Queries
		Finger Stick Blood Glucose: 195 MAR Injection site: 11			Finger Stick Blood Glucose: 195 MAR Injection site: 11
		1619 Transaction Rule PHABRCJOB			1619 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste			MEDI.WASTE - Medicare Waste
		Description: Debit svc Dc/Tm 11/22/22 1604: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.020 ML			Description: Debit svc Dc/Tm 11/22/22 1604: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.020 ML
		2206 BENUSERS at 2206 CO-SIGNER: BAIERI SITE: Left Anterior Forearm GAVE: 2 UNITF			2206 BENUSERS at 2206 CO-SIGNER: BAIERI SITE: Left Anterior Forearm GAVE: 2 UNITF
		Barcode Medication: Novolog			Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)			NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries			Admin Queries
		Finger Stick Blood Glucose: 200 MAR Injection site: 12			Finger Stick Blood Glucose: 200 MAR Injection site: 12
		2220 Transaction Rule PHABRCJOB			2220 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste			MEDI.WASTE - Medicare Waste
		Description: Debit svc Dc/Tm 11/22/22 2206: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.020 ML			Description: Debit svc Dc/Tm 11/22/22 2206: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.020 ML
		0142 BENUSERS at 0142 CO-SIGNER: DOMIXAV SITE: Left Posterolateral Arm GAVE: 2 UNITF			0142 BENUSERS at 0142 CO-SIGNER: DOMIXAV SITE: Left Posterolateral Arm GAVE: 2 UNITF
		Barcode Medication: Novolog			Barcode Medication: Novolog
		NDC/DIN: 0169750111 (SOURCE: eMAR)			NDC/DIN: 0169750111 (SOURCE: eMAR)
		Admin Queries			Admin Queries
		Finger Stick Blood Glucose: 194 MAR Injection site: 13			Finger Stick Blood Glucose: 194 MAR Injection site: 13
		0145 Transaction Rule PHABRCJOB			0145 Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste			MEDI.WASTE - Medicare Waste
		Description: Debit svc Dc/Tm 11/23/22 0142: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.020 ML			Description: Debit svc Dc/Tm 11/23/22 0142: INSNASP Amount Wasted: 0 UNITF; Amount Given: 0.020 ML

DATE: 12/03/22 @ 0013  
USER: PHABRG0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/23/22 to 0659 11/24/22	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL ODCUP)**  
15 ML NUCOUS MEB BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: 002233392

START/STOP	DESCRIPTION	AMOUNT WASTED
11/27/22	0800 RAMOTES at 1023 GAVE: 15 ML Barcode Medication: Peridex Oral Rinse NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/26/23	
	1029 Transaction Rule PHABRG0B MED1.WASTE - Medicare Waste	
	2000 BRMST8 at 2030 GAVE: 15 ML Description: Debit svc Dc/Tm 11/23/22 1023: BPR15: Amount Wasted: 0 ML; Drug Waste%: 0	
	Barcode Medication: Peridex Oral Rinse NDC/DIN: 0011620016 (SOURCE: eMAR)	
	Expiration Date: 04/14/23	
	2100 Transaction Rule PHABRG0B MED1.WASTE - Medicare Waste	
	Description: Debit svc Dc/Tm 11/23/22 2030: BPR15: Amount Wasted: 0 ML; Drug Waste%: 0	

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG G-TUBE DAILY before breakfast  
RX #: 002279429

START/STOP	DESCRIPTION	AMOUNT WASTED
11/21/22	0700 Not Administered RAMOTES at 0757 NPOIN	
	11/21/22 1000 RAMOTES at 1023 GAVE: 5 MG Barcode Medication: Norvasc NDC/DIN: 0904637061 (SOURCE: eMAR)	
	1029 Transaction Rule PHABRG0B MED1.WASTE - Medicare Waste	
	Description: Debit svc Dc/Tm 11/23/22 1023: NORV5: Amount Wasted: 0 MG; Drug Waste%: 0	

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG G-TUBE DAILY  
RX #: 002279431

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

START/STOP	DESCRIPTION	AMOUNT WASTED
11/21/22	1000 RAMOTES at 1023 GAVE: 20 MG Barcode Medication: Pepcid NDC/DIN: 6373964510 (SOURCE: eMAR)	
	1029 Transaction Rule PHABRG0B MED1.WASTE - Medicare Waste	
	Description: Debit svc Dc/Tm 11/23/22 1023: BPP20: Amount Wasted: 0 MG; Drug Waste%: 0	
	2100 BRMST8 at 2053 GAVE: 20 MG Barcode Medication: Pepcid NDC/DIN: 6373964510 (SOURCE: eMAR)	
	2100 Transaction Rule PHABRG0B MED1.WASTE - Medicare Waste	
	Description: Debit svc Dc/Tm 11/23/22 2053: BPP20: Amount Wasted: 0 MG; Drug Waste%: 0	

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/23/22 to 0659 11/24/22 (continued)	

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG G-TUBE TWICE A DAY  
Dose Inst: HOLD if SBP<130  
RX #: 002279436

START/STOP	DESCRIPTION	AMOUNT WASTED
11/21/22	1000 RAN028 at 1023 GAVE: 25 MG Barcode Medication: Apresoline NDC/DIN: 0904644161 (SOURCE: eMAR)	
	1029 Transaction Rule PHABRC0B MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/23/22 1023: APR25 Amount Wasted: 0 MG; Drug Waste%: 0	
	2100 BMS218 at 2053 GAVE: 25 MG Barcode Medication: Apresoline NDC/DIN: 0904644161 (SOURCE: eMAR)	
	Comments SBP 150	
	2100 Transaction Rule PHABRC0B MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/23/22 2053: APR25 Amount Wasted: 0 MG; Drug Waste%: 0	

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM G-TUBE Three Times Daily  
RX #: 002279436

START/STOP	DESCRIPTION	AMOUNT WASTED
11/21/22	1000 RAN028 at 1022 GAVE: 1 GM Barcode Medication: sodium chloride NDC/DIN: 00223176001 (SOURCE: eMAR)	
	Expiration Date: 05/08/23	
	1029 Transaction Rule PHABRC0B MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/23/22 1022: SODI Amount Wasted: 0 GM; Drug Waste%: 0	
	1443 Transaction Rule PHABRC0B MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/23/22 1432: SODI Amount Wasted: 0 GM; Drug Waste%: 0	
	1500 RAN028 at 1432 GAVE: 1 GM Barcode Medication: sodium chloride NDC/DIN: 00223176001 (SOURCE: eMAR)	
	Expiration Date: 05/08/23	
	2100 BMS218 at 2053 GAVE: 1 GM Barcode Medication: sodium chloride NDC/DIN: 00223176001 (SOURCE: eMAR)	
	Expiration Date: 05/08/23	
	2100 Transaction Rule PHABRC0B MEDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/23/22 2053: SODI Amount Wasted: 0 GM; Drug Waste%: 0	

DATE: 12/03/22 @ 0013  
USER: PHARMCOR

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/23/22 to 0659 11/24/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL)  
30 UNITS SUB-Q Q12HR 06 18  
Comments: HOLD IF THE FB WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: Q02281709

11/22/22	1800	RAMORS	at 1816 CO-SIGNER: GARCUIA	SITE: Abdomen	GAVE: 30 UNITS	
			Barcode Medication: NOVOLIN N			
			NDC/DIN: 0169183411 (SOURCE: eMAR)			
			Admin Queries			
			Finger Stick Blood Glucose: 390	MAR	Injection site: 11	
			Transaction Rule PHARMCOR			
			MEDI.WASTE - Medicare Waste			
			Description: Debit Svc Dc/Tm 11/23/22 1816:	INSNPH	Amount Wasted: 0 UNITS; Amount	
			Given: 0.300 ML			
			0546 Transaction Rule PHARMCOR			
			MEDI.WASTE - Medicare Waste			
			Description: Debit Svc Dc/Tm 11/24/22 0534:	INSNPH	Amount Wasted: 0 UNITS; Amount	
			Given: 0.300 ML			
			0600 BENSJRS	at 0534 CO-SIGNER: MARHEI	SITE: Left PosteroLateral Arm	GAVE: 30 UNITS
			Barcode Medication: NOVOLIN N			
			NDC/DIN: 0169183411 (SOURCE: eMAR)			
			Admin Queries			
			Finger Stick Blood Glucose: 501	MAR	Injection site: 13	

Xylocaine 1% (lidocaine 1% 20 ml MDV)  
10 ML INFILTRAT ONCE/ONE  
Dose Inst: admin Intraop by MD  
RX #: Q02283023

11/23/22	0823	Acknowledged Order	ABRSARO		
11/23/22	0823	ABRSARO	at 0823	GAVE: 20 ML	
			Barcode Medication: Xylocaine 1%		
			NDC/DIN: 0409427616 (SOURCE: eMAR)		
			0828 Edit or Verification	ZPMA.AS	
			0828 Edit or Verification	ZPMA.AS	
			0828 Discontinue	PHARMCOR	
			0835 Acknowledged Order	RAMORS	
			0842 Transaction Rule	PHARMCOR	
			MEDI.WASTE - Medicare Waste		
			Description: Debit Svc Dc/Tm 11/23/22 0823:	XYL1120	Amount Wasted: 20 ML; Drug Waste%:
			50		

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/23/22 to 0659 11/24/22 (continued)	STAGE	

Normal Saline Irrigation 1,000 ML  
(Sodium Chloride For Irrigation 1,000 ml Bottle)  
Ancef 1 GM  
(Cefazolin 1 gm Vial)  
0 MLS/HR IRRIGATION ONCE/ONE  
Comments: admin Intraop by MD For irrigation  
RX #: 002283024

DATE	DESCRIPTION	AMOUNT	WASTED
11/23/22	0824 Acknowledged Order ABBASRO		
11/23/22	0824 YEDONAL at 0824 GAVE: 1 MLS/HR		
	Barcode Medication: Ancef		
	NDC/DIN: 014392490 (SOURCE: eMAR)		
	0828 Edit of Verification ZPMA,AS		
	0828 Edit of Verification ZPMA,AS		
	0828 Discontinue PHABRC0B		
	0835 Acknowledged Order RAM0RES		
	0842 Transaction Rule PHABRC0B		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/23/22 0824: ANCI Amount Wasted: 0 GM; Drug Waste%: 0		
	0842 Transaction Rule PHABRC0B		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/23/22 0824: NSIR Amount Wasted: 0 ML; Drug Waste%: 0		

Thrombinar (Thrombin (Bovine) 5,000 unit Vial)  
5,000 UNIT IRRIGATION ONCE/ONE  
Dose Ins: admin Intraop by MD  
RX #: 002283056

DATE	DESCRIPTION	AMOUNT	WASTED
11/23/22	0844 Acknowledged Order ABBASRO		
11/23/22	0844 YEDONAL at 0844 GAVE: 5,000 UNIT		
	Barcode Medication: Thrombinar		
	NDC/DIN: 6079931501 (SOURCE: eMAR)		
	0858 Edit of Verification IBERRIN		
	0858 Edit of Verification IBERRIN		
	0858 Discontinue PHABRC0B		
	0900 Acknowledged Order RAM0RES		
	0912 Transaction Rule PHABRC0B		
	MEDI.WASTE - Medicare Waste		
	Description: Debit Svc Dr/Tm 11/23/22 0844: THRS Amount Wasted: 0 UNIT; Drug Waste%: 0		

Bacitracin Topical Oint (Bacitracin Topical Oint 15 gm Tube)  
1 APPLIC TOPICAL ONCE/ONE  
Dose Ins: admin Intraop by MD  
Comments: External Use Only  
RX #: 002283080

DATE	DESCRIPTION	AMOUNT	WASTED
11/23/22	0911 ABBASRO at 0912 GAVE: 1 APPLIC		
11/23/22	Barcode Medication: Bacitracin Topical Oint		
	NDC/DIN: 4580206001 (SOURCE: eMAR)		
	0912 Acknowledged Order ABBASRO		
	0925 Edit of Verification IBERRIN		
	0925 Edit of Verification IBERRIN		
	0926 Discontinue PHABRC0B		
	0933 Acknowledged Order RAM0RES		

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/23/22 to 0659 11/24/22 (continued)	STOP

Dextrose 5% 100 mL 100 ML  
(Dextrose 5% 100 mL Bag)  
Ancef 2 GM  
(Ceftriaxone 1 gm Vial)  
100 MLS/HR IVFB Every eight hours  
Total Bags: 2 (2 of 2 Given)  
Comments: \*Refrigerate\*  
RX #: Q02283102

11/23/22 0933 Acknowledged Order RAMOTES  
11/23/22 0937 Edit or Verification ZPHA.NEN  
0937 Edit or Verification ZPHA.NEN  
1400 RAMOTES at 1433 GAVE: 100 MLS/HR  
Barcode Medication: Ancef  
NDC/DIN: 00143992490 (SOURCE: Default NDCs)  
Barcode Medication: Dextrose 5% 100 mL  
NDC/DIN: 00388001748 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 100 Waste Amount: 0  
1433 Infusion In Progress 1433 RAMOTES: Started, Dose Rate: / Rate: 100 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Queries  
Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 100 Waste Amount: 0  
1443 Transaction Rule PHABRCJOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/23/22 1433: ANCI Amount Wasted: 0 GM; Drug Waste%: 0  
1443 Transaction Rule PHABRCJOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/23/22 1433: D5W100 Amount Wasted: 0 ML; Drug Waste%: 0  
1533 Infusion In Progress 1533 RAMOTES: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 2 Cumulative Intake (bag) : 100 Cumulative Intake (Rx) : 100  
Container Volume: 0 Cumulative Elapsed Time (minutes) : 1h 0m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0  
2155 Infusion In Progress 2155 BENSTES: Started/Running, Dose Rate: / Rate: 100 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: 2 Cumulative Intake (Rx) : 100 Container Volume: 100  
Cumulative Elapsed Time (minutes): 1h 0m Increase/Decrease: Started/Running Infusion Rate:  
100 Waste Amount: 0  
2200 BENSTES at 2155 GAVE: 100 MLS/HR  
Barcode Medication: Ancef  
NDC/DIN: 00143992490 (SOURCE: Default NDCs)  
Barcode Medication: Dextrose 5% 100 mL  
NDC/DIN: 00388001748 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 2 Cumulative Intake (Rx) : 100 Container Volume: 100  
Cumulative Elapsed Time (minutes): 1h 0m Increase/Decrease: Started/Running Infusion Rate:  
100 Waste Amount: 0

DATE: 12/03/22 @ 0013  
USER: PHARGJOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 11/23/22 to 0659 11/24/22 (continued)

START/STOP	
	2200 Transaction Rule PHARGJOB
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/23/22 2155; ANCI Amount Wasted: 0 GM; Drug Waste%: 0
	2200 Transaction Rule PHARGJOB
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/23/22 2155; D5W100 Amount Wasted: 0 ML; Drug Waste%: 0
	2255 Infusion In Progress 2255 BNSJBS: Infused; Dose Rate: / Rate: 0 MLS/HR
	Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: 4 Cumulative Intake (bag) : 100 Cumulative Intake (Rx) : 200
	Container Volume: 0 Cumulative Elapsed Time (minutes) : 2h 0m Increase/Decrease: Infused
	Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0
	2259 Discontinue PHARGJOB
	2305 Acknowledged Order BNSJBS

DATE: 12/03/22 @ 0013  
USER: PHARMC08

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/23/22 to 0659 11/24/22 (continued)	

Sodium Chloride 0.9% 100 ml 100 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Koppa 500 MG  
(Levetiracetam 500 mg/5 ml Vial)  
420 ML/HR IVB Every twelve hours  
Comments: SEND ONE DOSE NOW  
RX #: 002284450

11/23/22 2300 BNSJTS at 2342 GAVE: 420 ML/HR  
Barcode Medication: Koppa  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 ml  
NDC/DIN: 0038004918 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 105 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 420 Waste Amount: 0  
Comments  
LATE ENTRY PT WAS IN CT SCAN  
2302 Edit or Verification BNSJTS  
2303 Edit or Verification TRANSFE  
2307 Acknowledged Order BNSJTS  
2342 Infusion In Progress 2342 BNSJTS: started, Dose Rate: / Rate: 420 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 105 ml, Site:  
Queries  
Container Volume: 105 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 420 Waste Amount: 0  
2345 Transaction Rule PHAPRC08  
MEDT.WASTB - Medicare Waste  
Description: Debit svc Dc/Tm 11/23/22 2342: REP500I Amount Wasted: 0 MG; Drug Waste%: 0  
2345 Transaction Rule PHAPRC08  
MEDT.WASTB - Medicare Waste  
Description: Debit svc Dc/Tm 11/23/22 2342: NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
2357 Infusion In Progress 2357 BNSJTS: Infused, Dose Rate: / Rate: 0 ML/HR  
Intake: 105 ml, Cumulative Intake: 105 ml, Container Volume: 0 ml, Site:  
Queries  
Container Volume: 500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 105  
Container Volume: 0 Cumulative Elapsed Time (minutes): 15m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0



DATE: 12/03/22 @ 0013  
USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/
0700 11/23/22 to 0659 11/24/22 (continued)	STOP

**Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)**  
5 UNIT IV-Push NOW/ONE  
Comments: IAA/SA warning: order is for Novolin  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002284507

11/24/22	0006	BENSTES at 0010 CO-SIGNER: DOMINYA GAVE: 5 UNIT
11/24/22		Barcode Medication: Novolin Regular
		NDC/DIN: 0169183311 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 468
		0012 Edit or Verification ZPRA.RJB
		0012 Edit or Verification ZPRA.RJB
		0013 Discontinue PHABKJOB
		0109 Acknowledged Order BENSTES
		0130 Transaction Rule PHABKJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit svc Dr/7m 11/24/22 0010: INSRBG Amount Wasted: 0 UNIT; Amount Given: 0.050 HL

**Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)**  
10 UNIT IV-Push NOW/ONE  
Comments: IAA/SA warning: order is for Novolin  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: 002284776

11/24/22	0652	BENSTES at 0702 CO-SIGNER: MARHEL GAVE: 10 UNIT
11/24/22		Barcode Medication: Novolin Regular
		NDC/DIN: 0169183311 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 501
		0655 Edit or Verification ZPRA.RJB
		0655 Edit or Verification ZPRA.RJB
		0656 Acknowledged Order BENSTES
		0656 Discontinue PHABKJOB

**Novolin Regular (Insulin Regular (Human) 100 units/mL Vial)**  
2 GM .ROUTE .STR-MED/ONE  
RX #: 002288393

**Sublimaze (Fentanyl 100 mcg/2 mL Amp)**  
200 MCG .ROUTE .STR-MED/ONE  
RX #: 002288394

**Zemuron (Rocuronium Bromide 50 mg/5 mL Vial)**  
50 MG .ROUTE .STR-MED/ONE  
RX #: 002288395

DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/23/22 to 0659 11/24/22 (continued)	11/23/22   11/23/22

Zofran (Ondansetron 4 mg/2 ml Vial)  
4 MG .ROUTE .STR-MED/ONE  
RX #: 002288396

11/23/22 0815  
11/23/22  
|

Diprivan (Propofol 200 mg/20 ml Vial)  
200 MG .ROUTE .STR-MED/ONE  
RX #: 002288397

11/23/22 0815  
11/23/22  
|

Laetated Ringer's (Laetated Ringer's 1,000 ml Bag)  
1,000 ML .IV .STR-MED/ONE  
RX #: 002288398

11/23/22 0815  
11/23/22  
|

Trandate (Labetalol 100 mg/20 ml Vial)  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: 002232792

11/26/22 0512 BENUSIS at 0512 GAVE: 10 MG  
Barcode Medication: Trandate  
NDC/DIN: 0409226720 (SOURCE: eMAR)  
Comments  
SBP 144/77  
0515 Transaction Rule PHABRCIOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/24/22 0512: NOR100I Amount Wasted: 0 MG; Amount Given: 0.100 VIAL

Vasotec (Enalapril 1.25 mg/ml Vial)  
1.25 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension SBP > 150 mmHg  
RX #: 002233073

11/27/22 2138 BENUSIS at 2138 GAVE: 1.25 MG  
Barcode Medication: Vasotec  
NDC/DIN: 0143978701 (SOURCE: eMAR)  
Comments  
SBP 160  
2145 Transaction Rule PHABRCIOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/23/22 2138: VAS129I Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/23/22 to 0659 11/24/22 (continued)

START/  
STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	1236	RAMOU8	at 1236 CO-SIGNER: GARCJUA	SITE: Abdomen GAVE: 8 UNIT
			Barcode Medication: Novolog	
			NDC/DIN: 0169750111 (SOURCE: eMAR)	
			Admin Queries	
			Finger Stick Blood Glucose: 328 MAR Injection site: 11	
			Transaction Rule PHABRC0B	
			MEDI.WASTE - Medicate Waste	
			Description: Dabit svc Dc/Tm 11/23/22 1236: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.080 ML	
			1816 RAMOU8 at 1816 CO-SIGNER: GARCJUA	SITE: Abdomen GAVE: 10 UNIT
			Barcode Medication: Novolog	
			NDC/DIN: 0169750111 (SOURCE: eMAR)	
			Admin Queries	
			Finger Stick Blood Glucose: 390 MAR Injection site: 11	
			Transaction Rule PHABRC0B	
			MEDI.WASTE - Medicate Waste	
			Description: Dabit svc Dc/Tm 11/23/22 1816: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.100 ML	
			2150 BENSTS8 at 2150 CO-SIGNER: BATERI	SITE: Left PosteroLateral Arm GAVE: 10 UNIT
			Barcode Medication: Novolog	
			NDC/DIN: 0169750111 (SOURCE: eMAR)	
			Admin Queries	
			Finger Stick Blood Glucose: 396 MAR Injection site: 13	
			Comments	
			BLOOD GLUCOSE 396	
			Rule: INSDOSE - Checks insulin dose during AM	
			Transaction Rule PHABRC0B	
			MEDI.WASTE - Medicate Waste	
			Description: Dabit svc Dc/Tm 11/23/22 2150: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.100 ML	
			0121 BENSTS8 at 0121 CO-SIGNER: DOMIXAV	SITE: Left PosteroLateral Arm GAVE: 12 UNIT
			Barcode Medication: Novolog	
			NDC/DIN: 0169750111 (SOURCE: eMAR)	
			Admin Queries	
			Finger Stick Blood Glucose: 468 MAR Injection site: 13	
			Transaction Rule PHABRC0B	
			MEDI.WASTE - Medicate Waste	
			Description: Dabit svc Dc/Tm 11/24/22 0121: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.120 ML	
			0534 BENSTS8 at 0534 CO-SIGNER: MAKHEI	SITE: Left PosteroLateral Arm GAVE: 12 UNIT
			Barcode Medication: Novolog	
			NDC/DIN: 0169750111 (SOURCE: eMAR)	
			Admin Queries	

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/23/22 to 0659 11/24/22 (continued)		

0546	Transaction Rule PHABRCJOB	Finger Stick Blood Glucose: 501 MAR Injection Site: 13
	MEDI.WASTE - Medicare Waste	
	Description: Debit svc DR/Tm 11/24/22 0534: INSNASP Amount Wasted: 0 UNIT; Amount Given: 0.120 ML	

TYLENOL Liquid (Acetaminophen 650 mg/20.3 mL UNOCAP)

650 MG G-TUBE QGH/PRN

PRN Reason: Pain or Fever (>100.4)

RX #: Q02279425

11/21/22	0141	BENSTS8 at 0141 GAVE: 650 MG
		Barcode Medication: Tylenol Liquid
		NDC/DIN: 0121197121 (SOURCE: eMAR)
		Admin Queries
		MAR Pain Assessment Reason Not Required: 3 Pain Assessment Comment: 101.6
		Pain Management Goal/Pain Tolerated as This Number or Less: 3
	0145	Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicare Waste
		Description: Debit svc DR/Tm 11/24/22 0141: TYL650L Amount Wasted: 0 MG; Drug Waste%: 0
		0226 Reassessment by BENSTS8 at 0211
		Reassessment: MAR Pain Assessment
		MAR Pain Assessment Reason Not Required: 3
		Pain Management Goal/Pain Tolerated as This Number or Less: 3

DATE: 12/03/22 @ 0013  
USER: PHABRG0B

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/23/22 to 0659 11/24/22 (continued)	

Sodium Chloride 0.9% 250 ml 240 ML  
(0.9% Sodium Chloride 250 ml Bag)  
CARDENE 25 MG  
(Nicardipine 25 mg/10 ml Vial)  
50 Mls/Hr IV TITRATE/PBN  
PRN Reason: Hypertension  
Comments: Conc. = 0.1 mg/ml  
Protect From Light  
RX #: Q02284436

11/23/22	2236	Edit or Verification THONHUN	
	2236	Edit or Verification THONHUN	
	2253	Acknowledged Order LAMPHOA	
	2258	BNSJTS at 2258 CANV: 50 Mls/HR	
		Barcode Medication: CARDENE	
		NDC/DIN: 00143968910 (SOURCE: Default NDCs)	
		Barcode Medication: sodium chloride 0.9% 250 ml	
		NDC/DIN: 00338004902 (SOURCE: Default NDCs)	
		Admin Queries	
		Container Volume: 250 Dose Rate: 5 Cumulative Elapsed Time (minutes): 0m	
		Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0	
	2258	Infusion In Progress 2258 BNSJTS: started, Dose Rate: 5 MG/HR, Rate: 50 Mls/HR	
		Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:	
		Queries	
		Container Volume: 250 Dose Rate: 5 Cumulative Elapsed Time (minutes): 0m	
		Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0	
	2300	Infusion In Progress 2300 BNSJTS: paused, Dose Rate: 0 MG/HR, Rate: 0 Mls/HR	
		Intake: 1.667 mls, Cumulative Intake: 1.667 mls, Container Volume: 248.333 mls, Site:	
		Queries	
		Cumulative Dose: 0.1667 Cumulative Intake (bag): 1.667 Cumulative Intake (Rx): 1.667	
		Container Volume: 248.333 Dose Rate: 0 Cumulative Elapsed Time (minutes): 2m	
		Increase/Decrease: Paused Infusion Intake: 1.667 Infusion Rate: 0 Waste Amount: 0	
	2315	Transaction Rule PHABRG0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Fm 11/23/22 2258: NIC25I Amount Wasted: 0 MG; Drug Waste%: 0	
	2315	Transaction Rule PHABRG0B	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Fm 11/23/22 2258: NS250 Amount Wasted: 10 Ml; Drug Waste%: 4	
	2332	Infusion In Progress 2332 BNSJTS: resumed/decreased, Dose Rate: 2.5 Mls/HR	
		Intake: 0 mls, Cumulative Intake: 1.667 mls, Container Volume: 248.333 mls, Site:	
		Queries	
		Cumulative Dose: 0.1667 Cumulative Intake (bag): 1.667 Cumulative Intake (Rx): 1.667	
		Container Volume: 248.333 Dose Rate: 2.5 Cumulative Elapsed Time (minutes): 2m	
		Increase/Decrease: Resumed/Decreased Infusion Intake: 0 Infusion Rate: 25 Waste Amount: 0	
	0000	Infusion In Progress 0000 BNSJTS: running, Dose Rate: 2.5 MG/HR, Rate: 25 Mls/HR	
		Intake: 11.667 mls, Cumulative Intake: 13.334 mls, Container Volume: 236.666 mls, Site:	
		Queries	
		Cumulative Dose: 1.3334 Cumulative Intake (bag): 13.334 Cumulative Intake (Rx): 13.334	
		Container Volume: 236.666 Dose Rate: 2.5 Cumulative Elapsed Time (minutes): 30m	
		Increase/Decrease: Running Infusion Intake: 11.667 Infusion Rate: 25 Waste Amount: 0	
	0100	Infusion In Progress 0100 BNSJTS: running, Dose Rate: 2.5 MG/HR, Rate: 25 Mls/HR	
		Intake: 25 mls, Cumulative Intake: 38.334 mls, Container Volume: 211.666 mls, Site:	
		Queries	

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This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
 USER: PHARCTOR

Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	STOP
0700 11/23/22 to 0659 11/24/22 (continued)		

Cumulative Dose: 3.6334	Cumulative Intake (bag): 38.334	Cumulative Intake (Rx): 38.334
Container Volume: 211.666	Dose Rate: 2.5	Cumulative Elapsed Time (minutes): 1h 30m
Increase/Decrease: Running	Infusion Intake: 25	Infusion Rate: 25
0200	Infusion In Progress	0200 BMSIS: Running, Dose Rate: 2.5 MG/HR, Rate: 25 ML/HR
Intake: 25	mls, Cumulative Intake: 63.334	mls, Container Volume: 186.666
mls, Site:		
Queries		
Cumulative Dose: 6.3334	Cumulative Intake (bag): 63.334	Cumulative Intake (Rx): 63.334
Container Volume: 186.666	Dose Rate: 2.5	Cumulative Elapsed Time (minutes): 2h 30m
Increase/Decrease: Running	Infusion Intake: 25	Infusion Rate: 25
0245	Infusion In Progress	0245 BMSIS: Paused, Dose Rate: 0 MG/HR, Rate: 0 ML/HR
Intake: 18.75	mls, Cumulative Intake: 82.084	mls, Container Volume: 167.916
mls, Site:		
Queries		
Cumulative Dose: 8.2084	Cumulative Intake (bag): 82.084	Cumulative Intake (Rx): 82.084
Container Volume: 167.916	Dose Rate: 0	Cumulative Elapsed Time (minutes): 3h 15m
Increase/Decrease: Paused	Infusion Intake: 18.75	Infusion Rate: 0
Waste Amount: 0		

**Ativan (lorazepam 2 mg/ml vial)**  
 2 MG IV-Push Every two hours/PRN  
 PRN Reason: Seizures  
 RX #: 002284449

11/23/21	2303	Edit or Verification	TRANSTE
	2303	Edit or Verification	TRANSTE
	2306	Acknowledged Order	BMSIS
	2306	BMSIS	at 2306 GAV: 2 MG
		Barcode Medication:	Ativan
		NDC/DIN:	0641604401 (SOURCE: eMAR)
	2315	Transaction Rule	PHARCTOR
		MEDI.WASTE - Medicare Waste	
		Description:	Debit Svc Dc/Tm 11/23/22 2306: ATI2I Amount Wasted: 0 MG; Drug Waste: 0
	0136	BMSIS	at 0136 GAV: 2 MG
		Barcode Medication:	Ativan
		NDC/DIN:	0641604401 (SOURCE: eMAR)
	0145	Transaction Rule	PHARCTOR
		MEDI.WASTE - Medicare Waste	
		Description:	Debit Svc Dc/Tm 11/24/22 0136: ATI2I Amount Wasted: 0 MG; Drug Waste: 0

ADMINISTRATION PERIOD:	START/STOP	STOP
0700 11/24/22 to 0659 11/25/22		

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 ml UDCUP)**  
15 ML NUGOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: Q02233392

START/STOP	DESCRIPTION	AMOUNT WASTED
11/27/22	0800 TONGKAL at 0830 GAVE: 15 ML Barcode Medication: Peridex Oral Rinse NDC/DIN: 0011620016 (SOURCE: eMAR) Expiration Date: 04/28/23	0 ML; Drug Waste%: 0
	0845 Transaction Rule PHABRC08 MEDT.WASTE - Medicare Waste	
	2000 OANDAL at 2044 GAVE: 15 ML Barcode Medication: Peridex Oral Rinse NDC/DIN: 0011620016 (SOURCE: eMAR) Expiration Date: 05/18/23	0 ML; Drug Waste%: 0
	2049 Transaction Rule PHABRC08 MEDT.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/24/22 2044: PER15L Amount Wasted: 0 ML; Drug Waste%: 0	

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG G-TUBE DAILY before breakfast  
RX #: Q02279429

START/STOP	DESCRIPTION	AMOUNT WASTED
11/21/22	0700 BENSTBS at 0702 GAVE: 112 MCG Barcode Medication: Synthroid NDC/DIN: 4229203901 (SOURCE: eMAR)	0 MCG; Drug Waste%: 0
	0716 Transaction Rule PHABRC08 MEDT.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 11/24/22 0702: SYN112 Amount Wasted: 0 MCG; Drug Waste%: 0	

**Norvasc (Amlodipine 5 mg Tablet)**  
5 MG G-TUBE DAILY  
RX #: Q02279431

START/STOP	DESCRIPTION	AMOUNT WASTED
11/21/22	0845 Transaction Rule PHABRC08 MEDT.WASTE - Medicare Waste	
	1000 TONGKAL at 0830 GAVE: 5 MG Barcode Medication: Norvasc NDC/DIN: 0904637061 (SOURCE: eMAR)	0 MG; Drug Waste%: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

11/21/22	0845	Transaction Rule PHABRC0B							
		MEDI.WASTE - Medicare Waste							
		Description: Debit Svc Dr/Tm 11/24/22 0830: PE20 Amount Wasted: 0 MG; Drug Waste%: 0							
		1000 TONGVAL at 0830 GAVE: 20 MG							
		Barcode Medication: Pepcid							
		NDC/DIN: 6373964510 (SOURCE: eMAR)							
		2049 Transaction Rule PHABRC0B							
		MEDI.WASTE - Medicare Waste							
		Description: Debit Svc Dr/Tm 11/24/22 2045: PE20 Amount Wasted: 0 MG; Drug Waste%: 0							
		2100 OANDLAL at 2045 GAVE: 20 MG							
		Barcode Medication: Pepcid							
		NDC/DIN: 6373964510 (SOURCE: eMAR)							

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG G-TUBE TWICE A DAY  
Dose Inst: HOLD if SBPK130  
RX #: 002279435

11/21/22	0845	Transaction Rule PHABRC0B							
		MEDI.WASTE - Medicare Waste							
		Description: Debit Svc Dr/Tm 11/24/22 0830: APR25 Amount Wasted: 0 MG; Drug Waste%: 0							
		1000 TONGVAL at 0830 GAVE: 25 MG							
		Barcode Medication: Apresoline							
		NDC/DIN: 0904644161 (SOURCE: eMAR)							
		2100 Not Administered OANDLAL at 2256 HYPOFN							

**Sodium Chloride (Sodium Chloride 1 gm Tablet)**  
1 GM G-TUBE Three Times Daily  
RX #: 002279436

11/21/22	0845	Transaction Rule PHABRC0B							
		MEDI.WASTE - Medicare Waste							
		Description: Debit Svc Dr/Tm 11/24/22 0832: S0D1 Amount Wasted: 0 GM; Drug Waste%: 0							
		1000 TONGVAL at 0832 GAVE: 1 GM							
		Barcode Medication: Sodium Chloride							
		NDC/DIN: 0022317601 (SOURCE: eMAR)							
		Expiration Date: 05/08/23							
		1417 Transaction Rule PHABRC0B							
		MEDI.WASTE - Medicare Waste							
		Description: Debit Svc Dr/Tm 11/24/22 1402: S0D1 Amount Wasted: 0 GM; Drug Waste%: 0							
		1500 TONGVAL at 1402 GAVE: 1 GM							
		Barcode Medication: Sodium Chloride							
		NDC/DIN: 0022317601 (SOURCE: eMAR)							
		Expiration Date: 05/08/23							
		2100 Not Administered OANDLAL at 2257 on NS .3							



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/24/22 to 0659 11/25/22 (continued)		

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL) | 11/22/22 | 1021 Discontinue SEUA  
30 UNITS SUB-Q Q12HR 06 18 | | 1021 Order Entry SEUA  
Comments: HOLD IF THE PR WITHHELD OR BLOOD SUGAR BELOW | | 1136 Acknowledged Order TONGVAL  
100 MG/DL. | |  
RX #: Q02281709 | |

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/	STOP
0700 11/24/22 to 0659 11/25/22 (continued)		

Sodium Chloride 0.9% 100 ml 100 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Keppra 500 MG  
(Levetiracetam 500 mg/5 ml Vial)  
420 Mls/HR IVB Every twelve hours  
Comments: SEND ONE DOSE NOW  
RX #: 002284450

11/23/22 0832 Infusion In Progress 0832 TONGHAL: Started/Running, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 105 mls, Site:  
Queries  
Cumulative Dose: 500 Cumulative Intake (RX): 105 Container Volume: 105  
Cumulative Elapsed Time (minutes): 15m Increase/Decrease: Started/Running Infusion Rate:  
420 Waste Amount: 0  
0845 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 0832: KEP500I Amount Wasted: 0 MG; Drug Waste\$: 0  
0845 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 0832: KEP500I Amount Wasted: 0 MG; Drug Waste\$: 0  
0845 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 0832: NS100 Amount Wasted: 0 ML; Drug Waste\$: 0  
0847 Infusion In Progress 0847 TONGHAL: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 1000 Cumulative Intake (bag): 105 Cumulative Intake (RX): 210  
Container Volume: 0 Cumulative Elapsed Time (minutes): 30m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0  
0900 TONGHAL at 0832 GAVE: 420 Mls/HR  
Barcode Medication: Keppra  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: Sodium Chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 500 Cumulative Intake (RX): 105 Container Volume: 105  
Cumulative Elapsed Time (minutes): 15m Increase/Decrease: Started/Running Infusion Rate:  
420 Waste Amount: 0  
2046 Infusion In Progress 2046 OAMIDL: started/Running, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 105 mls, Site:  
Queries  
Cumulative Dose: 1000 Cumulative Intake (RX): 210 Container Volume: 105  
Cumulative Elapsed Time (minutes): 30m Increase/Decrease: Started/Running Infusion Rate:  
420 Waste Amount: 0  
2049 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 2046: KEP500I Amount Wasted: 0 MG; Drug Waste\$: 0  
2049 Transaction Rule PHABRC0B  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 2046: NS100 Amount Wasted: 0 ML; Drug Waste\$: 0  
2100 OAMIDL at 2046 GAVE: 420 Mls/HR  
Barcode Medication: Keppra  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: Sodium Chloride 0.9% 100 ml

DATE: 12/03/22 @ 0013  
USER: PHARMC08

Citrus Valley \*Live\* - PHA  
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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	
0700 11/24/22 to 0659 11/25/22 (continued)		

NDC/DIN: 0038004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 1000 Cumulative Intake (Rx): 210 Container Volume: 105  
Cumulative Elapsed Time (minutes): 30m Increase/Decrease: started/Running Infusion Rate:  
420 Waste Amount: 0  
2101 Infusion In Progress: Infused, Dose Rate: / Rate: 0 Mls/Hr  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Overies  
Cumulative Dose: 1500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 315  
Container Volume: 0 Cumulative Elapsed Time (minutes): 45m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0

Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)

10 UNIT IV-Push NCM/ONE

Comments: IA/SA warning: order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION

RX #: 002284776

11/24/22 0716 Transaction Rule PHARMC08  
11/24/22 MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 0702: INSRBG Amount Wasted: 0 UNIT, Amount Given:  
0.100 ML

Novolin Regular (Insulin Regular (Human) 100 units/ml Vial)

10 UNIT IV-Push NCM/ONE

Comments: IA/SA warning: order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION

RX #: 002284842

11/24/22 0838 TONGMAL at 0903 CO-SIGNER: GARCQUIA GAVE: 10 UNIT  
11/24/22 Barcode Medication: Novolin Regular  
NDC/DIN: 0169183311 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 436  
0900 Acknowledged Order TONGMAL  
0902 Edit or Verification IEPHILL  
0902 Edit or Verification IEPHILL  
0902 Discontinue PHARMC08  
0903 Acknowledged Order TONGMAL  
0916 Transaction Rule PHARMC08  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 0903: INSRBG Amount Wasted: 0 UNIT, Amount Given:  
0.100 ML

DATE: 12/03/22 @ 0013  
USER: PHABRG08

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL)  
24 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE FB WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: Q02284989

11/24/22	1021	Order Entry SEVA
	1030	Edit or Verification ZPHA.ANL
	1030	Edit or Verification ZPHA.ANL
	1136	Acknowledged Order TONGMAL
	1301	Transaction Rule PHABRG08
		MEDI.WASTE - Medicate Waste
		Description: Debit svc Dr/Tm 11/24/22 1246: INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.240 ML
	1400	TONGMAL at 1246 CO-SIGNER: GARCUDA SITE: Abdomen GAVE: 24 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 413 MAR Injection Site: 11
	2200	Not Administered OAMDLAL at 2258 ON INSULIN DRIP
		Admin Queries
		Finger Stick Blood Glucose: 185
	0600	Not Administered OAMDLAL at 0606 on insulin drip
		Admin Queries
		Finger Stick Blood Glucose: 165

DATE: 12/03/22 @ 0013  
USER: PHARMC08

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
(0.9% Sodium Chloride 100 ml MINI-Bag)  
zosyn 4.5 GM  
Piperacillin/Tazobactam 4.5 gm Vial)  
25 MLS/HR TYPE Q8H  
RX #: 002285170

11/24/22 1235 Acknowledged Order TONGVAL  
12/04/22 1237 Acknowledged Order TONGVAL  
1237 Edit or Verification ZPRA-ANL  
1237 Edit or Verification ZPRA-ANL  
1700 TONGVAL at 1742 GAVB: 25 MLS/HR  
Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag  
NDC/DIN: 00338055318 (SOURCE: Default NDCs)  
Barcode Medication: Zosyn  
NDC/DIN: 00781311495 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 25 Waste Amount: 0  
1742 Infusion In Progress 1742 TONGVAL: Started, Dose Rate: / Rate: 25 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Queries  
Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 25 Waste Amount: 0  
1748 Transaction Rule PHARMC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 1742: NS100MB Amount Wasted: 0 ML; Drug Waste%: 0  
1748 Transaction Rule PHARMC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/24/22 1742: 20845t Amount Wasted: 0 GM; Drug Waste%: 0  
2142 Infusion In Progress 0100 OANDLAL: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 4.5 Cumulative Intake (bag) : 100 Cumulative Intake (Rx) : 100  
Container Volume: 0 Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0  
0100 OANDLAL at 0100 GAVB: 25 MLS/HR  
Barcode Medication: Zosyn  
NDC/DIN: 0781311491 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: 4.5 Cumulative Intake (Rx) : 100 Container Volume: 100  
Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Started/Running Infusion Rate:  
25 Waste Amount: 0  
0100 Infusion In Progress 0100 OANDLAL: started/Running, Dose Rate: / Rate: 25 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: 4.5 Cumulative Intake (Rx) : 100 Container Volume: 100  
Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Started/Running Infusion Rate:  
25 Waste Amount: 0  
0329 Transaction Rule PHARMC08

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/24/22 to 0659 11/25/22 (continued)	STAGE	

MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/25/22 0100: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0  
0329 Transaction Rule PHABRCIOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/25/22 0100: 20845I Amount Wasted: 0 GM; Drug Waste%: 0  
0500 Infusion In Progress 0500 OANIDAL: Infused, Dose Rate: / Rate: 25 ML/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Overies  
Cumulative Dose: 9 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 200  
Container Volume: 0 Cumulative Elapsed Time (minutes): 8h 0m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 25 Waste Amount: 0  
0500 Infusion In Progress 0500 OANIDAL: started/Running, Dose Rate: / Rate: 25 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Overies  
Cumulative Dose: 9 Cumulative Intake (Rx): 200 Container Volume: 100  
Cumulative Elapsed Time (minutes): 8h 0m Increase/Decrease: started/Running Infusion Rate:  
25 Waste Amount: 0  
0615 Transaction Rule PHABRCIOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/25/22 0500: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0  
0615 Transaction Rule PHABRCIOB  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/25/22 0500: 20845I Amount Wasted: 0 GM; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABR00B

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/24/22 to 0659 11/25/22 (continued)	STOP

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
(0.9% Sodium Chloride 100 ml MINI-Bag)  
zosyn 4.5 GM  
(Piperacillin/Tazobactam 4.5 gm Vial)  
200 MLS/HR IVB8 NCM/ONE  
Comments: LOADING DOSE - INFUSE OVER 30 MIN  
RX #: 002285169

11/24/22	1235	Acknowledged Order TONGMAL
11/24/22	1236	Edit or Verification ZPHA.ANL
	1236	Edit or Verification ZPHA.ANL
	1237	Acknowledged Order TONGMAL
	1245	TONGMAL at 1402 GAVE: 200 MLS/HR
		Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag
		NDC/DIN: 00338055318 (SOURCE: Default NDCs)
		Barcode Medication: Zosyn
		NDC/DIN: 00781311495 (SOURCE: Default NDCs)
		Admin Queries
		Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started
		Infusion Rate: 200 Waste Amount: 0
	1314	Discontinue PHABR00B
	1330	Acknowledged Order TONGMAL
	1402	Infusion In Progress 1402 TONGMAL: started, Dose Rate: / Rate: 200 MLS/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
		Queries
		Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started
		Infusion Rate: 200 Waste Amount: 0
	1417	Transaction Rule PHABR00B
		MEDI.WASTE - Medicare Waste
	1417	Transaction Rule PHABR00B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/24/22 1402: 208451 Amount Wasted: 0 GM; Drug Waste%: 0
	1432	Infusion In Progress 1432 NSC.TRM16: Infused, Dose Rate: / Rate: 0 MLS/HR
		Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
		Queries
		Cumulative Dose: 4.5 Cumulative Intake (bag): 100 Cumulative Intake (RX): 100
		Container Volume: 0 Cumulative Elapsed Time (minutes): 30m Increase/Decrease: Infused
		Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0

**Vancomycin per Pharmacy (Vancomycin - Dosed by PHA)**  
1 EACH MISCELLANEOUS PER PROTOCOL  
Comments: All initial dosing and adjustments are managed by pharmacy protocols. Please contact pharmacy for any concerns.  
RX #: 002285168

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USER: PHARMCIOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/24/22 to 0659 11/25/22 (continued)	STOP

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 ML/HR IVB8 Q24H  
Comments: \*Refrigerate\*  
RX TO FOLLOW  
RX #: Q02285215

11/24/22	1254 Edit or Verification ZPRA.AND
	1254 Edit or Verification ZPRA.AND
	1300 TONGMAL at 1402 GAVE: 125 ML/HR
	Barcode Medication: Dextrose 5% 250 mL
	NDC/DIN: 0038001702 (SOURCE: DEFAULT NDCs)
	Barcode Medication: Vancomycin
	NDC/DIN: 67457034001 (SOURCE: DEFAULT NDCs)
	Admin Queries
	Container Volume: 250 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started
	Infusion Rate: 125 Waste Amount: 0
	1311 Acknowledged Order TONGMAL
	1402 Infusion In Progress 1402 TONGMAL: started, Dose Rate: / Rate: 125 ML/HR
	Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:
	Queries
	Container Volume: 250 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: started
	Infusion Rate: 125 Waste Amount: 0
	1417 Transaction Rule PHARMCIOB
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/24/22 1402: D5W250 Amount Wasted: 0 ML, Drug Waste%: 0
	1417 Transaction Rule PHARMCIOB
	MBDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/24/22 1402: VANILP Amount Wasted: 0 MG, Amount Given:
	1.25 VIAL
	1602 Infusion In Progress 1602 TONGMAL: Infused, Dose Rate: / Rate: 0 ML/HR
	Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:
	Queries
	Cumulative Dose: 1250 Cumulative Intake (bag): 250 Cumulative Intake (RX): 250
	Container Volume: 0 Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Infused
	Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0



DATE: 12/03/22 @ 0013  
USER: PHABKJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

**Ddavy (Desmopressin 4 mcg/ml Amp)**  
2 MCC IV-Push Every twelve hours  
RX #: 002285266

11/24/22 1339 Edit or Verification GALT  
1340 Acknowledged Order TONGMAL  
1343 Edit or Verification IEPHILL  
1343 Edit or Verification IEPHILL  
1345 NDC, TRN16 at 1505 GAVE: 2 MCCs  
Barcode Medication: Ddavy  
NDC/DIN: 69918089910 (SOURCE: Default NDCs)  
1517 Transaction Rule PHABKJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/24/22 1505: DDAI Amount Wasted: 2 MCC; Drug Waste%: 50  
2100 Not Administered VILIBRN at 11/25/22 - 0714 MDDC  
2132 Discontinue ZPHA.DAV

**Solucortef (Hydrocortisone Sod Succinate 100 mg/2 ml Vial)**  
100 MG IV-Push Every eight hours  
RX #: 002285263

11/24/22 1340 Acknowledged Order TONGMAL  
1342 Edit or Verification IEPHILL  
1342 Edit or Verification IEPHILL  
1400 TONGMAL at 1402 GAVE: 100 MG  
Barcode Medication: solucortef  
NDC/DIN: 0009001103 (SOURCE: eMAR)  
1417 Transaction Rule PHABKJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/24/22 1402: SOLC100I Amount Wasted: 0 MG; Drug Waste%:  
0  
2049 Transaction Rule PHABKJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/24/22 2044: SOLC100I Amount Wasted: 0 MG; Drug Waste%:  
0  
2200 OAMPDLA at 2044 GAVE: 100 MG  
Barcode Medication: solucortef  
NDC/DIN: 0009001103 (SOURCE: eMAR)  
0600 OAMPDLA at 0605 GAVE: 100 MG  
Barcode Medication: solucortef  
NDC/DIN: 0009001103 (SOURCE: eMAR)  
0615 Transaction Rule PHABKJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dt/Tm 11/25/22 0605: SOLC100I Amount Wasted: 0 MG; Drug Waste%:  
0

DATE: 12/03/22 @ 0013  
 USER: PHARCTOR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/24/22 to 0659 11/25/22 (continued)		

**Sodium Chloride 3% 500 ML**  
 (3% Sodium Chloride 500 ml Bag)  
 30 MLS/HR IV .016840M  
 Comments: Sodium Goal: 145-160  
 If increase or decrease of Sodium by 10,  
 Inform provider  
 Discontinue BMP q8hr when 3% NaCl d/c'd  
 RX #: Q02285272

11/24/22	1345	GARCTUA at 1432 GAVE: 30 MLS/HR	
		Barcode Medication: sodium Chloride 3%	
		NDC/DIN: 0038005403 (SOURCE: Default NDCs)	
		Admin Queries	
		Cumulative Dose: Not Applicable Container Volume: 500 Cumulative Elapsed Time (minutes):	
		0m Increase/Decrease: started Infusion Rate: 30 Waste Amount: 0	
		1352 Edit or Verification ZPMA.DAY	
		1352 Edit or Verification ZPMA.DAY	
		1354 Acknowledged Order TONGMAL	
		1432 Infusion In Progress 1432 GARCTUA: started, Dose Rate: / Rate: 30 MLS/HR	
		Intake: / Cumulative Intake: / Container Volume: 500 mls, Site:	
		Queries	
		Cumulative Dose: Not Applicable Container Volume: 500	
		Cumulative Elapsed Time (minutes): 0m Increase/Decrease: started Infusion Rate: 30	
		Waste Amount: 0	
		1447 Transaction Rule PHARCTOR	
		MBDI.WASTE - Medicare Waste	
		Description: Debt svc Dc/Tm 11/24/22 1432: NAC13/500 Amount Wasted: 0 ML; Drug Waste%	
		0	
		1500 Infusion In Progress 1500 TONGMAL: Running, Dose Rate: / Rate: 30 MLS/HR	
		Intake: 14 mls, Cumulative Intake: 14 mls, Container Volume: 486 mls, Site:	
		Queries	
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 14 Cumulative Intake (Rx): 14	
		Container Volume: 486 Cumulative Elapsed Time (minutes): 28m Increase/Decrease: Running	
		Infusion Intake: 14 Infusion Rate: 30 Waste Amount: 0	
		1600 Infusion In Progress 1600 TONGMAL: Running, Dose Rate: / Rate: 30 MLS/HR	
		Intake: 30 mls, Cumulative Intake: 44 mls, Container Volume: 456 mls, Site:	
		Queries	
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 44 Cumulative Intake (Rx): 44	
		Container Volume: 456 Cumulative Elapsed Time (minutes): 1h 28m Increase/Decrease: Running	
		Infusion Intake: 30 Infusion Rate: 30 Waste Amount: 0	
		1700 Infusion In Progress 1700 TONGMAL: Running, Dose Rate: / Rate: 30 MLS/HR	
		Intake: 30 mls, Cumulative Intake: 74 mls, Container Volume: 426 mls, Site:	
		Queries	
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 74 Cumulative Intake (Rx): 74	
		Container Volume: 426 Cumulative Elapsed Time (minutes): 2h 28m Increase/Decrease: Running	
		Infusion Intake: 30 Infusion Rate: 30 Waste Amount: 0	
		1800 Infusion In Progress 1800 TONGMAL: Running, Dose Rate: / Rate: 30 MLS/HR	
		Intake: 30 mls, Cumulative Intake: 104 mls, Container Volume: 396 mls, Site:	
		Queries	
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 104 Cumulative Intake (Rx):	
		104 Container Volume: 396 Cumulative Elapsed Time (minutes): 3h 28m Increase/Decrease:	
		Running Infusion Intake: 30 Infusion Rate: 30 Waste Amount: 0	

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

1900	Infusion In Progress	1900 OAMPDLA	Running	Dose Rate: , Rate: 30 MLS/HR
				Intake: 30 mls, Cumulative Intake: 134 mls, Container Volume: 366 mls, Site:
			Queries	
				Cumulative Dose: Not Applicable Cumulative Intake (bag): 134 Cumulative Intake (Rx):
134	Container Volume:	366	Cumulative Elapsed Time (minutes):	4h 28m Increase/Decrease:
	Running Infusion Intake:	30	Infusion Rate:	30 Waste Amount: 0
2000	Infusion In Progress	2000 OAMPDLA	Running	Dose Rate: , Rate: 30 MLS/HR
				Intake: 30 mls, Cumulative Intake: 164 mls, Container Volume: 336 mls, Site:
			Queries	
				Cumulative Dose: Not Applicable Cumulative Intake (bag): 164 Cumulative Intake (Rx):
164	Container Volume:	336	Cumulative Elapsed Time (minutes):	5h 28m Increase/Decrease:
	Running Infusion Intake:	30	Infusion Rate:	30 Waste Amount: 0
2053	Discontinue	GALZ		
2100	Infusion In Progress	2100 OAMPDLA	Running	Dose Rate: , Rate: 30 MLS/HR
				Intake: 30 mls, Cumulative Intake: 194 mls, Container Volume: 306 mls, Site:
			Queries	
				Cumulative Dose: Not Applicable Cumulative Intake (bag): 194 Cumulative Intake (Rx):
194	Container Volume:	306	Cumulative Elapsed Time (minutes):	6h 28m Increase/Decrease:
	Running Infusion Intake:	30	Infusion Rate:	30 Waste Amount: 0
2200	Infusion In Progress	2200 OAMPDLA	Running	Dose Rate: , Rate: 30 MLS/HR
				Intake: 30 mls, Cumulative Intake: 224 mls, Container Volume: 276 mls, Site:
			Queries	
				Cumulative Dose: Not Applicable Cumulative Intake (bag): 224 Cumulative Intake (Rx):
224	Container Volume:	276	Cumulative Elapsed Time (minutes):	7h 28m Increase/Decrease:
	Running Infusion Intake:	30	Infusion Rate:	30 Waste Amount: 0
2300	Infusion In Progress	2300 OAMPDLA	Running	Dose Rate: , Rate: 30 MLS/HR
				Intake: 30 mls, Cumulative Intake: 254 mls, Container Volume: 246 mls, Site:
			Queries	
				Cumulative Dose: Not Applicable Cumulative Intake (bag): 254 Cumulative Intake (Rx):
254	Container Volume:	246	Cumulative Elapsed Time (minutes):	8h 28m Increase/Decrease:
	Running Infusion Intake:	30	Infusion Rate:	30 Waste Amount: 0

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	11/24/22 11/24/22

Sodium Chloride 0.9% 500 ML 500 ML  
(0.9% Sodium Chloride 500 ml Bag)  
999 MLS/HR IV - 031M/ONE  
RX #: 002285271

11/24/22	1330	Infusion In Progress	1330 TONGMAL: Started, Dose Rate: / Rate: 999 MLS/HR
11/24/22		Intake: / Cumulative Intake: / Container Volume: 500 mL, Site:	
		Queries	
		Cumulative Dose: Not Applicable Container Volume: 500	
		Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 999	
		Waste Amount: 0	
	1344	TONGMAL at 1330 GAVE: 999 MLS/HR	
		Barcode Medication: Sodium Chloride 0.9% 500 ML	
		NDC/DIN: 0338004903 (SOURCE: eMAR)	
		Admin Queries	
		Cumulative Dose: Not Applicable Container Volume: 500 Cumulative Elapsed Time (minutes):	
		0m Increase/Decrease: Started Infusion Rate: 999 Waste Amount: 0	
	1350	Edit of Verification ZPRA.DAV	
	1350	Edit of Verification ZPRA.DAV	
	1351	Acknowledged Order TONGMAL	
	1401	Infusion In Progress 1401 TONGMAL: Infused, Dose Rate: / Rate: 0 MLS/HR	
		Intake: 500 mL, Cumulative Intake: 500 mL, Container Volume: 0 mL, Site:	
		Queries	
		Cumulative Dose: Not Applicable Cumulative Intake (Bag): 500 Cumulative Intake (Rx):	
		500 Container Volume: 0 Cumulative Elapsed Time (minutes): 31m Increase/Decrease: Infused	
		Infusion Intake: 500 Infusion Rate: 0 Waste Amount: 0	
	1414	Discontinue PHARMC08	
	1417	Transaction Rule PHARMC08	
		MEDI.WASTE - Medication Waste	
		Description: Debit Svc Dr/Tm 11/24/22 1330: NS500 Amount Wasted: 0 ML, Drug Waste%: 0	
	1508	Acknowledged Order TONGMAL	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/
0700 11/24/22 to 0659 11/25/22 (continued)	STOP

Sodium Chloride 0.9% 1,000 ML  
(0.9% Sodium Chloride 1,000 ml Bag)  
125 ML/HR IV .08H  
RX #: Q02285274

11/24/22 1345 TONGMAL at 1402 GAVE: 125 ML/HR  
Barcode Medication: sodium Chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed time (minutes):  
0m Increase/Decrease: started Infusion Rate: 125 Waste Amount: 0  
1352 Edit or Verification ZPRA.DAY  
1352 Edit or Verification ZPRA.DAY  
1354 Acknowledged Order TONGMAL  
1402 Infusion In Progress 1402 TONGMAL: started, Dose Rate: / Rate: 125 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 ml/s, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed time (minutes): 0m Increase/Decrease: started Infusion Rate: 125  
Waste Amount: 0  
1417 Transaction Rule PHABRGT08  
MEDT.WASTE - Medicare Waste  
Description: Debt svc Dc/Tm 11/24/22 1402: NS Amount Wasted: 0 ML, Drug Waste%: 0  
1500 Infusion In Progress 1500 TONGMAL: Running, Dose Rate: / Rate: 125 ML/HR  
Intake: 120.833 ml/s, Cumulative Intake: 120.833 ml/s, Container Volume: 879.167 ml/s, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 120.833  
Cumulative Intake (RX): 120.833 Container Volume: 879.167  
Cumulative Elapsed time (minutes): 58m Increase/Decrease: Running Infusion Intake: 120.833  
Infusion Rate: 125 Waste Amount: 0  
1600 Infusion In Progress 1600 TONGMAL: Running, Dose Rate: / Rate: 125 ML/HR  
Intake: 125 ml/s, Cumulative Intake: 245.833 ml/s, Container Volume: 794.167 ml/s, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 245.833  
Cumulative Intake (RX): 245.833 Container Volume: 794.167  
Cumulative Elapsed time (minutes): 1h 58m Increase/Decrease: Running Infusion Intake: 125  
Infusion Rate: 125 Waste Amount: 0  
1700 Infusion In Progress 1700 TONGMAL: Running, Dose Rate: / Rate: 125 ML/HR  
Intake: 125 ml/s, Cumulative Intake: 370.833 ml/s, Container Volume: 629.167 ml/s, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 370.833  
Cumulative Intake (RX): 370.833 Container Volume: 629.167  
Cumulative Elapsed time (minutes): 2h 58m Increase/Decrease: Running Infusion Intake: 125  
Infusion Rate: 125 Waste Amount: 0  
1800 Infusion In Progress 1800 TONGMAL: Running, Dose Rate: / Rate: 125 ML/HR  
Intake: 125 ml/s, Cumulative Intake: 495.833 ml/s, Container Volume: 504.167 ml/s, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 495.833

DATE: 12/03/22 @ 0013  
USER: PHABRG0B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

Cumulative Intake (Rx): 495.833 Container Volume: 504.167	
Cumulative Elapsed Time (minutes): 3h 58m Increase/Decrease: Running Infusion Intake: 125	
Infusion Rate: 125 Waste Amount: 0	
1849 Infusion In Progress 1849 TONGMHL: Infused, Dose Rate: / Rate: 125 MLS/HR	
Intake: 102.083 mls, Cumulative Intake: 597.916 mls, Container Volume: 0 mls, Site:	
Queries	
Cumulative Dose: Not Applicable Cumulative Intake (bag): 597.916	
Cumulative Intake (Rx): 597.916 Container Volume: 0 Cumulative Elapsed Time (minutes):	
4h 47m Increase/Decrease: Infused Infusion Intake: 102.083 Infusion Rate: 125	
Waste Amount: 402.084	
1849 Infusion In Progress 1849 TONGMHL: Started/Running, Dose Rate: / Rate: 125 MLS/HR	
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:	
Queries	
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 597.916 Container Volume: 1000	
Cumulative Elapsed Time (minutes): 4h 47m Increase/Decrease: Started/Running	
Infusion Rate: 125 Waste Amount: 0	
1900 Infusion In Progress 1900 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR	
Intake: 22.917 mls, Cumulative Intake: 22.917 mls, Container Volume: 977.083 mls, Site:	
Queries	
Cumulative Dose: Not Applicable Cumulative Intake (bag): 22.917 Cumulative Intake (Rx):	
620.833 Container Volume: 977.083 Cumulative Elapsed Time (minutes): 4h 58m	
Increase/Decrease: Running Infusion Intake: 22.917 Infusion Rate: 125 Waste Amount: 0	
1903 Transaction Rule PHABRG0B	
MEDI.WASTE - Medicare Waste	
2000 Infusion In Progress 2000 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR	
Intake: 125 mls, Cumulative Intake: 147.917 mls, Container Volume: 852.083 mls, Site:	
Queries	
Cumulative Dose: Not Applicable Cumulative Intake (bag): 147.917	
Cumulative Intake (Rx): 745.833 Container Volume: 852.083	
Cumulative Elapsed Time (minutes): 5h 58m Increase/Decrease: Running Infusion Intake: 125	
Infusion Rate: 125 Waste Amount: 0	
2100 Infusion In Progress 2100 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR	
Intake: 125 mls, Cumulative Intake: 272.917 mls, Container Volume: 727.083 mls, Site:	
Queries	
Cumulative Dose: Not Applicable Cumulative Intake (bag): 272.917	
Cumulative Intake (Rx): 870.833 Container Volume: 727.083	
Cumulative Elapsed Time (minutes): 6h 58m Increase/Decrease: Running Infusion Intake: 125	
Infusion Rate: 125 Waste Amount: 0	
2145 TONGMHL at 1849 GAVE: 125 MLS/HR	
Barcode Medication: sodium Chloride 0.9%	
NDC/DIN: 0338004904 (SOURCE: eMAR)	
Admin Queries	
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 597.916 Container Volume: 1000	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/24/22 to 0659 11/25/22 (continued)		

Cumulative Elapsed Time (minutes): 4h 47m Increase/Decrease: Started/Running  
| Infusion Rate: 125 Waste Amount: 0  
| 2200 Infusion In Progress 2200 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR  
| Intake: 125 mls, Cumulative Intake: 397.917 mls, Container Volume: 602.083 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 397.917  
| Cumulative Intake (Rx): 995.833 Container Volume: 602.083  
| Cumulative Elapsed Time (minutes): 7h 58m Increase/Decrease: Running Infusion Intake: 125  
| Infusion Rate: 125 Waste Amount: 0  
| 2300 Infusion In Progress 2300 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR  
| Intake: 125 mls, Cumulative Intake: 522.917 mls, Container Volume: 477.083 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 522.917  
| Cumulative Intake (Rx): 1120.833 Container Volume: 477.083  
| Cumulative Elapsed Time (minutes): 8h 58m Increase/Decrease: Running Infusion Intake: 125  
| Infusion Rate: 125 Waste Amount: 0  
| 0000 Infusion In Progress 0000 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR  
| Intake: 125 mls, Cumulative Intake: 647.917 mls, Container Volume: 352.083 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 647.917  
| Cumulative Intake (Rx): 1245.833 Container Volume: 352.083  
| Cumulative Elapsed Time (minutes): 9h 58m Increase/Decrease: Running Infusion Intake: 125  
| Infusion Rate: 125 Waste Amount: 0  
| 0100 Infusion In Progress 0100 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR  
| Intake: 125 mls, Cumulative Intake: 772.917 mls, Container Volume: 227.083 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 772.917  
| Cumulative Intake (Rx): 1370.833 Container Volume: 227.083  
| Cumulative Elapsed Time (minutes): 10h 58m Increase/Decrease: Running Infusion Intake: 125  
| Infusion Rate: 125 Waste Amount: 0  
| 0200 Infusion In Progress 0200 OANDLAL: Running, Dose Rate: / Rate: 125 MLS/HR  
| Intake: 125 mls, Cumulative Intake: 897.917 mls, Container Volume: 102.083 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 897.917  
| Cumulative Intake (Rx): 1495.833 Container Volume: 102.083  
| Cumulative Elapsed Time (minutes): 11h 58m Increase/Decrease: Running Infusion Intake: 125  
| Infusion Rate: 125 Waste Amount: 0  
| 0300 Infusion In Progress 0300 OANDLAL: Infused, Dose Rate: / Rate: 125 MLS/HR  
| Intake: 102.083 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
|  
| Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
| 1597.916 Container Volume: 0 Cumulative Elapsed Time (minutes): 12h 58m Increase/Decrease:  
| Infused Infusion Intake: 102.083 Infusion Rate: 125 Waste Amount: 0  
| 0300 Infusion In Progress 0300 OANDLAL: Started/Running, Dose Rate: / Rate: 125 MLS/HR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

Intake: / Cumulative Intake: / Container Volume: 1000 mLs, Size:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1597.916 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 12h 58m Increase/Decrease: started/running  
Infusion Rate: 125 Waste Amount: 0  
0400 Infusion In Progress 0400 OAMDLAU: Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: 125 mLs, Cumulative Intake: 125 mLs, Container Volume: 875 mLs, Size:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 125 Cumulative Intake (Rx):  
1722.916 Container Volume: 875 Cumulative Elapsed Time (minutes): 13h 58m  
Increase/Decrease: Running Infusion Intake: 125 Infusion Rate: 125 Waste Amount: 0  
0500 Infusion In Progress 0500 OAMDLAU: Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: 125 mLs, Cumulative Intake: 250 mLs, Container Volume: 750 mLs, Size:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 250 Cumulative Intake (Rx):  
1847.916 Container Volume: 750 Cumulative Elapsed Time (minutes): 14h 58m  
Increase/Decrease: Running Infusion Intake: 125 Infusion Rate: 125 Waste Amount: 0  
0545 OAMDLAU at 0300 GAVE: 125 MLS/HR  
Barcode Medication: sodium chloride 0.9%  
NDC/DIN: 0338004904 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1597.916 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 12h 58m Increase/Decrease: started/running  
Infusion Rate: 125 Waste Amount: 0  
0600 Infusion In Progress 0600 OAMDLAU: Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: 125 mLs, Cumulative Intake: 375 mLs, Container Volume: 625 mLs, Size:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 375 Cumulative Intake (Rx):  
1972.916 Container Volume: 625 Cumulative Elapsed Time (minutes): 15h 58m  
Increase/Decrease: Running Infusion Intake: 125 Infusion Rate: 125 Waste Amount: 0  
0615 Transaction Rule PHARMC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/25/22 0300: NS Amount Wasted: 0 MT; Drug Waste\$: 0



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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/24/22 to 0659 11/25/22 (continued)		

Potassium Chloride (Potassium Chloride 20 mg for oral soln pkt)

40 MEQ NG-TUBE NOW/ONE  
Comments: Dissolve packet contents with at least 4oz of cold water before administration.  
RX #: 002285775

11/24/22	2050 OAMDLAL at 2130 GAVE: 40 MEQ
11/24/22	Barcode Medication: Potassium Chloride
	NDC/DIN: 6923816171 (SOURCE: eMAR)
	Barcode Medication: Potassium Chloride
	NDC/DIN: 6923816171 (SOURCE: eMAR)
	2054 Edit or Verification ZPRA.DAV
	2054 Discontinue PHABRCJOB
	2130 Acknowledged Order OAMDLAL
	2136 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dt/Tm 11/24/22 2130: KCL20P0M Amount Wasted: 0 MEQ; Drug Waste\$:
	0

Potassium Chloride (Potassium Chloride 20 mg for oral soln pkt)

40 MEQ NG-TUBE NOW/ONE  
Comments: Dissolve packet contents with at least 4oz of cold water before administration.  
RX #: 002285785

11/24/22	2058 OAMDLAL at 2259 GAVE: 40 MEQ
11/24/22	Barcode Medication: Potassium Chloride
	NDC/DIN: 6923816171 (SOURCE: eMAR)
	Barcode Medication: Potassium Chloride
	NDC/DIN: 6923816171 (SOURCE: eMAR)
	2103 Edit or Verification ZPRA.RJB
	2103 Edit or Verification ZPRA.RJB
	2103 Discontinue PHABRCJOB
	2259 Acknowledged Order OAMDLAL
	2305 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dt/Tm 11/24/22 2259: KCL20P0M Amount Wasted: 0 MEQ; Drug Waste\$:
	0

Ddavep (Desmopressin 40 mcg/10 ml Vial)

2 MCG IV-Push DAILY  
RX #: 002285881

11/25/22	2132 Edit or Verification ZPRA.DAV
	2132 Edit or Verification ZPRA.DAV

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002237641

110/29/22	0834	TONGKAL	at 0834	CO-SIGNER:	GARCJUA	SITE:	Abdomen	GAVE:	12	UNIT			
				Barcode Medication:	Novolog								
				NDC/DIN:	0169750111	(SOURCE:	eMAR)						
				Admin Queries									
				Finger Stick Blood Glucose:	436	MAR	Injection	Site:	11				
				0845	Transaction Rule	PHABRCJOB							
				MEDI.MASTE	-	Medicare	Waste						
				Description:	Debit Svc Dc/Tm	11/24/22	0834:	INSASP	Amount	Wasted: 0	UNIT,	Amount	Given:
				0.120	ML								
				1021	Discontinue	GEUA							
				1136	Acknowledged	Order	TONGKAL						

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

Sodium Chloride 0.9% 100 ml 99 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Novolin Regular 100 UNIT  
(Insulin Regular (Human) 100 units/ml Vial)  
0 Mls/HR IV TITRATE/PN  
PNV Reason: Hyperglycemia  
Comments: INSULIN CONC = 1 unit/ml  
Dispense in "visiV" bag.  
Please send missing med slip for each dose  
\*Double check required\*  
(1) \_\_\_\_\_ (2) \_\_\_\_\_  
CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRES 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02284983

11/24/22	1029	Edit or Verification ZPRA.AM
	1029	Edit or Verification ZPRA.AM
	1136	Acknowledged Order TONGMAL
	1244	TONGMAL at 1244 CO-STOMER: GARCUIA CARE: 7 Mls/HR
		Barcode Medication: Novolin Regular
		NDC/DIN: 0016918311 (SOURCE: Default NDCs)
		Barcode Medication: sodium chloride 0.9% 100 ml
		NDC/DIN: 0038004918 (SOURCE: Default NDCs)
		Admin Queries
		Container Volume: 100 Dose Rate: 7 Cumulative Elapsed Time (minutes): 0m
		Increase/Decrease: Started Infusion Rate: 7 Waste Amount: 0 Finger Stick Blood Glucose: 413
		1244 Infusion In Progress 1244 TONGMAL: Started, Dose Rate: 7 UNIT/HR, Rate: 7 Mls/HR
		Intake: , Cumulative Intake: , Container Volume: 100 mls, Site:
		Queries
		Container Volume: 100 Dose Rate: 7 Cumulative Elapsed Time (minutes): 0m
		Increase/Decrease: Started Infusion Rate: 7 Waste Amount: 0 Finger Stick Blood Glucose: 413
		1301 Transaction Rule PHABRCJOB
		MEDI.WASRE - Medicate Waste
		Description: Dabit svc Dc/Fm 11/24/22 1244: INSRSG Amount Wasted: 0 UNIT/ Amount Given: 1 ML
		1301 Transaction Rule PHABRCJOB
		MEDI.WASRE - Medicate Waste
		Description: Dabit svc Dc/Fm 11/24/22 1244: NS100 Amount Wasted: 1 ML, Drug Waste%: 1
		1400 Infusion In Progress 1400 GARCUIA: Decreased, Dose Rate: 5 UNIT/HR, Rate: 5 Mls/HR
		Intake: 8.867 mls, Cumulative Intake: 8.867 mls, Container Volume: 91.133 mls, Site:
		Queries
		Cumulative Dose: 8.867 Cumulative Intake (bag): 8.867 Cumulative Intake (Rx): 8.867
		Container Volume: 91.133 Dose Rate: 5 Cumulative Elapsed Time (minutes): 1h 16m
		Increase/Decrease: Decreased Infusion Intake: 8.867 Infusion Rate: 5 Waste Amount: 0
		Finger Stick Blood Glucose: 347
		1559 Infusion In Progress 1559 NSC.FRN16: Decreased, Dose Rate: 4 UNIT/HR, Rate: 4 Mls/HR
		Intake: 9.917 mls, Cumulative Intake: 18.784 mls, Container Volume: 81.216 mls, Site:
		Queries
		Cumulative Dose: 18.784 Cumulative Intake (bag): 18.784 Cumulative Intake (Rx): 18.784
		Container Volume: 81.216 Dose Rate: 4 Cumulative Elapsed Time (minutes): 3h 15m
		Increase/Decrease: Decreased Infusion Intake: 9.917 Infusion Rate: 4 Waste Amount: 0
		Finger Stick Blood Glucose: 281
		1800 Infusion In Progress 1800 TONGMAL: Decreased, Dose Rate: 3 UNIT/HR, Rate: 3 Mls/HR
		Intake: 8.067 mls, Cumulative Intake: 26.851 mls, Container Volume: 73.149 mls, Site:
		Queries
		Cumulative Dose: 26.851 Cumulative Intake (bag): 26.851 Cumulative Intake (Rx): 26.851

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/24/22 to 0659 11/25/22 (continued)	

Container Volume: 73.149 Dose Rate: 3 Cumulative Elapsed Time (minutes): 5h 16m	
Increase/Decrease: Decreased Infusion Intake: 8.067 Infusion Rate: 3 Waste Amount: 0	
Finger Stick Blood Glucose: 241	
2000 Infusion In Progress 2000 OANDLAL: Decreased, Dose Rate: 2 UNIT/HR, Rate: 2 MLS/HR	
Intake: 6 mls, Cumulative Intake: 32.851 mls, Container Volume: 67.149 mls, Site:	
Queries	
Cumulative Dose: 32.851 Cumulative Intake (bag): 32.851 Cumulative Intake (Rx): 32.851	
Container Volume: 67.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 7h 16m	
Increase/Decrease: Decreased Infusion Intake: 6 Infusion Rate: 2 Waste Amount: 0	
Finger Stick Blood Glucose: 185	
2200 Infusion In Progress 2200 OANDLAL: Running, Dose Rate: 2 UNIT/HR, Rate: 2 MLS/HR	
Intake: 4 mls, Cumulative Intake: 36.851 mls, Container Volume: 63.149 mls, Site:	
Queries	
Cumulative Dose: 36.851 Cumulative Intake (bag): 36.851 Cumulative Intake (Rx): 36.851	
Container Volume: 63.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 9h 16m	
Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 2 Waste Amount: 0	
Finger Stick Blood Glucose: 155	
0000 Infusion In Progress 0000 OANDLAL: Decreased, Dose Rate: 1 UNIT/HR, Rate: 1 MLS/HR	
Intake: 4 mls, Cumulative Intake: 40.851 mls, Container Volume: 59.149 mls, Site:	
Queries	
Cumulative Dose: 40.851 Cumulative Intake (bag): 40.851 Cumulative Intake (Rx): 40.851	
Container Volume: 59.149 Dose Rate: 1 Cumulative Elapsed Time (minutes): 11h 16m	
Increase/Decrease: Decreased Infusion Intake: 4 Infusion Rate: 1 Waste Amount: 0	
Finger Stick Blood Glucose: 145	
0200 Infusion In Progress 0200 OANDLAL: Increased, Dose Rate: 2 UNIT/HR, Rate: 2 MLS/HR	
Intake: 2 mls, Cumulative Intake: 42.851 mls, Container Volume: 57.149 mls, Site:	
Queries	
Cumulative Dose: 42.851 Cumulative Intake (bag): 42.851 Cumulative Intake (Rx): 42.851	
Container Volume: 57.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 13h 16m	
Increase/Decrease: Increased Infusion Intake: 2 Infusion Rate: 2 Waste Amount: 0	
Finger Stick Blood Glucose: 155	
0400 Infusion In Progress 0400 OANDLAL: Running, Dose Rate: 2 UNIT/HR, Rate: 2 MLS/HR	
Intake: 4 mls, Cumulative Intake: 46.851 mls, Container Volume: 53.149 mls, Site:	
Queries	
Cumulative Dose: 46.851 Cumulative Intake (bag): 46.851 Cumulative Intake (Rx): 46.851	
Container Volume: 53.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 15h 16m	
Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 2 Waste Amount: 0	
Finger Stick Blood Glucose: 165	
0600 Infusion In Progress 0600 OANDLAL: Running, Dose Rate: 2 UNIT/HR, Rate: 2 MLS/HR	
Intake: 4 mls, Cumulative Intake: 50.851 mls, Container Volume: 49.149 mls, Site:	
Queries	
Cumulative Dose: 50.851 Cumulative Intake (bag): 50.851 Cumulative Intake (Rx): 50.851	
Container Volume: 49.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 17h 16m	
Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 2 Waste Amount: 0	

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Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

Finger Stick Blood Glucose: 165

ADMINISTRATION PERIOD:  
0900 11/25/22 to 0659 11/26/22

START/  
STOP

Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL UDCUP)

15 ML MUCOUS MEM BID0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol. Protocol continues until patient off ventilator.  
RX #: 002233392

11/27/22 0800 VILLSER at 0900 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 00116200116 (SOURCE: eMAR)  
Expiration Date: 04/26/23  
0914 Transaction Rule PHABKJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/25/22 0900: PER15D Amount Wasted: 0 ML; Drug Waste%: 0  
2000 OAMDDAD at 2107 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 00116200116 (SOURCE: eMAR)  
Expiration Date: 04/14/23  
2119 Transaction Rule PHABKJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/25/22 2107: PER15D Amount Wasted: 0 ML; Drug Waste%: 0

Synthroid (Levothyroxine 112 mcg Tablet)

112 MCG G-TUBE DAILY before breakfast  
RX #: 002279429

11/21/22 0700 VILLSER at 0900 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0914 Transaction Rule PHABKJOB  
MED: WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/25/22 0900: SYN112 Amount Wasted: 0 MCG; Drug Waste%: 0

Norvasc (Amlodipine 5 mg Tablet)

5 MG G-TUBE DAILY  
RX #: 002279431

11/21/22 0915 DISCONTINUE GATC  
0947 Acknowledged Order VILLSER  
1000 Not Administered VILLSER at 0850 HYPOREN

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

11/21/22	0914	Transaction Rule PHABRCJOB		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/25/22 0900: PE20 Amount Wasted: 0 MG; Drug Waste\$: 0		
		1000 VILISEP at 0900 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		
		2048 Transaction Rule PHABRCJOB		
		MEDI.WASTE - Medicare Waste		
		Description: Debit Svc Dr/Tm 11/25/22 2046: PE20 Amount Wasted: 0 MG; Drug Waste\$: 0		
		2100 OAMDIAD at 2046 GAVE: 20 MG		
		Barcode Medication: Pepcid		
		NDC/DIN: 6373964510 (SOURCE: eMAR)		

**Apresoline (Hydralazine 25 mg Tablet)**  
25 MG G-TUBE TWICE A DAY  
Dose Inst: HOLD if SBPC130  
RX #: 002279435

11/21/22	0915	Discontinue GATC		
		0947 Acknowledged Order VILISEP		
		1000 Not Administered VILISEP at 0850 HYPOEN		
11/21/22	1000	Not Administered VILISEP at 0850 PRAM PROF		
		1440 Discontinue GATC		
		1500 Acknowledged Order VILISEP		
		1500 Not Administered VILISEP at 1351 PRAM PROF		

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Medication Discharge Summary

Name Lyons, Kathleen A

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Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/25/22 to 0659 11/26/22 (continued)		

Sodium Chloride 0.9% 100 ml 100 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Koppa 500 MG  
(Levetiracetam 500 mg/5 ml Vial)  
420 Mls/HR IVB Every twelve hours  
Comments: SEND ONE DOSE NOW  
RX #: 002284450

11/23/22 0900 VILISTE at 0952 GAVE: 400 Mls/HR  
Barcode Medication: Koppa  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 1500 Cumulative Intake (Rx): 315 Container Volume: 105  
Cumulative Elapsed Time (minutes): 45m Increase/Decrease: Started/Decreased Infusion Rate:  
400 Waste Amount: 0  
0952 Infusion In Progress 0952 VILISTE: Started/Decreased, Dose Rate: / Rate: 400 Mls/HR  
Intake: / Container Volume: 105 ml, Site:  
Queries  
Cumulative Dose: 1500 Cumulative Intake (Rx): 315 Container Volume: 105  
Cumulative Elapsed Time (minutes): 45m Increase/Decrease: Started/Decreased Infusion Rate:  
400 Waste Amount: 0  
0959 Transaction Rule PHABRC08  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/25/22 0952: REP500I Amount Wasted: 0 MG; Drug Waste%: 0  
0959 Transaction Rule PHABRC08  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/25/22 0952: NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
1016 Infusion In Progress 1016 VILISTE: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 2000 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 420  
Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 9m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0  
2100 OAMIDL at 2107 GAVE: 420 Mls/HR  
Barcode Medication: Koppa  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 2000 Cumulative Intake (Rx): 420 Container Volume: 105  
Cumulative Elapsed Time (minutes): 1h 9m Increase/Decrease: Started/Increased  
Infusion Rate: 420 Waste Amount: 0  
2107 Infusion In Progress 2107 OAMIDL: Started/Increased, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Container Volume: 105 ml, Site:  
Queries  
Cumulative Dose: 2000 Cumulative Intake (Rx): 420 Container Volume: 105  
Cumulative Elapsed Time (minutes): 1h 9m Increase/Decrease: Started/Increased  
Infusion Rate: 420 Waste Amount: 0  
2119 Transaction Rule PHABRC08

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

DESCRIPTION	AMOUNT WASTED	AMOUNT INFUSED
MEDI.WASTE - Medicare Waste	0 MG	0
Description: Debit svc Dc/Tm 11/25/22 2107; REP500I		
2119 Transaction Rule PHABRCJOB		
MEDI.WASTE - Medicare Waste		
Description: Debit svc Dc/Tm 11/25/22 2107; NS100	0 ML	0
2122 Infusion In Progress 2122 OAMDLAU; Infused; Dose Rate: /		
Intake: 105 mls; Cumulative Intake: 105 mls; Container Volume: 0 mls; Site:		
Overies		
Cumulative Dose: 2500 Cumulative Intake (bag): 105		
Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 24m		
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0		

NOVOLIN N (Insulin NPH 100 units/ml 10 ml vial) 11/24/22 1400 VILSEB at 1609 CO-SIGNER; BANSERI SITE; Abdomen GAVE: 24 UNITS  
24 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE RP WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: 002284989  
Admin Queries  
Finger Stick Blood Glucose: 330 MAR Injection site: 11  
1G15 Transaction Rule PHABRCJOB  
MEDI.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/25/22 1609; INSNPH Amount Wasted: 0 UNITS; Amount Given: 0.240 ML  
2057 Discontinue GEUA  
2057 Order Entry GEUA



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/25/22 to 0659 11/26/22 (continued)		

0.9% Sodium Chloride 100 mL MINI-Bag 100 ML  
 (0.9% Sodium Chloride 100 mL MINI-Bag)  
 Zosyn 4.5 GM  
 25 MLS/HR IVPB Q8H  
 (Piperacillin/Tazobactam 4.5 gm Vial)  
 RX #: 002285170

11/24/22	0900	CANDIAL at 0500 GAVE: 25 MLS/HR	
12/04/22		Barcode Medication: zosyn	
		NDC/DIN: 0781311491 (SOURCE: eMAR)	
		Admin Queries	
		Cumulative Dose: 9 Cumulative Intake (Rx): 200 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 8h 0m Increase/Decrease: Started/Running Infusion Rate:	
		25 Waste Amount: 0	
		0900 Infusion In Progress 0900 VILIST: Infused, Dose Rate: , Rate: 0 MLS/HR	
		Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:	
		Queries	
		Cumulative Dose: 13.5 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 300	
		Container Volume: 0 Cumulative Elapsed Time (minutes): 12h 0m Increase/Decrease: Infused	
		Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0	
		1608 Infusion In Progress 1608 VILIST: Started/Running, Dose Rate: , Rate: 25 MLS/HR	
		Intake: , Cumulative Intake: , Container Volume: 100 mls, Site:	
		Queries	
		Cumulative Dose: 13.5 Cumulative Intake (Rx): 300 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 12h 0m Increase/Decrease: Started/Running	
		Infusion Rate: 25 Waste Amount: 0	
		1615 Transaction Rule PHABRC08	
		1615 Transaction Rule PHABRC08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/25/22 1608: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0	
		1615 Transaction Rule PHABRC08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/25/22 1608: ZOS45I Amount Wasted: 0 GM; Drug Waste%: 0	
		1700 VILIST at 1608 GAVE: 25 MLS/HR	
		Barcode Medication: 0.9% Sodium Chloride 100 mL MINI-Bag	
		NDC/DIN: 0038085318 (SOURCE: Default NDCs)	
		Barcode Medication: zosyn	
		NDC/DIN: 00781311495 (SOURCE: Default NDCs)	
		Admin Queries	
		Cumulative Dose: 13.5 Cumulative Intake (Rx): 300 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 12h 0m Increase/Decrease: Started/Running	
		Infusion Rate: 25 Waste Amount: 0	
		2008 Infusion In Progress 2008 CANDIAL: Infused, Dose Rate: , Rate: 0 MLS/HR	
		Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:	
		Queries	
		Cumulative Dose: 18 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 400	
		Container Volume: 0 Cumulative Elapsed Time (minutes): 16h 0m Increase/Decrease: Infused	
		Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0	
		0049 Infusion In Progress 0049 CANDIAL: Started/Running, Dose Rate: , Rate: 25 MLS/HR	
		Intake: , Cumulative Intake: , Container Volume: 100 mls, Site:	
		Queries	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/25/22 to 0659 11/26/22 (continued)		

Cumulative Dose: 18 Cumulative Intake (Rx) : 400 Container Volume: 100  
Cumulative Elapsed Time (minutes): 16h 0m Increase/Decrease: Started/Running  
Infusion Rate: 25 Waste Amount: 0  
0100 OANDLAL at 0049 GAVE: 25 MLS/HR  
Barcode Medication: zosyn  
NDC/DIN: 0781311491 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: 18 Cumulative Intake (Rx) : 400 Container Volume: 100  
Cumulative Elapsed Time (minutes): 16h 0m Increase/Decrease: Started/Running  
Infusion Rate: 25 Waste Amount: 0  
0100 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Dabit svc Dr/Tm 11/26/22 0049: NS100MB Amount Wasted: 0 ML; Drug Waste%: 0  
0100 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Dabit svc Dr/Tm 11/26/22 0049: ZOS45I Amount Wasted: 0 GM; Drug Waste%: 0  
0449 Infusion In Progress 0449 OANDLAL: Infused; Dose Rate: / Rate: 0 MLS/HR  
Intake: 100 mls; Cumulative Intake: 100 mls; Container Volume: 0 mls; Site:  
Queries  
Cumulative Dose: 22.5 Cumulative Intake (bag) : 100 Cumulative Intake (Rx) : 500  
Container Volume: 0 Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/25/22 to 0659 11/26/22 (continued)	STOP

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 ML/HR IVB8 Q24H  
Comments: \*Refrigerate\*  
RX TO FOLLOW  
RX #: Q02285215

11/24/22 1300 VILLSEP at 1402 GAVE: 125 ML/HR  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 00338001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 1250 Cumulative Intake (Rx): 250 Container Volume: 250  
Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1402 Infusion In Progress 1402 VILLSEP: Started/Running, Dose Rate: / Rate: 125 ML/HR  
Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 1250 Cumulative Intake (Rx): 250 Container Volume: 250  
Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1415 Transaction Rule PHABRC08  
1415 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/25/22 1402: D5W250 Amount Wasted: 0 ML, Drug Waste%: 0  
1415 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/25/22 1402: VAN11P Amount Wasted: 0 MG, Amount Given:  
1.25 VIAL  
1704 Infusion In Progress 1704 VILLSEP: Infused, Dose Rate: / Rate: 0 ML/HR  
Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 2500 Cumulative Intake (Bag): 250 Cumulative Intake (Rx): 500  
Container Volume: 0 Cumulative Elapsed Time (minutes): 5h 2m Increase/Decrease: Infused  
Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

D4avp (Desmopressin 4 mcg/mL Amp)  
2 MCG IV-Push Every twelve hours  
RX #: Q02285266

11/24/22 0714 Acknowledged Order VILLSEP

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

**SoluCortef (Hydrocortisone Sod Succinate 100 mg/2 ml Vial)**  
100 MG IV-Push Every eight hours  
RX #: 002285263

11/24/22	1400	VILLSEP at 1402 GAVE: 100 MG
		Barcode Medication: soluCortef
		NDC/DIN: 0009001103 (SOURCE: eMAR)
	1415	Transaction Rule PHARMCIOB
		MDI.WASTE - Medicare Waste
		Description: Debit svc Dr/Tm 11/25/22 1402: SOLC1001 Amount Wasted: 0 MG; Drug Waste%:
		0
	1440	Discontinue GATC
	1500	Acknowledged Order VILLSEP

**Sodium Chloride 3% 500 ML  
(3% Sodium Chloride 500 ml Bag)**

30 Mls/HR IV .Q16H40M

Comments: Sodium Goal: 145-160

If increase or decrease of Sodium by 10,

inform provider

Discontinue BMP q8hr when 3% NaCl d/c'd

RX #: 002285272

11/24/22	0714	Acknowledged Order VILLSEP
	0714	Infusion in Progress 0714 VILLSEP, Dose Rate: / Rate: 0 Mls/HR
		Intake: 246 mls, Cumulative Intake: 500 mls, Container Volume: 0 mls, Site:
		Queries
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 500 Cumulative Intake (Rx):
		500 Container Volume: 0 Cumulative Elapsed Time (minutes): 16h 42m Increase/Decrease:
		Infused Infusion Intake: 246 Infusion Rate: 0 Waste Amount: 0
11/24/22	0914	Discontinue GATC
	0947	Acknowledged Order VILLSEP
	0952	Infusion in Progress 0952 VILLSEP, Dose Rate: / Rate: 0 Mls/HR
		Intake: 483.333 mls, Cumulative Intake: 858.333 mls, Container Volume: 141.667 mls, Site:
		Queries
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 858.333
		Cumulative Intake (Rx): 2456.249 Container Volume: 141.667
		Cumulative Elapsed Time (minutes): 19h 50m Increase/Decrease: Paused Infusion Intake:
		483.333 Infusion Rate: 0 Waste Amount: 0
		1016 Infusion in Progress 1016 VILLSEP, Dose Rate: / Rate: 0 Mls/HR
		Intake: 0 mls, Cumulative Intake: 858.333 mls, Container Volume: 0 mls, Site:
		Queries
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 858.333
		Cumulative Intake (Rx): 2456.249 Container Volume: 0 Cumulative Elapsed Time (minutes):
		19h 50m Increase/Decrease: Infused Infusion Intake: 0 Infusion Rate: 0 Waste Amount:
		141.667

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

Ddapv (Desmopressin 40 mcg/10 ml Vial)  
2 MCG IV-Push DAILY  
RX #: 002285881

11/25/22 0731 Acknowledged Order VILISEP  
0923 Edit or Verification ZPHA,IE  
0947 Acknowledged Order VILISEP  
1000 VILISEP at 1038 SANE: 2 MCG  
Barcode Medication: Ddapv  
NDC/DIN: 62756052940 (SOURCE: Default NDCS)  
1045 Transaction Rule PHARGO8  
NBDI WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/25/22 1038: DDAL10 Amount Wasted: 38 MCG; Drug Waste%:  
95

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Medication Discharge Summary

Name Lyons, Kathleen A Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

Sodium Chloride 0.45 % 1,000 ML  
(0.45% Sodium Chloride 1,000 mL Bag)  
50 MLS/HR IV .020H  
RX #: 002286593

11/25/22 0915 VILISEP at 0951 GAVE: 50 MLS/HR  
Barcode Medication: sodium Chloride 0.45 %  
NDC/DIN: 0338004304 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed Time (minutes):  
0m Increase/Decrease: Started Infusion Rate: 50 Waste Amount: 0  
0922 Edit or Verification ZPMA.IB  
0947 Acknowledged Order VILISEP  
0951 Infusion In Progress 0951 VILISEP: Started, Dose Rate: / Rate: 50 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 50  
Waste Amount: 0  
0959 Transaction Rule PHABRGT08  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/25/22 0951: NRS Amount Wasted: 0 ML; Drug Waste%: 0  
2000 Infusion In Progress 2000 OAMIDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 507.5 mls, Cumulative Intake: 507.5 mls, Container Volume: 492.5 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 507.5 Cumulative Intake (RX):  
507.5 Container Volume: 492.5 Cumulative Elapsed Time (minutes): 10h 9m Increase/Decrease:  
Running Infusion Intake: 507.5 Infusion Rate: 50 Waste Amount: 0  
2100 Infusion In Progress 2100 OAMIDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 557.5 mls, Container Volume: 442.5 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 557.5 Cumulative Intake (RX):  
557.5 Container Volume: 442.5 Cumulative Elapsed Time (minutes): 11h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
2200 Infusion In Progress 2200 OAMIDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 607.5 mls, Container Volume: 392.5 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 607.5 Cumulative Intake (RX):  
607.5 Container Volume: 392.5 Cumulative Elapsed Time (minutes): 12h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
2300 Infusion In Progress 2300 OAMIDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 657.5 mls, Container Volume: 342.5 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 657.5 Cumulative Intake (RX):  
657.5 Container Volume: 342.5 Cumulative Elapsed Time (minutes): 13h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0000 Infusion In Progress 0000 OAMIDLAL: Running, Dose Rate: / Rate: 50 MLS/HR

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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/25/22 to 0659 11/26/22 (continued)		

Intake: 50 mls, Cumulative Intake: 707.5 mls, Container Volume: 292.5 mls, Site:  
|  
| Queries  
|  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 707.5 Cumulative Intake (Rx):  
| 707.5 Container Volume: 292.5 Cumulative Elapsed Time (minutes): 14h 9m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0100 Infusion In Progress 0100 OAMDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 757.5 mls, Container Volume: 242.5 mls, Site:  
|  
| Queries  
|  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 757.5 Cumulative Intake (Rx):  
| 757.5 Container Volume: 242.5 Cumulative Elapsed Time (minutes): 15h 9m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0200 Infusion In Progress 0200 OAMDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 807.5 mls, Container Volume: 192.5 mls, Site:  
|  
| Queries  
|  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 807.5 Cumulative Intake (Rx):  
| 807.5 Container Volume: 192.5 Cumulative Elapsed Time (minutes): 16h 9m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0300 Infusion In Progress 0300 OAMDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 857.5 mls, Container Volume: 142.5 mls, Site:  
|  
| Queries  
|  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 857.5 Cumulative Intake (Rx):  
| 857.5 Container Volume: 142.5 Cumulative Elapsed Time (minutes): 17h 9m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0400 Infusion In Progress 0400 OAMDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 907.5 mls, Container Volume: 92.5 mls, Site:  
|  
| Queries  
|  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 907.5 Cumulative Intake (Rx):  
| 907.5 Container Volume: 92.5 Cumulative Elapsed Time (minutes): 18h 9m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0500 Infusion In Progress 0500 OAMDLAL: Running, Dose Rate: / Rate: 50 MLS/HR  
| Intake: 50 mls, Cumulative Intake: 957.5 mls, Container Volume: 42.5 mls, Site:  
|  
| Queries  
|  
| Cumulative Dose: Not Applicable Cumulative Intake (bag): 957.5 Cumulative Intake (Rx):  
| 957.5 Container Volume: 42.5 Cumulative Elapsed Time (minutes): 19h 9m Increase/Decrease:  
| Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
| 0515 OAMDLAL at 0600 GAVE: 50 MLS/HR  
| Barcode Medication: sodium Chloride 0.45 %  
| NDC/DIN: 0338004304 (SOURCE: eMAR)  
| Admin Queries  
| Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Container Volume: 1000  
| Cumulative Elapsed Time (minutes): 20h 9m Increase/Decrease: Started/Running  
| Infusion Rate: 50 Waste Amount: 0  
| 0600 Infusion In Progress 0600 OAMDLAL: Infused, Dose Rate: / Rate: 50 MLS/HR  
| Intake: 42.5 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:

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 USER: PHARMCIOB

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 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
 1000 Container Volume: 0 Cumulative Elapsed Time (minutes): 20h 9m Increase/Decrease:  
 Infused Infusion Intake: 42.5 Infusion Rate: 50 Waste Amount: 0  
 0600 Infusion In Progress 0600 OANDLAL: Started/Running, Dose Rate: / Rate: 50 Mls/HR  
 Intake: / Cumulative Intake: / Container Volume: 1000 ml, Site:  
 Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Container Volume: 1000  
 Cumulative Elapsed Time (minutes): 20h 9m Increase/Decrease: Started/Running  
 Infusion Rate: 50 Waste Amount: 0

NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)

30 UNITS SUB-Q Every eight hours

Comments: HOLD IF THE TP WITHHEIDS OR BLOOD SUGAR BELOW

100 MG/DL.

RX #: 002287759

11/25/21 2057 Order Entry GENA  
 2057 Edit of Verification THONHUN  
 2057 Edit of Verification THONHUN  
 2158 Acknowledged Order OANDLAL  
 2200 OANDLAL at 2210 CO-STOMER: TRINROB SITE: Left Deltoid GAVE: 30 UNITS  
 Barcode Medication: Novolin N  
 NDC/DIN: 0169183411 (SOURCE: eMAR)  
 Admin Queries  
 Finger Stick Blood Glucose: 337 MAR Injection site: 1  
 2219 Transaction Rule PHARMCIOB  
 MEDI.WASTE - Medication Waste  
 Description: Debit svc Dr/Tm 11/25/22 2210: INSNPH Amount Wasted: 0 UNITS; Amount  
 Given: 0.300 ML  
 0600 OANDLAL at 0651 CO-STOMER: CHOWKRI SITE: Abdomen GAVE: 30 UNITS  
 Barcode Medication: Novolin N  
 NDC/DIN: 0169183411 (SOURCE: eMAR)  
 Admin Queries  
 Finger Stick Blood Glucose: 208 MAR Injection site: 11



DATE: 12/03/22 @ 0013  
USER: PHARMCOT

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/25/22 to 0659 11/26/22 (continued)	STOP

Sodium Chloride 0.9% 100 ml 99 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Novolin Regular 100 UNIT  
(Insulin Regular (Human) 100 units/ml Vial)  
0 Mls/HR IV TITRATE/PRN  
PRN Reason: Hyperglycemia  
Comments: INSULIN CONC = 1 unit/ml  
Dispense in 'visiV' bag.  
Please send missing med slip for each dose  
\*Double check required\*

(1) \_\_\_\_\_ (2) \_\_\_\_\_

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
REQUIRE 2 SIGNATURES FOR DOCUMENTATION  
RX #: Q02284983

11/24/22	0800	Infusion In Progress	VILISTE	Running	Dose Rate: 2 UNIT/HR, Rate: 2 Mls/HR
		Intake: 4 mls, Cumulative Intake: 54.851 mls, Container Volume: 45.149 mls, Site:			
		Queries			
		Cumulative Dose: 54.851 Cumulative Intake (Bag): 54.851 Cumulative Intake (Rx): 54.851			
		Container Volume: 45.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 19h 16m			
		Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 2 Waste Amount: 0			
		Finger Stick Blood Glucose: 182			
		1000 Infusion In Progress 1000 VILISTE: Running, Dose Rate: 2 UNIT/HR, Rate: 2 Mls/HR			
		Intake: 4 mls, Cumulative Intake: 58.851 mls, Container Volume: 41.149 mls, Site:			
		Queries			
		Cumulative Dose: 58.851 Cumulative Intake (Bag): 58.851 Cumulative Intake (Rx): 58.851			
		Container Volume: 41.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 21h 16m			
		Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 2 Waste Amount: 0			
		Finger Stick Blood Glucose: 185			
		1200 Infusion In Progress 1200 VILISTE: Running, Dose Rate: 2 UNIT/HR, Rate: 2 Mls/HR			
		Intake: 4 mls, Cumulative Intake: 62.851 mls, Container Volume: 37.149 mls, Site:			
		Queries			
		Cumulative Dose: 62.851 Cumulative Intake (Bag): 62.851 Cumulative Intake (Rx): 62.851			
		Container Volume: 37.149 Dose Rate: 2 Cumulative Elapsed Time (minutes): 23h 16m			
		Increase/Decrease: Running Infusion Intake: 4 Infusion Rate: 2 Waste Amount: 0			
		Finger Stick Blood Glucose: 190			
		1205 Discontinue GEDA			
		1220 Acknowledged Order VILISTE			
		1222 Infusion In Progress 1222 VILISTE: Paused, Dose Rate: 0 UNIT/HR, Rate: 0 Mls/HR			
		Intake: 0 mls, Cumulative Intake: 62.851 mls, Container Volume: 37.149 mls, Site:			
		Queries			
		Cumulative Dose: 62.851 Cumulative Intake (Bag): 62.851 Cumulative Intake (Rx): 62.851			
		Container Volume: 37.149 Dose Rate: 0 Infusion Rate: 0 Waste Amount: 0			
		Increase/Decrease: Paused Infusion Intake: 0 Infusion Rate: 0 Waste Amount: 0			
		1226 Infusion In Progress 1226 VILISTE: Infused, Dose Rate: 0 UNIT/HR, Rate: 0 Mls/HR			
		Intake: 0 mls, Cumulative Intake: 62.851 mls, Container Volume: 0 mls, Site:			
		Queries			
		Cumulative Dose: 62.851 Cumulative Intake (Bag): 62.851 Cumulative Intake (Rx): 62.851			
		Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 23h 36m			
		Increase/Decrease: Infused Infusion Intake: 0 Infusion Rate: 0 Waste Amount: 37.149			

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:

0700 11/25/22 to 0659 11/26/22 (continued)

Novolog (Insulin Aspart 100 units/ml 10ml Vial)

See Dose Ins. SUB-Q Q4H/PRN

PRN Reason: Glucose Coverage

RX #: 002286977

START/STOP	
11/25/22	1208 Edit or Verification ZPHA.ANL
	1208 Edit or Verification ZPHA.ANL
	1220 Acknowledged Order VILLSER
	1609 VILLSER at 1609 CO-SIGNER: BANSERI SITE: Abdomen GAVE: 8 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 330 MAR Injection site: 11
	1615 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/25/22 1609: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.080 ML
	0024 CANDIDAL at 0024 CO-SIGNER: CHOMRRI SITE: Right Deltoid GAVE: 10 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 347 MAR Injection site: 5
	0029 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/26/22 0024: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.100 ML
	0446 CANDIDAL at 0446 CO-SIGNER: CHOMRRI SITE: Right Deltoid GAVE: 4 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 218 MAR Injection site: 5
	0502 Transaction Rule PHABRC0B
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/26/22 0446: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML

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This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

Levophed Drip 250 ML  
(Norepinephrine in D5w 8 mg/250 mL Bag)  
19.594 MLS/HR IV TITRATE/PRN  
PRN Reason: BP Support (see Protocol)  
Comments: Conc = 32 mcg/mL  
Protect from light

Label matches overwrap. PRN \_\_\_\_\_  
RX #: Q02287536

11/25/22	1730	Acknowledged Order VILLST
		1730 Edit or Verification THONHUN
		1730 Edit or Verification THONHUN
		1753 VILLST at 1753 SANE: 19.594 MLS/HR
		Barcode Medication: Levophed Drip
		NDC/DIN: 00339010820 (SOURCE: Default NDCs)
		Adult Queries
		Container Volume: 250 Dose Rate: 0.1 Cumulative Elapsed Time (minutes): 0m
		Increase/Decrease: Started Infusion Rate: 19.594 Waste Amount: 0
		1753 Infusion In Progress 1753 VILLST: Started, Dose Rate: 0.1 MCG/KG/MIN, Rate: 19.594 MLS/HR
		Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:
		Queries
		Container Volume: 250 Dose Rate: 0.1 Cumulative Elapsed Time (minutes): 0m
		Increase/Decrease: Started Infusion Rate: 19.594 Waste Amount: 0
		1800 Infusion In Progress 1800 VILLST: Running, Dose Rate: 0.1 MCG/KG/MIN, Rate: 19.594 MLS/HR
		Intake: 2.286 mLs, Cumulative Intake: 2.286 mLs, Container Volume: 247.714 mLs, Site:
		Queries
		Cumulative Dose: 0.0732 Cumulative Intake (bag): 2.286 Cumulative Intake (Rx): 2.286
		Container Volume: 247.714 Dose Rate: 0.1 Cumulative Elapsed Time (minutes): 7m
		Increase/Decrease: Running Infusion Intake: 2.286 Infusion Rate: 19.594 Waste Amount: 0
		1801 Transaction Rule PHARMCIOB
		MEDI WASTE - Medication Waste
		Description: Debit svc Dr/Tm 11/25/22 1753: LEV08BD5# Amount Wasted: 0 MG; Drug Waste%:
		0
		1815 Infusion In Progress 1815 VILLST: Decreased, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR
		Intake: 4.899 mLs, Cumulative Intake: 7.185 mLs, Container Volume: 242.815 mLs, Site:
		Queries
		Cumulative Dose: 0.23 Cumulative Intake (bag): 7.185 Cumulative Intake (Rx): 7.185
		Container Volume: 242.815 Dose Rate: 0.09 Cumulative Elapsed Time (minutes): 22m
		Increase/Decrease: Decreased Infusion Intake: 4.899 Infusion Rate: 17.634 Waste Amount: 0
		1830 Infusion In Progress 1830 VILLST: Decreased, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
		Intake: 4.409 mLs, Cumulative Intake: 11.594 mLs, Container Volume: 238.406 mLs, Site:
		Queries
		Cumulative Dose: 0.3711 Cumulative Intake (bag): 11.594 Cumulative Intake (Rx): 11.594
		Container Volume: 238.406 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 37m
		Increase/Decrease: Decreased Infusion Intake: 4.409 Infusion Rate: 15.675 Waste Amount: 0
		1845 Infusion In Progress 1845 VILLST: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
		Intake: 3.919 mLs, Cumulative Intake: 15.513 mLs, Container Volume: 234.487 mLs, Site:
		Queries
		Cumulative Dose: 0.4965 Cumulative Intake (bag): 15.513 Cumulative Intake (Rx): 15.513
		Container Volume: 234.487 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 52m
		Increase/Decrease: Running Infusion Intake: 3.919 Infusion Rate: 15.675 Waste Amount: 0
		1900 Infusion In Progress 1900 VILLST: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR

DATE: 12/03/22 @ 0013  
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Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 11/25/22 to 0659 11/26/22 (continued)

START/ STOP	
	Intake: 3.919 mLs, Cumulative Intake: 19.432 mLs, Container Volume: 230.568 mLs, Site:
	Queries
	Cumulative Dose: 0.6219 Cumulative Intake (bag): 19.432 Cumulative Intake (Rx): 19.432
	Container Volume: 230.568 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 1h 7m
	Increase/Decrease: Running Infusion Intake: 3.919 Infusion Rate: 15.675 Waste Amount: 0
	2000 Infusion In Progress 2000 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 35.107 mLs, Container Volume: 214.893 mLs, Site:
	Queries
	Cumulative Dose: 1.1235 Cumulative Intake (bag): 35.107 Cumulative Intake (Rx): 35.107
	Container Volume: 214.893 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 2h 7m
	Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
	2100 Infusion In Progress 2100 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 50.782 mLs, Container Volume: 199.218 mLs, Site:
	Queries
	Cumulative Dose: 1.6251 Cumulative Intake (bag): 50.782 Cumulative Intake (Rx): 50.782
	Container Volume: 199.218 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 3h 7m
	Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
	2200 Infusion In Progress 2200 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 66.457 mLs, Container Volume: 183.543 mLs, Site:
	Queries
	Cumulative Dose: 2.1267 Cumulative Intake (bag): 66.457 Cumulative Intake (Rx): 66.457
	Container Volume: 183.543 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 4h 7m
	Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
	2300 Infusion In Progress 2300 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 82.132 mLs, Container Volume: 167.868 mLs, Site:
	Queries
	Cumulative Dose: 2.6283 Cumulative Intake (bag): 82.132 Cumulative Intake (Rx): 82.132
	Container Volume: 167.868 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 5h 7m
	Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
	0000 Infusion In Progress 0000 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 97.807 mLs, Container Volume: 152.193 mLs, Site:
	Queries
	Cumulative Dose: 3.1299 Cumulative Intake (bag): 97.807 Cumulative Intake (Rx): 97.807
	Container Volume: 152.193 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 6h 7m
	Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
	0100 Infusion In Progress 0100 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 113.482 mLs, Container Volume: 136.518 mLs, Site:
	Queries
	Cumulative Dose: 3.6315 Cumulative Intake (bag): 113.482 Cumulative Intake (Rx):
	113.482 Container Volume: 136.518 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 7h 7m
	Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
	0200 Infusion In Progress 0200 OAM/DAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake: 15.675 mLs, Cumulative Intake: 129.157 mLs, Container Volume: 120.843 mLs, Site:
	Queries

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/25/22 to 0659 11/26/22 (continued)	

Cumulative Dose: 4.1331 Cumulative Intake (bag): 129.157 Cumulative Intake (Rx): 129.157 Container Volume: 120.843 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 8h 7m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0300 Infusion In Progress 0300 OANDDAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR Intake: 15.675 mls, Cumulative Intake: 144.832 mls, Container Volume: 105.168 mls, Site: Queries  
Cumulative Dose: 4.6347 Cumulative Intake (bag): 144.832 Cumulative Intake (Rx): 144.832 Container Volume: 105.168 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 9h 7m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0400 Infusion In Progress 0400 OANDDAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR Intake: 15.675 mls, Cumulative Intake: 160.507 mls, Container Volume: 89.493 mls, Site: Queries  
Cumulative Dose: 5.1363 Cumulative Intake (bag): 160.507 Cumulative Intake (Rx): 160.507 Container Volume: 89.493 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 10h 7m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0500 Infusion In Progress 0500 OANDDAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR Intake: 15.675 mls, Cumulative Intake: 176.182 mls, Container Volume: 73.818 mls, Site: Queries  
Cumulative Dose: 5.6379 Cumulative Intake (bag): 176.182 Cumulative Intake (Rx): 176.182 Container Volume: 73.818 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 11h 7m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0600 Infusion In Progress 0600 OANDDAL: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR Intake: 15.675 mls, Cumulative Intake: 191.857 mls, Container Volume: 58.143 mls, Site: Queries  
Cumulative Dose: 6.1395 Cumulative Intake (bag): 191.857 Cumulative Intake (Rx): 191.857 Container Volume: 58.143 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 12h 7m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0

ADMINISTRATION PERIOD:	START/STOP
0700 11/26/22 to 0659 11/27/22	

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/26/22 to 0659 11/27/22 (continued)	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL ODCUP)**  
15 MG MUCOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.  
RX #: Q02233392

DATE	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
11/27/22	0800 HERNLEN at 0833 GAVE: 15 ML Barcode Medication: Peridex Oral Rinse NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 05/18/23		
	0847 Transaction Rule PHABKJOB MED1.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/26/22 0833: HERN15L Amount Wasted: 0 ML; Drug Waste%: 0		
	2000 OAMDDAL at 2052 GAVE: 15 ML Barcode Medication: Peridex Oral Rinse NDC/DIN: 0011620016 (SOURCE: eMAR)		
	Expiration Date: 05/18/23		
	2103 Transaction Rule PHABKJOB MED1.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/26/22 2052: HERN15L Amount Wasted: 0 ML; Drug Waste%: 0		

**Synthroid (Levothyroxine 112 mcg Tablet)**  
112 MCG G-TUBE DAVID before breakfast  
RX #: Q02279429

DATE	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
11/21/22	0700 HERNLEN at 0833 GAVE: 112 MCG Barcode Medication: Synthroid NDC/DIN: 4229203901 (SOURCE: eMAR)		
	0847 Transaction Rule PHABKJOB MED1.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/26/22 0833: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%: 0		

**Peppid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: Q02279432

DATE	DESCRIPTION	AMOUNT WASTED	DRUG WASTE%
11/21/22	1000 HERNLEN at 1123 GAVE: 20 MG Barcode Medication: Peppid NDC/DIN: 6373964510 (SOURCE: eMAR)		
	1131 Transaction Rule PHABKJOB MED1.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/26/22 1123: HERN20 Amount Wasted: 0 MG; Drug Waste%: 0		
	2100 OAMDDAL at 2049 GAVE: 20 MG Barcode Medication: Peppid NDC/DIN: 6373964510 (SOURCE: eMAR)		
	2103 Transaction Rule PHABKJOB MED1.WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/26/22 2049: HERN20 Amount Wasted: 0 MG; Drug Waste%: 0		

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/26/22 to 0659 11/27/22 (continued)	STOP

Sodium Chloride 0.9% 100 mL 100 ML  
(0.9% Sodium Chloride 100 mL Bag)  
Koppra 500 MG  
(Levetiracetam 500 mg/5 mL VIAL)  
420 MLS/HR IVB8 Every twelve hours  
Comments: SEND ONE DOSE NOW  
RX #: 002284450

11/23/22 0900 HERNLEN at 0933 GAVE: 420 MLS/HR  
Barcode Medication: Koppra  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 mL  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 2500 Cumulative Intake (RX): 525 Container Volume: 105  
Cumulative Elapsed Time (minutes): 1h 24m Increase/Decrease: Started/Running  
Intake: 420 Waste Amount: 0  
0933 Infusion In Progress 0933 HERNLEN: Started/Running, Dose Rate: / Rate: 420 MLS/HR  
Intake: / Container Volume: 105 mL, Site:  
Queries  
Cumulative Dose: 2500 Cumulative Intake (RX): 525 Container Volume: 105  
Cumulative Elapsed Time (minutes): 1h 24m Increase/Decrease: Started/Running  
Intake: 420 Waste Amount: 0  
0950 Infusion In Progress 0950 HERNLEN: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 105 mL, Cumulative Intake: 105 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 3000 Cumulative Intake (bag): 105 Cumulative Intake (RX): 630  
Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 41m Increase/Decrease: Infused  
Intake: 105 Infusion Rate: 0 Waste Amount: 0  
1002 Transaction Rule PHARMC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/26/22 0933: KE9500I Amount Wasted: 0 MG; Drug Waste%: 0  
1002 Transaction Rule PHARMC08  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/26/22 0933: NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
2100 OAMDDAL at 2139 GAVE: 420 MLS/HR  
Barcode Medication: Koppra  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 mL  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 3000 Cumulative Intake (RX): 630 Container Volume: 105  
Cumulative Elapsed Time (minutes): 1h 41m Increase/Decrease: Started/Running  
Intake: 420 Waste Amount: 0  
2139 Infusion In Progress 2139 OAMDDAL: Started/Running, Dose Rate: / Rate: 420 MLS/HR  
Intake: / Container Volume: 105 mL, Site:  
Queries  
Cumulative Dose: 3000 Cumulative Intake (RX): 630 Container Volume: 105  
Cumulative Elapsed Time (minutes): 1h 41m Increase/Decrease: Started/Running  
Intake: 420 Waste Amount: 0  
2150 Transaction Rule PHARMC08

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP	
0700 11/26/22 to 0659 11/27/22 (continued)		

--- MED1.WASTE - Medicare Waste  
--- Description: Dabit Svc Dc/Tm 11/26/22 2139; REP500I Amount Wasted: 0 MG; Drug Waste%: 0  
--- Transaction Rule PHABRCJOB  
--- MED1.WASTE - Medicare Waste  
--- Description: Dabit Svc Dc/Tm 11/26/22 2139; NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
--- 2154 Infusion In Progress 2154 OAMDLAU: Infused; Dose Rate: / Rate: 0 Mls/HR  
--- Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
--- Overrides  
--- Cumulative Dose: 3500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 735  
--- Container Volume: 0 Cumulative Elapsed Time (minutes): 1h 56m Increase/Decrease: Infused  
--- Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0

NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)

24 UNITS SUB-Q Every eight hours

Comments: HOLD IF THE RP WITHHELD OR BLOOD SUGAR BELOW  
100 MG/DL.

RX #: Q02284989

11/24/22 0756 Acknowledged Order HERNLEN



DATE: 12/03/22 @ 0013  
 USER: PHABRG0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046

Medication Discharge Summary

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/26/22 to 0659 11/27/22 (continued)	

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
 (0.9% Sodium Chloride 100 ml MINI-Bag)  
 Zosyn 4.5 GM  
 (Piperacillin/Tazobactam 4.5 gm Vial)  
 25 Mls/Hr IVPB Q8H  
 RX #: 002285170

11/24/22 0900 HERNLEN at 1016 GAVE: 25 Mls/Hr  
 12/04/22  
 Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag  
 NDC/DIN: 00338055318 (SOURCE: Default NDCs)  
 Barcode Medication: Zosyn  
 NDC/DIN: 00781311495 (SOURCE: Default NDCs)  
 Admin Queries  
 Cumulative Dose: 22.5 Cumulative Intake (Rx): 500 Container Volume: 100  
 Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: Started/Running  
 Intake: 25 Waste Amount: 0  
 1016 Infusion In Progress 1016 HERNLEN: Started/Running, Dose Rate: / Rate: 25 Mls/Hr  
 Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
 Queries  
 Cumulative Dose: 22.5 Cumulative Intake (Rx): 500 Container Volume: 100  
 Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: Started/Running  
 Intake: 25 Waste Amount: 0  
 1031 Transaction Rule PHABRCROB  
 MED1.WASTE - Medicare Waste  
 Description: Debit svc Dc/Tm 11/26/22 1016: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0  
 1031 Transaction Rule PHABRCROB  
 MED1.WASTE - Medicare Waste  
 Description: Debit svc Dc/Tm 11/26/22 1016: 20845I Amount Wasted: 0 GM; Drug Waste%: 0  
 1419 Infusion In Progress 1419 HERNLEN: Infused, Dose Rate: / Rate: 0 Mls/Hr  
 Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
 Queries  
 Cumulative Dose: 27 Cumulative Intake (Rx): 100 Cumulative Intake (Rx): 600  
 Container Volume: 0 Cumulative Elapsed Time (minutes): 24h 3m Increase/Decrease: Infused  
 Intake: 100 mls, Cumulative Intake: 0 Waste Amount: 0  
 1700 HERNLEN at 1710 GAVE: 25 Mls/Hr  
 Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag  
 NDC/DIN: 00338055318 (SOURCE: Default NDCs)  
 Barcode Medication: Zosyn  
 NDC/DIN: 00781311495 (SOURCE: Default NDCs)  
 Admin Queries  
 Cumulative Dose: 27 Cumulative Intake (Rx): 600 Container Volume: 100  
 Cumulative Elapsed Time (minutes): 24h 3m Increase/Decrease: Started/Running  
 Intake: 25 Waste Amount: 0  
 1710 Infusion In Progress 1710 HERNLEN: Started/Running, Dose Rate: / Rate: 25 Mls/Hr  
 Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
 Queries  
 Cumulative Dose: 27 Cumulative Intake (Rx): 600 Container Volume: 100  
 Cumulative Elapsed Time (minutes): 24h 3m Increase/Decrease: Started/Running  
 Intake: 25 Waste Amount: 0  
 1716 Transaction Rule PHABRCROB

DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:

0700 11/26/22 to 0659 11/27/22 (continued)

START/ STOP	
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/26/22 1710: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0
	1716 Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/26/22 1710: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
	2110 Infusion In Progress 0100 OAMIDAL: Infused, Dose Rate: / Rate: 0 MLS/HR
	Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
	Overies
	Cumulative Dose: 31.5 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 700
	Container Volume: 0 Cumulative Elapsed Time (minutes): 28h 3m Increase/Decrease: Infused
	Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0
	0100 OAMIDAL at 0100 CAME: 25 MLS/HR
	Barcode Medication: zosyn
	NDC/DIN: 0781311491 (SOURCE: eMAR)
	Admin Queries
	Cumulative Dose: 31.5 Cumulative Intake (Rx): 700 Container Volume: 100
	Cumulative Elapsed Time (minutes): 28h 3m Increase/Decrease: Started/Running
	Infusion Rate: 25 Waste Amount: 0
	0100 Infusion In Progress 0100 OAMIDAL: Started/Running, Dose Rate: / Rate: 25 MLS/HR
	Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
	Overies
	Cumulative Dose: 31.5 Cumulative Intake (Rx): 700 Container Volume: 100
	Cumulative Elapsed Time (minutes): 28h 3m Increase/Decrease: Started/Running
	Infusion Rate: 25 Waste Amount: 0
	0344 Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/27/22 0100: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0
	0344 Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/27/22 0100: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
	0500 Infusion In Progress 0500 OAMIDAL: Infused, Dose Rate: / Rate: 0 MLS/HR
	Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
	Overies
	Cumulative Dose: 36 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 800
	Container Volume: 0 Cumulative Elapsed Time (minutes): 32h 3m Increase/Decrease: Infused
	Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/26/22 to 0659 11/27/22 (continued)	

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 mL Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 ML/HR IVB8 Q24H  
Comments: \*Refrigerate\*  
RX TO FOLLOW  
RX #: Q02285215

11/24/22 1300 HERNIEM at 1409 GAVE: 125 ML/HR  
Barcode Medication: Dextrose 5% 250 mL  
NDC/DIN: 00338001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 2500 Cumulative Intake (Rx): 500 Container Volume: 250  
Cumulative Elapsed Time (minutes): 5h 2m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1409 Infusion In Progress: 1409 HERNIEM: Started/Running, Dose Rate: / Rate: 125 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mL, Site:  
Queries  
Cumulative Dose: 2500 Cumulative Intake (Rx): 500 Container Volume: 250  
Cumulative Elapsed Time (minutes): 5h 2m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1416 Transaction Rule PHARCTOR  
1416 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/26/22 1409: D5W250 Amount Wasted: 0 ML, Drug Waste%: 0  
1416 Transaction Rule PHARCTOR  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/26/22 1409: VAN11P Amount Wasted: 0 MG, Amount Given:  
1.25 VIAL  
1610 Infusion In Progress: 1610 HERNIEM: Infused, Dose Rate: / Rate: 0 ML/HR  
Intake: 250 mL, Cumulative Intake: 250 mL, Container Volume: 0 mL, Site:  
Queries  
Cumulative Dose: 3750 Cumulative Intake (Bag): 250 Cumulative Intake (Rx): 750  
Container Volume: 0 Cumulative Elapsed Time (minutes): 7h 3m Increase/Decrease: Infused  
Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0

Ddapv (Desmopressin 40 mcg/10 mL Vial)  
2 MCG IV-Push DAILY  
RX #: Q02285881

11/25/22 1000 Not Administered HERNIEM at 0912 hold low urine output

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/26/22 to 0659 11/27/22 (continued)	

Sodium Chloride 0.45 % 1,000 ML  
(0.45% Sodium Chloride 1,000 mL Bag)  
50 MLS/HR IV .020H  
RX #: 002286593

11/25/22	0702	Transaction Rule PHABRCOB
		MDI.WASTE - Medicate Waste
		Description: Dabit svc Dr/Pm 11/26/22 0600: HNS Amount Wasted: 0 ML; Drug Waste%: 0
		1700 Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 450 mls, Site: Queries
		1550 Container Volume: 450 Cumulative Intake (bag): 550 Cumulative Intake (RX): Running Intake: 50 Waste Amount: 0
		2000 Intake: 150 mls, Cumulative Intake: 700 mls, Container Volume: 300 mls, Site: Queries
		1700 Container Volume: 300 Cumulative Intake (bag): 700 Cumulative Intake (RX): Running Intake: 150 Waste Amount: 0
		2100 Intake: 50 mls, Cumulative Intake: 750 mls, Container Volume: 250 mls, Site: Queries
		1750 Container Volume: 250 Cumulative Intake (bag): 750 Cumulative Intake (RX): Running Intake: 50 Waste Amount: 0
		2200 Intake: 50 mls, Cumulative Intake: 800 mls, Container Volume: 200 mls, Site: Queries
		1800 Container Volume: 200 Cumulative Intake (bag): 800 Cumulative Intake (RX): Running Intake: 50 Waste Amount: 0
		2300 Intake: 50 mls, Cumulative Intake: 850 mls, Container Volume: 150 mls, Site: Queries
		1850 Container Volume: 150 Cumulative Intake (bag): 850 Cumulative Intake (RX): Running Intake: 50 Waste Amount: 0
		0000 Intake: 50 mls, Cumulative Intake: 900 mls, Container Volume: 100 mls, Site: Queries
		1900 Container Volume: 100 Cumulative Intake (bag): 900 Cumulative Intake (RX): Running Intake: 50 Waste Amount: 0
		0100 Intake: 50 mls, Cumulative Intake: 950 mls, Container Volume: 50 mls, Site: Queries
		Cumulative Dose: Not Applicable Cumulative Intake (bag): 950 Cumulative Intake (RX):

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/26/22 to 0659 11/27/22 (continued)		

1950 Container Volume: 50 Cumulative Elapsed Time (minutes): 39h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0115 OAMDLAL at 0200 GAVE: 50 MLS/HR  
Barcode Medication: sodium Chloride 0.45 %  
NDC/DIN: 0338004304 (SOURCE: eMAR)  
AdmIn Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 2000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 40h 9m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
0200 Infusion In Progress 0200 OAMDLAL: Infused, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (RX):  
2000 Container Volume: 0 Cumulative Elapsed Time (minutes): 40h 9m Increase/Decrease:  
Infused Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0200 Infusion In Progress 0200 OAMDLAL: started/Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (RX): 2000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 40h 9m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
0300 Infusion In Progress 0300 OAMDLAL: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 950 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 50 Cumulative Intake (RX):  
2050 Container Volume: 950 Cumulative Elapsed Time (minutes): 41h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0344 Transaction Rule PHABRCJOB  
MEDI.WASTE - Med/care Waste  
Description: DabIt Src Df/Pm 11/27/22 0200: HNS Amount Wasted: 0 ML: Drug Waste%: 0  
0400 Infusion In Progress 0400 OAMDLAL: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 100 mls, Container Volume: 900 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 100 Cumulative Intake (RX):  
2100 Container Volume: 900 Cumulative Elapsed Time (minutes): 42h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0500 Infusion In Progress 0500 OAMDLAL: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 150 mls, Container Volume: 850 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 150 Cumulative Intake (RX):  
2150 Container Volume: 850 Cumulative Elapsed Time (minutes): 43h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0600 Infusion In Progress 0600 OAMDLAL: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 200 mls, Container Volume: 800 mls, Site:

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP
0700 11/26/22 to 0659 11/27/22 (continued)		

Queries  
 Cumulative Dose: Not Applicable Cumulative Intake (bag): 200 Cumulative Intake (RX):  
 2200 Container Volume: 800 Cumulative Elapsed Time (minutes): 44h 9m Increase/Decrease:  
 Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0

**NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL)**  
 30 UNITS SUB-Q Every eight hours  
 Comments: HOLD IF THE PE WITHHELD OR BLOOD SUGAR BELOW  
 100 MG/DL.  
 RX #: Q02287759

11/25/22	0702	Transaction Rule PHABRC08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/26/22 0651: INSNPH Amount Wasted: 0 UNITS; Amount	
		Given: 0.300 ML	
		1400 HERNIM at 1413 CO-SIGNER: RANQOES SITE: Abdomen GAVE: 30 UNITS	
		Barcode Medication: Novolin N	
		NDC/DIN: 0169183411 (SOURCE: eMAR)	
		Admin Queries	
		MAR Injection Site: 11	
		1416 Transaction Rule PHABRC08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/26/22 1413: INSNPH Amount Wasted: 0 UNITS; Amount	
		Given: 0.300 ML	
		2200 OAMDDAL at 2236 CO-SIGNER: CHOMKRI SITE: Abdomen GAVE: 30 UNITS	
		Barcode Medication: Novolin N	
		NDC/DIN: 0169183411 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 221 MAR Injection site: 11	
		2251 Transaction Rule PHABRC08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/26/22 2236: INSNPH Amount Wasted: 0 UNITS; Amount	
		Given: 0.300 ML	
		0600 HERNIM at 0850 CO-SIGNER: RANQOES SITE: Abdomen GAVE: 30 UNITS	
		Barcode Medication: Novolin N	
		NDC/DIN: 0169183411 (SOURCE: eMAR)	
		Admin Queries	
		Finger stick Blood Glucose: 284 MAR Injection site: 11	

**Ancef (Cefazolin 1 gm Vial)**  
 2 GM .ROUTE .STR-MED/ONE  
 RX #: Q02288393

11/23/22	0805	Order Entry FISRCH	
11/23/22	0805	Discontinue STR MED	
		0816 Transaction Rule PHABRC08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/23/22 0815: ANCIH Amount Wasted: 0 GM; Drug Waste%: 0	

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num HB01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/26/22 to 0659 11/27/22 (continued)	

Sublimaze (Fentanyl 100 mcg/2 ml Amp)  
200 MCG . ROUTE . STR-MED/ONE  
RX #: 002288394

11/23/22	0805	Discontinue STR MED	
11/23/22	0805	Order Entry FISRCHR	
	0816	Transaction Rule PHABRCJOB	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/23/22 0815: SUB100I Amount Wasted: 0 MCG; Drug Waste%: 0	

Zemuron (Meclozolin Bromide 50 mg/5 ml Vial)  
50 MG . ROUTE . STR-MED/ONE  
RX #: 002288395

11/23/22	0805	Discontinue STR MED	
11/23/22	0805	Order Entry FISRCHR	
	0816	Transaction Rule PHABRCJOB	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/23/22 0815: ZEM50I Amount Wasted: 0 MG; Drug Waste%: 0	

Zofran (Ondansetron 4 mg/2 ml Vial)  
4 MG . ROUTE . STR-MED/ONE  
RX #: 002288396

11/23/22	0805	Discontinue STR MED	
11/23/22	0805	Order Entry FISRCHR	
	0816	Transaction Rule PHABRCJOB	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/23/22 0815: ZOP4I Amount Wasted: 0 MG; Drug Waste%: 0	

Diprivan (Propofol 200 mg/20 ml Vial)  
200 MG . ROUTE . STR-MED/ONE  
RX #: 002288397

11/23/22	0805	Discontinue STR MED	
11/23/22	0805	Order Entry FISRCHR	
	0816	Transaction Rule PHABRCJOB	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/23/22 0815: DIP20 Amount Wasted: 0 MG; Drug Waste%: 0	

Lactated Ringer's (Lactated Ringer's 1,000 ml Bag)  
1,000 ML IV . STR-MED/ONE  
RX #: 002288398

11/23/22	0805	Discontinue STR MED	
11/23/22	0805	Order Entry FISRCHR	
	0816	Transaction Rule PHABRCJOB	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/23/22 0815: LR Amount Wasted: 0 ML; Drug Waste%: 0	

Trandate (Labetalol 100 mg/20 ml Vial)  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: 002232792

11/26/22	2336	Discontinue RENEW STOP	
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/26/22 to 0659 11/27/22 (continued)		

Vasotec (Enalapril 1.25 mg/ml Vial)  
1.25 MG IV-Push Q6H/PRN  
PRN Reason: Hypertension SBP > 150 mmHg  
RX #: 002233073

	11/27/22	0457	Discontinue RENEW STOP



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:  
0700 11/26/22 to 0659 11/27/22 (continued)

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Qd/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002286977

START/STOP	DESCRIPTION	AMOUNT	UNIT
11/25/22	0833 HERNLEN at 0833 CO-SIGNER: RAMOUER SITE: Abdomen GAVE: 2 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries Finger Stick Blood Glucose: 176 MAR Injection site: 11 0847 Transaction Rule PHABRC0B MEDL.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/26/22 0833: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML		
	1219 HERNLEN at 1219 CO-SIGNER: RAMOUER SITE: Abdomen GAVE: 2 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries Finger Stick Blood Glucose: 176 MAR Injection site: 11 1231 Transaction Rule PHABRC0B MEDL.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/26/22 1219: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML		
	1623 HERNLEN at 1623 CO-SIGNER: RAMOUER SITE: Abdomen GAVE: 2 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries Finger Stick Blood Glucose: 175 MAR Injection site: 11 1631 Transaction Rule PHABRC0B MEDL.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/26/22 1623: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.020 ML		
	2052 CANDDAL at 2052 CO-SIGNER: CHOMKRI SITE: Abdomen GAVE: 4 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries Finger Stick Blood Glucose: 209 MAR Injection site: 11 2103 Transaction Rule PHABRC0B MEDL.WASTE - Medicare Waste Description: Debit Svc Dc/Tm 11/26/22 2052: INSASP Amount Wasted: 0 UNIT; Amount Given: 0.040 ML		
	0030 CANDDAL at 0030 CO-SIGNER: LAMPHEN SITE: Left Deltoid GAVE: 2 UNIT Barcode Medication: Novolog NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries Finger Stick Blood Glucose: 197 MAR Injection site: 1 0044 Transaction Rule PHABRC0B MEDL.WASTE - Medicare Waste		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:

0700 11/26/22 to 0659 11/27/22 (continued)

START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
	Description: Debit Svc Dc/Tm 11/27/22 0030: INRSASP	0 UNIT	Amount Given:
	0.020 ML		
	0501 OAMDIAT at 0501 CO-SIGNER: LAMPBEN SITE: Abdomen GAVE: 4 UNIT		
	Barcode Medication: Novolog		
	NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries		
	Finger Stick Blood Glucose: 249 MAR Injection site: 11		
	0515 Transaction Rule PHARGO8		
	NPDI WASTE - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/27/22 0501: INRSASP	Amount Wasted: 0 UNIT	Amount Given:
	0.040 ML		

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/26/22 to 0659 11/27/22 (continued)	STOP	STOP

Levophed Drip 250 ML  
(Norepinephrine in D5W 8 mg/250 mL Bag)

19.594 MLS/HR IV TITRATE/PRN  
PRN Reason: BP Support (see Protocol)  
Comments: Conc = 32 mcg/mL  
Protect From Light

Label matches overwrap. PRN \_\_\_\_\_  
RX #: Q022875396

11/25/22 0700 Infusion In Progress 0700 HERRIEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 207.532 mls, Container Volume: 42.468 mls, Site:  
Queries  
Cumulative Dose: 6.6411 Cumulative Intake (bag): 207.532 Cumulative Intake (Rx):  
207.532 Container Volume: 42.468 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 13h 7m  
Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0800 Infusion In Progress 0800 HERRIEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 223.207 mls, Container Volume: 26.793 mls, Site:  
Queries  
Cumulative Dose: 7.1427 Cumulative Intake (bag): 223.207 Cumulative Intake (Rx):  
223.207 Container Volume: 26.793 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 14h 7m  
Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0900 Infusion In Progress 0900 HERRIEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 238.882 mls, Container Volume: 11.118 mls, Site:  
Queries  
Cumulative Dose: 7.6443 Cumulative Intake (bag): 238.882 Cumulative Intake (Rx):  
238.882 Container Volume: 11.118 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 15h 7m  
Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
0909 Infusion In Progress 0909 HERRIEN: Infused, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 2.351 mls, Cumulative Intake: 241.233 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 7.7195 Cumulative Intake (bag): 241.233 Cumulative Intake (Rx):  
241.233 Container Volume: 0 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 15h 16m  
Increase/Decrease: Infused Infusion Intake: 2.351 Infusion Rate: 15.675 Waste Amount:  
8.767  
0909 HERRIEN at 0909 GAVE: 15.675 MLS/HR  
Barcode Medication: Levophed Drip  
NDC/DIN: 00338010820 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 7.7195 Cumulative Intake (Rx): 241.233 Container Volume: 250 Dose Rate:  
0.08 Cumulative Elapsed Time (minutes): 15h 16m Increase/Decrease: Started/Running  
Infusion Rate: 15.675 Waste Amount: 0  
0909 Infusion In Progress 0909 HERRIEN: started/Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 7.7195 Cumulative Intake (Rx): 241.233 Container Volume: 250  
Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 15h 16m Increase/Decrease:  
Started/Running Infusion Rate: 15.675 Waste Amount: 0  
0916 Transaction Rule PHABRCIOB  
MED1.WASFE - Medicare Waste  
Description: Debit svc Dr/Tm 11/26/22 0909: LEV8BPSM Amount Wasted: 0 MG. Drug Waste%:  
0  
1000 Infusion In Progress 1000 HERRIEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR

DATE: 12/03/22 @ 0013  
USER: PHABG08

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/26/22 to 0659 11/27/22 (continued)		

Intake: 13.324 mls, Cumulative Intake: 13.324 mls, Container Volume: 236.676 mls, Site:  
Queries  
Cumulative Dose: 8.1459 Cumulative Intake (bag): 13.324 Cumulative Intake (Rx): 254.557  
Container Volume: 236.676 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 16h 7m  
Increase/Decrease: Running Infusion Intake: 13.324 Infusion Rate: 15.675 Waste Amount: 0  
1100 Infusion In Progress 1100 HERRIMEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 28.999 mls, Container Volume: 221.001 mls, Site:  
Queries  
Cumulative Dose: 8.6475 Cumulative Intake (bag): 28.999 Cumulative Intake (Rx): 270.232  
Container Volume: 221.001 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 17h 7m  
Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
1200 Infusion In Progress 1200 HERRIMEN: Increased, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 44.674 mls, Container Volume: 205.326 mls, Site:  
Queries  
Cumulative Dose: 9.1491 Cumulative Intake (bag): 44.674 Cumulative Intake (Rx): 285.907  
Container Volume: 205.326 Dose Rate: 0.09 Cumulative Elapsed Time (minutes): 18h 7m  
Increase/Decrease: Increased Infusion Intake: 15.675 Infusion Rate: 17.634 Waste Amount: 0  
1300 Infusion In Progress 1300 HERRIMEN: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 17.634 mls, Cumulative Intake: 62.308 mls, Container Volume: 187.692 mls, Site:  
Queries  
Cumulative Dose: 9.7134 Cumulative Intake (bag): 62.308 Cumulative Intake (Rx): 303.541  
Container Volume: 187.692 Dose Rate: 0.09 Cumulative Elapsed Time (minutes): 19h 7m  
Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634 Waste Amount: 0  
1400 Infusion In Progress 1400 HERRIMEN: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 17.634 mls, Cumulative Intake: 79.942 mls, Container Volume: 170.058 mls, Site:  
Queries  
Cumulative Dose: 10.2777 Cumulative Intake (bag): 79.942 Cumulative Intake (Rx):  
321.175 Container Volume: 170.058 Dose Rate: 0.09 Cumulative Elapsed Time (minutes):  
20h 7m Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634  
Waste Amount: 0  
1500 Infusion In Progress 1500 HERRIMEN: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 17.634 mls, Cumulative Intake: 97.576 mls, Container Volume: 152.424 mls, Site:  
Queries  
Cumulative Dose: 10.842 Cumulative Intake (bag): 97.576 Cumulative Intake (Rx): 338.809  
Container Volume: 152.424 Dose Rate: 0.09 Cumulative Elapsed Time (minutes): 21h 7m  
Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634 Waste Amount: 0  
1600 Infusion In Progress 1600 HERRIMEN: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 17.634 mls, Cumulative Intake: 115.21 mls, Container Volume: 134.79 mls, Site:  
Queries  
Cumulative Dose: 11.4063 Cumulative Intake (bag): 115.21 Cumulative Intake (Rx):  
356.443 Container Volume: 134.79 Dose Rate: 0.09 Cumulative Elapsed Time (minutes): 22h 7m  
Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634 Waste Amount: 0  
1700 Infusion In Progress 1700 HERRIMEN: Increased, Dose Rate: 0.1 MCG/KG/MIN, Rate: 19.594 MLS/HR

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USER: PHARGOTB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 11/26/22 to 0659 11/27/22 (continued)		

Intake: 17.634 mls, Cumulative Intake: 132.844 mls, Container Volume: 117.156 mls, Site:  
Queries  
Cumulative Dose: 11.9706 Cumulative Intake (bag): 132.844 Cumulative Intake (Rx):  
374.077 Container Volume: 117.156 Dose Rate: 0.1 Cumulative Elapsed Time (minutes): 23h 7m  
Increase/Decrease: Increased Infusion Intake: 17.634 Infusion Rate: 19.594 Waste Amount:  
0  
1715 Infusion In Progress 1715 HERNIMEN: Increased, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 4.899 mls, Cumulative Intake: 137.743 mls, Container Volume: 112.257 mls, Site:  
Queries  
Cumulative Dose: 12.1274 Cumulative Intake (bag): 137.743 Cumulative Intake (Rx):  
378.976 Container Volume: 112.257 Dose Rate: 0.11 Cumulative Elapsed Time (minutes):  
23h 22m Increase/Decrease: Increased Infusion Intake: 4.899 Infusion Rate: 21.553  
Waste Amount: 0  
1730 Infusion In Progress 1730 HERNIMEN: Increased, Dose Rate: 0.12 MCG/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 5.388 mls, Cumulative Intake: 143.131 mls, Container Volume: 106.869 mls, Site:  
Queries  
Cumulative Dose: 12.2996 Cumulative Intake (bag): 143.131 Cumulative Intake (Rx):  
384.364 Container Volume: 106.869 Dose Rate: 0.12 Cumulative Elapsed Time (minutes):  
23h 37m Increase/Decrease: Increased Infusion Intake: 5.388 Infusion Rate: 23.513  
Waste Amount: 0  
1800 Infusion In Progress 1800 HERNIMEN: Running, Dose Rate: 0.12 MCG/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 11.757 mls, Cumulative Intake: 154.888 mls, Container Volume: 95.112 mls, Site:  
Queries  
Cumulative Dose: 12.676 Cumulative Intake (bag): 154.888 Cumulative Intake (Rx):  
396.121 Container Volume: 95.112 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 24h 7m  
Increase/Decrease: Running Infusion Intake: 11.757 Infusion Rate: 23.513 Waste Amount: 0  
1900 Infusion In Progress 1900 HERNIMEN: Running, Dose Rate: 0.12 MCG/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 23.513 mls, Cumulative Intake: 178.401 mls, Container Volume: 71.599 mls, Site:  
Queries  
Cumulative Dose: 13.4284 Cumulative Intake (bag): 178.401 Cumulative Intake (Rx):  
419.634 Container Volume: 71.599 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 25h 7m  
Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513 Waste Amount: 0  
2000 Infusion In Progress 2000 OANDPAL: Running, Dose Rate: 0.12 MCG/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 23.513 mls, Cumulative Intake: 201.914 mls, Container Volume: 48.086 mls, Site:  
Queries  
Cumulative Dose: 14.1808 Cumulative Intake (bag): 201.914 Cumulative Intake (Rx):  
443.147 Container Volume: 48.086 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 26h 7m  
Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513 Waste Amount: 0  
2100 Infusion In Progress 2100 OANDPAL: Running, Dose Rate: 0.12 MCG/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 23.513 mls, Cumulative Intake: 225.427 mls, Container Volume: 24.573 mls, Site:  
Queries  
Cumulative Dose: 14.9332 Cumulative Intake (bag): 225.427 Cumulative Intake (Rx):  
466.66 Container Volume: 24.573 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 27h 7m  
Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/26/22 to 0659 11/27/22 (continued)	STAGE	

2200 Infusion In Progress 2200 OANDDAL: Running, Dose Rate: 0.12 MCC/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 23.513 mls, Cumulative Intake: 248.94 mls, Container Volume: 1.06 mls, Site:  
Queries  
Cumulative Dose: 15.6856 Cumulative Intake (bag): 248.94 Cumulative Intake (Rx):  
490.173 Container Volume: 1.06 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 28h 7m  
Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513 Waste Amount: 0  
2203 Infusion In Progress 2203 OANDDAL: Infused, Dose Rate: 0.12 MCC/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 1.06 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 15.7195 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 491.233  
Container Volume: 0 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 28h 10m  
Increase/Decrease: Infused Infusion Intake: 1.06 Infusion Rate: 23.513 Waste Amount: 0  
2240 OANDDAL at 2240 GAVE: 23.513 MLS/HR  
Barcode Medication: LevoPhed drip  
NDC/DIN: 0338010820 (SOURCE: eMAR)  
Adultn Queries  
Cumulative Dose: 15.7195 Cumulative Intake (Rx): 491.233 Container Volume: 250 Dose Rate:  
0.12 Cumulative Elapsed Time (minutes): 28h 10m Increase/Decrease: Started/Running  
2240 Infusion In Progress 2240 OANDDAL: Started/Running, Dose Rate: 0.12 MCC/KG/MIN, Rate: 23.513 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 15.7195 Cumulative Intake (Rx): 491.233 Container Volume: 250  
Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 28h 10m Increase/Decrease:  
2251 Transaction Rule PHABRC0B  
MEDI.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/26/22 2240: IEV8BDS# Amount Wasted: 0 Mq; Drug Waste%:  
0  
2300 Infusion In Progress 2300 OANDDAL: Running, Dose Rate: 0.12 MCC/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 7.838 mls, Cumulative Intake: 7.838 mls, Container Volume: 242.162 mls, Site:  
Queries  
Cumulative Dose: 15.9703 Cumulative Intake (bag): 7.838 Cumulative Intake (Rx): 499.071  
Container Volume: 242.162 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 28h 30m  
Increase/Decrease: Running Infusion Intake: 7.838 Infusion Rate: 23.513 Waste Amount: 0  
0000 Infusion In Progress 0000 OANDDAL: Running, Dose Rate: 0.12 MCC/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 23.513 mls, Cumulative Intake: 31.351 mls, Container Volume: 218.649 mls, Site:  
Queries  
Cumulative Dose: 16.7227 Cumulative Intake (bag): 31.351 Cumulative Intake (Rx):  
522.584 Container Volume: 218.649 Dose Rate: 0.12 Cumulative Elapsed Time (minutes):  
29h 30m Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513  
Waste Amount: 0  
0100 Infusion In Progress 0100 OANDDAL: Running, Dose Rate: 0.12 MCC/KG/MIN, Rate: 23.513 MLS/HR  
Intake: 23.513 mls, Cumulative Intake: 54.864 mls, Container Volume: 195.136 mls, Site:

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:  
0700 11/26/22 to 0659 11/27/22 (continued)

START/ STOP	
	Queries
	Cumulative Dose: 17.4751 Cumulative Intake (bag): 54.864 Cumulative Intake (RX): 546.097 Container Volume: 195.136 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 30h 30m Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513 Waste Amount: 0
	0200 Infusion In Progress: 0200 OAMIDAL: Running, Dose Rate: 0.12 MCG/KG/MTN, Rate: 23.513 MLS/HR Intake: 23.513 mls, Cumulative Intake: 78.377 mls, Container Volume: 171.623 mls, site:
	Queries
	Cumulative Dose: 18.2275 Cumulative Intake (bag): 78.377 Cumulative Intake (RX): 569.61 Container Volume: 171.623 Dose Rate: 0.12 Cumulative Elapsed Time (minutes): 31h 30m Increase/Decrease: Running Infusion Intake: 23.513 Infusion Rate: 23.513 Waste Amount: 0
	0300 Infusion In Progress: 0300 OAMIDAL: Decreased, Dose Rate: 0.11 MCG/KG/MTN, Rate: 21.553 MLS/HR Intake: 23.513 mls, Cumulative Intake: 101.89 mls, Container Volume: 148.11 mls, site:
	Queries
	Cumulative Dose: 18.9799 Cumulative Intake (bag): 101.89 Cumulative Intake (RX): 593.123 Container Volume: 148.11 Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 32h 30m Increase/Decrease: Decreased Infusion Intake: 23.513 Infusion Rate: 21.553 Waste Amount: 0
	0400 Infusion In Progress: 0400 OAMIDAL: Running, Dose Rate: 0.11 MCG/KG/MTN, Rate: 21.553 MLS/HR Intake: 21.553 mls, Cumulative Intake: 123.443 mls, Container Volume: 126.557 mls, site:
	Queries
	Cumulative Dose: 19.6696 Cumulative Intake (bag): 123.443 Cumulative Intake (RX): 614.676 Container Volume: 126.557 Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 33h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553 Waste Amount: 0
	0500 Infusion In Progress: 0500 OAMIDAL: Running, Dose Rate: 0.11 MCG/KG/MTN, Rate: 21.553 MLS/HR Intake: 21.553 mls, Cumulative Intake: 144.996 mls, Container Volume: 105.004 mls, site:
	Queries
	Cumulative Dose: 20.3593 Cumulative Intake (bag): 144.996 Cumulative Intake (RX): 636.229 Container Volume: 105.004 Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 34h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553 Waste Amount: 0
	0600 Infusion In Progress: 0600 OAMIDAL: Running, Dose Rate: 0.11 MCG/KG/MTN, Rate: 21.553 MLS/HR Intake: 21.553 mls, Cumulative Intake: 166.549 mls, Container Volume: 83.451 mls, site:
	Queries
	Cumulative Dose: 21.049 Cumulative Intake (bag): 166.549 Cumulative Intake (RX): 657.782 Container Volume: 83.451 Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 35h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553 Waste Amount: 0

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USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/27/22 to 0659 11/28/22	

**Peridex Oral Rinse (Chlorhexidine 0.12% 15 mL UDCUP)**  
15 ML NUGOUS MEM BID@0800,2000  
Dose Inst: Swab oral cavity at 0800 and 2000 as part of ventilator care  
Protocol: Protocol continues until patient off ventilator.

11/27/22 0800 HERNLEN at 0852 GAVE: 15 ML  
Barcode Medication: Peridex Oral Rinse  
NDC/DIN: 00116200116 (SOURCE: eMAR)  
Expiration Date: 05/18/23  
0900 Transaction Rule PHABRCJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/27/22 0852: BERR15 Amount Wasted: 0 ML; Drug Waste%: 0  
1959 Discontinue RENEW STOP  
2030 Acknowledged Order: BENSJBS

**Synthroid (Letrothyroxine 112 mcg Tablet)**  
112 MCG G-TUBE DALDI before breakfast  
RX #: Q02279429

11/21/22 0700 HERNLEN at 0851 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0900 Transaction Rule PHABRCJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/27/22 0851: SWNF12 Amount Wasted: 0 MCG; Drug Waste%: 0  
0633 Transaction Rule PHABRCJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/28/22 0630: SWNF12 Amount Wasted: 0 MCG; Drug Waste%: 0

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: Q02279432

11/21/22 1000 HERNLEN at 1341 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
1345 Transaction Rule PHABRCJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/27/22 1341: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2049 Transaction Rule PHABRCJOB  
MED:WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/27/22 2046: BEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 BENSJBS at 2046 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)



DATE: 12/03/22 @ 0013  
 USER: PHARGJOB

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 Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/27/22 to 0659 11/28/22 (continued)		

Sodium Chloride 0.9% 100 ml 100 ML  
 (0.9% Sodium Chloride 100 ml Bag)  
 Koppa 500 MG  
 (Levetiracetam 500 mg/5 ml Vial)  
 420 ML/HR IVB Every twelve hours  
 Comments: SEND ONE DOSE NOW  
 RX #: 002284450

11/23/22 0900	HERNLEN at 1122 GAVE: 420 ML/HR	
	Barcode Medication: Koppa	
	NDC/DIN: 67457079005 (SOURCE: Default NDCs)	
	Barcode Medication: sodium chloride 0.9% 100 ml	
	NDC/DIN: 00338004918 (SOURCE: Default NDCs)	
	Admin Queries	
	Cumulative Dose: 3500 Cumulative Intake (RX): 735 Container Volume: 105	
	Cumulative Elapsed Time (minutes): 0	
	Infusion Rate: 420 Waste Amount: 0	
	1122 Infusion In Progress 1122 HERNLEN: Started/Running, Dose Rate: / Rate: 420 ML/HR	
	Intake: / Cumulative Intake: / Container Volume: 105 ml, Site:	
	Queries	
	Cumulative Dose: 3500 Cumulative Intake (RX): 735 Container Volume: 105	
	Cumulative Elapsed Time (minutes): 1h 56m Increase/Decrease: Started/Running	
	Infusion Rate: 420 Waste Amount: 0	
	1130 Transaction Rule PHARGJOB	
	MDI.WASTE - Medicare Waste	
	1130 Transaction Rule PHARGJOB	
	MDI.WASTE - Medicare Waste	
	Description: Debit svc Dc/Tm 11/27/22 1122: REP500I Amount Wasted: 0 MG; Drug Waste%: 0	
	1137 Infusion In Progress 1137 HERNLEN: Infused, Dose Rate: / Rate: 0 ML/HR	
	Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:	
	Queries	
	Cumulative Dose: 4000 Cumulative Intake (bag): 105 Cumulative Intake (RX): 840	
	Container Volume: 0 Cumulative Elapsed Time (minutes): 2h 11m Increase/Decrease: Infused	
	Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0	
	2052 Infusion In Progress 2052 BMSJBS: started/Running, Dose Rate: / Rate: 420 ML/HR	
	Intake: / Cumulative Intake: / Container Volume: 105 ml, Site:	
	Queries	
	Cumulative Dose: 4000 Cumulative Intake (RX): 840 Container Volume: 105	
	Cumulative Elapsed Time (minutes): 2h 11m Increase/Decrease: Started/Running	
	Infusion Rate: 420 Waste Amount: 0	
	2100 BMSJBS at 2052 GAVE: 420 ML/HR	
	Barcode Medication: Koppa	
	NDC/DIN: 67457079005 (SOURCE: Default NDCs)	
	Barcode Medication: sodium chloride 0.9% 100 ml	
	NDC/DIN: 00338004918 (SOURCE: Default NDCs)	
	Admin Queries	
	Cumulative Dose: 4000 Cumulative Intake (RX): 840 Container Volume: 105	
	Cumulative Elapsed Time (minutes): 2h 11m Increase/Decrease: Started/Running	
	Infusion Rate: 420 Waste Amount: 0	
	2103 Transaction Rule PHARGJOB	



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/27/22 to 0659 11/28/22 (continued)	

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
(0.9% Sodium Chloride 100 ml MINI-Bag)  
zosyn 4.5 GM  
(Piperacillin/Tazobactam 4.5 gm Vial)  
25 Mls/HR IVPB Q8H  
RX #: 002285170

11/24/22 0900 HERNLEN at 0913 GAVE: 25 Mls/HR  
12/04/22 Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag  
NDC/DIN: 0038055318 (SOURCE: Default NDCs)  
Barcode Medication: zosyn  
NDC/DIN: 0078131495 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 36 Cumulative Intake (Rx): 800 Container Volume: 100  
Cumulative Elapsed Time (minutes): 32h 3m Increase/Decrease: Started/Running  
Infusion Rate: 25 Waste Amount: 0  
0913 Infusion In Progress 0913 HERNLEN: Started/Running, Dose Rate: / Rate: 25 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: 36 Cumulative Intake (Rx): 800 Container Volume: 100  
Cumulative Elapsed Time (minutes): 32h 3m Increase/Decrease: Started/Running  
Infusion Rate: 25 Waste Amount: 0  
0914 Transaction Rule PHABRCROB  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/27/22 0913: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0  
0914 Transaction Rule PHABRCROB  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/27/22 0913: 20845I Amount Wasted: 0 GM; Drug Waste%: 0  
1338 Infusion In Progress 1338 HERNLEN: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 40.5 Cumulative Intake (Rx): 100 Cumulative Intake (Rx): 900  
Container Volume: 0 Cumulative Elapsed Time (minutes): 36h 28m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0  
1700 HERNLEN at 1713 GAVE: 25 Mls/HR  
Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag  
NDC/DIN: 0038055318 (SOURCE: Default NDCs)  
Barcode Medication: zosyn  
NDC/DIN: 0078131495 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 40.5 Cumulative Intake (Rx): 900 Container Volume: 100  
Cumulative Elapsed Time (minutes): 36h 28m Increase/Decrease: Started/Running  
Infusion Rate: 25 Waste Amount: 0  
1713 Infusion In Progress 1713 HERNLEN: Started/Running, Dose Rate: / Rate: 25 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: 40.5 Cumulative Intake (Rx): 900 Container Volume: 100  
Cumulative Elapsed Time (minutes): 36h 28m Increase/Decrease: Started/Running  
Infusion Rate: 25 Waste Amount: 0  
1718 Transaction Rule PHABRCROB

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/27/22 to 0659 11/28/22 (continued)		

MDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/27/22 1713: NS100MB Amount Wasted: 0 ML; Drug Waste%: 0  
1718 Transaction Rule PHABRCJOB  
MDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/27/22 1713: 208451 Amount Wasted: 0 GM; Drug Waste%: 0  
2113 Infusion In Progress 2113 BNS3TS: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Overies  
Cumulative Dose: 45 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 1000  
Container Volume: 0 Cumulative Elapsed Time (minutes): 40h 28m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0  
0058 Infusion In Progress 0058 BNS3TS: started/Running, Dose Rate: / Rate: 25 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:  
Overies  
Cumulative Dose: 45 Cumulative Intake (Rx): 1000 Container Volume: 100  
Cumulative Elapsed Time (minutes): 40h 28m Increase/Decrease: started/Running  
Infusion Rate: 25 Waste Amount: 0  
0100 BNS3TS at 0058 GAVE: 25 MLS/HR  
Barcode Medication: 0.9% Sodium Chloride 100 mL MINI-Bag  
NDC/DIN: 0038055318 (SOURCE: Default NDCs)  
Barcode Medication: zoelyn  
NDC/DIN: 00781311495 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 45 Cumulative Intake (Rx): 1000 Container Volume: 100  
Cumulative Elapsed Time (minutes): 40h 28m Increase/Decrease: started/Running  
Infusion Rate: 25 Waste Amount: 0  
0101 Transaction Rule PHABRCJOB  
MDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/28/22 0058: NS100MB Amount Wasted: 0 ML; Drug Waste%: 0  
0101 Transaction Rule PHABRCJOB  
MDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/28/22 0058: 208451 Amount Wasted: 0 GM; Drug Waste%: 0  
0458 Infusion In Progress 0458 BNS3TS: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:  
Overies  
Cumulative Dose: 49.5 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 1100  
Container Volume: 0 Cumulative Elapsed Time (minutes): 44h 28m Increase/Decrease: Infused  
Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/27/22 to 0659 11/28/22 (continued)	

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 ml Bag)  
Vancomycin 1,250 MG  
(Vancomycin 1,000 mg Vial)  
125 MLS/HR IV#8 Q24H  
Comments: \*Refrigerate\*  
RX TO FOLLOW  
RX #: Q02285215

11/24/22 1300 HERNLEN at 1341 GAVE: 125 MLS/HR  
Barcode Medication: Dextrose 5% 250 ml  
NDC/DIN: 00338001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 3750 Cumulative Intake (Rx): 750 Container Volume: 250  
Cumulative Elapsed Time (minutes): 7h 3m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1341 Infusion In Progress 1341 HERNLEN: Started/Running, Dose Rate: / Rate: 125 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mLr, Site:  
Queries  
Cumulative Dose: 3750 Cumulative Intake (Rx): 750 Container Volume: 250  
Cumulative Elapsed Time (minutes): 7h 3m Increase/Decrease: Started/Running Infusion Rate:  
125 Waste Amount: 0  
1345 Transaction Rule PHABRC08  
1345 Transaction Rule PHABRC08  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/27/22 1341: D5W250 Amount Wasted: 0 MLr Drug Waste%: 0  
1345 Transaction Rule PHABRC08  
MEDT.WASTE - Medicare Waste  
Description: Debit svc Dc/Tm 11/27/22 1341: VAN11P Amount Wasted: 0 MG; Amount Given:  
1.25 VIAL  
1420 Infusion In Progress 1420 HERNLEN: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 81.25 mLr, Cumulative Intake: 81.25 mLr, Container Volume: 0 mLr, Site:  
Queries  
Cumulative Dose: 4156.25 Cumulative Intake (bag): 81.25 Cumulative Intake (Rx): 831.25  
Container Volume: 0 Cumulative Elapsed Time (minutes): 7h 42m Increase/Decrease: Infused  
Infusion Intake: 81.25 Infusion Rate: 0 Waste Amount: 168.75  
1423 Discontinue ZPHA.DSH  
1544 Acknowledged Order: HERNLEN

Delay: (Desmopressin 40 mcg/10 mL Vial)  
2 MCG IV-Push DAILY  
RX #: Q02285881

11/25/21 1000 Not Administered HERNLEN at 1123 LOW URINE OUTPUT

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/27/22 to 0659 11/28/22 (continued)	STAGE	

Sodium Chloride 0.45 % 1,000 ML  
(0.45% Sodium Chloride 1,000 mL Bag)  
50 MLS/HR IV .020H  
RX #: 002286593

11/25/22 0700 Infusion In Progress 0700 OAMIDAL: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 250 mls, Container Volume: 750 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 250 Cumulative Intake (Rx):  
2250 Container Volume: 750 Cumulative Elapsed Time (minutes): 45h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0800 Infusion In Progress 0800 HERNIM: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 300 mls, Container Volume: 700 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 300 Cumulative Intake (Rx):  
2300 Container Volume: 700 Cumulative Elapsed Time (minutes): 46h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
1700 Infusion In Progress 1700 HERNIM: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 450 mls, Cumulative Intake: 750 mls, Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 750 Cumulative Intake (Rx):  
2750 Container Volume: 250 Cumulative Elapsed Time (minutes): 55h 9m Increase/Decrease:  
Running Infusion Intake: 450 Infusion Rate: 50 Waste Amount: 0  
1800 Infusion In Progress 1800 HERNIM: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 800 mls, Container Volume: 200 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 800 Cumulative Intake (Rx):  
2800 Container Volume: 200 Cumulative Elapsed Time (minutes): 56h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
2000 Infusion In Progress 2000 BMSSTS: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 100 mls, Cumulative Intake: 900 mls, Container Volume: 100 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 900 Cumulative Intake (Rx):  
2900 Container Volume: 100 Cumulative Elapsed Time (minutes): 58h 9m Increase/Decrease:  
Running Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0  
2100 Infusion In Progress 2100 BMSSTS: Running, Dose Rate: , Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 950 mls, Container Volume: 50 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 950 Cumulative Intake (Rx):  
2950 Container Volume: 50 Cumulative Elapsed Time (minutes): 59h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
2115 BMSSTS at 2200 GAVE: 50 MLS/HR  
Barcode Medication: Sodium Chloride 0.45 %  
NDC/DIN: 0338004304 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 3000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 60h 9m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/27/22 to 0659 11/28/22 (continued)		

2200 Infusion In Progress 2200 BMSJTS: Infused, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
3000 Container Volume: 0 Cumulative Elapsed Time (minutes): 60h 9m Increase/Decrease:  
Infused Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
2200 Infusion In Progress 2200 BMSJTS: Started/Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 3000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 60h 9m Increase/Decrease: Started/Running  
Infusion Rate: 50 Waste Amount: 0  
2220 Transaction Rule PHABRC08  
MEDI.WASTE - Medication Waste  
2300 Infusion In Progress 2300 BMSJTS: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 50 mls, Container Volume: 950 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 50 Cumulative Intake (Rx):  
3050 Container Volume: 950 Cumulative Elapsed Time (minutes): 61h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0000 Infusion In Progress 0000 BMSJTS: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 100 mls, Container Volume: 900 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 100 Cumulative Intake (Rx):  
3100 Container Volume: 900 Cumulative Elapsed Time (minutes): 62h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0100 Infusion In Progress 0100 BMSJTS: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 150 mls, Container Volume: 850 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 150 Cumulative Intake (Rx):  
3150 Container Volume: 850 Cumulative Elapsed Time (minutes): 63h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0300 Infusion In Progress 0300 BMSJTS: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 100 mls, Cumulative Intake: 250 mls, Container Volume: 750 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 250 Cumulative Intake (Rx):  
3250 Container Volume: 750 Cumulative Elapsed Time (minutes): 65h 9m Increase/Decrease:  
Running Infusion Intake: 100 Infusion Rate: 50 Waste Amount: 0  
0400 Infusion In Progress 0400 BMSJTS: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 300 mls, Container Volume: 700 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 300 Cumulative Intake (Rx):  
3300 Container Volume: 700 Cumulative Elapsed Time (minutes): 66h 9m Increase/Decrease:

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 11/27/22 to 0659 11/28/22 (continued)

START/STOP	
	Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
	0500 Infusion In Progress 0500 BMS/STS: Running, Dose Rate: / Rate: 50 MLS/HR
	Intake: 50 mls, Cumulative Intake: 350 mls, Container Volume: 650 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 350 Cumulative Intake (Rx):
	3350 Container Volume: 650 Cumulative Elapsed Time (minutes): 67h 9m Increase/Decrease:
	Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0
	0600 Infusion In Progress 0600 BMS/STS: Running, Dose Rate: / Rate: 50 MLS/HR
	Intake: 50 mls, Cumulative Intake: 400 mls, Container Volume: 600 mls, Site:
	Queries
	Cumulative Dose: Not Applicable Cumulative Intake (bag): 400 Cumulative Intake (Rx):
	3400 Container Volume: 600 Cumulative Elapsed Time (minutes): 68h 9m Increase/Decrease:
	Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0



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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/27/22 to 0659 11/28/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 mL VIAL) 11/25/22) 0900 Transaction Rule PHABRCJOB  
30 UNITS SUB-Q Every eight hours  
Description: Debit svc Dc/Tm 11/27/22 0850: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
Comments: HOLD IF THE PB WITHHELDS OR BLOOD SUGAR BELOW  
1400 HERNIMEN at 1538 CO-SIGNER: RANOGES SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
NAX Injection Site: 11  
1545 Transaction Rule PHABRCJOB  
Description: Debit svc Dc/Tm 11/27/22 1538: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
2200 BENSJYS at 2201 CO-SIGNER: LAMPHBN SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 268 MAR Injection site: 11  
2204 Transaction Rule PHABRCJOB  
Description: Debit svc Dc/Tm 11/27/22 2201: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
0547 Transaction Rule PHABRCJOB  
Description: Debit svc Dc/Tm 11/28/22 0540: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.300 ML  
0600 BENSJYS at 0540 CO-SIGNER: MACCAJEN SITE: Abdomen GAVE: 30 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 326 MAR Injection site: 11

Trandate (labetalol 100 mg/20 mL VIAL) 10/26/22) 0841 Acknowledged Order HERNIMEN  
10 MG IV-Push Q4H/PRN  
PRN Reason: Hypertension  
Comments: SBP >140  
RX #: Q02287759

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/27/22 to 0659 11/28/22 (continued)		

Vasotec (Enalapril 1.25 mg/mL Vial)  
1.25 MG IV-Push Q6H/PRN  
PRN Reason: Hypertension SBP > 150 mmHg  
RX #: 002233073

11/27/22	0841	Acknowledged Order	HERRNLEN

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/27/22 to 0659 11/28/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002286977

11/25/22	0850	HERNLEN at 0850 CO-SIGNER: RAMOJES SITE: Abdomen GAVE: 6 UNIT	
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 284 MAR Injection site: 11	
		Transaction Rule PHABRC08	
		0900	Transaction Rule PHABRC08
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/27/22 0950: IN5ASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML	
		1342	HERNLEN at 1342 CO-SIGNER: RAMOJES SITE: Abdomen GAVE: 8 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 310 MAR Injection site: 11	
		1345	Transaction Rule PHABRC08
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/27/22 1342: IN5ASP Amount Wasted: 0 UNIT; Amount Given: 0.080 ML	
		1658	HERNLEN at 1658 CO-SIGNER: RAMOJES SITE: Abdomen GAVE: 8 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 322 MAR Injection site: 11	
		1702	Transaction Rule PHABRC08
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/27/22 1658: IN5ASP Amount Wasted: 0 UNIT; Amount Given: 0.080 ML	
		2046	BMSJES at 2046 CO-SIGNER: LAMPHEN SITE: Right PosteroLateral Arm GAVE: 6 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 268 MAR Injection site: 16	
		2049	Transaction Rule PHABRC08
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/27/22 2046: IN5ASP Amount Wasted: 0 UNIT; Amount Given: 0.060 ML	
		0055	BMSJES at 0055 CO-SIGNER: LAMPHEN SITE: Abdomen GAVE: 8 UNIT
		Barcode Medication: Novolog	
		NDC/DIN: 0169750111 (SOURCE: eMAR)	
		Admin Queries	
		Finger Stick Blood Glucose: 305 MAR Injection site: 11	
		0101	Transaction Rule PHABRC08
		MEDI.WASTE - Medicare Waste	

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H005494016

ADMINISTRATION PERIOD:

0700 11/27/22 to 0659 11/28/22 (continued)

START/STOP	DESCRIPTION	AMOUNT WASTED	AMOUNT GIVEN
	0.080 ML	0 UNIT	
	0527 BMS188 at 0527 CO-SIGNER: MACAJEN SITE: Abdomen GAVE: 8 UNIT		
	Barcode Medication: Novolog		
	NDC/DIN: 0169750111 (SOURCE: eMAR)		
	Admin Queries		
	Finger stick Blood Glucose: 326 MAR Injection site: 11		
	0547 Transaction Rule PHARGO8		
	NPDI Waste - Medicare Waste		
	Description: Debit Svc Dc/Tm 11/28/22 0527: INRSAP Amount Wasted: 0 UNIT, Amount Given: 0.080 ML		

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12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num HR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/27/22 to 0659 11/28/22 (continued)	STAGE	

**Levophed Drip 250 ML**  
**(Norepinephrine in D5w 8 mg/250 mL Bag)**  
19.594 MLS/HR IV TITRATE/PRN  
PRN Reason: BP Support (see Protocol)  
Comments: Conc = 32 mcg/mL  
Protect from light  
Label matches overwrap. Rph \_\_\_\_\_  
RX #: Q02287536

11/25/22 0700 Infusion In Progress 0700 CONTINUAL: Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 21.553 mls, Cumulative Intake: 188.102 mls, Container Volume: 61.898 mls, Site:  
Queries  
Cumulative Dose: 21.7387 Cumulative Intake (bag): 188.102 Cumulative Intake (RX):  
679.335 Container Volume: 61.898 Dose Rate: 0.11 Cumulative Elapsed Time (minutes):  
36h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553  
Waste Amount: 0  
0800 Infusion In Progress 0800 HERNIEM: Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 21.553 mls, Cumulative Intake: 209.655 mls, Container Volume: 40.345 mls, Site:  
Queries  
Cumulative Dose: 22.4284 Cumulative Intake (bag): 209.655 Cumulative Intake (RX):  
700.888 Container Volume: 40.345 Dose Rate: 0.11 Cumulative Elapsed Time (minutes):  
37h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553  
Waste Amount: 0  
0912 Infusion In Progress 0912 HERNIEM: Infused, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 25.864 mls, Cumulative Intake: 235.519 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 23.256 Cumulative Intake (bag): 235.519 Cumulative Intake (RX):  
726.752 Container Volume: 0 Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 38h 42m  
Increase/Decrease: Infused Infusion Intake: 25.864 Infusion Rate: 21.553 Waste Amount:  
14.481  
0912 HERNIEM at 0912 GAVE: 21.553 MLS/HR  
Barcode Medication: Levophed Drip  
NDC/DIN: 0338010820 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: 23.256 Cumulative Intake (RX): 726.752 Container Volume: 250 Dose Rate:  
0.11 Cumulative Elapsed Time (minutes): 38h 42m Increase/Decrease: Started/Running  
Infusion Rate: 21.553 Waste Amount: 0  
0912 Infusion In Progress 0912 HERNIEM: Started/Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 23.256 Cumulative Intake (RX): 726.752 Container Volume: 250  
Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 38h 42m Increase/Decrease:  
Started/Running Infusion Rate: 21.553 Waste Amount: 0  
0914 Transaction Rule PHABKGOB  
MEDL.WASTE - Medicare Waste  
Description: Dablt svc Dr/Tm 11/27/22 0912: LEV0BDSW Amount Wasted: 0 MG; Dug Waste%:  
0  
1000 Infusion In Progress 1000 HERNIEM: Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 17.242 mls, Cumulative Intake: 17.242 mls, Container Volume: 232.758 mls, Site:  
Queries  
Cumulative Dose: 23.8077 Cumulative Intake (bag): 17.242 Cumulative Intake (RX):  
743.994 Container Volume: 232.758 Dose Rate: 0.11 Cumulative Elapsed Time (minutes):

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/27/22 to 0659 11/28/22 (continued)	

39h 30m Increase/Decrease: Running Infusion Intake: 17.242 Infusion Rate: 21.553  
Waste Amount: 0  
1100 Infusion In Progress 1100 HERRIEM: Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 21.553 mls, Cumulative Intake: 38.795 mls, Container Volume: 211.205 mls, Site:  
Queries  
Cumulative Dose: 24.4974 Cumulative Intake (bag): 38.795 Cumulative Intake (Rx):  
765.547 Container Volume: 211.205 Dose Rate: 0.11 Cumulative Elapsed Time (minutes):  
40h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553  
Waste Amount: 0  
1200 Infusion In Progress 1200 HERRIEM: Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 21.553 mls, Cumulative Intake: 60.348 mls, Container Volume: 189.652 mls, Site:  
Queries  
Cumulative Dose: 25.1871 Cumulative Intake (bag): 60.348 Cumulative Intake (Rx): 787.1  
Container Volume: 189.652 Dose Rate: 0.11 Cumulative Elapsed Time (minutes): 41h 30m  
Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553 Waste Amount: 0  
1300 Infusion In Progress 1300 HERRIEM: Running, Dose Rate: 0.11 MCG/KG/MIN, Rate: 21.553 MLS/HR  
Intake: 21.553 mls, Cumulative Intake: 81.901 mls, Container Volume: 168.099 mls, Site:  
Queries  
Cumulative Dose: 25.8768 Cumulative Intake (bag): 81.901 Cumulative Intake (Rx):  
808.653 Container Volume: 168.099 Dose Rate: 0.11 Cumulative Elapsed Time (minutes):  
42h 30m Increase/Decrease: Running Infusion Intake: 21.553 Infusion Rate: 21.553  
Waste Amount: 0  
1345 Infusion In Progress 1345 HERRIEM: Decreased, Dose Rate: 0.1 MCG/KG/MIN, Rate: 19.594 MLS/HR  
Intake: 16.165 mls, Cumulative Intake: 98.066 mls, Container Volume: 151.934 mls, Site:  
Queries  
Cumulative Dose: 26.3941 Cumulative Intake (bag): 98.066 Cumulative Intake (Rx):  
824.818 Container Volume: 151.934 Dose Rate: 0.1 Cumulative Elapsed Time (minutes):  
43h 15m Increase/Decrease: Decreased Infusion Intake: 16.165 Infusion Rate: 19.594  
Waste Amount: 0  
1350 Infusion In Progress 1350 HERRIEM: Decreased, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 1.633 mls, Cumulative Intake: 99.699 mls, Container Volume: 150.301 mls, Site:  
Queries  
Cumulative Dose: 26.4464 Cumulative Intake (bag): 99.699 Cumulative Intake (Rx):  
826.451 Container Volume: 150.301 Dose Rate: 0.09 Cumulative Elapsed Time (minutes):  
43h 20m Increase/Decrease: Decreased Infusion Intake: 1.633 Infusion Rate: 17.634  
Waste Amount: 0  
1400 Infusion In Progress 1400 HERRIEM: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 2.939 mls, Cumulative Intake: 102.638 mls, Container Volume: 147.362 mls, Site:  
Queries  
Cumulative Dose: 26.5404 Cumulative Intake (bag): 102.638 Cumulative Intake (Rx):  
829.39 Container Volume: 147.362 Dose Rate: 0.09 Cumulative Elapsed Time (minutes):  
43h 30m Increase/Decrease: Running Infusion Intake: 2.939 Infusion Rate: 17.634  
Waste Amount: 0  
1500 Infusion In Progress 1500 HERRIEM: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/27/22 to 0659 11/28/22 (continued)	

Intake: 17.634 mls, Cumulative Intake: 120.272 mls, Container Volume: 129.728 mls, Site:  
Queries  
Cumulative Dose: 27.1047 Cumulative Intake (bag): 120.272 Cumulative Intake (Rx):  
847.024 Container Volume: 129.728 Dose Rate: 0.09 Cumulative Elapsed Time (minutes):  
4h 30m Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634  
Waste Amount: 0  
1600 Infusion In Progress: 1600 HERNIMEN: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 17.634 mls, Cumulative Intake: 137.906 mls, Container Volume: 112.094 mls, Site:  
Queries  
Cumulative Dose: 27.669 Cumulative Intake (bag): 137.906 Cumulative Intake (Rx):  
864.658 Container Volume: 112.094 Dose Rate: 0.09 Cumulative Elapsed Time (minutes):  
45h 30m Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634  
Waste Amount: 0  
1700 Infusion In Progress: 1700 HERNIMEN: Running, Dose Rate: 0.09 MCG/KG/MIN, Rate: 17.634 MLS/HR  
Intake: 17.634 mls, Cumulative Intake: 155.54 mls, Container Volume: 94.46 mls, Site:  
Queries  
Cumulative Dose: 28.2333 Cumulative Intake (bag): 155.54 Cumulative Intake (Rx):  
882.292 Container Volume: 94.46 Dose Rate: 0.09 Cumulative Elapsed Time (minutes): 4h 30m  
Increase/Decrease: Running Infusion Intake: 17.634 Infusion Rate: 17.634 Waste Amount: 0  
1718 Infusion In Progress: 1718 HERNIMEN: Decreased, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 5.29 mls, Cumulative Intake: 160.83 mls, Container Volume: 89.17 mls, Site:  
Queries  
Cumulative Dose: 28.4026 Cumulative Intake (bag): 160.83 Cumulative Intake (Rx):  
887.582 Container Volume: 89.17 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 4h 48m  
Increase/Decrease: Decreased Infusion Intake: 5.29 Infusion Rate: 15.675 Waste Amount: 0  
1800 Infusion In Progress: 1800 HERNIMEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 10.973 mls, Cumulative Intake: 171.803 mls, Container Volume: 78.197 mls, Site:  
Queries  
Cumulative Dose: 28.7537 Cumulative Intake (bag): 171.803 Cumulative Intake (Rx):  
898.555 Container Volume: 78.197 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
47h 30m Increase/Decrease: Running Infusion Intake: 10.973 Infusion Rate: 15.675  
Waste Amount: 0  
1900 Infusion In Progress: 1900 HERNIMEN: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 187.478 mls, Container Volume: 62.522 mls, Site:  
Queries  
Cumulative Dose: 29.2553 Cumulative Intake (bag): 187.478 Cumulative Intake (Rx):  
914.23 Container Volume: 62.522 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 4h 30m  
Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0  
2000 Infusion In Progress: 2000 BMSIS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 203.153 mls, Container Volume: 46.847 mls, Site:  
Queries  
Cumulative Dose: 29.7569 Cumulative Intake (bag): 203.153 Cumulative Intake (Rx):  
929.905 Container Volume: 46.847 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
49h 30m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/27/22 to 0659 11/28/22 (continued)	STAGE	

Waste Amount: 0  
2100 Infusion In Progress 2100 BMSSTS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 218.828 mls, Container Volume: 31.172 mls, Site:  
Queries  
Cumulative Dose: 30.2585 Cumulative Intake (bag): 218.828 Cumulative Intake (Rx):  
945.58 Container Volume: 31.172 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 50h 30m  
Increase/Decrease: Running Infusion Intake: 15.675 Waste Amount: 0  
2200 Infusion In Progress 2200 BMSSTS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 234.503 mls, Container Volume: 15.497 mls, Site:  
Queries  
Cumulative Dose: 30.7601 Cumulative Intake (bag): 234.503 Cumulative Intake (Rx):  
961.255 Container Volume: 15.497 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
51h 30m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675  
Waste Amount: 0  
2300 Infusion In Progress 2300 BMSSTS: Infused, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.497 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 31.256 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 976.752  
Container Volume: 0 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 52h 30m  
Increase/Decrease: Infused Infusion Intake: 15.497 Infusion Rate: 15.675 Waste Amount: 0  
2300 BMSSTS at 2300 GAVE: 15.675 MLS/HR  
Barcode Medication: Levophed Drip  
NDC/DIN: 00398010920 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 31.256 Cumulative Intake (Rx): 976.752 Container Volume: 250 Dose Rate:  
0.08 Cumulative Elapsed Time (minutes): 52h 30m Increase/Decrease: Started/Running  
Infusion Rate: 15.675 Waste Amount: 0  
2300 Infusion In Progress 2300 BMSSTS: Started/Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 31.256 Cumulative Intake (Rx): 976.752 Container Volume: 250  
Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 52h 30m Increase/Decrease:  
Started/Running Rate: 15.675 Waste Amount: 0  
0000 Infusion In Progress 0000 BMSSTS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 15.675 mls, Container Volume: 234.325 mls, Site:  
Queries  
Cumulative Dose: 31.7576 Cumulative Intake (bag): 15.675 Cumulative Intake (Rx):  
992.427 Container Volume: 234.325 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
53h 30m Increase/Decrease: Running Infusion Intake: 15.675 Waste Amount: 0  
0031 Transaction Rule PHABRCJOB  
MED1.WASRE - Medicare Waste  
Description: Debit svc Dr/Tm 11/27/22 2300: LFV8BDS# Amount Wasted: 0 MG. Drug Waste%:  
0



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/27/22 to 0659 11/28/22 (continued)		

0100	Infusion In Progress	0100 BMS/STS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake:	15.675 mls, Cumulative Intake: 31.35 mls, Container Volume: 218.65 mls, Site:
	Queries	
	Cumulative Dose:	32.2592 Cumulative Intake (bag): 31.35 Cumulative Intake (Rx):
1008.102	Container Volume:	218.65 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):
54h 30m	Increase/Decrease:	Running Infusion Intake: 15.675 Infusion Rate: 15.675
	Waste Amount:	0
0200	Infusion In Progress	0200 BMS/STS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake:	15.675 mls, Cumulative Intake: 47.025 mls, Container Volume: 202.975 mls, Site:
	Queries	
	Cumulative Dose:	32.7608 Cumulative Intake (bag): 47.025 Cumulative Intake (Rx):
1023.777	Container Volume:	202.975 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):
55h 30m	Increase/Decrease:	Running Infusion Intake: 15.675 Infusion Rate: 15.675
	Waste Amount:	0
0300	Infusion In Progress	0300 BMS/STS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake:	15.675 mls, Cumulative Intake: 62.7 mls, Container Volume: 187.3 mls, Site:
	Queries	
	Cumulative Dose:	33.2624 Cumulative Intake (bag): 62.7 Cumulative Intake (Rx): 1039.452
	Container Volume:	187.3 Dose Rate: 0.08 Cumulative Elapsed Time (minutes): 56h 30m
	Increase/Decrease:	Running Infusion Intake: 15.675 Infusion Rate: 15.675 Waste Amount: 0
0400	Infusion In Progress	0400 BMS/STS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake:	15.675 mls, Cumulative Intake: 78.375 mls, Container Volume: 171.625 mls, Site:
	Queries	
	Cumulative Dose:	33.764 Cumulative Intake (bag): 78.375 Cumulative Intake (Rx):
1055.127	Container Volume:	171.625 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):
57h 30m	Increase/Decrease:	Running Infusion Intake: 15.675 Infusion Rate: 15.675
	Waste Amount:	0
0500	Infusion In Progress	0500 BMS/STS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake:	15.675 mls, Cumulative Intake: 94.05 mls, Container Volume: 155.95 mls, Site:
	Queries	
	Cumulative Dose:	34.2656 Cumulative Intake (bag): 94.05 Cumulative Intake (Rx):
1070.802	Container Volume:	155.95 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):
58h 30m	Increase/Decrease:	Running Infusion Intake: 15.675 Infusion Rate: 15.675
	Waste Amount:	0
0600	Infusion In Progress	0600 BMS/STS: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR
	Intake:	15.675 mls, Cumulative Intake: 109.725 mls, Container Volume: 140.275 mls, Site:
	Queries	
	Cumulative Dose:	34.7672 Cumulative Intake (bag): 109.725 Cumulative Intake (Rx):
1086.477	Container Volume:	140.275 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):
59h 30m	Increase/Decrease:	Running Infusion Intake: 15.675 Infusion Rate: 15.675
	Waste Amount:	0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/28/22 to 0659 11/29/22		

**Synthroid (Letrothyroxine 112 mcg Tablet)**  
112 MCG G-TUBE DAILY before breakfast  
RX #: 002279432

11/21/22 0700 BENUSYS at 0630 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0632 Transaction Rule PHARMCOR  
MED: WASTE - Medicate Waste  
Description: Debit Svc Dt/Tm 11/29/22 0630: SYNTH12 Amount Wasted: 0 MCG; Drug Waste%: 0

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

11/21/22 1000 GORRUM at 1029 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 00172572860 (SOURCE: eMAR)  
Expiration Date: 05/18/23  
1035 Transaction Rule PHARMCOR  
MED: WASTE - Medicate Waste  
Description: Debit Svc Dt/Tm 11/28/22 1029: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 DORTIV at 2110 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 00172572860 (SOURCE: eMAR)  
Expiration Date: 05/18/23  
2125 Transaction Rule PHARMCOR  
MED: WASTE - Medicate Waste  
Description: Debit Svc Dt/Tm 11/28/22 2100: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/28/22 to 0659 11/29/22 (continued)	STOP

Sodium Chloride 0.9% 100 ml 100 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Koppra 500 MG  
(Levetiracetam 500 mg/5 ml Vial)  
420 Mls/Hr IVB Every twelve hours  
Comments: SEND ONE DOSE NOW  
RX #: 002284450

11/23/22 0900 GORRUMA at 1029 GAVE: 420 Mls/HR  
Barcode Medication: Koppra  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 4500 Cumulative Intake (Rx): 945 Container Volume: 105  
Cumulative Elapsed Time (minutes): 0  
Infusion Rate: 420 Waste Amount: 0  
1029 Infusion In Progress 1029 GORRUMA: Started/Running, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Container Volume: 105 ml, Site:  
Queries  
Cumulative Dose: 4500 Cumulative Intake (Rx): 945 Container Volume: 105  
Cumulative Elapsed Time (minutes): 2h 26m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0  
1035 Transaction Rule PHABRCROB  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/28/22 1029: REP500I Amount Wasted: 0 MG; Drug Waste%: 0  
1035 Transaction Rule PHABRCROB  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/28/22 1029: NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
1044 Infusion In Progress 1044 GORRUMA: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 5000 Cumulative Intake (Bag): 105 Cumulative Intake (Rx): 1050  
Container Volume: 0 Cumulative Elapsed Time (minutes): 2h 41m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0  
2100 DORTIXAV at 2110 GAVE: 420 Mls/HR  
Barcode Medication: Koppra  
NDC/DIN: 67457079005 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCs)  
Admin Queries  
Cumulative Dose: 5000 Cumulative Intake (Rx): 1050 Container Volume: 105  
Cumulative Elapsed Time (minutes): 2h 41m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0 IV Site: Right Upper Arm Basilic Vein  
2110 Infusion In Progress 2110 DORTIXAV: started/Running, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Container Volume: 105 ml, Site:  
Queries  
Cumulative Dose: 5000 Cumulative Intake (Rx): 1050 Container Volume: 105  
Cumulative Elapsed Time (minutes): 2h 41m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0 IV Site: Right Upper Arm Basilic Vein  
2125 Transaction Rule PHABRCROB

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 11/28/22 to 0659 11/29/22 (continued)		

MBDI.WASTE - Medicare Waste  
Description: Dabit svc Dc/Tm 11/28/22 2110: REP500I Amount Wasted: 0 MG; Drug Waste%: 0  
2125 Transaction Rule PHABRCJOB  
MBDI.WASTE - Medicare Waste  
Description: Dabit svc Dc/Tm 11/28/22 2110: NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
2200 Infusion In Progress 2200 DMTXAV: Infused, Dose Rate: / Rate: 420 Mls/HR  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Overies  
Cumulative Dose: 5500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 1155  
Container Volume: 0 Cumulative Elapsed Time (minutes): 3h 31m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 420 Waste Amount: 0

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 USER: PHABRG08

Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/28/22 to 0659 11/29/22 (continued)	

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
 (0.9% Sodium Chloride 100 ml MINI-Bag)  
 Zosyn 4.5 GM  
 (Piperacillin/Tazobactam 4.5 gm Vial)  
 25 Mls/Hr IVPB Q8H  
 RX #: 002285170

11/24/22	0900	GORRUMA at 1131 GAVE: 25 Mls/Hr
12/04/22		Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag
		NDC/DIN: 0038055318 (SOURCE: Default NDCs)
		Barcode Medication: Zosyn
		NDC/DIN: 0078131495 (SOURCE: Default NDCs)
		Admin Queries
		Cumulative Dose: 49.5 Cumulative Intake (Rx): 1100 Container Volume: 100
		Cumulative Elapsed Time (minutes): 44h 26m Increase/Decrease: started/Running
		Infusion Rate: 25 Waste Amount: 0
		1131 Infusion In Progress 1131 GORRUMA: Started/Running, Dose Rate: / Rate: 25 Mls/Hr
		Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
		Queries
		Cumulative Dose: 49.5 Cumulative Intake (Rx): 1100 Container Volume: 100
		Cumulative Elapsed Time (minutes): 44h 26m Increase/Decrease: started/Running
		Infusion Rate: 25 Waste Amount: 0
		1136 Transaction Rule PHABRC08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/28/22 1131: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0
		1136 Transaction Rule PHABRC08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/28/22 1131: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
		1531 Infusion In Progress 1531 GORRUMA: Infused, Dose Rate: / Rate: 0 Mls/Hr
		Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
		Queries
		Cumulative Dose: 54 Cumulative Intake (Rx): 100 Cumulative Intake (Rx): 1200
		Container Volume: 0 Cumulative Elapsed Time (minutes): 48h 28m Increase/Decrease: Infused
		Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0
		1700 GORRUMA at 1738 GAVE: 25 Mls/Hr
		Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag
		NDC/DIN: 0038055318 (SOURCE: Default NDCs)
		Barcode Medication: Zosyn
		NDC/DIN: 0078131495 (SOURCE: Default NDCs)
		Admin Queries
		Cumulative Dose: 54 Cumulative Intake (Rx): 1200 Container Volume: 100
		Cumulative Elapsed Time (minutes): 48h 28m Increase/Decrease: started/Running
		Infusion Rate: 25 Waste Amount: 0
		1738 Infusion In Progress 1738 GORRUMA: Started/Running, Dose Rate: / Rate: 25 Mls/Hr
		Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
		Queries
		Cumulative Dose: 54 Cumulative Intake (Rx): 1200 Container Volume: 100
		Cumulative Elapsed Time (minutes): 48h 28m Increase/Decrease: started/Running
		Infusion Rate: 25 Waste Amount: 0
		1739 Transaction Rule PHABRC08

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

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ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)		

1739	MEDI.WASTE - Medicare Waste				
	Description: Dablt Svc Dc/Tm 11/28/22 1738: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0				
	Transaction Rule PHABRCJOB				
	MEDI.WASTE - Medicare Waste				
1900	Description: Dablt Svc Dc/Tm 11/28/22 1738: 208451 Amount Wasted: 0 GM; Drug Waste%: 0				
	Infusion In Progress 1900 DDMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR				
	Intake: 34.167 mls, Cumulative Intake: 34.167 mls, Container Volume: 65.833 mls, site:				
	Queries				
	Cumulative Dose: 55.5375 Cumulative Intake (bag): 34.167 Cumulative Intake (RX):				
	1294.167 Container Volume: 65.833 Cumulative Elapsed Time (minutes): 49h 50m				
	Increase/Decrease: Running Infusion Intake: 34.167 Infusion Rate: 25 Waste Amount: 0				
2000	Infusion In Progress 2000 DDMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR				
	Intake: 25 mls, Cumulative Intake: 59.167 mls, Container Volume: 40.833 mls, site:				
	Queries				
	Cumulative Dose: 56.6625 Cumulative Intake (bag): 59.167 Cumulative Intake (RX):				
	1259.167 Container Volume: 40.833 Cumulative Elapsed Time (minutes): 50h 50m				
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0				
2100	Infusion In Progress 2100 DDMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR				
	Intake: 25 mls, Cumulative Intake: 84.167 mls, Container Volume: 15.833 mls, site:				
	Queries				
	Cumulative Dose: 57.7875 Cumulative Intake (bag): 84.167 Cumulative Intake (RX):				
	1284.167 Container Volume: 15.833 Cumulative Elapsed Time (minutes): 51h 50m				
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0				
2200	Infusion In Progress 2200 DDMIXAV: Infused; Dose Rate: / Rate: 25 MLS/HR				
	Intake: 15.833 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, site:				
	Queries				
	Cumulative Dose: 58.5 Cumulative Intake (bag): 100 Cumulative Intake (RX): 1300				
	Container Volume: 0 Cumulative Elapsed Time (minutes): 52h 50m Increase/Decrease: Infused				
	Infusion Intake: 15.833 Infusion Rate: 25 Waste Amount: 0				
	0100 DDMIXAV at 0100 GAVE: 25 MLS/HR				
	Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag				
	NDC/DIN: 003805518 (SOURCE: Default NDCs)				
	Barcode Medication: Zosyn				
	NDC/DIN: 00781311495 (SOURCE: Default NDCs)				
	Admin Queries				
	Cumulative Dose: 58.5 Cumulative Intake (RX): 1300 Container Volume: 100				
	Cumulative Elapsed Time (minutes): 52h 50m Increase/Decrease: Started/Running				
	Infusion Rate: 25 Waste Amount: 0 IV Site: Right Upper Arm Basilleic Vein				
	0100 Infusion In Progress 0100 DDMIXAV: Started/Running; Dose Rate: / Rate: 25 MLS/HR				
	Intake: / Cumulative Intake: / Container Volume: 100 mls, site:				
	Queries				
	Cumulative Dose: 58.5 Cumulative Intake (RX): 1300 Container Volume: 100				
	Cumulative Elapsed Time (minutes): 52h 50m Increase/Decrease: Started/Running				
	Infusion Rate: 25 Waste Amount: 0 IV Site: Right Upper Arm Basilleic Vein				

DATE: 12/03/22 @ 0013  
 USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:

0700 11/28/22 to 0659 11/29/22 (continued)

START/STOP	
	0200 Infusion In Progress 0200 DMTXAW: Running, Dose Rate: /, Rate: 25 mLs/HR
	Intake: 25 mLs, Cumulative Intake: 25 mLs, Container Volume: 75 mLs, Site:
	Overrides
	Cumulative Dose: 59.625 Cumulative Intake (bag): 25 Cumulative Intake (Rx): 1325
	Container Volume: 75 Cumulative Elapsed Time (minutes): 53h 50m Increase/Decrease: Running
	Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0
	0246 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/29/22 0100: NS100MB Amount Wasted: 0 NL; Drug Waste%: 0
	0246 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/29/22 0100: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
	0300 Infusion In Progress 0300 DMTXAW: Running, Dose Rate: /, Rate: 25 mLs/HR
	Intake: 25 mLs, Cumulative Intake: 50 mLs, Container Volume: 50 mLs, Site:
	Overrides
	Cumulative Dose: 60.75 Cumulative Intake (bag): 50 Cumulative Intake (Rx): 1350
	Container Volume: 50 Cumulative Elapsed Time (minutes): 54h 50m Increase/Decrease: Running
	Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0
	0400 Infusion In Progress 0400 DMTXAW: Running, Dose Rate: /, Rate: 25 mLs/HR
	Intake: 25 mLs, Cumulative Intake: 75 mLs, Container Volume: 25 mLs, Site:
	Overrides
	Cumulative Dose: 61.975 Cumulative Intake (bag): 75 Cumulative Intake (Rx): 1375
	Container Volume: 25 Cumulative Elapsed Time (minutes): 55h 50m Increase/Decrease: Running
	Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0
	0500 Infusion In Progress 0500 DMTXAW: Infused, Dose Rate: /, Rate: 25 mLs/HR
	Intake: 25 mLs, Cumulative Intake: 100 mLs, Container Volume: 0 mLs, Site:
	Overrides
	Cumulative Dose: 63 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 1400
	Container Volume: 0 Cumulative Elapsed Time (minutes): 56h 50m Increase/Decrease: Infused
	Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0

Ddayp (Desmopressin 40 mcg/10 mL Vial)

2 MCG IV-Push DAILY

RX #: 002285881

11/25/22	1000 GORRUPA at 1133 GAVE: 2 MCG
	Barcode Medication: Ddayp
	NDC/PIN: 62756052940 (SOURCE: Default NDOS)
	1136 Transaction Rule PHABRCJOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/28/22 1133: DDAI10 Amount Wasted: 38 MCG; Drug Waste%: 95

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/28/22 to 0659 11/29/22 (continued)	

Sodium Chloride 0.45 % 1,000 ML  
(0.45% Sodium Chloride 1,000 mL Bag)  
50 MLS/HR IV .020H  
RX #: 002286593

11/25/22 0700 Infusion In Progress 0700 GORRUMA: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 450 mls, Container Volume: 550 mls, Site:  
--- Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (bag): 450 Cumulative Intake (Rx):  
3450 Container Volume: 550 Cumulative Elapsed Time (minutes): 69h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0800 Infusion In Progress 0800 GORRUMA: Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: 50 mls, Cumulative Intake: 500 mls, Container Volume: 500 mls, Site:  
--- Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (bag): 500 Cumulative Intake (Rx):  
3500 Container Volume: 500 Cumulative Elapsed Time (minutes): 70h 9m Increase/Decrease:  
Running Infusion Intake: 50 Infusion Rate: 50 Waste Amount: 0  
0831 Discontinued Order GORRUMA  
0839 Acknowledged Order GORRUMA  
0840 Infusion In Progress 0840 GORRUMA: Paused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 33.333 mls, Cumulative Intake: 533.333 mls, Container Volume: 466.667 mls, Site:  
--- Queries  
--- Cumulative Dose: Not Applicable Cumulative Intake (bag): 533.333  
Cumulative Intake (Rx): 3533.333 Container Volume: 466.667  
Cumulative Elapsed Time (minutes): 70h 49m Increase/Decrease: Paused Infusion Intake:  
33.333 Infusion Rate: 0 Waste Amount: 0

Novolin N (Insulin NPH 100 units/mL 10 mL Vial)  
30 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE TP WITHHELD OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: 002287759

11/25/22 1332 Discontinue GRUA  
1332 Order Entry GRUA  
1333 Acknowledged Order GORRUMA



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/28/22 to 0659 11/29/22 (continued)	

Dextrose 5% 1,000 ML  
(Dextrose 5% 1,000 mL Bag)  
75 ML/HR IV .013820M  
RX #: 002291621

11/28/22 0832 Edit of Verification DAMQUAN  
0832 Edit of Verification DAMQUAN  
0839 Acknowledged Order GORRUMA  
0845 GORRUMA at 0906 SANE: 75 ML/HR  
Barcode Medication: Dextrose 5%  
NDC/DIN: 0338001704 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed Time (minutes):  
0m Increase/Decrease: Started Infusion Rate: 75 Waste Amount: 0  
0906 Infusion In Progress 0906 GORRUMA: Started, Dose Rate: / Rate: 75 ML/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started Infusion Rate: 75  
Waste Amount: 0  
0919 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/28/22 0906: DSW Amount Wasted: 0 ML; Drug Waste%: 0  
0930 Infusion In Progress 0930 GORRUMA: Paused, Dose Rate: / Rate: 0 ML/HR  
Intake: 30 mlr, Cumulative Intake: 30 mlr, Container Volume: 970 mlr, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 30 Cumulative Intake (Rx): 30  
Container Volume: 970 Cumulative Elapsed Time (minutes): 24m Increase/Decrease: Paused  
Infusion Intake: 30 Infusion Rate: 0 Waste Amount: 0  
1159 Discontinue GORRUMA  
1203 Acknowledged Order GORRUMA

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/28/22 to 0659 11/29/22 (continued)	STOP

NOVOLIN N (Insulin NPH 100 units/ml 10 mL VIAL)  
34 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PT WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: Q02292170

11/28/22	1332	Order Entry GEUA
	1333	Acknowledged Order GORRUMA
	1334	Edit or Verification ZPRA.IE
	1334	Edit or Verification ZPRA.IE
	1400	GORRUMA at 1511 CO-SIGNER: HONGSERA SITE: Left Anterior Forearm GAVE: 34 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 269 MAR Injection Site: 12
	1524	Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicate Waste
		Description: Dablt Svc Dc/Tm 11/28/22 1511: INSNPH Amount Wasted: 0 UNITS; Amount
		Given: 0.340 ML
	2200	DOMIXAV at 2155 CO-SIGNER: JOPEZNI SITE: Abdomen GAVE: 34 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 286 MAR Injection Site: 11
	2212	Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicate Waste
		Description: Dablt Svc Dc/Tm 11/28/22 2155: INSNPH Amount Wasted: 0 UNITS; Amount
		Given: 0.340 ML
	0600	DOMIXAV at 0630 CO-SIGNER: KINGEON SITE: Abdomen GAVE: 34 UNITS
		Barcode Medication: NOVOLIN N
		NDC/DIN: 0169183411 (SOURCE: eMAR)
		Admin Queries
		Finger Stick Blood Glucose: 238 MAR Injection Site: 11
	0632	Transaction Rule PHABRCJOB
		MEDI.WASTE - Medicate Waste
		Description: Dablt Svc Dc/Tm 11/29/22 0630: INSNPH Amount Wasted: 0 UNITS; Amount
		Given: 0.340 ML

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)	STOP	STOP

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002286977

11/25/22	1259 GORRUMA at 1259 CO-SIGNER: TINABES SITE: Left Anterior Forearm GAVE: 6 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 269 MAR Injection site: 12
	1306 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/28/22 1259: INSASP Amount Wasted: 0 UNITF, Amount Given:
	0.060 ML
	1739 GORRUMA at 1739 CO-SIGNER: HONGERA SITE: Left Anterior Forearm GAVE: 6 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 292 MAR Injection site: 12
	1754 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/28/22 1739: INSASP Amount Wasted: 0 UNITF, Amount Given:
	0.060 ML
	0054 DORTXAV at 0054 CO-SIGNER: KIMJEN SITE: Abdomen GAVE: 8 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 323 MAR Injection site: 11
	0101 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/29/22 0054: INSASP Amount Wasted: 0 UNITF, Amount Given:
	0.080 ML
	0440 DORTXAV at 0440 CO-SIGNER: LOPEZNI SITE: Abdomen GAVE: 8 UNIT
	Barcode Medication: Novolog
	NDC/DIN: 0169750111 (SOURCE: eMAR)
	Admin Queries
	Finger Stick Blood Glucose: 318 MAR Injection site: 11
	0446 Transaction Rule PHABRC08
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dc/Tm 11/29/22 0440: INSASP Amount Wasted: 0 UNITF, Amount Given:
	0.080 ML

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)	STAGE	

**Levophed Drip 250 ML**  
**(Norepinephrine in D5w 8 mg/250 mL Bag)**  
19.594 MLS/HR IV TITRATE/PRN  
PRN Reason: BP Support (see Protocol)  
Comments: Conc = 32 mcg/mL  
Protect From Light  
Label matches overwrap. PRN \_\_\_\_\_  
RX #: Q02287536

11/25/22 0700 Infusion In Progress 0700 GORRUM: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 125.4 mls, Container Volume: 124.6 mls, Site:  
Queries  
Cumulative Dose: 35.2688 Cumulative Intake (bag): 125.4 Cumulative Intake (Rx):  
1102.152 Container Volume: 124.6 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
60h 30m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675  
Waste Amount: 0  
0800 Infusion In Progress 0800 GORRUM: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 141.075 mls, Container Volume: 108.925 mls, Site:  
Queries  
Cumulative Dose: 35.7704 Cumulative Intake (bag): 141.075 Cumulative Intake (Rx):  
1117.827 Container Volume: 108.925 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
61h 30m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675  
Waste Amount: 0  
0900 Infusion In Progress 0900 GORRUM: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 47.025 mls, Cumulative Intake: 156.75 mls, Container Volume: 93.25 mls, Site:  
Queries  
Cumulative Dose: 36.272 Cumulative Intake (bag): 156.75 Cumulative Intake (Rx):  
1133.502 Container Volume: 93.25 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
62h 30m Increase/Decrease: Running Infusion Intake: 47.025 Infusion Rate: 15.675  
Waste Amount: 0  
1000 Infusion In Progress 1000 GORRUM: Running, Dose Rate: 0.08 MCG/KG/MIN, Rate: 15.675 MLS/HR  
Intake: 15.675 mls, Cumulative Intake: 172.425 mls, Container Volume: 77.575 mls, Site:  
Queries  
Cumulative Dose: 36.7736 Cumulative Intake (bag): 172.425 Cumulative Intake (Rx):  
1149.177 Container Volume: 77.575 Dose Rate: 0.08 Cumulative Elapsed Time (minutes):  
63h 30m Increase/Decrease: Running Infusion Intake: 15.675 Infusion Rate: 15.675  
Waste Amount: 0  
1015 Infusion In Progress 1015 GORRUM: Decreased, Dose Rate: 0.07 MCG/KG/MIN, Rate: 13.716 MLS/HR  
Intake: 3.919 mls, Cumulative Intake: 176.344 mls, Container Volume: 73.656 mls, Site:  
Queries  
Cumulative Dose: 36.899 Cumulative Intake (bag): 176.344 Cumulative Intake (Rx):  
1153.096 Container Volume: 73.656 Dose Rate: 0.07 Cumulative Elapsed Time (minutes):  
63h 45m Increase/Decrease: Decreased Infusion Intake: 3.919 Infusion Rate: 13.716  
Waste Amount: 0  
1045 Infusion In Progress 1045 GORRUM: Decreased, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.756 MLS/HR  
Intake: 6.858 mls, Cumulative Intake: 183.202 mls, Container Volume: 66.798 mls, Site:  
Queries  
Cumulative Dose: 37.1185 Cumulative Intake (bag): 183.202 Cumulative Intake (Rx):  
1159.954 Container Volume: 66.798 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
64h 15m Increase/Decrease: Decreased Infusion Intake: 6.858 Infusion Rate: 11.756  
Waste Amount: 0  
1100 Infusion In Progress 1100 GORRUM: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.756 MLS/HR

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 11/28/22 to 0659 11/29/22 (continued)	

Intake: 2,939 mls, Cumulative Intake: 186,141 mls, Container Volume: 63,859 mls, Site:  
Queries  
Cumulative Dose: 37,2125 Cumulative Intake (bag): 186,141 Cumulative Intake (Rx):  
1162.893 Container Volume: 63,859 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
64h 30m Increase/Decrease: Running Infusion Intake: 2,939 Infusion Rate: 11.756  
Waste Amount: 0  
1115 Infusion In Progress 1115 GORRUMA: Decreased, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.797 MLS/HR  
Intake: 2,939 mls, Cumulative Intake: 189,08 mls, Container Volume: 60,92 mls, Site:  
Queries  
Cumulative Dose: 37,3065 Cumulative Intake (bag): 189,08 Cumulative Intake (Rx):  
1165.832 Container Volume: 60,92 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):  
64h 45m Increase/Decrease: Decreased Infusion Intake: 2,939 Infusion Rate: 9.797  
Waste Amount: 0  
1200 Infusion In Progress 1200 GORRUMA: Running, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.797 MLS/HR  
Intake: 7,348 mls, Cumulative Intake: 196,428 mls, Container Volume: 53,572 mls, Site:  
Queries  
Cumulative Dose: 37,5416 Cumulative Intake (bag): 196,428 Cumulative Intake (Rx):  
1173.18 Container Volume: 53,572 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):  
65h 30m Increase/Decrease: Running Infusion Intake: 7,348 Infusion Rate: 9.797  
Waste Amount: 0  
1300 Infusion In Progress 1300 GORRUMA: Running, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.797 MLS/HR  
Intake: 9,797 mls, Cumulative Intake: 206,225 mls, Container Volume: 43,775 mls, Site:  
Queries  
Cumulative Dose: 37,8951 Cumulative Intake (bag): 206,225 Cumulative Intake (Rx):  
1182.977 Container Volume: 43,775 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):  
66h 30m Increase/Decrease: Running Infusion Intake: 9,797 Infusion Rate: 9.797  
Waste Amount: 0  
1400 Infusion In Progress 1400 GORRUMA: Running, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.797 MLS/HR  
Intake: 9,797 mls, Cumulative Intake: 216,022 mls, Container Volume: 33,978 mls, Site:  
Queries  
Cumulative Dose: 38,1686 Cumulative Intake (bag): 216,022 Cumulative Intake (Rx):  
1192.774 Container Volume: 33,978 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):  
67h 30m Increase/Decrease: Running Infusion Intake: 9,797 Infusion Rate: 9.797  
Waste Amount: 0  
1500 Infusion In Progress 1500 GORRUMA: Running, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.797 MLS/HR  
Intake: 9,797 mls, Cumulative Intake: 225,819 mls, Container Volume: 24,181 mls, Site:  
Queries  
Cumulative Dose: 38,4821 Cumulative Intake (bag): 225,819 Cumulative Intake (Rx):  
1202.571 Container Volume: 24,181 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):  
68h 30m Increase/Decrease: Running Infusion Intake: 9,797 Infusion Rate: 9.797  
Waste Amount: 0  
1600 Infusion In Progress 1600 GORRUMA: Decreased, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: 9,797 mls, Cumulative Intake: 235,616 mls, Container Volume: 14,384 mls, Site:  
Queries

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)		

Cumulative Dose: 39.7956 Cumulative Intake (bag): 235.616 Cumulative Intake (Rx):  
1212.368 Container Volume: 14.384 Dose Rate: 0.04 Cumulative Elapsed Time (minutes):  
69h 30m Increase/Decrease: Decreased Infusion Intake: 9.797 Infusion Rate: 7.838  
Waste Amount: 0  
1700 Infusion In Progress 1700 GORRUMA: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: 7.838 mls, Cumulative Intake: 243.454 mls, Container Volume: 6.546 mls, Site:  
Queries  
Cumulative Dose: 39.0464 Cumulative Intake (bag): 243.454 Cumulative Intake (Rx):  
1220.206 Container Volume: 6.546 Dose Rate: 0.04 Cumulative Elapsed Time (minutes):  
70h 30m Increase/Decrease: Running Infusion Intake: 7.838  
Waste Amount: 0  
1751 Infusion In Progress 1751 GORRUMA: Infused, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: 6.546 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 39.2559 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 1226.752  
Container Volume: 0 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 71h 21m  
Increase/Decrease: Infused Infusion Intake: 6.546 Infusion Rate: 7.838 Waste Amount: 0  
1751 GORRUMA at 1751 GAVR: 7.838 MLS/HR  
Barcode Medication: Levophed Drip  
NDC/DIN: 0338010820 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: 39.2559 Cumulative Intake (Rx): 1226.752 Container Volume: 250  
Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 71h 21m Increase/Decrease:  
Started/Running Infusion Rate: 7.838 Waste Amount: 0  
1751 Infusion In Progress 1751 GORRUMA: started/Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 39.2559 Cumulative Intake (Rx): 1226.752 Container Volume: 250  
Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 71h 21m Increase/Decrease:  
Started/Running Infusion Rate: 7.838 Waste Amount: 0  
1800 Infusion In Progress 1800 GORRUMA: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: 1.176 mls, Cumulative Intake: 1.176 mls, Container Volume: 248.824 mls, Site:  
Queries  
Cumulative Dose: 39.2935 Cumulative Intake (bag): 1.176 Cumulative Intake (Rx):  
1227.928 Container Volume: 248.824 Dose Rate: 0.04 Cumulative Elapsed Time (minutes):  
71h 30m Increase/Decrease: Running Infusion Intake: 1.176 Infusion Rate: 7.838  
Waste Amount: 0  
1824 Transaction Rule PHABRC08  
MEDT WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/28/22 1751: LEV8BDSW Amount Wasted: 0 MG; Drug Waste%:  
0  
1900 Infusion In Progress 1900 DGMIXAV: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: 7.838 mls, Cumulative Intake: 9.014 mls, Container Volume: 240.986 mls, Site:  
Queries

DATE: 12/03/22 @ 0013  
USER: PHARMCOT

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)		

Cumulative Dose: 39,5443 Cumulative Intake (bag) : 9.014 Cumulative Intake (RX) :  
1235.766 Container Volume: 240.986 Dose Rate: 0.04 Cumulative Elapsed Time (minutes):  
3d 0h 30m Increase/Decrease: Running Infusion Intake: 7.838 Infusion Rate: 7.838  
Waste Amount: 0  
2000 Infusion In Progress 2000 DMTXAV: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.838 MLS/HR  
Intake: 7.838 mls, Cumulative Intake: 16.852 mls, Container Volume: 233.148 mls, site:  
Queries  
Cumulative Dose: 39.7951 Cumulative Intake (bag) : 16.852 Cumulative Intake (RX) :  
1243.604 Container Volume: 233.148 Dose Rate: 0.04 Cumulative Elapsed Time (minutes):  
3d 1h 30m Increase/Decrease: Running Infusion Intake: 7.838 Infusion Rate: 7.838  
Waste Amount: 0  
2026 Infusion In Progress 2026 DMTXAV: Decreased, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.878 MLS/HR  
Intake: 3.396 mls, Cumulative Intake: 20.248 mls, Container Volume: 229.752 mls, site:  
Queries  
Cumulative Dose: 39.9038 Cumulative Intake (bag) : 20.248 Cumulative Intake (RX) : 1247  
Container Volume: 229.752 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 3d 1h 56m  
Increase/Decrease: Decreased Infusion Intake: 3.396 Infusion Rate: 5.878 Waste Amount: 0  
2100 Infusion In Progress 2100 DMTXAV: Decreased, Dose Rate: 0.02 MCG/KG/MIN, Rate: 3.919 MLS/HR  
Intake: 3.331 mls, Cumulative Intake: 23.579 mls, Container Volume: 226.421 mls, site:  
Queries  
Cumulative Dose: 40.0104 Cumulative Intake (bag) : 23.579 Cumulative Intake (RX) :  
1250.331 Container Volume: 226.421 Dose Rate: 0.02 Cumulative Elapsed Time (minutes):  
3d 2h 30m Increase/Decrease: Decreased Infusion Intake: 3.331 Infusion Rate: 3.919  
Waste Amount: 0  
2110 Infusion In Progress 2110 DMTXAV: Increased, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.878 MLS/HR  
Intake: 0.653 mls, Cumulative Intake: 24.232 mls, Container Volume: 225.768 mls, site:  
Queries  
Cumulative Dose: 40.0313 Cumulative Intake (bag) : 24.232 Cumulative Intake (RX) :  
1250.984 Container Volume: 225.768 Dose Rate: 0.03 Cumulative Elapsed Time (minutes):  
3d 2h 40m Increase/Decrease: Increased Infusion Intake: 0.653 Infusion Rate: 5.878  
Waste Amount: 0  
2200 Infusion In Progress 2200 DMTXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.878 MLS/HR  
Intake: 4.898 mls, Cumulative Intake: 29.13 mls, Container Volume: 220.87 mls, site:  
Queries  
Cumulative Dose: 40.188 Cumulative Intake (bag) : 29.13 Cumulative Intake (RX) : 1255.882  
Container Volume: 220.87 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 3d 3h 30m  
Increase/Decrease: Running Infusion Intake: 4.898 Infusion Rate: 5.878 Waste Amount: 0  
2213 Discontinue ZDHA, KY  
2226 Acknowledged Order DMTXAV  
2300 Infusion In Progress 2300 DMTXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.878 MLS/HR  
Intake: 5.878 mls, Cumulative Intake: 35.008 mls, Container Volume: 214.992 mls, site:  
Queries  
Cumulative Dose: 40.3761 Cumulative Intake (bag) : 35.008 Cumulative Intake (RX) :  
1261.76 Container Volume: 214.992 Dose Rate: 0.03 Cumulative Elapsed Time (minutes):

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:  
0700 11/28/22 to 0659 11/29/22 (continued)

START/STOP	
	3d 4h 30m Increase/Decrease: Running Infusion Intake: 5.878 Infusion Rate: 5.878
	Waste Amount: 0
	2325 Infusion In Progress 2325 DDMIXAV: Infused, Dose Rate: 0 MCG/KG/MIN, Rate: 0 MLS/HR
	Intake: 1.992 mls, Cumulative Intake: 37 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: 40.4398 Cumulative Intake (bag): 37 Cumulative Intake (RX): 1253.752
	Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 3d 4h 55m
	Increase/Decrease: Infused Infusion Intake: 1.992 Infusion Rate: 0 Waste Amount: 213



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USER: PHABKJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)	STOP	STOP

Sodium Chloride 0.9% 250 ml 242 ML  
(0.9% Sodium Chloride 250 ml Bag)  
Levophed 8 MG  
(Norepinephrine 4 mg/4 ml vial)  
19.688 MLS/HR IV TITRATE/PRN  
PRN Reason: BP Support (See Protocol)  
Comments: \*\*IN NS\*\*  
Conc. = 32mcg/ml  
Protect From Light

RX #: Q02293108

11/28/22 2215 Edit or Verification ZPHA.KV  
2215 Edit or Verification ZPHA.KV  
2226 Acknowledged Order DOMIXAV  
2325 DOMIXAV at 2325 GAVE: 5.906 MLS/HR  
Barcode Medication: Levophed  
NDC/DIN: 36000016210 (SOURCE: Default NDCs)  
Barcode Medication: sodium chloride 0.9% 250 ml  
NDC/DIN: 0038004902 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 250 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 0m  
Increase/Decrease: Started Infusion Rate: 5.906 Waste Amount: 0 IV site:  
Right Upper Arm BasiliC Vein  
2325 Infusion In Progress 0000 DOMIXAV: Started, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mls, site:  
Queries  
Container Volume: 250 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 0m  
Increase/Decrease: Started Infusion Rate: 5.906 Waste Amount: 0 IV site:  
Right Upper Arm BasiliC Vein  
2341 Transaction Rule PHABKJOB  
MED1.WASFE - Medicate Waste  
2341 Transaction Rule PHABKJOB  
MED1.WASFE - Medicate Waste  
Description: Dabit svc Dr/Tm 11/28/22 2325: LEV4I Amount Wasted: 0 MG; Drug Waste%: 0  
2341 Transaction Rule PHABKJOB  
MED1.WASFE - Medicate Waste  
Description: Dabit svc Dr/Tm 11/28/22 2325: NS250 Amount Wasted: 8 ML; Drug Waste%: 3.2  
0000 Infusion In Progress 0000 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 3.445 mls, Cumulative Intake: 3.445 mls, Container Volume: 246.555 mls, site:  
Queries  
Cumulative Dose: 0.1102 Cumulative Intake (bag): 3.445 Cumulative Intake (RX): 3.445  
Container Volume: 246.555 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 35m  
Increase/Decrease: Running Infusion Intake: 3.445 Infusion Rate: 5.906 Waste Amount: 0  
0100 Infusion In Progress 0100 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 5.906 mls, Cumulative Intake: 9.351 mls, Container Volume: 240.649 mls, site:  
Queries  
Cumulative Dose: 0.2992 Cumulative Intake (bag): 9.351 Cumulative Intake (RX): 9.351  
Container Volume: 240.649 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 1h 35m  
Increase/Decrease: Running Infusion Intake: 5.906 Infusion Rate: 5.906 Waste Amount: 0  
0200 Infusion In Progress 0200 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 5.906 mls, Cumulative Intake: 15.257 mls, Container Volume: 234.743 mls, site:  
Queries  
Cumulative Dose: 0.4882 Cumulative Intake (bag): 15.257 Cumulative Intake (RX): 15.257  
Container Volume: 234.743 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 2h 35m  
Increase/Decrease: Running Infusion Intake: 5.906 Infusion Rate: 5.906 Waste Amount: 0  
0300 Infusion In Progress 0300 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)		

Intake: 5.906 mls, Cumulative Intake: 21.163 mls, Container Volume: 228.837 mls, site:  
|  
| Queries  
| Cumulative Dose: 0.6772 Cumulative Intake (bag): 21.163 Cumulative Intake (R): 21.163  
| Container Volume: 228.837 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 3h 35m  
| Increase/Decrease: Running Infusion Intake: 5.906 Infusion Rate: 5.906 Waste Amount: 0  
| 0400 Infusion In Progress 0400 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
| Intake: 5.906 mls, Cumulative Intake: 27.069 mls, Container Volume: 222.931 mls, site:  
|  
| Queries  
| Cumulative Dose: 0.8662 Cumulative Intake (bag): 27.069 Cumulative Intake (R): 27.069  
| Container Volume: 222.931 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 4h 35m  
| Increase/Decrease: Running Infusion Intake: 5.906 Infusion Rate: 5.906 Waste Amount: 0  
| 0420 Infusion In Progress 0420 DOMIXAV: Increased, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
| Intake: 1.969 mls, Cumulative Intake: 29.038 mls, Container Volume: 220.962 mls, site:  
|  
| Queries  
| Cumulative Dose: 0.9292 Cumulative Intake (bag): 29.038 Cumulative Intake (R): 29.038  
| Container Volume: 220.962 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 4h 55m  
| Increase/Decrease: Increased Infusion Intake: 1.969 Infusion Rate: 7.875 Waste Amount: 0  
| 0425 Infusion In Progress 0425 DOMIXAV: Increased, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.844 MLS/HR  
| Intake: 0.656 mls, Cumulative Intake: 29.694 mls, Container Volume: 220.306 mls, site:  
|  
| Queries  
| Cumulative Dose: 0.9502 Cumulative Intake (bag): 29.694 Cumulative Intake (R): 29.694  
| Container Volume: 220.306 Dose Rate: 0.05 Cumulative Elapsed Time (minutes): 5h 0m  
| Increase/Decrease: Increased Infusion Intake: 0.656 Infusion Rate: 9.844 Waste Amount: 0  
| 0430 Infusion In Progress 0430 DOMIXAV: Increased, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
| Intake: 0.82 mls, Cumulative Intake: 30.514 mls, Container Volume: 219.486 mls, site:  
|  
| Queries  
| Cumulative Dose: 0.9764 Cumulative Intake (bag): 30.514 Cumulative Intake (R): 30.514  
| Container Volume: 219.486 Dose Rate: 0.06 Cumulative Elapsed Time (minutes): 5h 5m  
| Increase/Decrease: Increased Infusion Intake: 0.82 Infusion Rate: 11.813 Waste Amount: 0  
| 0435 Infusion In Progress 0435 DOMIXAV: Increased, Dose Rate: 0.07 MCG/KG/MIN, Rate: 13.781 MLS/HR  
| Intake: 0.984 mls, Cumulative Intake: 31.498 mls, Container Volume: 218.502 mls, site:  
|  
| Queries  
| Cumulative Dose: 1.0079 Cumulative Intake (bag): 31.498 Cumulative Intake (R): 31.498  
| Container Volume: 218.502 Dose Rate: 0.07 Cumulative Elapsed Time (minutes): 5h 10m  
| Increase/Decrease: Increased Infusion Intake: 0.984 Infusion Rate: 13.781 Waste Amount: 0  
| 0440 Infusion In Progress 0440 DOMIXAV: Decreased, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
| Intake: 1.148 mls, Cumulative Intake: 32.646 mls, Container Volume: 217.354 mls, site:  
|  
| Queries  
| Cumulative Dose: 1.0446 Cumulative Intake (bag): 32.646 Cumulative Intake (R): 32.646  
| Container Volume: 217.354 Dose Rate: 0.06 Cumulative Elapsed Time (minutes): 5h 15m  
| Increase/Decrease: Decreased Infusion Intake: 1.148 Infusion Rate: 11.813 Waste Amount: 0  
| Edt Infusion 0440 DOMIXAV Action - From: Increased To: Decreased  
| Intake - From: 1.608 mls To: 1.148 mls  
| Cumulative Intake - From: 33.106 mls To: 32.646 mls

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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 11/29/22 (continued)		

Dose Rate - From: 0.08 MCG/KG/MIN To: 0.06 MCG/KG/MIN  
Rate - From: 15.75 ML/HR To: 11.813 ML/HR  
Container Volume - From: 216.894 mlr To: 217.354 mlr  
Old Order:  
Cumulative Dose: 1.0594  
Cumulative Intake (bag): 33.106  
Cumulative Intake (Rx): 33.106  
Container Volume: 216.894  
Dose Rate: 0.08  
Cumulative Elapsed Time (minutes): 5h 17m  
Increase/Decrease: Increased  
Infusion Intake: 1.608  
Infusion Rate: 15.75  
New Order:  
Cumulative Dose: 1.0446  
Cumulative Intake (bag): 32.646  
Cumulative Intake (Rx): 32.646  
Container Volume: 217.354  
Dose Rate: 0.06  
Cumulative Elapsed Time (minutes): 5h 15m  
Increase/Decrease: Decreased  
Infusion Intake: 1.148  
Infusion Rate: 11.813  
0445 Infusion In Progress 0445 DMIXAV: Decreased, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.844 ML/HR  
Intake: 0.984 mlr, Cumulative Intake: 33.63 mlr, Container Volume: 216.37 mlr, Site:  
Order:  
Cumulative Dose: 1.0761 Cumulative Intake (bag): 33.63 Cumulative Intake (Rx): 33.63  
Container Volume: 216.37 Dose Rate: 0.05 Cumulative Elapsed Time (minutes): 5h 20m  
Increase/Decrease: Decreased Infusion Intake: 0.984 Infusion Rate: 9.844 Waste Amount: 0  
0450 Infusion In Progress 0450 DMIXAV: Decreased, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 ML/HR  
Intake: 0.82 mlr, Cumulative Intake: 34.45 mlr, Container Volume: 215.55 mlr, Site:  
Order:  
Cumulative Dose: 1.1023 Cumulative Intake (bag): 34.45 Cumulative Intake (Rx): 34.45  
Container Volume: 215.55 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 5h 25m  
Increase/Decrease: Decreased Infusion Intake: 0.82 Infusion Rate: 7.875 Waste Amount: 0  
0455 Infusion In Progress 0455 DMIXAV: Decreased, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 ML/HR  
Intake: 0.656 mlr, Cumulative Intake: 35.106 mlr, Container Volume: 214.894 mlr, Site:  
Order:  
Cumulative Dose: 1.1233 Cumulative Intake (bag): 35.106 Cumulative Intake (Rx): 35.106  
Container Volume: 214.894 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 5h 30m  
Increase/Decrease: Decreased Infusion Intake: 0.656 Infusion Rate: 5.906 Waste Amount: 0  
0500 Infusion In Progress 0500 DMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 ML/HR  
Intake: 0.492 mlr, Cumulative Intake: 35.598 mlr, Container Volume: 214.402 mlr, Site:  
Order:

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 11/28/22 to 0659 11/29/22 (continued)	START/STOP	

Cumulative Dose: 1.139 Cumulative Intake (bag): 35.598 Cumulative Intake (RX): 35.598  
Container Volume: 214.402 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 5h 35m  
Increase/Decrease: Running Infusion Intake: 0.492 Infusion Rate: 5.906 Waste Amount: 0  
0600 Infusion In Progress 0600 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 5.906 mls, Cumulative Intake: 41.504 mls, Container Volume: 208.496 mls, Site:  
Queles  
Cumulative Dose: 1.328 Cumulative Intake (bag): 41.504 Cumulative Intake (RX): 41.504  
Container Volume: 208.496 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 6h 35m  
Increase/Decrease: Running Infusion Intake: 5.906 Infusion Rate: 5.906 Waste Amount: 0

ADMINISTRATION PERIOD:	START/STOP	
0700 11/29/22 to 0659 11/30/22	START/STOP	

**Synthroid (Letrothyroxine 112 mcg Tablet)**  
112 MCG G-TUBE DAILY before breakfast  
RX #: Q02279429  
11/21/22 0700 DOMIXAV at 0630 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)  
0644 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/30/22 0640: SYNTH112 Amount Wasted: 0 MCG; Drug Waste%: 0

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: Q02279432  
11/21/22 1000 GORRHA at 1009 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 00172572860 (SOURCE: eMAR)  
Expiration Date: 05/18/23  
1017 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/29/22 1009: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
2100 DOMIXAV at 2108 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 00172572860 (SOURCE: eMAR)  
Expiration Date: 05/18/23  
2120 Transaction Rule PHABRC0B  
MED1.WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/29/22 2108: PEP20 Amount Wasted: 0 MG; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRG08

Citrus Valley \*Live\* - PHA  
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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/29/22 to 0659 11/30/22 (continued)		

Sodium Chloride 0.9% 100 ml 100 ML  
 (0.9% Sodium Chloride 100 ml Bag)  
 Koppa 500 MG  
 (Levetiracetam 500 mg/5 ml Vial)  
 420 Mls/Hr IVB Every twelve hours  
 Comments: SEND ONE DOSE NOW  
 RX #: 002284450

11/23/22	0900	GORRUM	at 0935	GAWE	: 420	Mls/HR		
								Barcode Medication: Koppa
								NDC/DIN: 67457079005 (SOURCE: Default NDCs)
								Barcode Medication: sodium chloride 0.9% 100 ml
								NDC/DIN: 00338004918 (SOURCE: Default NDCs)
								Admin Queries
								Cumulative Dose: 5500 Cumulative Intake (Rx): 1155 Container Volume: 105
								Cumulative Elapsed Time (minutes): 3h 31m Increase/Decrease: Started/Running
								Infusion Rate: 420 Waste Amount: 0
								0935 Infusion In Progress 0935 GORRUM: Started/Running, Dose Rate: / Rate: 420 Mls/HR
								Intake: / Cumulative Intake: / Container Volume: 105 ml, Site:
								Queries
								Cumulative Dose: 5500 Cumulative Intake (Rx): 1155 Container Volume: 105
								Cumulative Elapsed Time (minutes): 3h 31m Increase/Decrease: Started/Running
								Infusion Rate: 420 Waste Amount: 0
								0948 Transaction Rule PHABRC08
								MDI.WASTE - Medicare Waste
								Description: Debit svc Dc/Tm 11/29/22 0935: REP500I Amount Wasted: 0 MG; Drug Waste%: 0
								0948 Transaction Rule PHABRC08
								MDI.WASTE - Medicare Waste
								Description: Debit svc Dc/Tm 11/29/22 0935: NS100 Amount Wasted: 0 ML; Drug Waste%: 0
								0950 Infusion In Progress 0950 GORRUM: Infused, Dose Rate: / Rate: 0 Mls/HR
								Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:
								Queries
								Cumulative Dose: 6000 Cumulative Intake (Rx): 1260 Container Volume: 105
								Container Volume: 0 Cumulative Elapsed Time (minutes): 3h 46m Increase/Decrease: Infused
								Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0
								2100 DORTXAV at 2108 GAWE: 420 Mls/HR
								Barcode Medication: Koppa
								NDC/DIN: 67457079005 (SOURCE: Default NDCs)
								Barcode Medication: sodium chloride 0.9% 100 ml
								NDC/DIN: 00338004918 (SOURCE: Default NDCs)
								Admin Queries
								Cumulative Dose: 6000 Cumulative Intake (Rx): 1260 Container Volume: 105
								Cumulative Elapsed Time (minutes): 3h 46m Increase/Decrease: Started/Running
								Infusion Rate: 420 Waste Amount: 0
								2108 Infusion In Progress 2108 DORTXAV: Started/Running, Dose Rate: / Rate: 420 Mls/HR
								Intake: / Cumulative Intake: / Container Volume: 105 ml, Site:
								Queries
								Cumulative Dose: 6000 Cumulative Intake (Rx): 1260 Container Volume: 105
								Cumulative Elapsed Time (minutes): 3h 46m Increase/Decrease: Started/Running
								Infusion Rate: 420 Waste Amount: 0
								2120 Transaction Rule PHABRC08

DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:

0700 11/29/22 to 0659 11/30/22 (continued)

STAFF/	
STGE	
	MBDI.WASTE - Medicare Waste
	Description: Debt svc Dc/Tm 11/29/22 2108: REP500I Amount Wasted: 0 MG; Drug Waste%: 0
	2120 Transaction Rule PHABRCJOB
	MBDI.WASTE - Medicare Waste
	Description: Debt svc Dc/Tm 11/29/22 2108: NS100 Amount Wasted: 0 ML; Drug Waste%: 0
	2150 Infusion In Progress 2150 DMIXAV: Infused; Dose Rate: / Rate: 420 Mls/HR
	Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:
	Overies
	Cumulative Dose: 6500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 1365
	Container Volume: 0 Cumulative Elapsed Time (minutes): 4h 26m Increase/Decrease: Infused
	Infusion Intake: 105 Infusion Rate: 420 Waste Amount: 0

DATE: 12/03/22 @ 0013  
 USER: PHABRG0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/29/22 to 0659 11/30/22 (continued)	

0.9% Sodium Chloride 100 mL MINI-Bag 100 ML  
 (0.9% Sodium Chloride 100 mL MINI-Bag)  
 Zosyn 4.5 GM  
 (Piperacillin/Tazobactam 4.5 gm Vial)  
 25 Mls/Hr IVPB Q8H  
 RX #: 002285170

11/24/22	0900	GORRUMA at 1004 GAVE: 25 Mls/Hr	
12/04/22		Barcode Medication: 0.9% Sodium Chloride 100 mL MINI-Bag	
		NDC/DIN: 0038055318 (SOURCE: Default NDCs)	
		Barcode Medication: Zosyn	
		NDC/DIN: 0078131495 (SOURCE: Default NDCs)	
		Admin Queries	
		Cumulative Dose: 63 Cumulative Intake (RX): 1400 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 56h 50m Increase/Decrease: started/Running	
		Infusion Rate: 25 Waste Amount: 0	
		1004 Infusion In Progress 1004 GORRUMA: Started/Running, Dose Rate: / Rate: 25 Mls/Hr	
		Intake: / Cumulative Intake: / Container Volume: 100 mL, Site:	
		Queries	
		Cumulative Dose: 63 Cumulative Intake (RX): 1400 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 56h 50m Increase/Decrease: started/Running	
		Infusion Rate: 25 Waste Amount: 0	
		1017 Transaction Rule PHABRCROB	
		MDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/29/22 1004: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0	
		1017 Transaction Rule PHABRCROB	
		MDI.WASTE - Medicare Waste	
		Description: Debit Svc Dc/Tm 11/29/22 1004: 20845I Amount Wasted: 0 GM; Drug Waste%: 0	
		1404 Infusion In Progress 1404 GORRUMA: Infused, Dose Rate: / Rate: 0 Mls/Hr	
		Intake: 100 mL, Cumulative Intake: 100 mL, Container Volume: 0 mL, Site:	
		Queries	
		Cumulative Dose: 67.5 Cumulative Intake (Bag): 100 Cumulative Intake (RX): 1500	
		Container Volume: 0 Cumulative Elapsed Time (minutes): 60h 50m Increase/Decrease: Infused	
		Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0	
		1700 GORRUMA at 1741 GAVE: 25 Mls/Hr	
		Barcode Medication: 0.9% Sodium Chloride 100 mL MINI-Bag	
		NDC/DIN: 0038055318 (SOURCE: Default NDCs)	
		Barcode Medication: Zosyn	
		NDC/DIN: 0078131495 (SOURCE: Default NDCs)	
		Admin Queries	
		Cumulative Dose: 67.5 Cumulative Intake (RX): 1500 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 60h 50m Increase/Decrease: started/Running	
		Infusion Rate: 25 Waste Amount: 0	
		1741 Infusion In Progress 1741 GORRUMA: started/Running, Dose Rate: / Rate: 25 Mls/Hr	
		Intake: / Cumulative Intake: / Container Volume: 100 mL, Site:	
		Queries	
		Cumulative Dose: 67.5 Cumulative Intake (RX): 1500 Container Volume: 100	
		Cumulative Elapsed Time (minutes): 60h 50m Increase/Decrease: started/Running	
		Infusion Rate: 25 Waste Amount: 0	
		1749 Transaction Rule PHABRCROB	

DATE: 12/03/22 @ 0013  
 USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/29/22 to 0659 11/30/22 (continued)		

1749	MDI.WASTE - Medicare Waste Description: Dabit Svc Dc/Tm 11/29/22 1741: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0 Transaction Rule PHABRCIOB		
	MDI.WASTB - Medicare Waste		
1900	Description: Dabit Svc Dc/Tm 11/29/22 1741: 208451 Amount Wasted: 0 GM; Drug Waste%: 0 Infusion In Progress 1900 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR		
	Intake: 32.917 mls, Cumulative Intake: 32.917 mls, Container Volume: 67.083 mls, site:		
	Queries		
	Cumulative Dose: 68.9813 Cumulative Intake (bag): 32.917 Cumulative Intake (Rx):		
	1532.917 Container Volume: 67.083 Cumulative Elapsed Time (minutes): 62h 9m		
	Increase/Decrease: Running Infusion Intake: 32.917 Infusion Rate: 25 Waste Amount: 0		
2000	Infusion In Progress 2000 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR		
	Intake: 25 mls, Cumulative Intake: 57.917 mls, Container Volume: 42.083 mls, site:		
	Queries		
	Cumulative Dose: 70.1063 Cumulative Intake (bag): 57.917 Cumulative Intake (Rx):		
	1557.917 Container Volume: 42.083 Cumulative Elapsed Time (minutes): 63h 9m		
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0		
2100	Infusion In Progress 2100 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR		
	Intake: 25 mls, Cumulative Intake: 82.917 mls, Container Volume: 17.083 mls, site:		
	Queries		
	Cumulative Dose: 71.2313 Cumulative Intake (bag): 82.917 Cumulative Intake (Rx):		
	1582.917 Container Volume: 17.083 Cumulative Elapsed Time (minutes): 64h 9m		
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0		
2150	Infusion In Progress 2150 DMIXAV: Infused; Dose Rate: / Rate: 25 MLS/HR		
	Intake: 17.083 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, site:		
	Queries		
	Cumulative Dose: 72 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 1600		
	Container Volume: 0 Cumulative Elapsed Time (minutes): 64h 59m Increase/Decrease: Infused		
	Infusion Intake: 17.083 Infusion Rate: 25 Waste Amount: 0		
	0100 DMIXAV at 0122 GAVE: 25 MLS/HR		
	Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag		
	NDC/DIN: 003805518 (SOURCE: Default NDCs)		
	Barcode Medication: Zosyn		
	NDC/DIN: 00781311495 (SOURCE: Default NDCs)		
	Admin Queries		
	Cumulative Dose: 72 Cumulative Intake (Rx): 1600 Container Volume: 100		
	Cumulative Elapsed Time (minutes): 64h 59m Increase/Decrease: Started/Running		
	Infusion Rate: 25 Waste Amount: 0 IV Site: Right Upper Arm Basilleic Vein		
	0122 Infusion In Progress 0122 DMIXAV: Started/Running; Dose Rate: / Rate: 25 MLS/HR		
	Intake: / Cumulative Intake: / Container Volume: 100 mls, site:		
	Queries		
	Cumulative Dose: 72 Cumulative Intake (Rx): 1600 Container Volume: 100		
	Cumulative Elapsed Time (minutes): 64h 59m Increase/Decrease: started/running		
	Infusion Rate: 25 Waste Amount: 0 IV Site: Right Upper Arm Basilleic Vein		



DATE: 12/03/22 @ 0013  
 USER: PHARMCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP
0700 11/29/22 to 0659 11/30/22 (continued)		

0130	Transaction Rule PHARMCJOB								
	MDI.WASTE - Medicare Waste								
	Description: Debit Svc Dc/Tm 11/30/22 0122: NS100MB Amount Wasted: 0 MT; Drug Waste%: 0								
0130	Transaction Rule PHARMCJOB								
	MDI.WASTE - Medicare Waste								
	Description: Debit Svc Dc/Tm 11/30/22 0122: 20845T Amount Wasted: 0 GM; Drug Waste%: 0								
0200	Infusion In Progress 0200 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR								
	Intake: 15.833 mls, Cumulative Intake: 15.833 mls, Container Volume: 84.167 mls, Site:								
	Queries								
	Cumulative Dose: 72.7125 Cumulative Intake (bag): 15.833 Cumulative Intake (Rx):								
	1615.833 Container Volume: 84.167 Cumulative Elapsed Time (minutes): 65h 37m								
	Increase/Decrease: Running Infusion Intake: 15.833 Infusion Rate: 25 Waste Amount: 0								
0300	Infusion In Progress 0300 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR								
	Intake: 25 mls, Cumulative Intake: 40.833 mls, Container Volume: 59.167 mls, Site:								
	Queries								
	Cumulative Dose: 73.8375 Cumulative Intake (bag): 40.833 Cumulative Intake (Rx):								
	1640.833 Container Volume: 59.167 Cumulative Elapsed Time (minutes): 66h 37m								
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0								
0400	Infusion In Progress 0400 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR								
	Intake: 25 mls, Cumulative Intake: 65.833 mls, Container Volume: 34.167 mls, Site:								
	Queries								
	Cumulative Dose: 74.9625 Cumulative Intake (bag): 65.833 Cumulative Intake (Rx):								
	1665.833 Container Volume: 34.167 Cumulative Elapsed Time (minutes): 67h 37m								
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0								
0500	Infusion In Progress 0500 DMIXAV: Running; Dose Rate: / Rate: 25 MLS/HR								
	Intake: 25 mls, Cumulative Intake: 90.833 mls, Container Volume: 9.167 mls, Site:								
	Queries								
	Cumulative Dose: 76.0875 Cumulative Intake (bag): 90.833 Cumulative Intake (Rx):								
	1690.833 Container Volume: 9.167 Cumulative Elapsed Time (minutes): 68h 37m								
	Increase/Decrease: Running Infusion Intake: 25 Infusion Rate: 25 Waste Amount: 0								
0600	Infusion In Progress 0600 DMIXAV: Infused; Dose Rate: / Rate: 25 MLS/HR								
	Intake: 9.167 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:								
	Queries								
	Cumulative Dose: 76.5 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 1700								
	Container Volume: 0 Cumulative Elapsed Time (minutes): 69h 37m Increase/Decrease: Infused								
	Infusion Intake: 9.167 Infusion Rate: 25 Waste Amount: 0								

Dabap (Desmopressin 40 mcg/10 ml Vial)  
 2 MCG IV-Push DAILY  
 RX #: 002285881

11/25/22 0757 Discontinue GORRMA  
 0757 Order Entry GORRMA  
 0825 Acknowledged Order GORRMA

DATE: 12/03/22 @ 0013  
USER: PHABRCJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/29/22 to 0659 11/30/22 (continued)	

NOVOLIN N (Insulin NPH 100 units/ml) 10 ml VIAL)  
34 UNITS SUB-Q Every eight hours  
Comments: HOLD IF PHE OR WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
RX #: Q02292170

11/28/22 1347 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/29/22 1334: INSNPH Amount Wasted: 0 UNITS; Amount  
Given: 0.340 ML  
1400 GORRUMA at 1334 CO-SIGNER: HONGSERA SITE: Abdomen GAVE: 34 UNITS  
Barcode Medication: NOVOLIN N  
NDC/DIN: 0169183411 (SOURCE: eMAR)  
Admin Queries  
Finger Stick Blood Glucose: 126 MAR Injection Site: 11  
1816 Acknowledged Order GORRUMA  
1816 Discontinue GORRUMA  
1816 Order Entry GORRUMA

Ddayp (Desmopressin 40 mcg/10 ml Vial)  
2 MCG IV-Push TWICE A DAY  
RX #: Q02293577

11/29/22 0757 Order Entry GORRUMA  
0807 Edit or Verification ZPHA.CL  
0807 Edit or Verification ZPHA.CL  
0825 Acknowledged Order GORRUMA  
1000 GORRUMA at 1004 GAVE: 2 MCG  
Barcode Medication: Ddayp  
NDC/DIN: 62756052940 (SOURCE: Default NDCs)  
Comments  
UNABLE TO SCAN BARCODE  
1017 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/29/22 1004: DDAT10 Amount Wasted: 38 MCG; Drug Waste%:  
95  
2100 DOKTRAY at 2226 GAVE: 2 MCG  
Barcode Medication: Ddayp  
NDC/DIN: 62756052940 (SOURCE: Default NDCs)  
2234 Transaction Rule PHABRCJOB  
MED: WASTE - Medicare Waste  
Description: Debit svc Dr/Tm 11/29/22 2226: DDAT10 Amount Wasted: 38 MCG; Drug Waste%:  
95

DATE: 12/03/22 @ 0013  
USER: PHABRCIOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/STOP
0700 11/29/22 to 0659 11/30/22 (continued)	

**NOVOLIN N (Insulin NPH 100 units/ml 10 ml Vial)**  
30 UNITS SUB-Q Every eight hours  
Comments: HOLD IF THE PB WITHHELDS OR BLOOD SUGAR BELOW  
100 MG/DL.  
HOLD IF TUBE FEEDING ON HOLD  
RX #: 002294664

11/29/22 | 1816 Order Entry GORRUMA  
| 1818 Edit or Verification THONHUN  
| 1818 Edit or Verification THONHUN  
| 1845 Acknowledged Order GORRUMA  
| 2200 Not Administered DOMIXAV at 2235 HYP0GLYC  
| Comments  
| BS 57  
| 0600 Not Administered DOMIXAV at 0537 HYP0GLYC

**Dextrose 50% (Dextrose 50% 50 ml Syringe)**  
50 ML IV-Push As Directed/PRO  
PRN Reason: See Comments  
Comments: Give if BS < 70 and/or patient has any altered level of consciousness  
RX #: 002219545

10/19/22 | 1741 GORRUMA at 1741 GAVE: 50 ML  
| Barcode Medication: Dextrose 50%  
| NDC/DIN: 7632933021 (SOURCE: eMAR)  
| 1749 Transaction Rule PHABRCIOB  
| MED1.WASTE - Medicate Waste  
| Description: Debit Svc Dc/Tm 11/29/22 1741: D50B Amount Wasted: 0 ML; Drug Waste%: 0  
| 2225 DOMIXAV at 2225 GAVE: 50 ML  
| Barcode Medication: Dextrose 50%  
| NDC/DIN: 7632933021 (SOURCE: eMAR)  
| 2234 Transaction Rule PHABRCIOB  
| MED1.WASTE - Medicate Waste  
| Description: Debit Svc Dc/Tm 11/29/22 2225: D50B Amount Wasted: 0 ML; Drug Waste%: 0  
| 0536 DOMIXAV at 0536 GAVE: 50 ML  
| Barcode Medication: Dextrose 50%  
| NDC/DIN: 7632933021 (SOURCE: eMAR)  
| 0544 Transaction Rule PHABRCIOB  
| MED1.WASTE - Medicate Waste  
| Description: Debit Svc Dc/Tm 11/30/22 0536: D50B Amount Wasted: 0 ML; Drug Waste%: 0

DATE: 12/03/22 @ 0013  
USER: PHABGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:	START/
0700 11/29/22 to 0659 11/30/22 (continued)	STOP

Sodium Chloride 0.9% 250 ml 242 ML  
(0.9% Sodium Chloride 250 ml Bag)

Levophed 8 MG

(Norepinephrine 4 mg/4 ml vial)

19,688 MLS/HR IV TITRATE/PRN

PRN Reason: BP Support (See Protocol)

Comments: \*\*IN NS\*\*

Conc. = 32mcg/ml

Protect from Light

RX #: Q02293108

11/28/22 0700 Infusion In Progress 0700 DONTAV: Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 5.906 mls, Cumulative Intake: 47.41 mls, Container Volume: 202.59 mls, Site:  
Queries  
Container Volume: 202.59 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 7h 35m  
Increase/Decrease: Running Infusion Intake: 5.906 Infusion Rate: 5.906 Waste Amount: 0  
0745 Infusion In Progress 0745 GORRUM: Decreased, Dose Rate: 0.02 MCG/KG/MIN, Rate: 3.938 MLS/HR  
Intake: 4.43 mls, Cumulative Intake: 51.84 mls, Container Volume: 198.16 mls, Site:  
Queries  
Container Volume: 198.16 Dose Rate: 0.02 Cumulative Elapsed Time (minutes): 8h 20m  
Increase/Decrease: Decreased Infusion Intake: 4.43 Infusion Rate: 3.938 Waste Amount: 0  
0800 Infusion In Progress 0800 GORRUM: Running, Dose Rate: 0.02 MCG/KG/MIN, Rate: 3.938 MLS/HR  
Intake: 0.985 mls, Cumulative Intake: 52.825 mls, Container Volume: 197.175 mls, Site:  
Queries  
Container Volume: 197.175 Dose Rate: 0.02 Cumulative Elapsed Time (minutes): 8h 35m  
Increase/Decrease: Running Infusion Intake: 0.985 Infusion Rate: 3.938 Waste Amount: 0  
0900 Infusion In Progress 0900 GORRUM: Running, Dose Rate: 0.02 MCG/KG/MIN, Rate: 3.938 MLS/HR  
Intake: 3.938 mls, Cumulative Intake: 56.763 mls, Container Volume: 193.237 mls, Site:  
Queries  
Container Volume: 193.237 Dose Rate: 0.02 Cumulative Elapsed Time (minutes): 9h 35m  
Increase/Decrease: Running Infusion Intake: 3.938 Infusion Rate: 3.938 Waste Amount: 0  
0930 Infusion In Progress 0930 GORRUM: Increased, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 1.969 mls, Cumulative Intake: 58.732 mls, Container Volume: 191.268 mls, Site:  
Queries  
Container Volume: 191.268 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 10h 5m  
Increase/Decrease: Increased Infusion Intake: 1.969 Infusion Rate: 5.906 Waste Amount: 0  
1000 Infusion In Progress 1000 GORRUM: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
Intake: 2.953 mls, Cumulative Intake: 61.685 mls, Container Volume: 188.315 mls, Site:  
Queries  
Container Volume: 188.315 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 10h 35m  
Increase/Decrease: Running Infusion Intake: 2.953 Infusion Rate: 5.906 Waste Amount: 0  
1030 Infusion In Progress 1030 GORRUM: Increased, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: 2.953 mls, Cumulative Intake: 64.638 mls, Container Volume: 185.362 mls, Site:  
Queries  
Container Volume: 185.362 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 11h 5m  
Increase/Decrease: Increased Infusion Intake: 2.953 Infusion Rate: 7.875 Waste Amount: 0  
1100 Infusion In Progress 1100 GORRUM: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR

DATE: 12/03/22 @ 0013  
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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/29/22 to 0659 11/30/22 (continued)		

Intake: 3.938 mls, Cumulative Intake: 68.576 mls, Container Volume: 181.424 mls, site:  
Queries  
Cumulative Dose: 2.1943 Cumulative Intake (bag): 68.576 Cumulative Intake (Rx): 68.576  
Container Volume: 181.424 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 11h 35m  
Increase/Decrease: Running Infusion Intake: 3.938 Infusion Rate: 7.875 Waste Amount: 0  
1200 Infusion In Progress 1200 GORRUM: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: 7.875 mls, Cumulative Intake: 76.451 mls, Container Volume: 173.549 mls, site:  
Queries  
Cumulative Dose: 2.4463 Cumulative Intake (bag): 76.451 Cumulative Intake (Rx): 76.451  
Container Volume: 173.549 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 12h 35m  
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0  
1300 Infusion In Progress 1300 GORRUM: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: 7.875 mls, Cumulative Intake: 84.326 mls, Container Volume: 165.674 mls, site:  
Queries  
Cumulative Dose: 2.6983 Cumulative Intake (bag): 84.326 Cumulative Intake (Rx): 84.326  
Container Volume: 165.674 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 13h 35m  
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0  
1315 Infusion In Progress 1315 GORRUM: Increased, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.844 MLS/HR  
Intake: 1.969 mls, Cumulative Intake: 86.295 mls, Container Volume: 163.705 mls, site:  
Queries  
Cumulative Dose: 2.7613 Cumulative Intake (bag): 86.295 Cumulative Intake (Rx): 86.295  
Container Volume: 163.705 Dose Rate: 0.05 Cumulative Elapsed Time (minutes): 13h 50m  
Increase/Decrease: Increased Infusion Intake: 1.969 Infusion Rate: 9.844 Waste Amount: 0  
1400 Infusion In Progress 1400 GORRUM: Running, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.844 MLS/HR  
Intake: 7.383 mls, Cumulative Intake: 93.678 mls, Container Volume: 156.322 mls, site:  
Queries  
Cumulative Dose: 2.9976 Cumulative Intake (bag): 93.678 Cumulative Intake (Rx): 93.678  
Container Volume: 156.322 Dose Rate: 0.05 Cumulative Elapsed Time (minutes): 14h 35m  
Increase/Decrease: Running Infusion Intake: 7.383 Infusion Rate: 9.844 Waste Amount: 0  
1431 Infusion In Progress 1431 GORRUM: Increased, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 5.086 mls, Cumulative Intake: 98.764 mls, Container Volume: 151.236 mls, site:  
Queries  
Cumulative Dose: 3.1604 Cumulative Intake (bag): 98.764 Cumulative Intake (Rx): 98.764  
Container Volume: 151.236 Dose Rate: 0.06 Cumulative Elapsed Time (minutes): 15h 0m  
Increase/Decrease: Increased Infusion Intake: 5.086 Infusion Rate: 11.813 Waste Amount: 0  
1500 Infusion In Progress 1500 GORRUM: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 5.71 mls, Cumulative Intake: 104.474 mls, Container Volume: 145.526 mls, site:  
Queries  
Cumulative Dose: 3.3431 Cumulative Intake (bag): 104.474 Cumulative Intake (Rx):  
104.474 Container Volume: 145.526 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
15h 35m Increase/Decrease: Running Infusion Intake: 5.71 Infusion Rate: 11.813  
Waste Amount: 0  
1600 Infusion In Progress 1600 GORRUM: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 11.813 mls, Cumulative Intake: 116.287 mls, Container Volume: 133.713 mls, site:

DATE: 12/03/22 @ 0013  
USER: PHARGTOR

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/29/22 to 0659 11/30/22 (continued)	STOP	STOP

Queries  
Cumulative Dose: 3.7211 Cumulative Intake (bag): 116.287 Cumulative Intake (Rx):  
116.287 Container Volume: 133.713 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
16h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813  
Waste Amount: 0  
1700 Infusion In Progress 1700 GORRUMA: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 11.813 mls, Cumulative Intake: 128.1 mls, Container Volume: 121.9 mls, Site:  
Queries  
Cumulative Dose: 4.0991 Cumulative Intake (bag): 128.1 Cumulative Intake (Rx): 128.1  
Container Volume: 121.9 Dose Rate: 0.06 Cumulative Elapsed Time (minutes): 17h 35m  
Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813 Waste Amount: 0  
1800 Infusion In Progress 1800 GORRUMA: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 11.813 mls, Cumulative Intake: 139.913 mls, Container Volume: 110.087 mls, Site:  
Queries  
Cumulative Dose: 4.4771 Cumulative Intake (bag): 139.913 Cumulative Intake (Rx):  
139.913 Container Volume: 110.087 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
18h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813  
Waste Amount: 0  
1900 Infusion In Progress 1900 DMTXAV: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 11.813 mls, Cumulative Intake: 151.726 mls, Container Volume: 98.274 mls, Site:  
Queries  
Cumulative Dose: 4.8551 Cumulative Intake (bag): 151.726 Cumulative Intake (Rx):  
151.726 Container Volume: 98.274 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
19h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813  
Waste Amount: 0  
1930 Infusion In Progress 1930 DMTXAV: Decreased, Dose Rate: 0.05 MCG/KG/MIN, Rate: 9.844 MLS/HR  
Intake: 5.907 mls, Cumulative Intake: 157.633 mls, Container Volume: 92.367 mls, Site:  
Queries  
Cumulative Dose: 5.0441 Cumulative Intake (bag): 157.633 Cumulative Intake (Rx):  
157.633 Container Volume: 92.367 Dose Rate: 0.05 Cumulative Elapsed Time (minutes): 20h 5m  
Increase/Decrease: Decreased Infusion Intake: 5.907 Infusion Rate: 9.844 Waste Amount: 0  
2000 Infusion In Progress 2000 DMTXAV: Increased, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 4.922 mls, Cumulative Intake: 162.555 mls, Container Volume: 87.445 mls, Site:  
Queries  
Cumulative Dose: 5.2016 Cumulative Intake (bag): 162.555 Cumulative Intake (Rx):  
162.555 Container Volume: 87.445 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
20h 35m Increase/Decrease: Increased Infusion Intake: 4.922 Infusion Rate: 11.813  
Waste Amount: 0  
2100 Infusion In Progress 2100 DMTXAV: Running, Dose Rate: 0.06 MCG/KG/MIN, Rate: 11.813 MLS/HR  
Intake: 11.813 mls, Cumulative Intake: 174.368 mls, Container Volume: 75.632 mls, Site:  
Queries  
Cumulative Dose: 5.5796 Cumulative Intake (bag): 174.368 Cumulative Intake (Rx):  
174.368 Container Volume: 75.632 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):  
21h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 11/29/22 to 0659 11/30/22 (continued)

START/ STOP	
	Waste Amount: 0
	2200 Infusion In Progress 2200 DMTXAV: Running, Dose Rate: 0.06 MCG/KG/MTN, Rate: 11.813 MLS/HR
	Intake: 11.813 mls, Cumulative Intake: 186.181 mls, Container Volume: 63.819 mls, Site:
	Queries
	Cumulative Dose: 5.9576 Cumulative Intake (bag): 186.181 Cumulative Intake (RX):
	186.181 Container Volume: 63.819 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):
	22h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813
	Waste Amount: 0
	2300 Infusion In Progress 2300 DMTXAV: Running, Dose Rate: 0.06 MCG/KG/MTN, Rate: 11.813 MLS/HR
	Intake: 11.813 mls, Cumulative Intake: 197.994 mls, Container Volume: 52.006 mls, Site:
	Queries
	Cumulative Dose: 6.3356 Cumulative Intake (bag): 197.994 Cumulative Intake (RX):
	197.994 Container Volume: 52.006 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):
	23h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813
	Waste Amount: 0
	0000 Infusion In Progress 0000 DMTXAV: Running, Dose Rate: 0.06 MCG/KG/MTN, Rate: 11.813 MLS/HR
	Intake: 11.813 mls, Cumulative Intake: 209.807 mls, Container Volume: 40.193 mls, Site:
	Queries
	Cumulative Dose: 6.7136 Cumulative Intake (bag): 209.807 Cumulative Intake (RX):
	209.807 Container Volume: 40.193 Dose Rate: 0.06 Cumulative Elapsed Time (minutes):
	24h 35m Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813
	Waste Amount: 0
	0100 Infusion In Progress 0100 DMTXAV: Running, Dose Rate: 0.06 MCG/KG/MTN, Rate: 11.813 MLS/HR
	Intake: 11.813 mls, Cumulative Intake: 221.62 mls, Container Volume: 28.38 mls, Site:
	Queries
	Cumulative Dose: 7.0916 Cumulative Intake (bag): 221.62 Cumulative Intake (RX): 221.62
	Container Volume: 28.38 Dose Rate: 0.06 Cumulative Elapsed Time (minutes): 25h 35m
	Increase/Decrease: Running Infusion Intake: 11.813 Infusion Rate: 11.813 Waste Amount: 0
	0122 Infusion In Progress 0122 DMTXAV: Decreased, Dose Rate: 0.05 MCG/KG/MTN, Rate: 9.844 MLS/HR
	Intake: 4.331 mls, Cumulative Intake: 225.951 mls, Container Volume: 24.049 mls, Site:
	Queries
	Cumulative Dose: 7.2302 Cumulative Intake (bag): 225.951 Cumulative Intake (RX):
	225.951 Container Volume: 24.049 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):
	25h 57m Increase/Decrease: Decreased Infusion Intake: 4.331 Infusion Rate: 9.844
	Waste Amount: 0
	0200 Infusion In Progress 0200 DMTXAV: Running, Dose Rate: 0.05 MCG/KG/MTN, Rate: 9.844 MLS/HR
	Intake: 6.235 mls, Cumulative Intake: 232.186 mls, Container Volume: 17.814 mls, Site:
	Queries
	Cumulative Dose: 7.4297 Cumulative Intake (bag): 232.186 Cumulative Intake (RX):
	232.186 Container Volume: 17.814 Dose Rate: 0.05 Cumulative Elapsed Time (minutes):
	26h 35m Increase/Decrease: Running Infusion Intake: 6.235 Infusion Rate: 9.844
	Waste Amount: 0
	0226 Infusion In Progress 0226 DMTXAV: Decreased, Dose Rate: 0.04 MCG/KG/MTN, Rate: 7.875 MLS/HR
	Intake: 4.266 mls, Cumulative Intake: 236.452 mls, Container Volume: 13.548 mls, Site:

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/29/22 to 0659 11/30/22 (continued)		

Queries  
Cumulative Dose: 7.5662 Cumulative Intake (bag): 236.452 Cumulative Intake (RX):  
236.452 Container Volume: 13.548 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 27h 1m  
Increase/Decrease: Decreased Infusion Intake: 4.266 Infusion Rate: 7.875 Waste Amount: 0  
0226 Infusion In Progress 0226 DMTXAV: Infused, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: 0 mls, Cumulative Intake: 236.452 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 7.5662 Cumulative Intake (bag): 236.452 Cumulative Intake (RX):  
236.452 Container Volume: 0 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 27h 1m  
Increase/Decrease: Infused Infusion Intake: 0 Infusion Rate: 7.875 Waste Amount: 13.548  
0226 DMTXAV at 0226 GAVE: 7.875 MLS/HR  
Barcode Medication: Ievophad  
NDC/DIN: 36000016210 (SOURCE: Default NDCs)  
Barcode Medication: Sodium Chloride 0.9% 250 mL  
NDC/DIN: 00338004902 (SOURCE: Default NDCs)  
Adultn Queries  
Cumulative Dose: 7.5662 Cumulative Intake (RX): 236.452 Container Volume: 250 Dose Rate:  
0.04 Cumulative Elapsed Time (minutes): 27h 1m Increase/Decrease: Started/Running  
Infusion Rate: 7.875 Waste Amount: 0  
0226 Infusion In Progress 0226 DMTXAV: Started/Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:  
Queries  
Cumulative Dose: 7.5662 Cumulative Intake (RX): 236.452 Container Volume: 250  
Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 27h 1m Increase/Decrease:  
Started/Running Infusion Rate: 7.875 Waste Amount: 0  
0229 Transaction Rule PHABRCIOB  
MED1.WASTE - Medication Waste  
Description: Debit Svc Dc/Tm 11/30/22 0226: IEVVI Amount Wasted: 0 MCG; Drug Waste\$: 0  
0229 Transaction Rule PHABRCIOB  
MED1.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/30/22 0226: NS250 Amount Wasted: 8 ML; Drug Waste\$: 3.2  
0300 Infusion In Progress 0300 DMTXAV: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: 4.463 mls, Cumulative Intake: 4.463 mls, Container Volume: 245.537 mls, Site:  
Queries  
Cumulative Dose: 7.709 Cumulative Intake (bag): 4.463 Cumulative Intake (RX): 240.915  
Container Volume: 245.537 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 27h 35m  
Increase/Decrease: Running Infusion Intake: 4.463 Infusion Rate: 7.875 Waste Amount: 0  
0400 Infusion In Progress 0400 DMTXAV: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
Intake: 7.875 mls, Cumulative Intake: 12.338 mls, Container Volume: 237.662 mls, Site:  
Queries  
Cumulative Dose: 7.961 Cumulative Intake (bag): 12.338 Cumulative Intake (RX): 248.779  
Container Volume: 237.662 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 28h 35m  
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0  
0500 Infusion In Progress 0500 DMTXAV: Decreased, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	STOP
0700 11/29/22 to 0659 12/30/22 (continued)		

Intake: 7.875 mls, Cumulative Intake: 20.213 mls, Container Volume: 229.787 mls, site:  
 Overrides  
 Cumulative Dose: 8.213 Cumulative Intake (bag): 20.213 Cumulative Intake (RX): 256.665  
 Container Volume: 229.787 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 29h 35m  
 Increase/Decrease: Decreased Infusion Intake: 7.875 Infusion Rate: 5.906 Waste Amount: 0  
 0600 Infusion In Progress 0600 DOMIXAV: Running, Dose Rate: 0.03 MCG/KG/MIN, Rate: 5.906 MLS/HR  
 Intake: 5.906 mls, Cumulative Intake: 26.119 mls, Container Volume: 223.881 mls, site:  
 Overrides  
 Cumulative Dose: 8.402 Cumulative Intake (bag): 26.119 Cumulative Intake (RX): 262.571  
 Container Volume: 223.881 Dose Rate: 0.03 Cumulative Elapsed Time (minutes): 30h 35m  
 Increase/Decrease: Running Infusion Intake: 5.906 Waste Amount: 0  
 Edit Infusion 0600 DOMIXAV Action - From: Decreased To: Running  
 Dose Rate - From: 0.02 MCG/KG/MIN To: 0.03 MCG/KG/MIN  
 Rate - From: 3.938 MLS/HR To: 5.906 MLS/HR  
 Old Overrides:  
 Dose Rate: 0.02  
 Increase/Decrease: Decreased  
 Infusion Rate: 3.938  
 New Overrides:  
 Dose Rate: 0.03  
 Increase/Decrease: Running  
 Infusion Rate: 5.906  
 0631 Infusion In Progress 0631 DOMIXAV: Increased, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR  
 Intake: 3.051 mls, Cumulative Intake: 29.17 mls, Container Volume: 220.83 mls, site:  
 Overrides  
 Cumulative Dose: 8.4996 Cumulative Intake (bag): 29.17 Cumulative Intake (RX): 265.622  
 Container Volume: 220.83 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 31h 6m  
 Increase/Decrease: Increased Infusion Intake: 3.051 Infusion Rate: 7.875 Waste Amount: 0

ADMINISTRATION PERIOD:	START/STOP	STOP
0700 11/30/22 to 0659 12/01/22		

Synthroid (Levothyroxine 112 mcg Tablet)  
 112 MCG G-TUBE DATA before breakfast  
 RX #: 002279429  
 11/21/22 0700 DOMIXAV at 0640 GAVE: 112 MCG  
 Barcode Medication: Synthroid  
 NDC/DIN: 4229203901 (SOURCE: eMAR)  
 0647 Transaction Rule PHABRC08  
 MEDT WASTE - Medicare Waste  
 Description: Debit Svc Dr/Tm 12/01/22 0641: SWM112 Amount Wasted: 0 MCG; Drug Waste%: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 11/30/22 to 0659 12/01/22 (continued)		

**Pepcid (Famotidine 20 mg Tablet)**  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

11/21/22	1000	FERRURS at 1015 GAVE: 20 MG	
		Barcode Medication: Pepcid	
		NDC/DIN: 00172572860 (SOURCE: eMAR)	
		Expiration Date: 05/18/23	
		1100 Transaction Rule PHABKG08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/30/22 1015: BPP20 Amount Wasted: 0 MG; Drug Waste%: 0	
		Barcode Medication: Pepcid	
		NDC/DIN: 6373964510 (SOURCE: eMAR)	
		2118 Transaction Rule PHABKG08	
		MEDI.WASTE - Medicare Waste	
		Description: Debit Svc Dr/Tm 11/30/22 2114: BPP20 Amount Wasted: 0 MG; Drug Waste%: 0	



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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 11/30/22 to 0659 12/01/22 (continued)		

MDI.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/30/22 2114; REP500I Amount Wasted: 0 MG; Drug Waste%: 0  
2118 Transaction Rule PHABRCJOB  
MDI.WASTE - Medicare Waste  
Description: Dabit Svc Dc/Tm 11/30/22 2114; NS100 Amount Wasted: 0 ML; Drug Waste%: 0  
2303 Infusion In Progress 2303 LAMPHEN; Infused; Dose Rate: / Rate: 0 MGS/HR  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Overies  
Cumulative Dose: 7500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 1575  
Container Volume: 0 Cumulative Elapsed Time (minutes): 6h 32m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/30/22 to 0659 12/01/22 (continued)	STAGE	STAGE

0.9% Sodium Chloride 100 mL MINI-Bag 100 ML  
(0.9% Sodium Chloride 100 mL MINI-Bag)  
zosyn 4.5 GM  
(Piperacillin/Tazobactam 4.5 gm Vial)  
25 Mls/HR IVPB Q8H  
RX #: 002285170

11/24/22	0900	FERRRUS at 0905 GAVE: 25 Mls/HR
12/04/22		Barcode Medication: 0.9% Sodium Chloride 100 mL MINI-Bag
		NDC/DIN: 00338055318 (SOURCE: Default NDCs)
		Barcode Medication: zosyn
		NDC/DIN: 00781311495 (SOURCE: Default NDCs)
		Admin Queries
		Cumulative Dose: 76.5 Cumulative Intake (Rx): 1700 Container Volume: 100
		Cumulative Elapsed Time (minutes): 69h 37m Increase/Decrease: started/Running
		Infusion Rate: 25 Waste Amount: 0
		0905 Infusion In Progress 0905 FERRRUS: Started/Running, Dose Rate: / Rate: 25 Mls/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mL, Site:
		Queries
		Cumulative Dose: 76.5 Cumulative Intake (Rx): 1700 Container Volume: 100
		Cumulative Elapsed Time (minutes): 69h 37m Increase/Decrease: started/Running
		Infusion Rate: 25 Waste Amount: 0
		0914 Transaction Rule PHARGT08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/30/22 0905: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0
		0914 Transaction Rule PHARGT08
		MDI.WASTE - Medicare Waste
		Description: Debit Svc Dc/Tm 11/30/22 0905: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
		1305 Infusion In Progress 1305 FERRRUS: Infused, Dose Rate: / Rate: 0 Mls/HR
		Intake: 100 mL, Cumulative Intake: 100 mL, Container Volume: 0 mL, Site:
		Queries
		Cumulative Dose: 81 Cumulative Intake (Rx): 100 Cumulative Intake (Rx): 1800
		Container Volume: 0 Cumulative Elapsed Time (minutes): 3d 1h 37m Increase/Decrease:
		Infused Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0
		1504 Edit or Verification ZPRA.CR
		1512 Acknowledged Order FERRRUS
		1700 FERRRUS at 1701 GAVE: 25 Mls/HR
		Barcode Medication: 0.9% Sodium Chloride 100 mL MINI-Bag
		NDC/DIN: 00338055318 (SOURCE: Default NDCs)
		Barcode Medication: zosyn
		NDC/DIN: 00781311495 (SOURCE: Default NDCs)
		Admin Queries
		Cumulative Dose: 81 Cumulative Intake (Rx): 1800 Container Volume: 100
		Cumulative Elapsed Time (minutes): 3d 1h 37m Increase/Decrease: Started/Running
		Infusion Rate: 25 Waste Amount: 0
		1701 Infusion In Progress 1701 FERRRUS: Started/Running, Dose Rate: / Rate: 25 Mls/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mL, Site:
		Queries
		Cumulative Dose: 81 Cumulative Intake (Rx): 1800 Container Volume: 100
		Cumulative Elapsed Time (minutes): 3d 1h 37m Increase/Decrease: Started/Running

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Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD: 0700 11/30/22 to 0659 12/01/22 (continued)

START/ STOP	
	Infusion Rate: 25 Waste Amount: 0
1716	Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/30/22 1701: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0
1716	Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 11/30/22 1701: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
2113	Infusion In Progress 0534 LAMPHEN: Infused, Dose Rate: / Rate: 0 MLS/HR
	Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: 85.5 Cumulative Intake (bag) : 100 Cumulative Intake (RX) : 1900
	Container Volume: 0 Cumulative Elapsed Time (minutes) : 3d 5h 49m Increase/Decrease:
	Infused Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0
0033	Infusion In Progress 0033 LAMPHEN: Started/Running, Dose Rate: / Rate: 25 MLS/HR
	Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
	Queries
	Cumulative Dose: 85.5 Cumulative Intake (RX) : 1900 Container Volume: 100
	Cumulative Elapsed Time (minutes) : 3d 5h 49m Increase/Decrease: Started/Running
	Infusion Rate: 25 Waste Amount: 0
0045	Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 12/01/22 0033: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0
0045	Transaction Rule PHABRCIOB
	MEDI.WASTE - Medicare Waste
	Description: Debit Svc Dr/Tm 12/01/22 0033: 20845I Amount Wasted: 0 GM; Drug Waste%: 0
0100	LAMPHEN at 0033 GAVE: 25 MLS/HR
	Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag
	NDC/DIN: 0033805518 (SOURCE: Default NDCs)
	Barcode Medication: Zosyn
	NDC/DIN: 00781311495 (SOURCE: Default NDCs)
	Admin Queries
	Cumulative Dose: 85.5 Cumulative Intake (RX) : 1900 Container Volume: 100
	Cumulative Elapsed Time (minutes) : 3d 5h 49m Increase/Decrease: Started/Running
	Infusion Rate: 25 Waste Amount: 0
0534	Infusion In Progress 0534 LAMPHEN: Infused, Dose Rate: / Rate: 0 MLS/HR
	Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: 90 Cumulative Intake (bag) : 100 Cumulative Intake (RX) : 2000
	Container Volume: 0 Cumulative Elapsed Time (minutes) : 3d 10h 50m Increase/Decrease:
	Infused Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0

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Medication Discharge Summary

Name Lyons, Kathleen A

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ADMINISTRATION PERIOD:	START/	STOP
0700 11/30/22 to 0659 12/01/22 (continued)		

**Ddapv (Desmopressin 40 mcg/10 ml Vial)**  
 2 MCG IV-Push TWICE A DAY  
 RX #: 002293577

11/29/22	1000	FERRJRS at 1051 GAVE: 2 MCG
		Barcode Medication: Ddapv
		NDC/DIN: 62756052940 (SOURCE: Default NDCs)
	1100	Transaction Rule PHARCTOR
		MBDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/30/22 1051: DDAL10 Amount Wasted: 38 MCG; Drug Waste%:
	95	
	2100	LAMPBHN at 2230 GAVE: 2 MCG
		Barcode Medication: Ddapv
		NDC/DIN: 62756052940 (SOURCE: Default NDCs)
	2318	Transaction Rule PHARCTOR
		MBDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 11/30/22 2230: DDAL10 Amount Wasted: 38 MCG; Drug Waste%:
	95	

**Novolin N (Insulin NPH 100 units/ml 10 ml Vial)**  
 30 UNITS SUB-Q Every eight hours  
 Comments: HOLD IF THE RP WITHHOLDS OR BLOOD SUGAR BELOW  
 100 MG/DL.  
 HOLD IF TUBE FEEDING ON HOLD  
 RX #: 002294664

11/29/22	1400	Not Administered RANOTRS at 12/01/22 - 0800 MDPC
	1410	Discontinue FERRJRS
	1447	Acknowledged Order FERRJRS

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Medication Discharge Summary

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ADMINISTRATION PERIOD:	START/	STOP/
0700 11/30/22 to 0659 12/01/22 (continued)	STAGE	

Dextrose 5% 250 mL 250 ML  
(Dextrose 5% 250 ml Bag)  
Vancomycin 1,000 MG  
(Vancomycin 1,000 mg Vial)  
125 MLS/HR IVFB NCM/ONE  
Comments: \*Refill/Rate\*  
DOSE PER PHARMACY  
RX #: Q02295626

11/30/22 0820 Edit or Verification ZPHA.DAW  
11/30/22 0820 Edit or Verification ZPHA.DAW  
0822 Acknowledged Order FERRRES  
0900 FERRRES at 0926 SANE: 125 MLS/HR  
Barcode Medication: Dextrose 5% 250 ml  
NDC/DIN: 00338001702 (SOURCE: Default NDCs)  
Barcode Medication: Vancomycin  
NDC/DIN: 67457034001 (SOURCE: Default NDCs)  
Admin Queries  
Container Volume: 250 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 125 Waste Amount: 0  
0926 Infusion In Progress 0926 FERRRES: Started, Dose Rate: / Rate: 125 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 250 mls, Site:  
Queries  
Container Volume: 250 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started  
Infusion Rate: 125 Waste Amount: 0  
0930 Transaction Rule PHARGJOB  
MEDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/30/22 0926: D5W250 Amount Wasted: 0 ML, Drug Waste%: 0  
0930 Transaction Rule PHARGJOB  
MEDI.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 11/30/22 0926: VANILP Amount Wasted: 0 MG, Amount Given: 1  
VIAL  
1059 Acknowledged Order FERRRES  
1059 Discontinue PHARGJOB  
1126 Infusion In Progress 1126 FERRRES: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 250 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 1000 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 250  
Container Volume: 0 Cumulative Elapsed Time (minutes): 2h 0m Increase/Decrease: Infused  
Infusion Intake: 250 Infusion Rate: 0 Waste Amount: 0



DATE: 12/03/22 @ 0013  
USER: PHABRC08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 11/30/22 to 0659 12/01/22 (continued)	STOP

Dextrose 5% 1,000 ML  
(Dextrose 5% 1,000 mL Bag)  
50 MLS/HR IV .020H  
RX #: 002295751

11/30/22 0930 ERRORS at 0948 GAVE: 50 MLS/HR  
Barcode Medication: Dextrose 5%  
NDC/DIN: 0338001704 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Container Volume: 1000 Cumulative Elapsed Time (minutes):  
0m Increase/Decrease: started Infusion Rate: 50 Waste Amount: 0  
0933 Acknowledged Order ERRORS  
0938 Edit or Verification ZPWA.HH  
0948 Infusion In Progress 0948 ERRORS: Started, Dose Rate: / Rate: 50 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Container Volume: 1000  
Cumulative Elapsed Time (minutes): 0m Increase/Decrease: started Infusion Rate: 50  
Waste Amount: 0  
0959 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 11/30/22 0948: DSW Amount Wasted: 0 ML; Drug Waste%: 0  
0530 LAMPHEN at 0615 GAVE: 50 MLS/HR  
Barcode Medication: Dextrose 5%  
NDC/DIN: 0338001704 (SOURCE: eMAR)  
Admin Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: started/Running  
Infusion Rate: 50 Waste Amount: 0  
0548 Infusion In Progress 0548 LAMPHEN: Infused, Dose Rate: / Rate: 50 MLS/HR  
Intake: 1000 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
1000 Container Volume: 0 Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease:  
Infused Infusion Intake: 1000 Infusion Rate: 50 Waste Amount: 0  
0615 Infusion In Progress 0615 LAMPHEN: started/Running, Dose Rate: / Rate: 50 MLS/HR  
Intake: / Cumulative Intake: / Container Volume: 1000 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (Rx): 1000 Container Volume: 1000  
Cumulative Elapsed Time (minutes): 20h 0m Increase/Decrease: started/Running  
Infusion Rate: 50 Waste Amount: 0  
0631 Transaction Rule PHABRC08  
MBDI.WASTE - Medicare Waste  
Description: Debit Svc Dc/Tm 12/01/22 0615: DSW Amount Wasted: 0 ML; Drug Waste%: 0

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP
0700 11/30/22 to 0659 12/01/22 (continued)	

Novolog (Insulin Aspart 100 units/ml 10ml Vial)  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucosecan Coverage  
RX #: 002286977

11/25/22	1200	FERRUES at 1200 CO-SIGNER: LHMNICH	SITE: Abdomen	GAVE: 2 UNIT
		Barcode Medication: Novolog		
		NDC/DIN: 0169750111 (SOURCE: eMAR)		
		Admin Queries		
		Finger Stick Blood Glucose:		151 MAR Injection site: 11
		1215 Transaction Rule PHABRCJOB		
		MEDI.MASTR - Medicare Waste		
		Description: Debit Svc Dc/Fm 11/30/22 1200:		INSASP Amount Wasted: 0 UNIT, Amount Given: 0.020 ML

DATE: 12/03/22 @ 0013  
USER: PHARGJOB

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/28/22 to 0659 12/01/22 (continued)	STAGE	

Sodium Chloride 0.9% 250 ml 242 ML  
(0.9% Sodium Chloride 250 ml Bag)

Levophed 8 MG

(Norepinephrine 4 mg/4 ml vial)

19,688 MLS/HR IV TITRATE/PRN

PRN Reason: BP Support (See Protocol)

Comments: \*\*IN NS\*\*

Conc. = 32mcg/ml

Protect From Light

RX #: Q02293108

11/28/22 0700	Infusion In Progress	0700 DONTAV	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 3.806 mls, Cumulative Intake: 32.976 mls, Container Volume: 217.024 mls, site:
	Queries				
	Cumulative Dose:	8.6214	Cumulative Intake (kg):	269.428	
	Container Volume:	217.024	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 31h 35m
	Increase/Decrease:	Running	Infusion Intake:	3.806	Infusion Rate: 7.875 Waste Amount: 0
0730	Infusion In Progress	0730 FERRJES	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 3.938 mls, Cumulative Intake: 36.914 mls, Container Volume: 213.086 mls, site:
	Queries				
	Cumulative Dose:	8.7474	Cumulative Intake (bag):	36.914	Cumulative Intake (kg): 273.366
	Container Volume:	213.086	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 32h 5m
	Increase/Decrease:	Running	Infusion Intake:	3.938	Infusion Rate: 7.875 Waste Amount: 0
0800	Infusion In Progress	0800 FERRJES	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 3.938 mls, Cumulative Intake: 40.852 mls, Container Volume: 209.148 mls, site:
	Queries				
	Cumulative Dose:	8.8734	Cumulative Intake (bag):	40.852	Cumulative Intake (kg): 277.304
	Container Volume:	209.148	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 32h 35m
	Increase/Decrease:	Running	Infusion Intake:	3.938	Infusion Rate: 7.875 Waste Amount: 0
0900	Infusion In Progress	0900 FERRJES	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 7.875 mls, Cumulative Intake: 48.727 mls, Container Volume: 201.273 mls, site:
	Queries				
	Cumulative Dose:	9.1254	Cumulative Intake (bag):	48.727	Cumulative Intake (kg): 285.179
	Container Volume:	201.273	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 33h 35m
	Increase/Decrease:	Running	Infusion Intake:	7.875	Infusion Rate: 7.875 Waste Amount: 0
1000	Infusion In Progress	1000 FERRJES	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 7.875 mls, Cumulative Intake: 56.602 mls, Container Volume: 193.398 mls, site:
	Queries				
	Cumulative Dose:	9.3774	Cumulative Intake (bag):	56.602	Cumulative Intake (kg): 293.054
	Container Volume:	193.398	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 34h 35m
	Increase/Decrease:	Running	Infusion Intake:	7.875	Infusion Rate: 7.875 Waste Amount: 0
1100	Infusion In Progress	1100 FERRJES	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 7.875 mls, Cumulative Intake: 64.477 mls, Container Volume: 185.523 mls, site:
	Queries				
	Cumulative Dose:	9.6294	Cumulative Intake (bag):	64.477	Cumulative Intake (kg): 300.929
	Container Volume:	185.523	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 35h 35m
	Increase/Decrease:	Running	Infusion Intake:	7.875	Infusion Rate: 7.875 Waste Amount: 0
1200	Infusion In Progress	1200 FERRJES	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	Intake: 7.875 mls, Cumulative Intake: 72.352 mls, Container Volume: 177.648 mls, site:
	Queries				
	Cumulative Dose:	9.8814	Cumulative Intake (bag):	72.352	Cumulative Intake (kg): 308.804
	Container Volume:	177.648	Dose Rate:	0.04	Cumulative Elapsed Time (minutes): 36h 35m
	Increase/Decrease:	Running	Infusion Intake:	7.875	Infusion Rate: 7.875 Waste Amount: 0
1305	Discontinue	FERRJES			

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num 0H0054940116

ADMINISTRATION PERIOD:

0700 11/30/22 to 0659 12/01/22 (continued)

START/	STOP
	1305 Order Entry ERRORS
	1306 Acknowledged Order ERRORS





DATE: 12/03/22 @ 0013  
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Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 11/30/22 to 0659 12/01/22 (continued)	STOP	STOP

Cumulative Dose: 2.772 Cumulative Intake (bag): 86.625 Cumulative Intake (RX): 86.625		
Container Volume: 163.375 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 11h 0m		
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0		
0100 Infusion In Progress 0100 LAMPHEN: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 7.875 mls, Cumulative Intake: 94.5 mls, Container Volume: 155.5 mls, Site:		
Queries		
Cumulative Dose: 3.024 Cumulative Intake (bag): 94.5 Cumulative Intake (RX): 94.5		
Container Volume: 155.5 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 12h 0m		
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0		
Edit Infusion 0100 LAMPHEN Action - From: Running To: Running		
Intake - From: 15.75 mls To: 7.875 mls		
Old Queries:		
Infusion Intake: 15.75		
New Queries:		
Infusion Intake: 7.875		
0200 Infusion In Progress 0200 LAMPHEN: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 7.875 mls, Cumulative Intake: 102.375 mls, Container Volume: 147.625 mls, Site:		
Queries		
Cumulative Dose: 3.276 Cumulative Intake (bag): 102.375 Cumulative Intake (RX): 102.375		
Container Volume: 147.625 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 13h 0m		
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0		
0300 Infusion In Progress 0300 LAMPHEN: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 7.875 mls, Cumulative Intake: 110.25 mls, Container Volume: 139.75 mls, Site:		
Queries		
Cumulative Dose: 3.528 Cumulative Intake (bag): 110.25 Cumulative Intake (RX): 110.25		
Container Volume: 139.75 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 14h 0m		
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0		
0400 Infusion In Progress 0400 LAMPHEN: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 7.875 mls, Cumulative Intake: 118.125 mls, Container Volume: 131.875 mls, Site:		
Queries		
Cumulative Dose: 3.78 Cumulative Intake (bag): 118.125 Cumulative Intake (RX): 118.125		
Container Volume: 131.875 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 15h 0m		
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0		
0500 Infusion In Progress 0500 LAMPHEN: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 7.875 mls, Cumulative Intake: 126 mls, Container Volume: 124 mls, Site:		
Queries		
Cumulative Dose: 4.032 Cumulative Intake (bag): 126 Cumulative Intake (RX): 126		
Container Volume: 124 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 16h 0m		
Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0		
0600 Infusion In Progress 0600 LAMPHEN: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 7.875 mls, Cumulative Intake: 133.875 mls, Container Volume: 116.125 mls, Site:		
Queries		
Cumulative Dose: 4.284 Cumulative Intake (bag): 133.875 Cumulative Intake (RX): 133.875		
Container Volume: 116.125 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 17h 0m		

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0

ADMINISTRATION PERIOD:	START/STOP
0700 12/01/22 to 0659 12/02/22	

Synthroid (Letrothyroxine 112 mcg Tablet)  
112 MCG G-TUBE DAILY before breakfast  
RX #: 002279429

11/21/22| 0700 LAMPHEM at 0641 GAVE: 112 MCG  
Barcode Medication: Synthroid  
NDC/DIN: 4229203901 (SOURCE: eMAR)

Pepcid (Famotidine 20 mg Tablet)  
20 MG G-TUBE TWICE A DAY  
Comments: IV TO NG PER PROTOCOL  
RX #: 002279432

11/21/22| 0947 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 12/01/22 0839; BEP20 Amount Wasted: 0 MG; Drug Waste%: 0  
1000 RMC008 at 0839 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 6373964510 (SOURCE: eMAR)  
2100 LAMPHEM at 2120 GAVE: 20 MG  
Barcode Medication: Pepcid  
NDC/DIN: 00172572860 (SOURCE: eMAR)  
Expiration Date: 05/18/23  
2136 Transaction Rule PHABRCJOB  
MED.WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 12/01/22 2120; BEP20 Amount Wasted: 0 MG; Drug Waste%: 0



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USER: PHABRCJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num ME01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:	START/
0700 12/01/22 to 0659 12/02/22 (continued)	STOP

Sodium Chloride 0.9% 100 ml 100 ML  
(0.9% Sodium Chloride 100 ml Bag)  
Koppa 500 MG  
(Levetiracetam 500 mg/5 ml Vial)  
420 Mls/HR IVB Every twelve hours  
Comments: SEND ONE DOSE NOW  
RX #: 002284450

11/23/22 0835 Infusion In Progress 0835 RMOJRS: Started/Running, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 105 mls, Site:  
Queries  
Cumulative Dose: 7500 Cumulative Intake (Rx): 1575 Container Volume: 105  
Cumulative Elapsed Time (minutes): 6h 32m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0  
0847 Transaction Rule PHABRCJOB  
NBDI WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 12/01/22 0835: REP500I Amount Wasted: 0 MG; Drug Waste\$: 0  
0847 Transaction Rule PHABRCJOB  
NBDI WASTE - Medicare Waste  
Description: Debit Svc Dr/Tm 12/01/22 0835: NS100 Amount Wasted: 0 ML; Drug Waste\$: 0  
0850 Infusion In Progress 0850 RMOJRS: Infused, Dose Rate: / Rate: 0 Mls/HR  
Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: 8000 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 1680  
Container Volume: 0 Cumulative Elapsed Time (minutes): 6h 47m Increase/Decrease: Infused  
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0  
0900 RMOJRS at 0835 GAVE: 420 Mls/HR  
Barcode Medication: Koppa  
NDC/DIN: 67457079005 (SOURCE: Default NDCCs)  
Barcode Medication: Sodium Chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCCs)  
Admin Queries  
Cumulative Dose: 7500 Cumulative Intake (Rx): 1575 Container Volume: 105  
Cumulative Elapsed Time (minutes): 6h 32m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0  
2100 IAMPHEM at 2114 GAVE: 420 Mls/HR  
Barcode Medication: Koppa  
NDC/DIN: 67457079005 (SOURCE: Default NDCCs)  
Barcode Medication: Sodium Chloride 0.9% 100 ml  
NDC/DIN: 00338004918 (SOURCE: Default NDCCs)  
Admin Queries  
Cumulative Dose: 8000 Cumulative Intake (Rx): 1680 Container Volume: 105  
Cumulative Elapsed Time (minutes): 6h 47m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0  
2114 Infusion In Progress 2114 IAMPHEM: Started/Running, Dose Rate: / Rate: 420 Mls/HR  
Intake: / Cumulative Intake: / Container Volume: 105 mls, Site:  
Queries  
Cumulative Dose: 8000 Cumulative Intake (Rx): 1680 Container Volume: 105  
Cumulative Elapsed Time (minutes): 6h 47m Increase/Decrease: Started/Running  
Infusion Rate: 420 Waste Amount: 0  
2132 Infusion In Progress 2132 IAMPHEM: Infused, Dose Rate: / Rate: 0 Mls/HR

DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046  
 Medication Discharge Summary  
 Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 12/01/22 to 0659 12/02/22 (continued)	

Intake: 105 mls, Cumulative Intake: 105 mls, Container Volume: 0 mls, Site:	
Queries	
Cumulative Dose: 8500 Cumulative Intake (bag): 105 Cumulative Intake (Rx): 1785	
Container Volume: 0 Cumulative Elapsed Time (minutes): 7h 5m Increase/Decrease: Infused	
Infusion Intake: 105 Infusion Rate: 0 Waste Amount: 0	
2136 Transaction Rule PHABRC0B	
MEDI.WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 12/01/22 2114: KEP500I Amount Wasted: 0 MG; Drug Waste%: 0	
2136 Transaction Rule PHABRC0B	
MEDI.WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 12/01/22 2114: NS100 Amount Wasted: 0 MG; Drug Waste%: 0	

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
 (0.9% Sodium Chloride 100 ml MINI-Bag)  
 Zosyn 4.5 GM  
 (Piperacillin/Tazobactam 4.5 gm Vial)  
 25 Mls/HR TYPE Q8H  
 RX #: Q02285170

11/24/22 0835 Infusion In Progress 0835 RMOORS: Started/Running, Dose Rate: , Rate: 25 Mls/HR	
12/04/22 Intake: , Cumulative Intake: , Container Volume: 100 mls, Site:	
Queries	
Cumulative Dose: 90 Cumulative Intake (Rx): 2000 Container Volume: 100	
Cumulative Elapsed Time (minutes): 3d 10h 50m Increase/Decrease: Started/Running	
Infusion Rate: 25 Waste Amount: 0	
0847 Transaction Rule PHABRC0B	
MEDI.WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 12/01/22 0835: NS100HB Amount Wasted: 0 ML; Drug Waste%: 0	
0847 Transaction Rule PHABRC0B	
MEDI.WASTE - Medicare Waste	
Description: Debit Svc Dc/Tm 12/01/22 0835: 20845I Amount Wasted: 0 GM; Drug Waste%: 0	
0900 RMOORS at 0835 GAVE: 25 Mls/HR	
Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag	
NDC/DIN: 0033805518 (SOURCE: Default NDCs)	
Barcode Medication: Zosyn	
NDC/DIN: 00781311495 (SOURCE: Default NDCs)	
Admin Queries	
Cumulative Dose: 90 Cumulative Intake (Rx): 2000 Container Volume: 100	
Cumulative Elapsed Time (minutes): 3d 10h 50m Increase/Decrease: Started/Running	
Infusion Rate: 25 Waste Amount: 0	
1240 Infusion In Progress 1240 RMOORS: Infused, Dose Rate: , Rate: 0 Mls/HR	
Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:	
Queries	
Cumulative Dose: 94.5 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 2100	
Container Volume: 0 Cumulative Elapsed Time (minutes): 3d 14h 55m Increase/Decrease:	
Infused Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0	
1659 Discontinue RENEW STOP	
1712 Acknowledged Order RMOORS	

DATE: 12/03/22 @ 0013  
USER: PHABKJOB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 12/01/22 to 0659 12/02/22 (continued)	

**Vancomycin per Pharmacy (Vancomycin - Dosed by PHN)**  
1 EACH MISCELLANEOUS PER PROTOCOL  
Comments: All initial dosing and adjustments are managed by pharmacy protocols. Please contact pharmacy for any concerns.  
RX #: 002285168

11/24/22 1229 Discontinue RENEW STOP  
1232 Acknowledged Order RAMOIRS

**Sodium Chloride 0.45 % 1,000 ML (0.45% Sodium Chloride 1,000 mL Bag)**  
50 MLS/HR IV .020H  
RX #: 0022868593

11/29/22 0758 Infusion In Progress 0758 RAMOIRS: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 466.667 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
4000 Container Volume: 0 Cumulative Elapsed Time (minutes): 70h 49m Increase/Decrease:  
Infused Intake: 466.667 Infusion Rate: 0 Waste Amount: 0

**Dextrose 5% 1,000 ML (Dextrose 5% 1,000 mL Bag)**  
75 MLS/HR IV .013H20M  
RX #: 002291621

11/28/22 0756 Infusion In Progress 0756 RAMOIRS: Infused, Dose Rate: / Rate: 0 MLS/HR  
Intake: 970 mls, Cumulative Intake: 1000 mls, Container Volume: 0 mls, Site:  
Queries  
Cumulative Dose: Not Applicable Cumulative Intake (bag): 1000 Cumulative Intake (Rx):  
1000 Container Volume: 0 Cumulative Elapsed Time (minutes): 24h Increase/Decrease: Infused  
Infusion Intake: 970 Infusion Rate: 0 Waste Amount: 0

**Dabap (Desmopressin 40 mcg/10 mL Vial)**  
2 MCG IV--Push TWICE A DAY  
RX #: 002293577

11/29/22 1000 RAMOIRS at 1129 GAVE: 2 MCG  
Barcode Medication: Dabap  
NDC/DIN: 62756052940 (SOURCE: Default NDCs)  
1133 Transaction Rule PHABKJOB  
MED1.WASTE - Medicare Waste  
Description: Debit Svc DC/Tm 12/01/22 1129: DDAIL0 Amount Wasted: 38 MCG; Drug Waste%:  
95  
2100 IAMPBRN at 2114 GAVE: 2 MCG  
Barcode Medication: Dabap  
NDC/DIN: 62756052940 (SOURCE: Default NDCs)  
2136 Transaction Rule PHABKJOB  
MED1.WASTE - Medicare Waste  
Description: Debit Svc DC/Tm 12/01/22 2114: DDAIL0 Amount Wasted: 38 MCG; Drug Waste%:  
95



DATE: 12/03/22 @ 0013  
 USER: PHABRC0B

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22  
 Name Lyons, Kathleen A  
 Unit Num MR01483046

Medication Discharge Summary

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/	STOP/
0700 12/01/22 to 0659 12/02/22 (continued)		

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
 (0.9% Sodium Chloride 100 ml MINI-Bag)  
 Zosyn 4.5 GM  
 (Piperacillin/Tazobactam 4.5 gm Vial)  
 25 Mls/HR IVPB Q8H  
 Total Bags: 12 (2 of 12 Given)  
 Comments: TOTAL 10 DAYS OF THERAPY PER MD (STARTED  
 11/24/22)  
 RX #: Q02298710

12/01/22	1712	Acknowledged Order RANOTES
12/05/22	1717	Edit or Verification ZPRA.SUP
	1717	Edit or Verification ZPRA.SUP
	1746	Infusion In Progress 1746 RANOTES: Started, Dose Rate: / Rate: 25 Mls/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
		Queries
		Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: started
		Infusion Rate: 25 Waste Amount: 0
	1749	Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 12/01/22 1746: NS100MB Amount Wasted: 0 Ml; Drug Waste%: 0
	1749	Transaction Rule PHABRC0B
		MEDI.WASTE - Medicare Waste
		Description: Debit Svc Dr/Tm 12/01/22 1746: 20845t Amount Wasted: 0 GM; Drug Waste%: 0
	1800	RANOTES at 1746 GAVE: 25 Mls/HR
		Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag
		NDC/DIN: 00380655318 (SOURCE: Default NDCs)
		Barcode Medication: Zosyn
		NDC/DIN: 00781311495 (SOURCE: Default NDCs)
		Admin Queries
		Container Volume: 100 Cumulative Elapsed Time (minutes): 0m Increase/Decrease: Started
		Infusion Rate: 25 Waste Amount: 0
	2146	Infusion In Progress 2146 LAMPHEN: Infused, Dose Rate: / Rate: 0 Mls/HR
		Intake: 100 mls, Cumulative Intake: 100 mls, Container Volume: 0 mls, Site:
		Queries
		Cumulative Dose: 4.5 Cumulative Intake (bag): 100 Cumulative Intake (Rx): 100
		Container Volume: 0 Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Infused
		Infusion Intake: 100 Infusion Rate: 0 Waste Amount: 0
	0200	LAMPHEN at 0243 GAVE: 25 Mls/HR
		Barcode Medication: 0.9% Sodium Chloride 100 ml MINI-Bag
		NDC/DIN: 00380655318 (SOURCE: Default NDCs)
		Barcode Medication: Zosyn
		NDC/DIN: 00781311495 (SOURCE: Default NDCs)
		Admin Queries
		Cumulative Dose: 4.5 Cumulative Intake (Rx): 100 Container Volume: 100
		Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: Started/Running Infusion Rate:
		25 Waste Amount: 0
	0243	Infusion In Progress 0243 LAMPHEN: Started/Running, Dose Rate: / Rate: 25 Mls/HR
		Intake: / Cumulative Intake: / Container Volume: 100 mls, Site:
		Queries
		Cumulative Dose: 4.5 Cumulative Intake (Rx): 100 Container Volume: 100
		Cumulative Elapsed Time (minutes): 4h 0m Increase/Decrease: started/Running Infusion Rate:
		25 Waste Amount: 0

DATE: 12/03/22 @ 0013  
 USER: PHARMCIOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 12/01/22 to 0659 12/02/22 (continued)		

0259	Transaction Rule PHARMCIOB	
	MBDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 12/02/22 0243: NS100MB Amount Wasted: 0 MT; Drug Waste%: 0	
0259	Transaction Rule PHARMCIOB	
	MBDI.WASTE - Medicare Waste	
	Description: Debit Svc Dc/Tm 12/02/22 0243: 20845T Amount Wasted: 0 GM; Drug Waste%: 0	

11/28/22 1800 Infusion In Progress: 1800 RAMOJES: Infused. Dose Rate: 0 MG/HR, Rate: 0 MLS/HR  
 Intake: 167.916 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
 Queries  
 Cumulative Dose: 25 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 250  
 Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 3h 15m  
 Increase/Decrease: Infused Infusion Intake: 167.916 Infusion Rate: 0 Waste Amount: 0  
 RX #: 002284436  
 Protect from light

11/28/22 0759 Infusion In Progress: 0759 RAMOJES: Infused. Dose Rate: 0 MCG/KG/MIN, Rate: 0 MLS/HR  
 Intake: 177.648 mls, Cumulative Intake: 250 mls, Container Volume: 0 mls, Site:  
 Queries  
 Cumulative Dose: 15.5661 Cumulative Intake (bag): 250 Cumulative Intake (Rx): 466.452  
 Container Volume: 0 Dose Rate: 0 Cumulative Elapsed Time (minutes): 5h 34m  
 Increase/Decrease: Infused Infusion Intake: 177.648 Infusion Rate: 0 Waste Amount: 0  
 Conc. = 32mcg/ml  
 Protect from light  
 RX #: 002293108

DATE: 12/03/22 @ 0013  
USER: PHARGT08

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP/
0700 12/01/22 to 0659 12/02/22 (continued)	STAGE	

Sodium Chloride 0.9% 250 ml 242 ML  
(0.9% Sodium Chloride 250 ml Bag)

Levophed 8 MG

(Norepinephrine 4 mg/4 ml vial)

7.875 MLS/HR IV TITRATE/ERN

PRN Reason: BP Support (See Protocol)

Comments: \*\*IN NS\*\*

Conc. = 32mcg/ml

Protect from Light

Rx #: Q02296175

11/30/22	0700	Infusion In Progress	0700 RAMOJRS	Running	Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR
					Intake: 7.875 mls, Cumulative Intake: 141.75 mls, Container Volume: 108.25 mls, Site:
				Queries	
				Cumulative Dose: 4.536 Cumulative Intake (bag): 141.75 Cumulative Intake (Rx): 141.75	
				Container Volume: 108.25 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 18h 0m	
				Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0	
				Edt Infusion 0700 RAMOJRS Action - From: Running To: Running	
				Intake - From: 94.5 mls To: 7.875 mls	
				Old Queries:	
				New Queries:	
				Infusion Intake: 7.875	
				0800 Infusion In Progress 0800 RAMOJRS: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	
				Intake: 7.875 mls, Cumulative Intake: 149.625 mls, Container Volume: 100.375 mls, Site:	
				Queries	
				Cumulative Dose: 4.788 Cumulative Intake (bag): 149.625 Cumulative Intake (Rx): 149.625	
				Container Volume: 100.375 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 19h 0m	
				Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0	
				0900 Infusion In Progress 0900 RAMOJRS: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	
				Intake: 7.875 mls, Cumulative Intake: 157.5 mls, Container Volume: 92.5 mls, Site:	
				Queries	
				Cumulative Dose: 5.04 Cumulative Intake (bag): 157.5 Cumulative Intake (Rx): 157.5	
				Container Volume: 92.5 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 20h 0m	
				Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0	
				1000 Infusion In Progress 1000 RAMOJRS: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	
				Intake: 7.875 mls, Cumulative Intake: 165.375 mls, Container Volume: 84.625 mls, Site:	
				Queries	
				Cumulative Dose: 5.292 Cumulative Intake (bag): 165.375 Cumulative Intake (Rx): 165.375	
				Container Volume: 84.625 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 21h 0m	
				Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0	
				1100 Infusion In Progress 1100 RAMOJRS: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	
				Intake: 7.875 mls, Cumulative Intake: 173.25 mls, Container Volume: 76.75 mls, Site:	
				Queries	
				Cumulative Dose: 5.544 Cumulative Intake (bag): 173.25 Cumulative Intake (Rx): 173.25	
				Container Volume: 76.75 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 22h 0m	
				Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0	
				1200 Infusion In Progress 1200 RAMOJRS: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	
				Intake: 7.875 mls, Cumulative Intake: 181.125 mls, Container Volume: 68.875 mls, Site:	
				Queries	
				Cumulative Dose: 5.796 Cumulative Intake (bag): 181.125 Cumulative Intake (Rx): 181.125	
				Container Volume: 68.875 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 23h 0m	
				Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0	
				1300 Infusion In Progress 1300 RAMOJRS: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR	

DATE: 12/03/22 @ 0013  
USER: PHARGOIB

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons Kathleen A

Unit Num MR01483046

Account Num QH0054940416

ADMINISTRATION PERIOD:  
0700 12/01/22 to 0659 12/02/22 (continued)

START/ STOP	
	Intake: 7.875 mls, Cumulative Intake: 189 mls, Container Volume: 61 mls, Site:
	Queries
	Cumulative Dose: 6.048 Cumulative Intake (bag): 189 Cumulative Intake (Rx): 189
	Container Volume: 61 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 24h 0m
	Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0
	1400 Infusion In Progress 1400 RAMOJES: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR
	Intake: 7.875 mls, Cumulative Intake: 196.875 mls, Container Volume: 53.125 mls, Site:
	Queries
	Cumulative Dose: 6.3 Cumulative Intake (bag): 196.875 Cumulative Intake (Rx): 196.875
	Container Volume: 53.125 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 25h 0m
	Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0
	1500 Infusion In Progress 1500 RAMOJES: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR
	Intake: 7.875 mls, Cumulative Intake: 204.75 mls, Container Volume: 45.25 mls, Site:
	Queries
	Cumulative Dose: 6.552 Cumulative Intake (bag): 204.75 Cumulative Intake (Rx): 204.75
	Container Volume: 45.25 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 26h 0m
	Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0
	1600 Infusion In Progress 1600 RAMOJES: Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR
	Intake: 7.875 mls, Cumulative Intake: 212.625 mls, Container Volume: 37.375 mls, Site:
	Queries
	Cumulative Dose: 6.804 Cumulative Intake (bag): 212.625 Cumulative Intake (Rx): 212.625
	Container Volume: 37.375 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 27h 0m
	Increase/Decrease: Running Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 0
	1700 Infusion In Progress 1700 RAMOJES: Infused, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR
	Intake: 7.875 mls, Cumulative Intake: 220.5 mls, Container Volume: 0 mls, Site:
	Queries
	Cumulative Dose: 7.056 Cumulative Intake (bag): 220.5 Cumulative Intake (Rx): 220.5
	Container Volume: 0 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 28h 0m
	Increase/Decrease: Infused Infusion Intake: 7.875 Infusion Rate: 7.875 Waste Amount: 29.5
	1711 RAMOJES at 1711 GAVE: 7.875 MLS/HR
	Barcode Medication: LevoPhed
	NDC/DIN: 36000016210 (SOURCE: Default NDCs)
	Barcode Medication: sodium Chloride 0.9% 250 ml
	NDC/DIN: 00338004902 (SOURCE: Default NDCs)
	Admin Queries
	Cumulative Dose: 7.056 Cumulative Intake (Rx): 220.5 Container Volume: 250 Dose Rate:
	0.04 Cumulative Elapsed Time (minutes): 28h 0m Increase/Decrease: Started/Running
	1711 Infusion In Progress 1711 RAMOJES: Started/Running, Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR
	Intake: , Cumulative Intake: , Container Volume: 250 mls, Site:
	Queries
	Cumulative Dose: 7.056 Cumulative Intake (Rx): 220.5 Container Volume: 250 Dose Rate:
	0.04 Cumulative Elapsed Time (minutes): 28h 0m Increase/Decrease: Started/Running
	Intake: 7.875 Waste Amount: 0

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This document is part of the legal medical record.



DATE: 12/03/22 @ 0013  
 USER: PHARMCJOB

Citrus Valley \*Live\* - PHA  
 Medication Discharge Summary Report

12/03/22

Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/STOP	
0700 12/01/22 to 0659 12/03/22 (continued)		

1719 Transaction Rule PHARMCJOB		
MDI.WASTE - Medicare Waste		
Description: Debt Svc Dc/Tm 12/01/22 1711: LEV4I Amount Wasted: 0 MG; Drug Waste%: 0		
1719 Transaction Rule PHARMCJOB		
MDI.WASTE - Medicare Waste		
Description: Debt Svc Dc/Tm 12/01/22 1711: NS250 Amount Wasted: 8 ML; Drug Waste%: 3.2		
1800 Infusion In Progress 1800 RAMOJES: Running; Dose Rate: 0.04 MCG/KG/MIN, Rate: 7.875 MLS/HR		
Intake: 6.431 mls, Cumulative Intake: 6.431 mls, Container Volume: 243.569 mls, Site:		
Queries		
Cumulative Dose: 7.2618 Cumulative Intake (Bag): 6.431 Cumulative Intake (Rx): 226.931		
Container Volume: 243.569 Dose Rate: 0.04 Cumulative Elapsed Time (minutes): 28h 49m		
Increase/Decrease: Running Infusion Intake: 6.431 Infusion Rate: 7.875 Waste Amount: 0		

ADMINISTRATION PERIOD:	START/STOP	
0700 12/02/22 to 0659 12/03/22		

Route Change - PO to G-Tube - Per Pharmacy (PO to G-Tube - Rx Consult)  
 1 EACH MISCELLANEOUS PER PROTOCOL  
 Comments: PATIENT HAS REG1  
 RX #: 002279423

Synthroid (Letrothyroxine 112 mcg Tablet)  
 112 MCG G-TUBE DAILY before breakfast  
 RX #: 002279429

Pepcid (Famotidine 20 mg Tablet)  
 20 MG G-TUBE TWICE A DAY  
 Comments: IV TO NG PER PROTOCOL  
 RX #: 002279432

Sodium Chloride 0.9% 100 ml 100 ML  
 (0.9% Sodium Chloride 100 ml Bag)  
 Keppra 500 MG  
 (Levetiracetam 500 mg/5 ml Vial)  
 420 MLS/HR IVB Every twelve hours  
 Comments: SEND ONE DOSE NOW  
 RX #: 002284450

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USER: PHARGTOR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH005494016

ADMINISTRATION PERIOD:	START/	STOP
0700 12/03/22 to 0659 12/03/22 (continued)		

Dalavp (Desmopressin 40 mcg/10 ml Vial)  
2 MCC IV-Push TWICE A DAY  
RX #: 002293577

11/29/22 1000  
1008 Discontinue DISCHARGE

0.9% Sodium Chloride 100 ml MINI-Bag 100 ML  
(0.9% Sodium Chloride 100 ml MINI-Bag)  
Zosyn 4.5 GK  
(Piperacillin/Tazobactam 4.5 gm Vial)  
25 MLS/HR IVPB Q8H  
Total Bags: 12 (2 of 12 Given)  
Comments: TOTAL 10 DAYS OF THERAPY PER MD (STARTED  
11/24/22)  
RX #: 002298710

11/29/22 1000  
11/29/22 1000 Discontinue DISCHARGE

Dextrose 50% (Dextrose 50% 50 ml Syringe)  
50 ML IV-Push As Directed/PRN  
PRN Reason: See Comments  
Comments: Give if BS < 70 and/or patient has any altered level of  
consciousness  
RX #: 002219545

11/19/22 1008 Discontinue DISCHARGE

Dextrose 10% 250 ml 250 ML  
(Dextrose 10% 250 ml Bag)  
999 MLS/HR IV . Q1GM/PRN  
PRN Reason: Hypoglycemia [IV Backup]  
Comments: Run D10% 250 ml bag at 999 ml/hr per  
hypoglycemia protocol #IDP-19  
Give if BS < 70 and/or patient has any  
altered level of consciousness  
Give if BS < 50 after 2 oral CHO Treatments  
\*If Dextrose 50% Syringe unobtainable  
RX #: 002219546

11/19/22 1008 Discontinue DISCHARGE

DATE: 12/03/22 @ 0013  
USER: PHARGTOR

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP
0700 12/03/22 to 0659 12/03/22 (continued)	

Glucose 15 (Dextrose Gel 40% 1 each tube)  
1 EACH MUCOUS MEM PER PROTOCOL/PRN  
PRN Reason: Hypoglycemia  
Comments: 93.75 ml tube of Glucose 15 delivers 15 gms of glucose.  
Give if B8 < 70 with or without symptoms of hypoglycemia.  
RX #: Q02233226

Tylenol Liquid (Acetaminophen 650 mg/20.3 ml UCOP)  
650 MG G-TUBE Q6H/PRN  
PRN Reason: Pain or Fever (>100.4)  
RX #: Q02279425

Catapres (clonidine 0.1 mg Tablet)  
0.1 MG G-TUBE Q6H/PRN  
PRN Reason: sbp > 160  
Comments: LA/SA warning: this order is for clonidine(catapres)  
RX #: Q02279428

Sodium Chloride 0.9% 250 ml 240 ML  
(0.9% Sodium Chloride 250 ml Bag)  
Catapres 25 MG  
(Nifedipine 25 mg/10 ml vial)  
50 MLS/HR IV TITRATE/PRN  
PRN Reason: Hypertension  
Comments: Conc. = 0.1 mg/ml  
Protect from light  
RX #: Q02284436

Rivan (lorazepam 2 mg/ml Vial)  
2 MG IV-Push Every two hours/PRN  
PRN Reason: Seizures  
RX #: Q02284449

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DATE: 12/03/22 @ 0013  
USER: PHARGTOR

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Medication Discharge Summary Report

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Medication Discharge Summary

Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

ADMINISTRATION PERIOD:	START/STOP	
0700 12/02/22 to 0659 12/03/22 (continued)		

Novolog (Insulin Aspart 100 units/ml 10ml Vial) 11/25/22 1008 Discontinue DISCHARGE  
See Dose Ins. SUB-Q Q4H/PRN  
PRN Reason: Glucose Coverage  
RX #: 002286977

Sodium Chloride 0.9% 250 ml 242 ML 11/30/22 1008 Discontinue DISCHARGE  
(0.9% Sodium Chloride 250 ml Bag)  
Levophed 8 Mg  
(Norepinephrine 4 mg/4 ml Vial)  
7.875 ML/HR IV TITRATE/PRN  
PRN Reason: BP Support (See Protocol)  
Comments: \*\*IN NS\*\*  
Conc. = 32mcg/ml  
Protect from light  
RX #: 002296175

DATE: 12/03/22 @ 0013  
USER: PHABRG10B

Citrus Valley \*Live\* - PHA  
Medication Discharge Summary Report

12/03/22  
Name Lyons, Kathleen A  
Unit Num MR01483046

Medication Discharge Summary  
Account Num QH005494016

Legends

Reason Codes  
CSI - Current Bag Still Infusing  
HELD - Held for Procedure  
HYPOGLYC - Hypoglycemia  
HYPOTEN - Hypotension  
IVDC - IV Infiltrated or DC'd  
MDDC - MD DC'd Medication  
NPOIN - NPO Including Meds  
POU - Patient off Unit  
PRAM.PROF - Parameter/Protocol

Site Codes  
Abdomen  
Left Anterior Forearm  
Left Deltoid  
Left PosteroLateral Arm  
Right Deltoid  
Right PosteroLateral Arm

Administered By

USER: USER: Name/Type  
ABESANO - Robert Jr Abesano  
BENSSES - Jessica A Benson  
CORDOI - Olivia Cordeiro  
DOMIXAV - Xavier Ramiro Dominguez  
GARCIUA - Juan B Garcia  
HONGERA - Grace Hong  
KOVBLAT - Blair Koyanagi  
LANGDIA - Diana Lange  
LOPEANI - Monica Lopez  
MILLPHT - Phyllis C Mills  
NSC.TRN101 - CVMC Registry RN 101  
NSC.TRN16 - CVMC Registry RN 16  
NSC.TRN36 - CVMC Registry RN 36  
OAVDIAL - Lailaine Oandasan  
RAVITOA - Joann M Vandemark  
SAN CHE - Cheryl M San Juan  
THOMSON - Souva Thomas  
TRINROB - Robert J Trinidad  
WILSPAN - Katrina M Olivares

USER: USER: Name/Type  
ANAMARI - Mary Jurem Apa  
BOWDPIH - Phil Bowley-Williams  
DEIACVA - Vanessa Delacruz  
DONSERUR - Ruth Donke  
GORRUDA - Uma Gottrela  
IREALPU - Itumanya Iteacho  
LAHEMAR - Mary J Laher  
LESHARI - Shari Levy  
MACAJIN - Jennifer C Macasieb  
MONDUJR - Jyrelli Mondares  
NSC.TRN106 - CVMC Registry RN 106  
NSC.TRN209 - CVMC REGISTRY RN  
NSC.TRN69 - CVMC Registry RN 69  
ORDMCKT - Cristina Ordanza  
RAMOJES - Jessica Ramos  
SANDALO - Alondra Sandoval  
TINMDS - Desilee G Saqun  
UDSSJAY - Jay Bhavin Udeshi  
YEDONAL - Donald Ye

USER: USER: Name/Type  
BALERT - Erich D Bal  
CHEWKRI - Kristin Chow  
DEVEJUS - JUSTIN DEVERA  
EVALJUS - Justin Evalle  
GUBRILS - Lisette Guerrero  
KARRSAM - Samikshya Karhi Thapa  
LAMPHEN - Henry Lampareto  
LIMMICH - Michelle Kim  
MARHEL - Helen Mak  
MORLAND - Linda Muih  
NSC.TRN110 - CVMC Registry RN 110  
NSC.TRN213 - CVMC REGISTRY RN  
NSC.TRN7 - CVMC Registry RN 7  
PAUMRIC - Ricardo Palma, RN  
RAMAVAI - Jaime Rana  
SIRAPRI - Princess Sibai, RN  
TONGMAL - Malina Tong  
VENPAPAT - Arturo Ventura  
ZERNILAV - Laura M Zermeno

USER: USER: Name/Type  
BANSORI - Cristelle B Diamas  
CONTEIS - Elisa Contreras  
DIZONIE - Jeremy Dizon  
FERRRES - Jessalite Malaca  
HERRIEN - Lena Hernandez  
KIMROB - Jeongdo Kim  
LAMTHOA - Tho-Kim T Lam  
LOBERKAV - Kamille Lopez  
MARTPRI - Prigette Martinez  
NGUWICH - Michael Nguyen  
NSC.TRN131 - CVMC Registry RN 131  
NSC.TRN214 - CVMC REGISTRY RN  
NSC.TRN86 - CVMC Registry RN 86  
ELICBER - Bekezela Elich  
SALABRI - Brileanna Salataza  
TABLROZ - Roger Tablate  
TRANAMY - Amy Tran  
VILLIST - Seth Aaron Villada

Pharmacy

USER: USER: Name  
ANRAM - Ramhad Amani Yazdi, MD  
BENSSES - Jessica A Benson  
FERRRES - Jessalite Malaca  
GORRUDA - Uma Gottrela  
LAUTSAN - Tsang Lau, MD  
MARHEL - Helen Mak  
THONHUN - Hung Thong

USER: USER: Name  
AIRAM - Ramh Anirovin, MD  
CONTEIS - Elisa Contreras  
FITSCHR - Christophe P Fiske  
GOSRMAN - Mana Goshitasbi, MD  
LBERLIN - Erin Lee  
NGUWICH - Michael Nguyen  
FRANSE - Steven Tran

USER: USER: Name  
ARNOCCI - Clifton Landon Arnold  
DARGGO - George Dajkovich, NP  
GALC - Claudio H Gallego, MD  
JONHAR - Hartlene Joanno  
LEPHILL - Phillip H Le  
PHA.LTR - Ian P Tran  
VTCHEIS - Christina Anh Vu

USER: USER: Name  
BATANG - Angen Batou, DO  
DAMOUAN - Quang Nghi Dam  
GEUA - Arsalan Geula, MD  
LAHEMAR - Mary J Laher  
LOPEANI - Monica Lopez  
SYEDSHA - Shadi Syed, MD  
ZPHA.ANL - Anne Dieu

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This document is part of the legal medical record.

DATE: 12/03/22 @ 0013  
USER: PHABRG08

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Medication Discharge Summary Report

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Name Lyons, Kathleen A

Unit Num MR01483046

Account Num QH0054940116

Medication Discharge Summary

ZPHA.AS - Anita K Scheer  
ZPHA.DH - Diana S Hyun  
ZPHA.ID.S - Ilene K Gebur  
ZPHA.NGN - Nichelle G Nguyen  
ZPHA.ID - Thao Dao

ZPHA.BOB - Bouchara Bernichi  
ZPHA.GT - Genevieve N Truc  
ZPHA.GMW - Jennifer N Wright  
ZPHA.RJB - Robert Bearden

ZPHA.CL - Carol Shen  
ZPHA.HH - Hanh H Huynh  
ZPHA.KT - Karen Trinh  
ZPHA.SAR - Sandy A Knapp

ZPHA.DAV - David Yang  
ZPHA.IB - Ivy K Bweirga  
ZPHA.KY - Karen Villegas  
ZPHA.SUP - Suzanne Phong

Allergy History

DATE	TIME	USER	NAME	DATE	DATABASE	TYPE	ALLERGY
10/17/22	0805	Arnold	Suboc	FCM	New		No Known Allergies
10/17/22	1004	Yi, T	Nguyen	PHH	HCS		Acknowledge

NEW: User acknowledged allergy record in PHA.

This must be completed upon entry to unit/transferring from unit to unit/and at discharge. Please provide detailed inventory of the patient's belongings.  
 FPH  ICH  QVH  Hospice Date \_\_\_\_\_ Time \_\_\_\_\_

Item	Description/Amount	Hospital Safe	Sent home with (Name)	At Bedside	Patient Location at Time of Initial Inventory	Transferred to		Transferred to	
						By	Date	By	Date
Dentures - Upper	<input type="checkbox"/> Partial <input type="checkbox"/> Full								
Dentures - Lower	<input type="checkbox"/> Partial <input type="checkbox"/> Full								
Hearing Aid	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Both								
Classes									
Contact Lens									
Wallet									
Purse									
Money	Amount: _____								
Cell Phone									
Cell Phone Charger									
Computer/Pad									
Clothing	List: <u>Pants, Blouse, Sweater</u>								
Prosthesis									
Jewelry									
Keys									
Cane/Walker/Crutches									
Other									

**Release of Responsibility for Valuables and other belongings retained by the patient.**

I have been encouraged to have personal belongings sent home. I have been offered to place personal valuables, such as money, in the hospital's fireproof safe for safekeeping. I have been advised that items such as weapons, contraband, cigarettes, lighters, and medications (both prescribed and non-prescription) are not allowed in patient rooms. I understand and agree that the hospital is not liable for the loss or damage to any money, jewelry, documents, or other personal valuables that are not placed in the safe or brought in after admission.

Patient/Representative: \_\_\_\_\_ Printed Name: Kathleen Lyons Signature: [Signature] Date: 10-18-2022  
 Hospital Representative: \_\_\_\_\_ Printed Name: April Fountain RN Signature: [Signature] Date: 10-18-2022  
 I received the above listed items upon discharge: \_\_\_\_\_ Patient/Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Nurse discharging patient returned all belongings: \_\_\_\_\_ Date: \_\_\_\_\_

**Patient Information**

Patient Name \_\_\_\_\_  
 Unit # \_\_\_\_\_  
 D.O.B. \_\_\_\_\_



**PATIENT BELONGINGS INVENTORY DOWNTIME**



ITEMS

White - Chart Upon Discharge

Yellow - Patient Upon Discharge

40-198 (Rev. 3-20)

QH0054940416 LYONS,KATHLEEN,A MR01483046

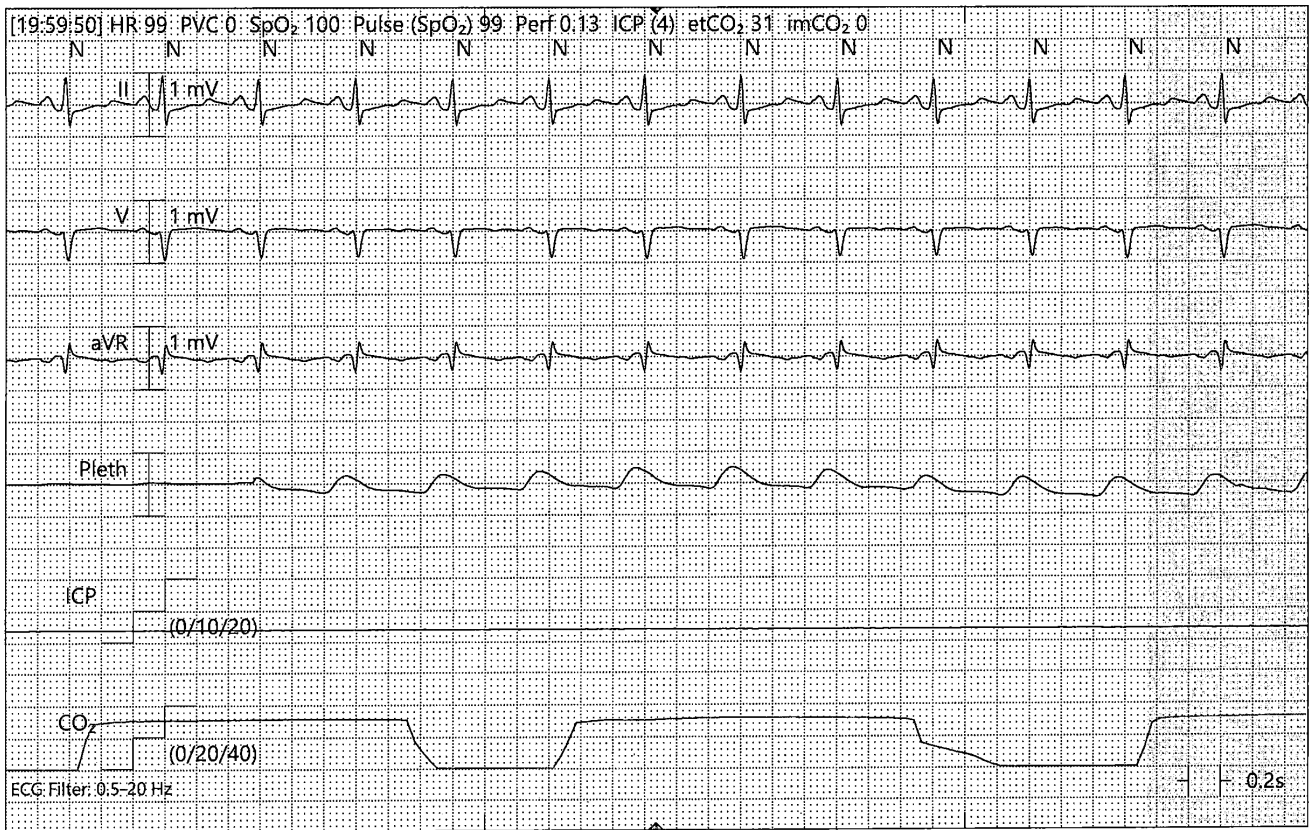
Patient Summary Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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Patient Name: LYONS, KATHLEEN, Lifetime Id: QH0054940416

Gender: Female	<b>Vitals: 20:04:53</b>
Age: 61 Years	HR 99 PVC 0 SpO <sub>2</sub> 99 Pulse (SpO <sub>2</sub> ) 99
Resuscitation: Unknown	Perf 0.11 ICP (9) etCO <sub>2</sub> 33 imCO <sub>2</sub> 0
Group: No Group	NBP Ongoing Pulse (NBP) Ongoing
Screen Notes: HYDROCEPHALUS	<b>Rhythm:</b> Sinus Rhythm
Screen Notes (2):	<b>Alarms:</b>
Location: ICU 7 MICU7	11/10/2022 19:59:50 Saved strip
Paced Mode: Off	11/10/2022 19:22:27 **ICPm 38 >20
Category: Adult	11/10/2022 16:20:35 **NBP 141 >140
	11/10/2022 16:14:37 * HR 121 >120
	11/10/2022 16:06:35 Saved strip



ICU	My Institution
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Printed on 11/10/2022 20:05:18

Page 1



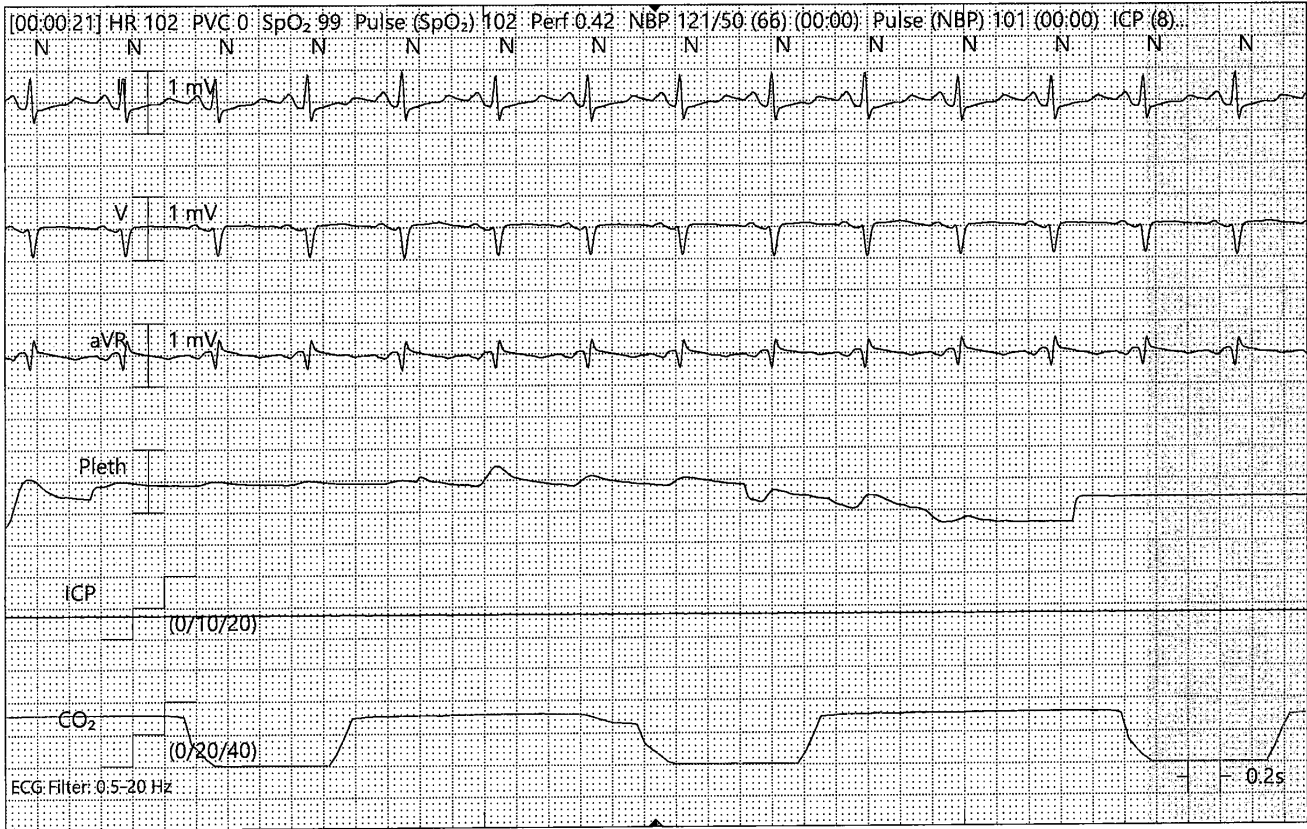
Patient Summary Report

ICU 7

LYONS, KATHLEEN QH0054940416

Patient Name: LYONS, KATHLEEN, Lifetime Id: QH0054940416

Gender: Female	<b>Vitals: 00:05:17</b>
Age: 61 Years	HR 100 PVC 0 SpO <sub>2</sub> 99 Pulse (SpO <sub>2</sub> ) 102
Resuscitation: Unknown	Perf 0.48 ICP (8) etCO <sub>2</sub> 33 imCO <sub>2</sub> 0
Group: No Group	NBP 121/50 (66) (00:00) Pulse (NBP) 101 (00:00)
Screen Notes: HYDROCEPHALUS	<b>Rhythm: Sinus Tach</b>
Screen Notes (2):	<b>Alarms:</b>
Location: ICU 7 MICU7	11/11/2022 00:00:21 Saved strip
Paced Mode: Off	11/10/2022 23:00:22 **NBP 141 >140
Category: Adult	11/10/2022 19:59:50 Saved strip
	11/10/2022 19:22:27 **ICPm 38 >20
	11/10/2022 16:20:35 **NBP 141 >140



ICU My Institution

Printed on 11/11/2022 00:05:18

Page 1

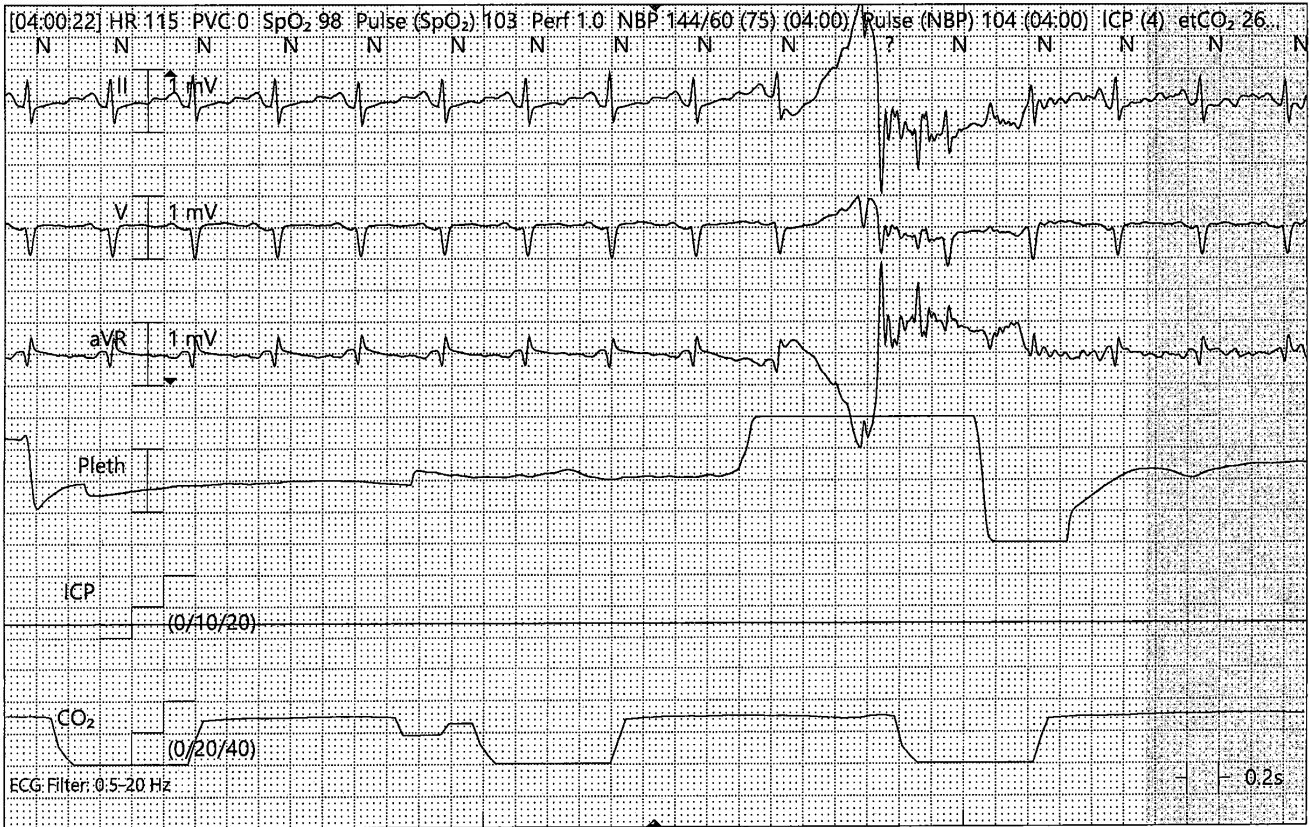
Patient Summary Report

ICU 7

LYONS, KATHLEEN QH0054940416

Patient Name: LYONS, KATHLEEN, Lifetime Id: QH0054940416

Gender: Female	<b>Vitals: 04:05:10</b>
Age: 61 Years	HR 107 PVC 2 SpO <sub>2</sub> 98 Pulse (SpO <sub>2</sub> ) 107
Resuscitation: Unknown	Perf 1.1 ICP (4) etCO <sub>2</sub> 32 imCO <sub>2</sub> 0
Group: No Group	NBP 144/60 (75) (04:00) Pulse (NBP) 104 (04:00)
Screen Notes: HYDROCEPHALUS	<b>Rhythm: Sinus Tach</b>
Screen Notes (2):	<b>Alarms:</b>
Location: ICU 7 MICU7	11/11/2022 04:01:20 * HR 121 >120
Paced Mode: Off	11/11/2022 04:00:51 **NBP 144 >140
Category: Adult	11/11/2022 04:00:22 Saved strip
	11/11/2022 03:45:49 **NBP 151 >140
	11/11/2022 03:00:52 **NBP 142 >140



ICU My Institution

Printed on 11/11/2022 04:05:18

Page 1



Strip Report  
LYONS, KATHLEEN

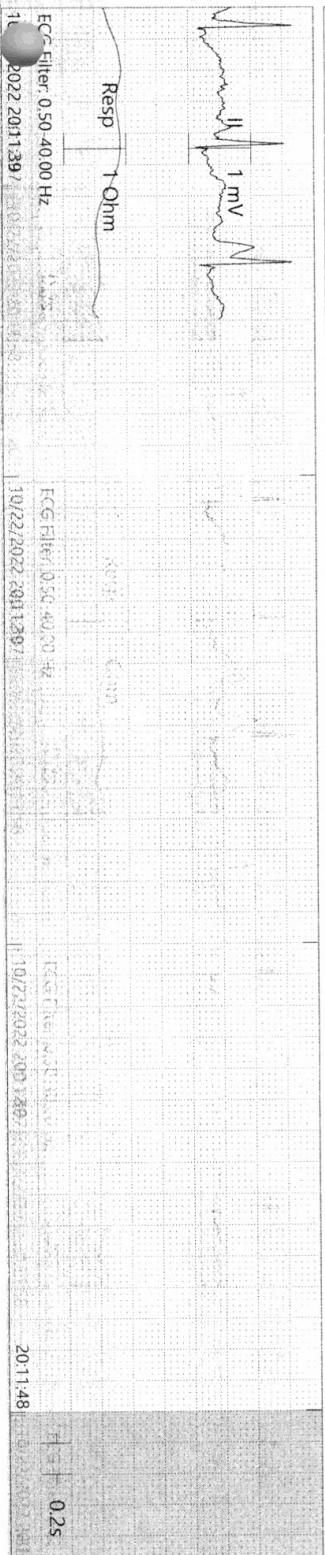
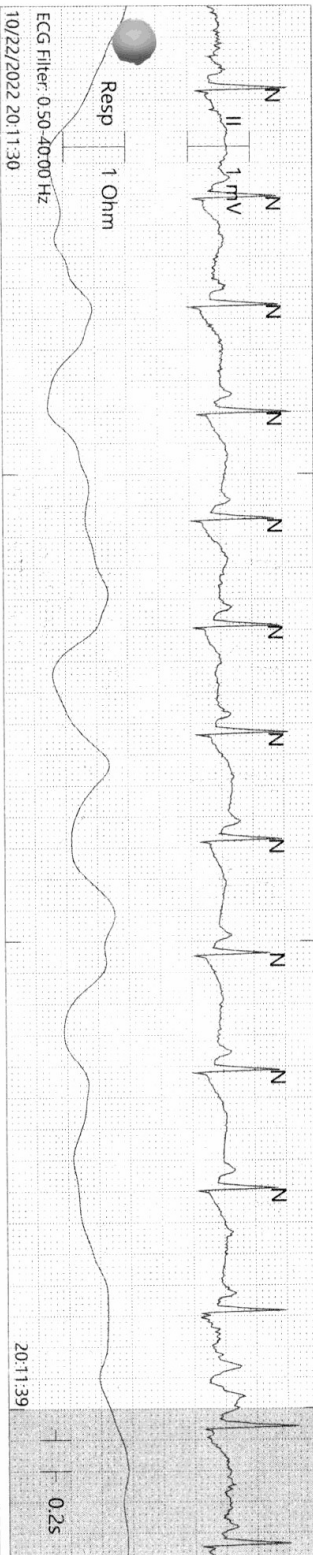
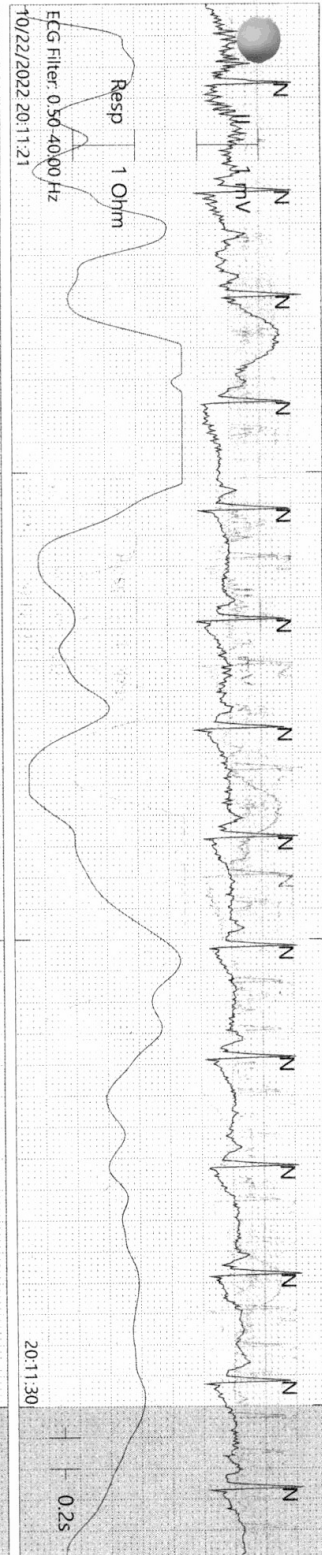
QH0054940416

605B

Vitals:  
HR 86

PVC 0

RR 19



Strip Report

ICU 7

10/26/2022 20:49:50

LYONS, KATHLEEN

QH0054940416

**Vitals:**

HR 86

PVC 0

SpO<sub>2</sub> 100

Pulse (SpO<sub>2</sub>) 77

Perf 0.61

ICP (6)

RR 23



ICU My Institution

Printed on 10/26/2022 21:33:56

Page 1 of 5

QH0054940416 LYONS,KATHLEEN,A MR01483046



Strip Report

ICU 7

11/25/2022 19:59:11

LYONS, KATHLEEN

QH0054940416

**Vitals:**

HR 100

PVC 0

SpO<sub>2</sub> 95

Pulse (SpO<sub>2</sub>) 100

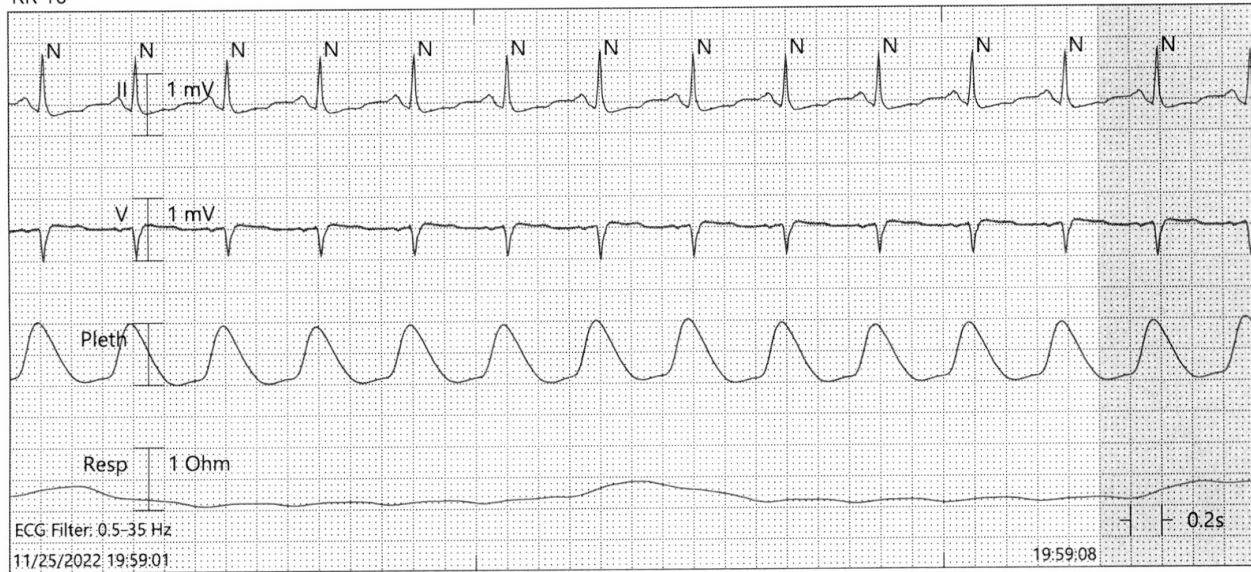
Perf 3.5

etCO<sub>2</sub> 35

imCO<sub>2</sub> 0

awRR 18

RR 16



ICU My Institution

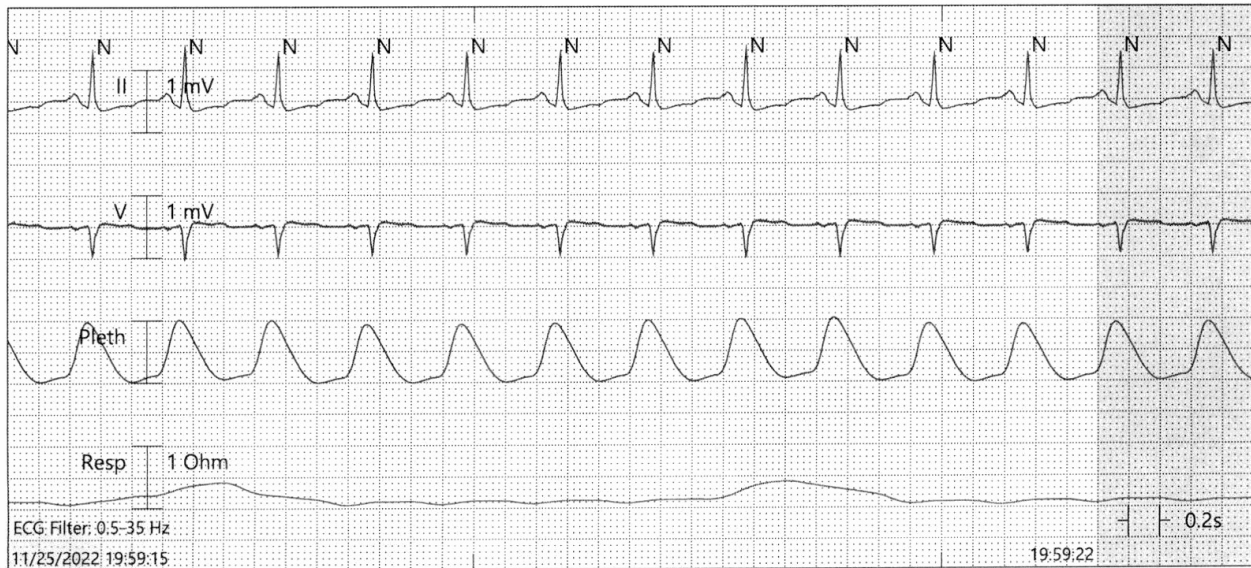
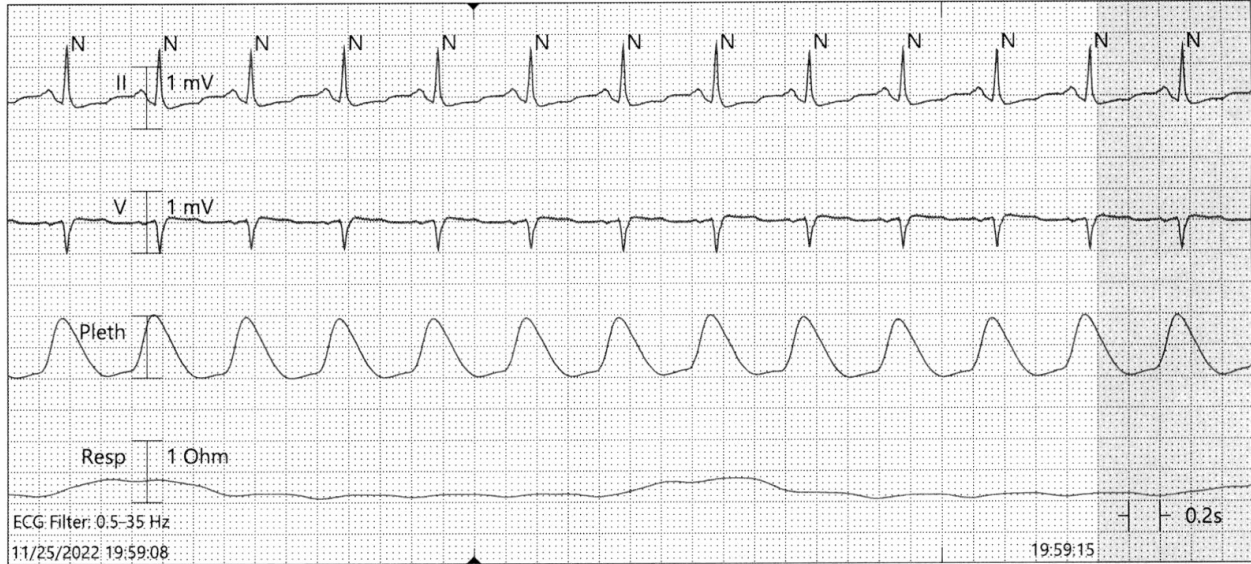
Printed on 11/26/2022 04:53:45

Page 1 of 3

QH0054940416 LYONS,KATHLEEN,A MR01483046

LYONS, KATHLEEN

QH0054940416



Strip Report

ICU 7

11/25/2022 19:59:11

LYONS, KATHLEEN	QH0054940416	
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**Vitals:**

HR 100

PVC 0

SpO<sub>2</sub> 95

Pulse (SpO<sub>2</sub>) 100

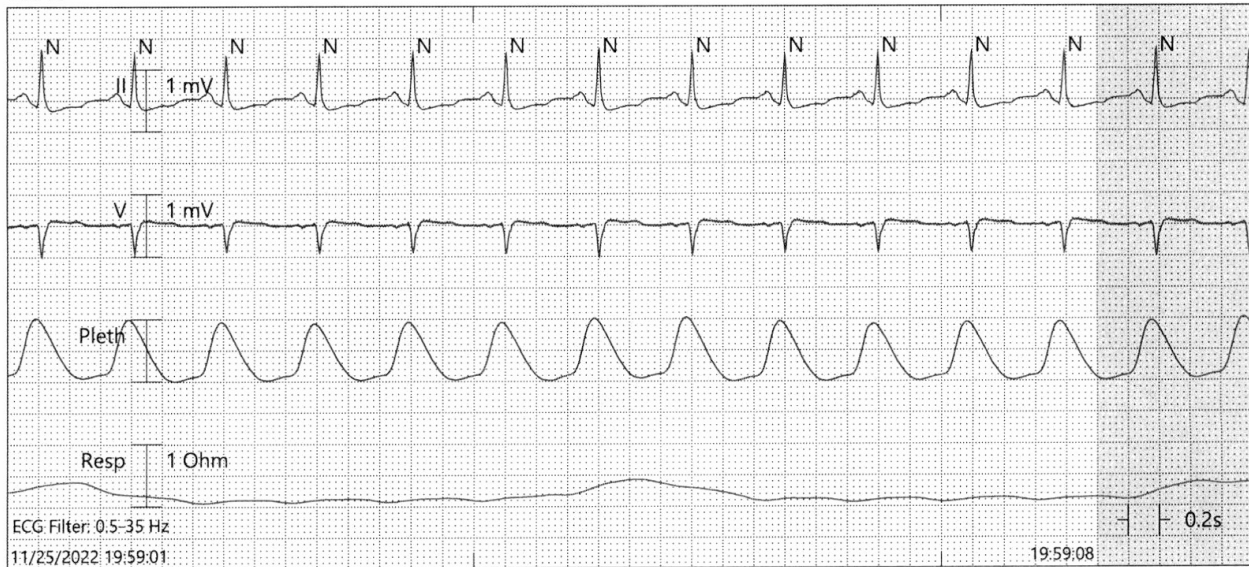
Perf 3.5

etCO<sub>2</sub> 35

imCO<sub>2</sub> 0

awRR 18

RR 16



	ICU	My Institution
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Printed on 11/26/2022 04:53:45

Page 1 of 3

QH0054940416 LYONS,KATHLEEN,A MR01483046

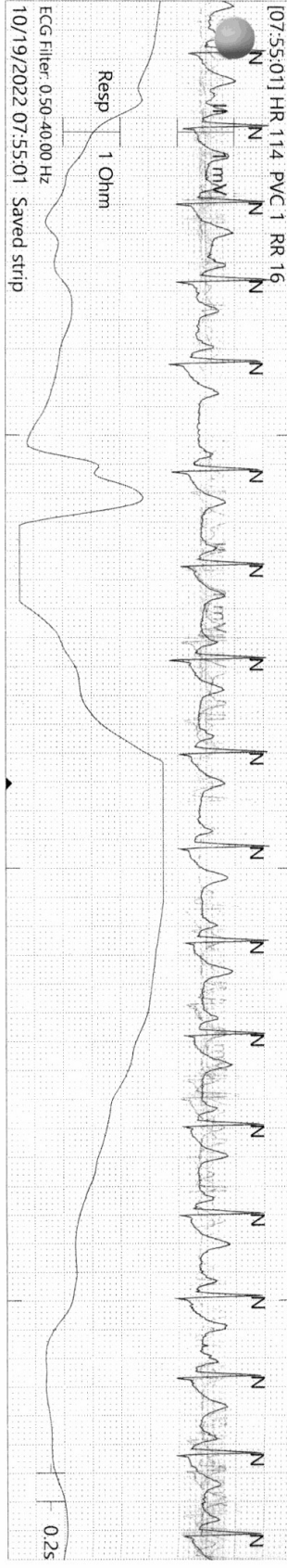


Alarm Review Report  
LYONS, KATHLEEN

QH0054940416

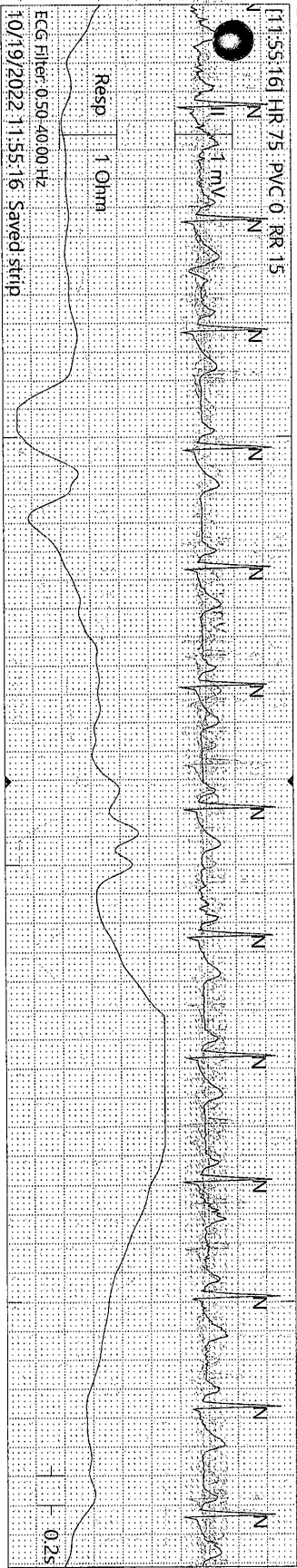
605B

ECG source: 6TELE11



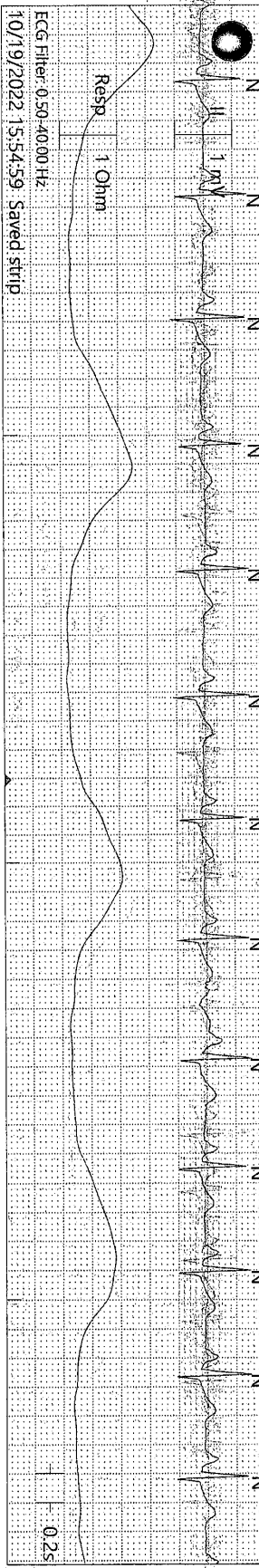
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[11:55:16] HR 75 PVC 0 RR 15

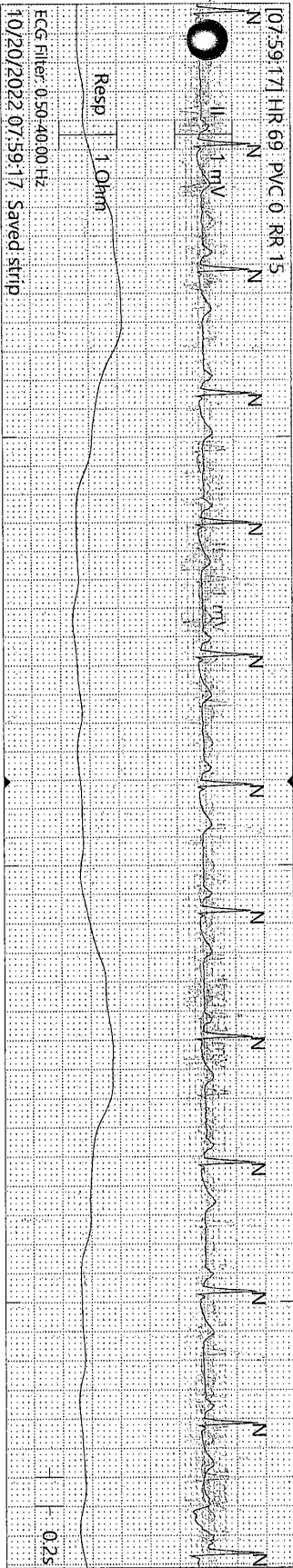


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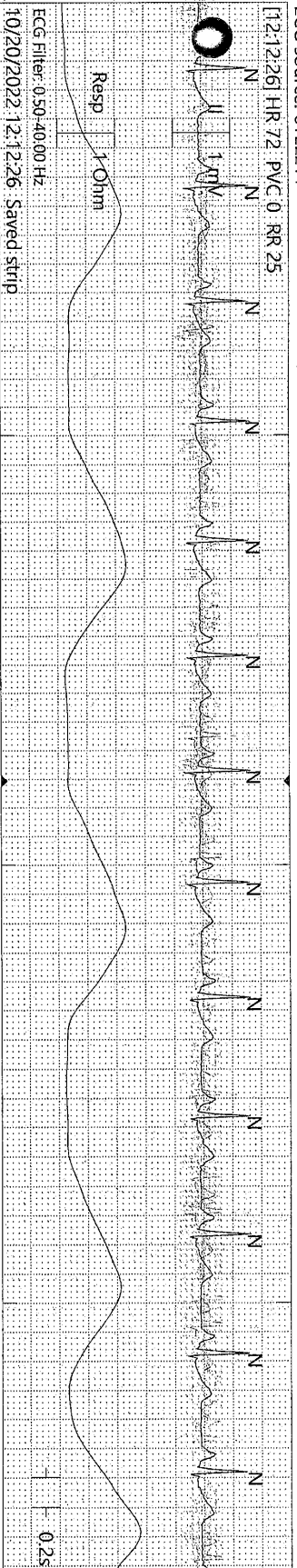
[15:54:59] HR: 78 PVC: 0 RR: 22



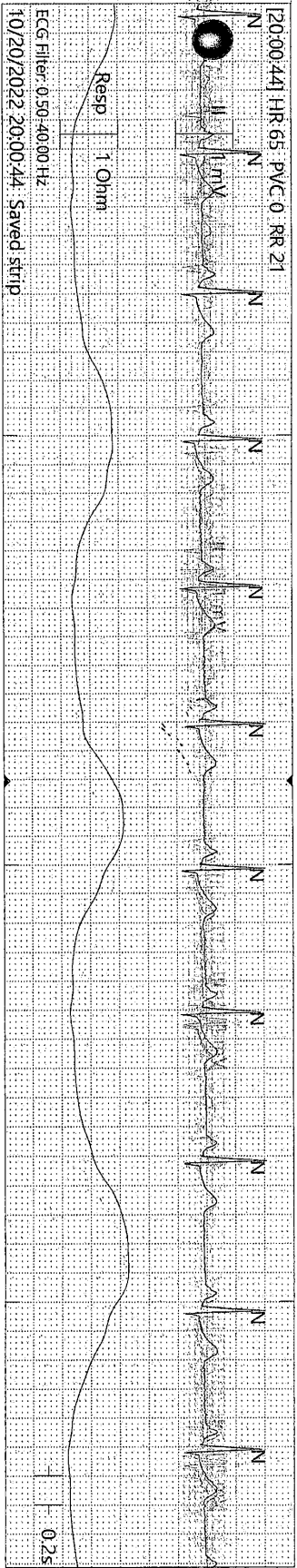
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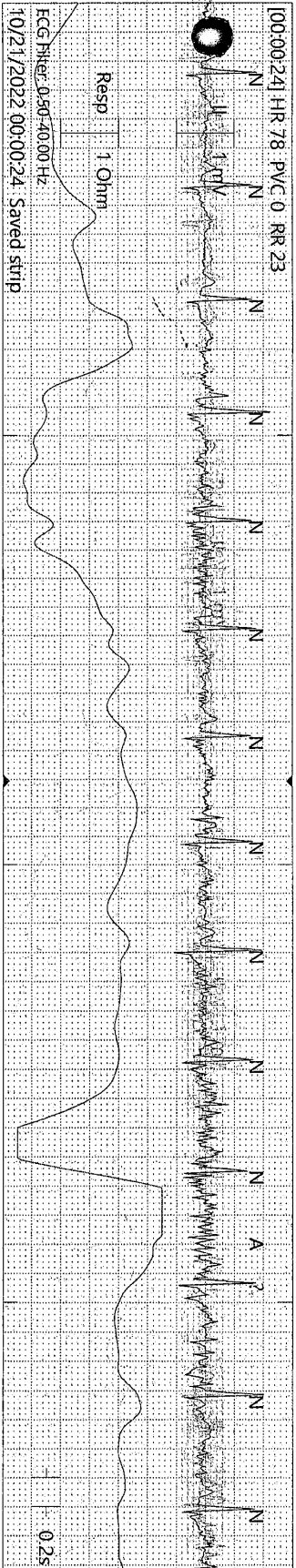
ECG source: 6TELE11



ECG source: 6TELE1

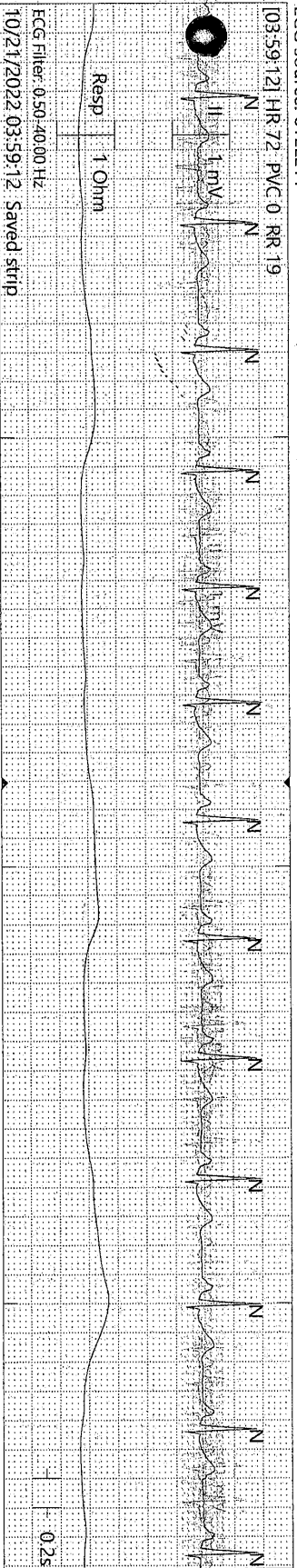


ECG source: 6TELE11



ECG source: 6TELE1

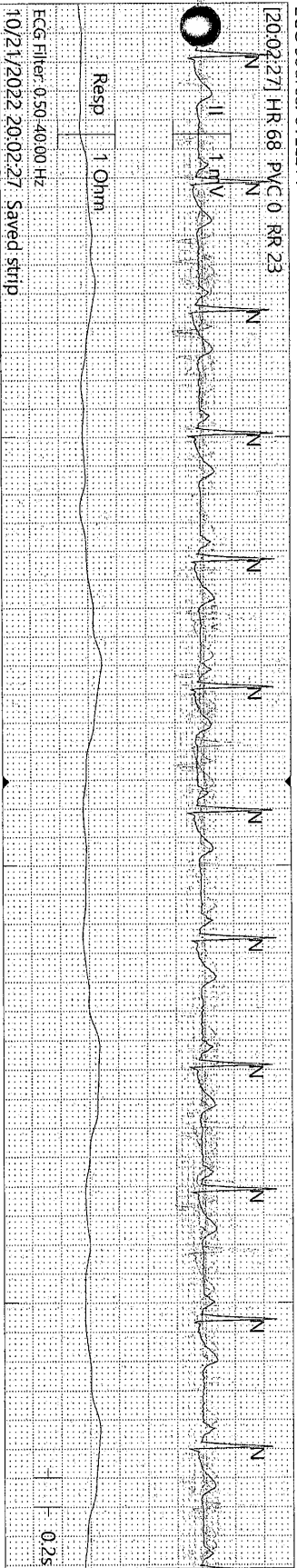
103:59:12| HR:72 PVC:0 RR:19





ECG source: 6TELE1

[20:02:27] HR 68 PVC 0 RR 23



Alarm Review Report

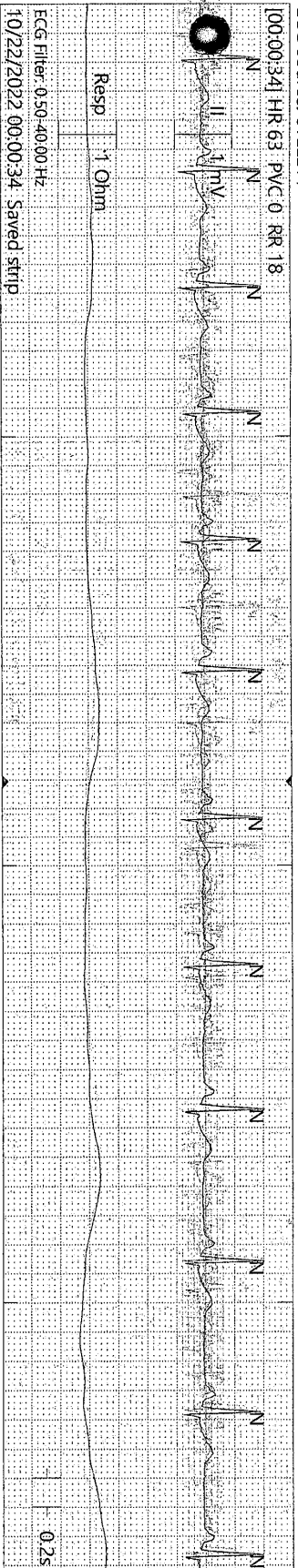
LYONS, KATHLEEN

QH0054940416

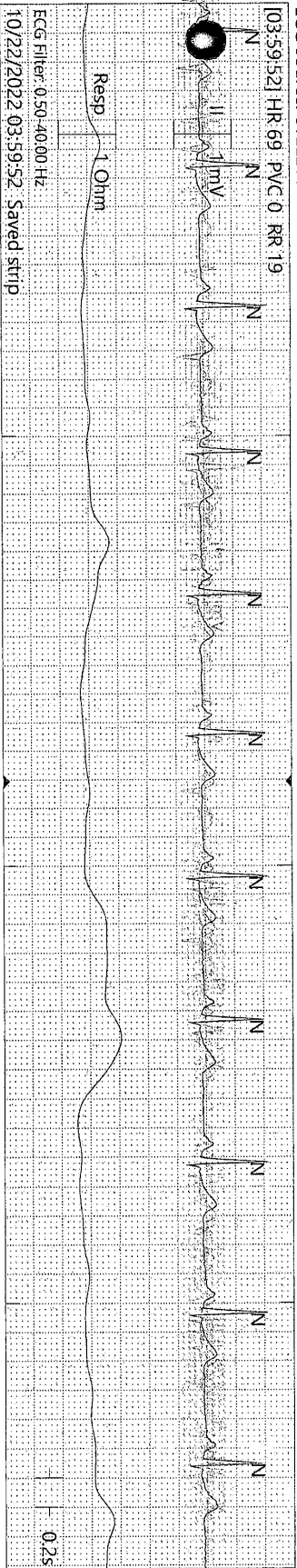
605B

ECG source: 6TELE1

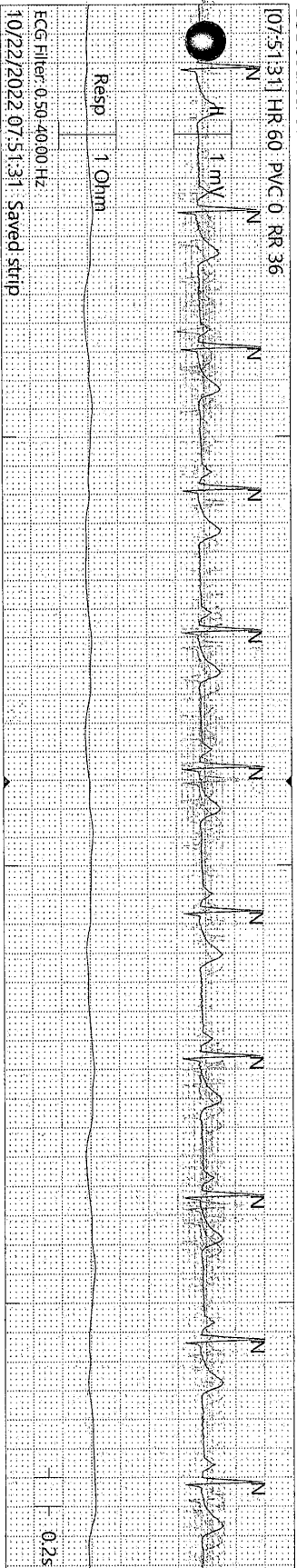
[00:00:34] HR: 63 PVC: 0 RR: 18



ECG source: 6TELE11



ECG source: 6TELE11

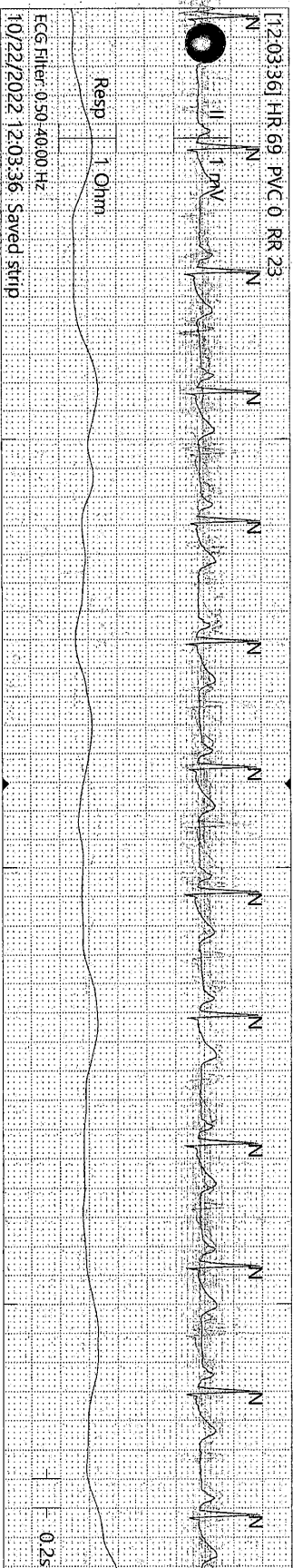


0.14  
 0.00  
 0.40

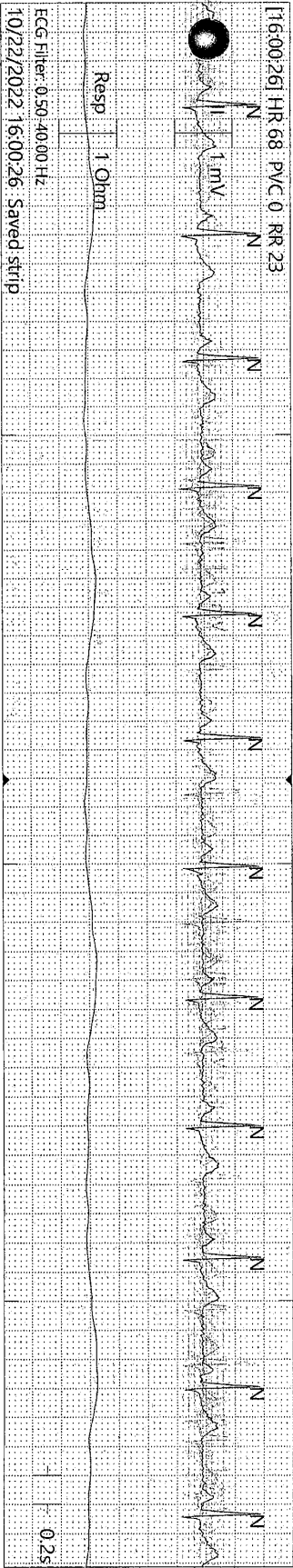
LYONS, KATHLEEN

QH0054940416

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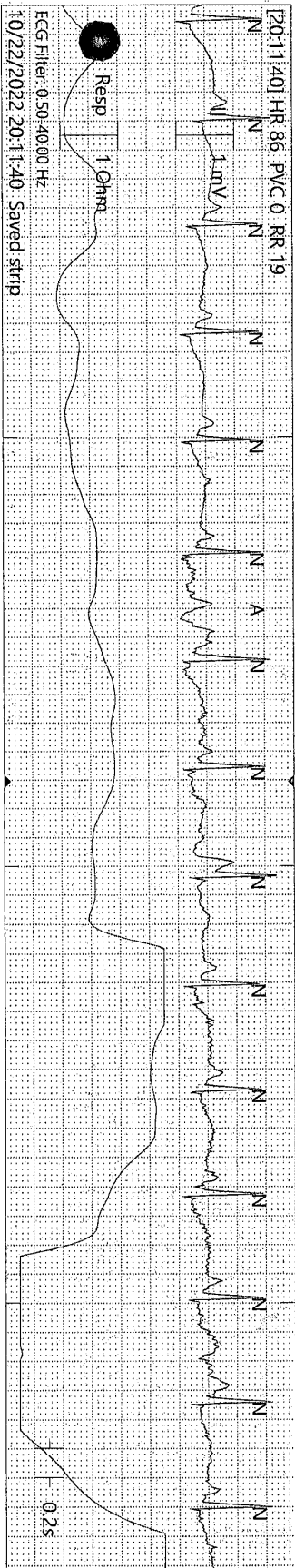
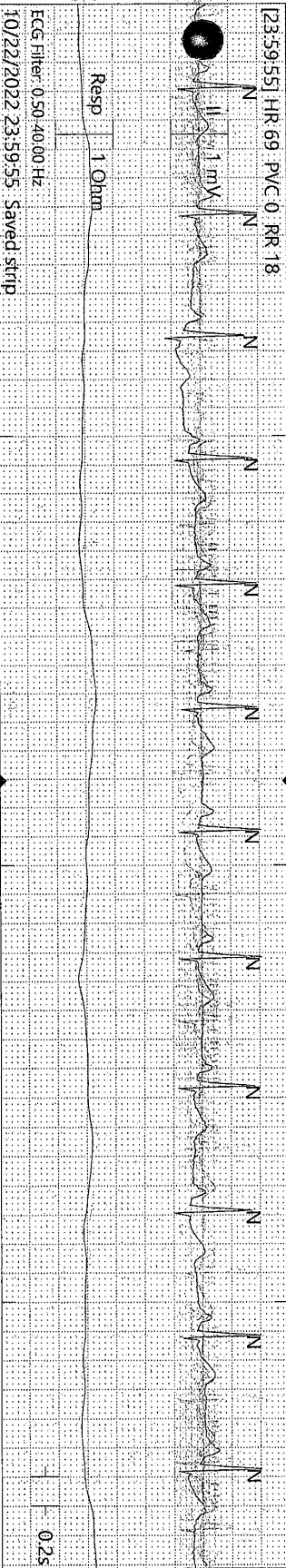
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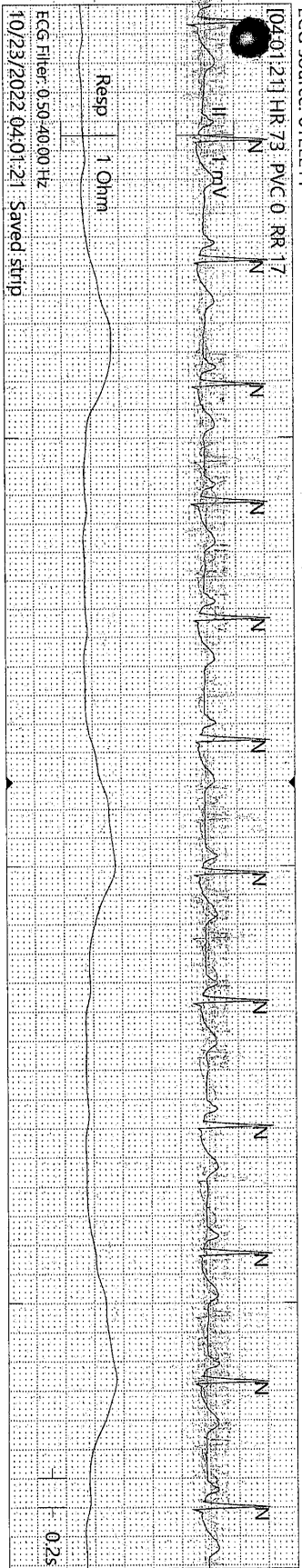
LYONS, KATHLEEN

QH0054940416

ECG source: 6T1ELE11



ECG source: 6TELE11





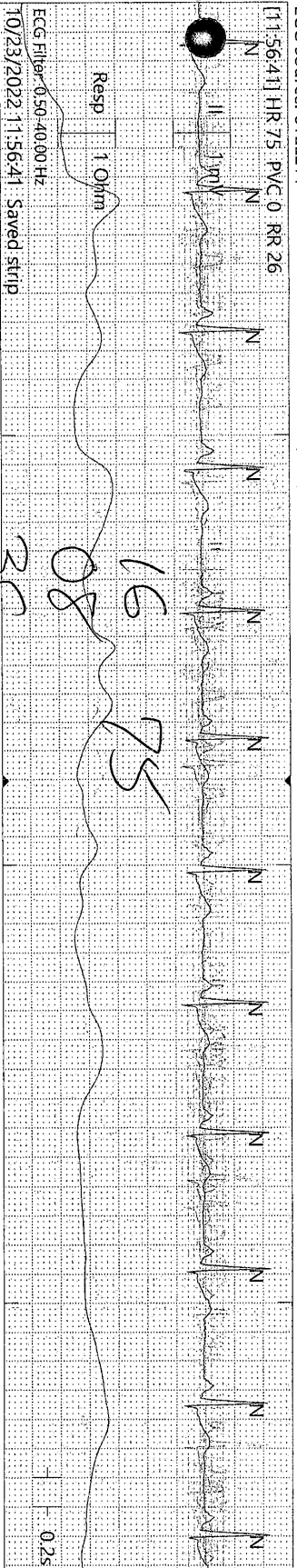
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LYONS, KATHLEEN

QH0054940416

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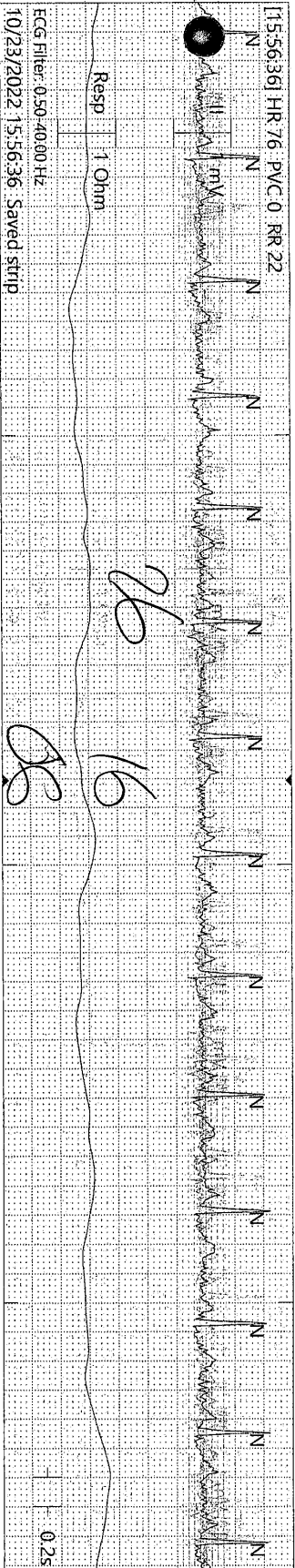


6TELE Emanate Health Queen of the Valley

LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE1

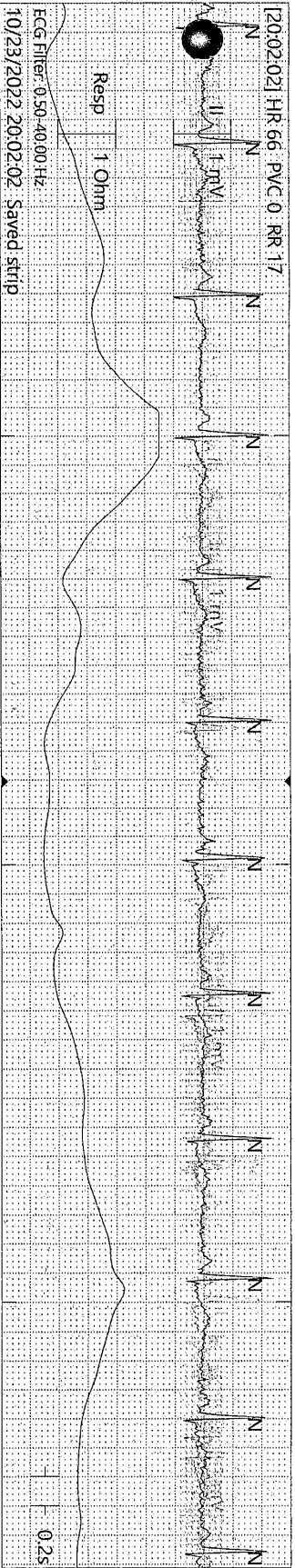


26  
32

LYONS, KATHLEEN

QH0054940416

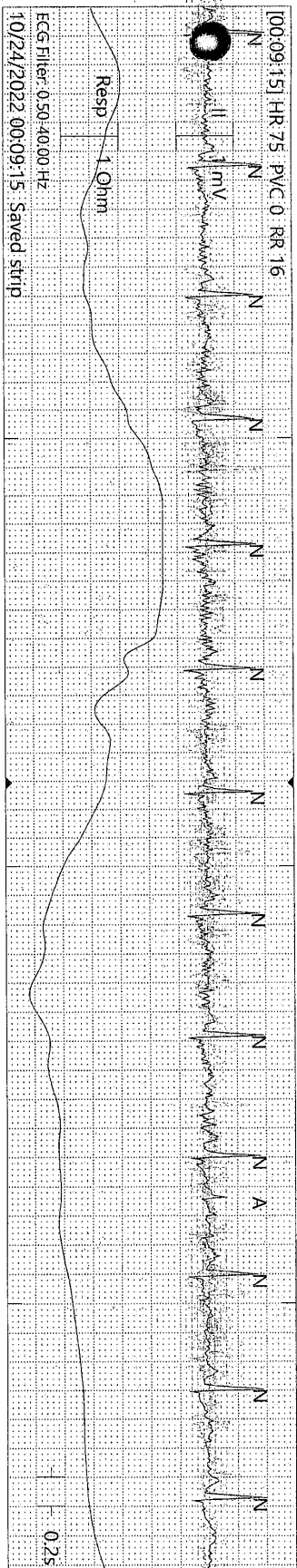
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LYONS, KATHLEEN

QH0054940416

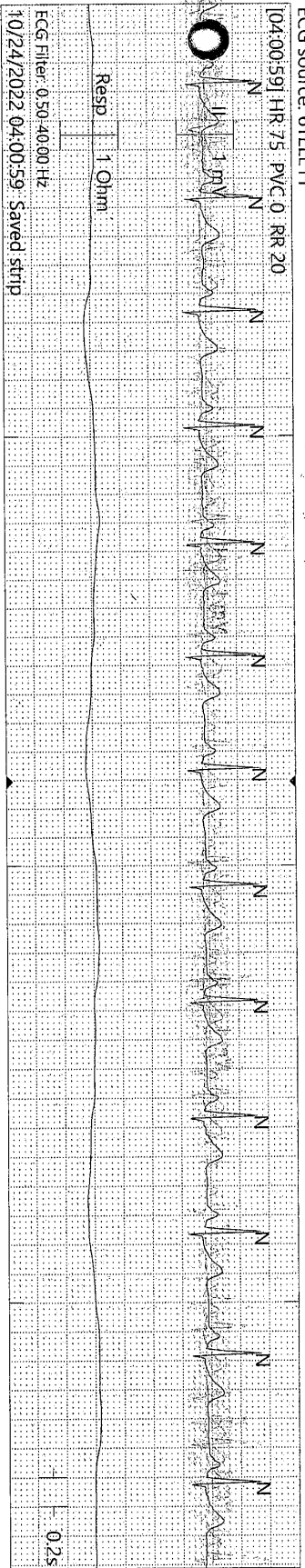
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6TELE Emanate Health Queen of the Valley

ECG source: 6TELE11

[04:00:59] HR: 75 PVC: 0 RR: 20



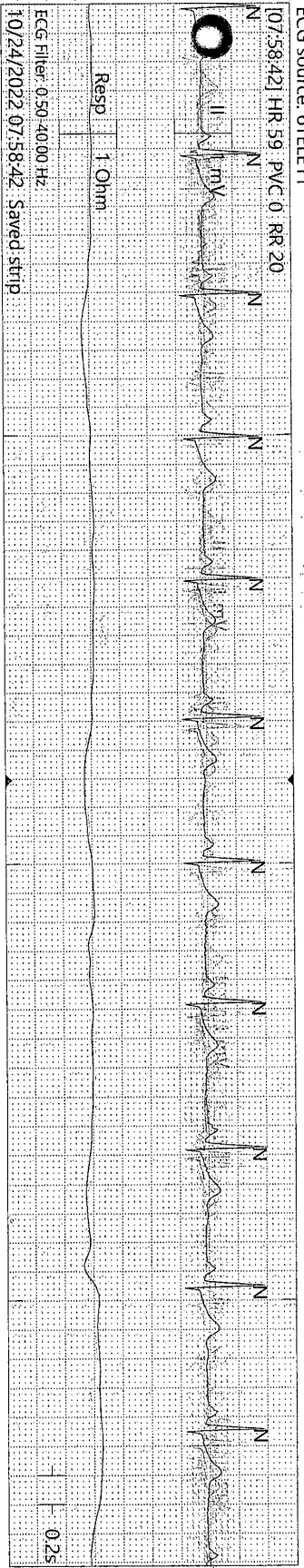
Alert Report

LYONS, KATHLEEN

QH0054940416

605B

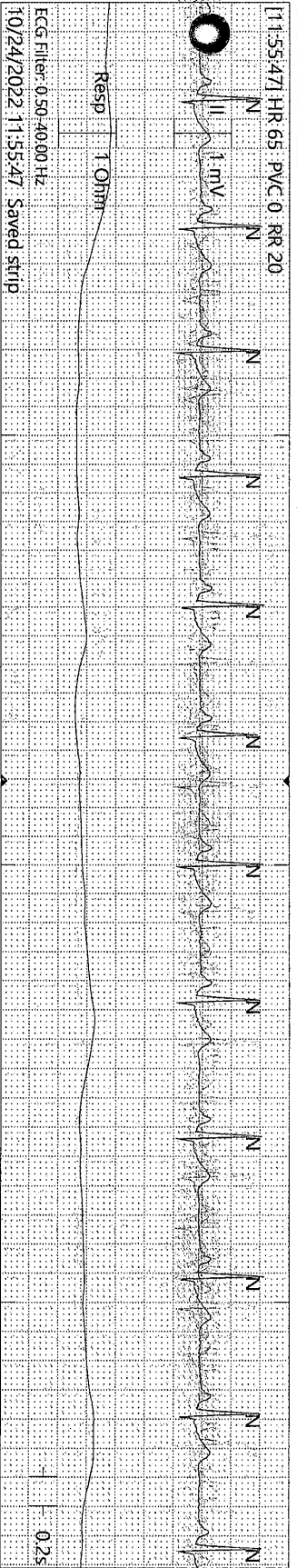
ECG source: 6TELE1



LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE11



6TELE

Emanate Health Queen of the Valley

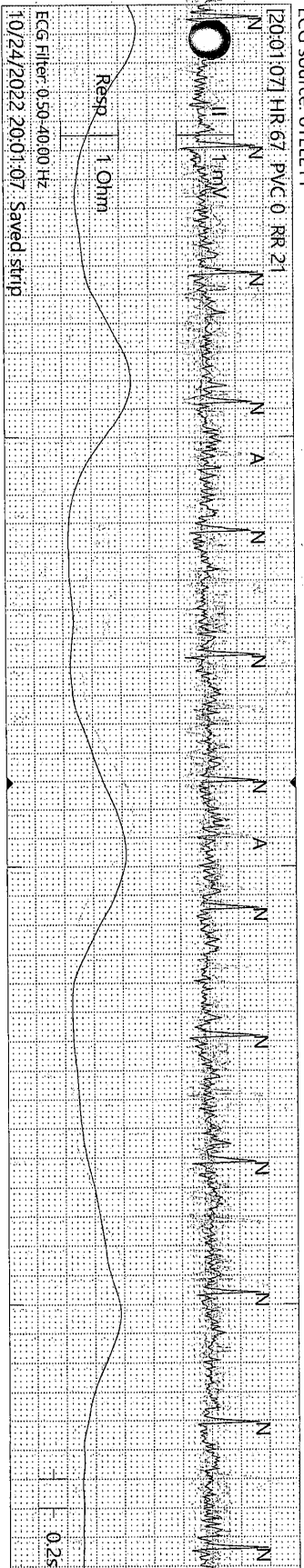


ECG source: 6TELE11

[15:57:59] HR:68 PVC:0 RR:20



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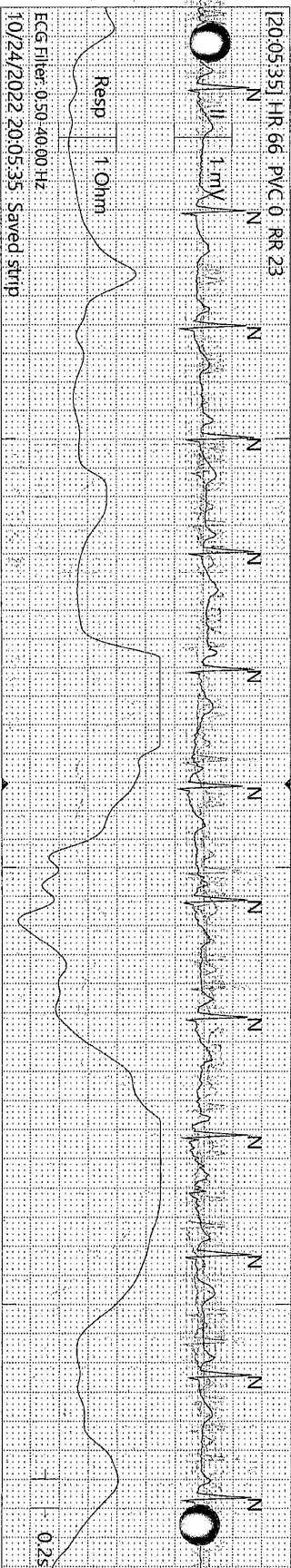


6TELE Emanate Health Queen of the Valley

LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE1



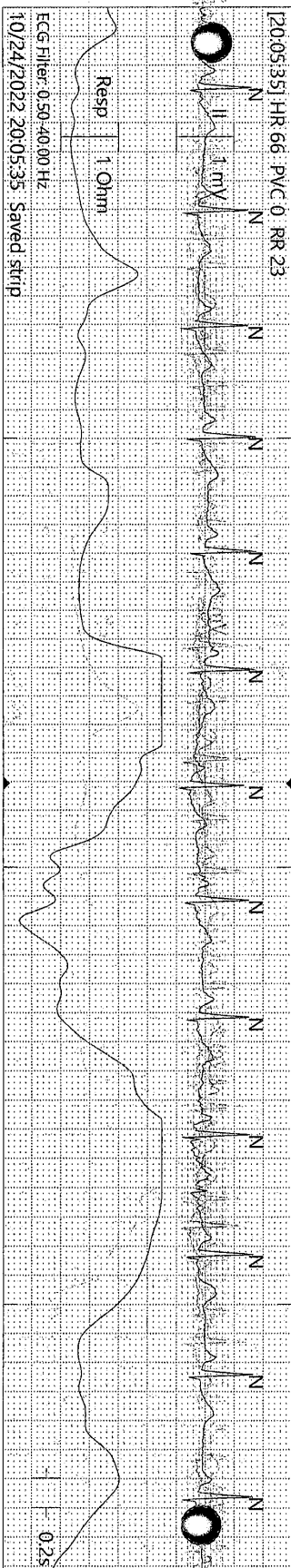
6TELE

Emanate Health Queen of the Valley

LYONS, KATHLEEN

QH0054940416

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6TELE

Emanate Health Queen of the Valley

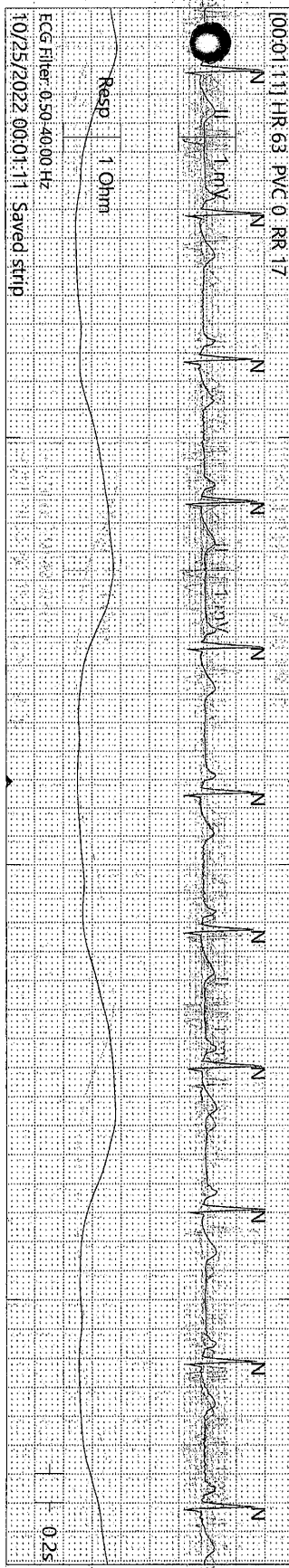
Alarm Review Report

LYONS, KATHLEEN

QH0054940416

605B

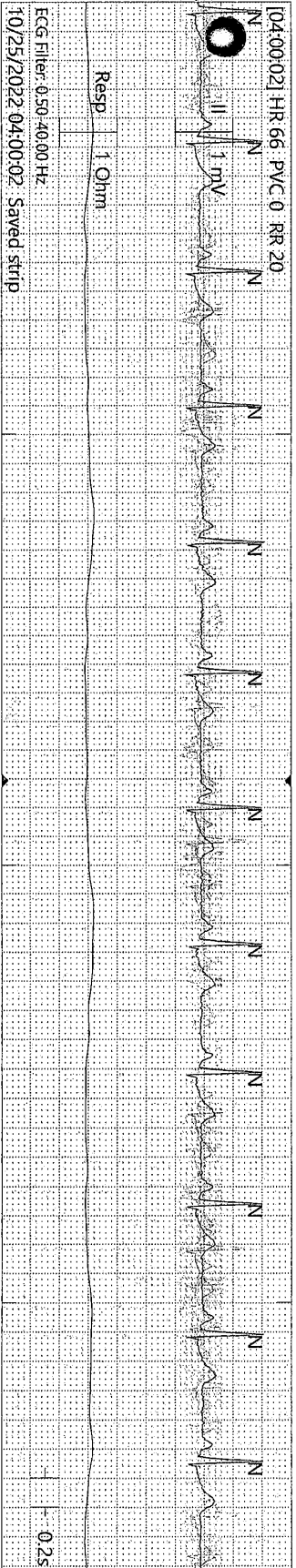
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LYONS, KATHLEEN

QH0054940416

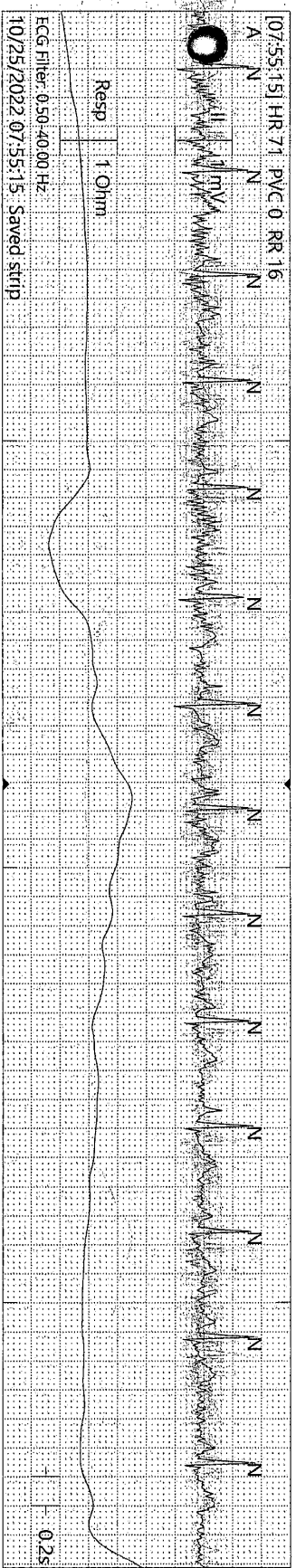
ECG source: 6TELE1



LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE11



10/25/2022 08:11:04	10/25/2022 08:11:04	6TELE	10/25/2022 08:11:04	10/25/2022 08:11:04	Emanate Health Queen of the Valley	10/25/2022 08:11:04
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ECG source: GTELE11

[12:09:27] HR 68 PVC 0 RR 16



Resp 1 Ohm

ECG Filter: 0.50-40.00 Hz

10/25/2022 12:09:27 Saved strip

[11:55:57] HR 67 PVC 0 RR 20



Resp 1 Ohm

ECG Filter: 0.50-40.00 Hz

10/25/2022 11:55:57 Saved strip

0.25

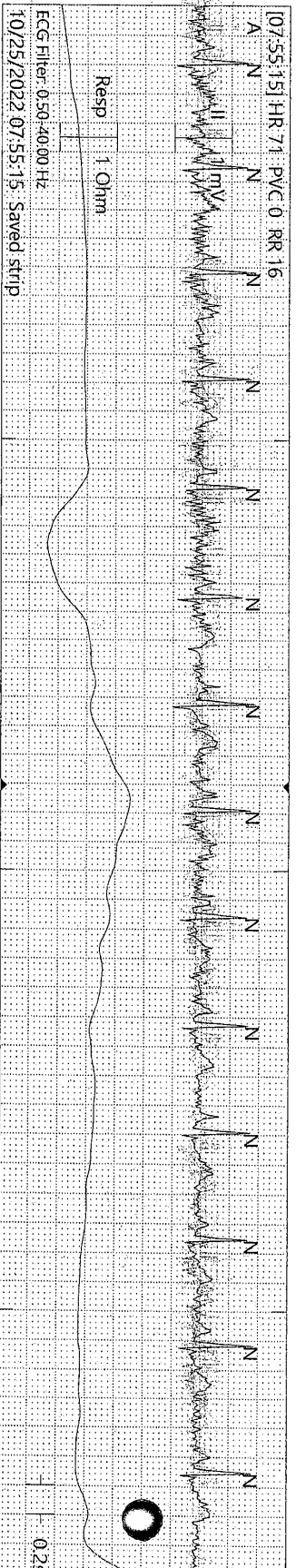




LYONS, KATHLEEN

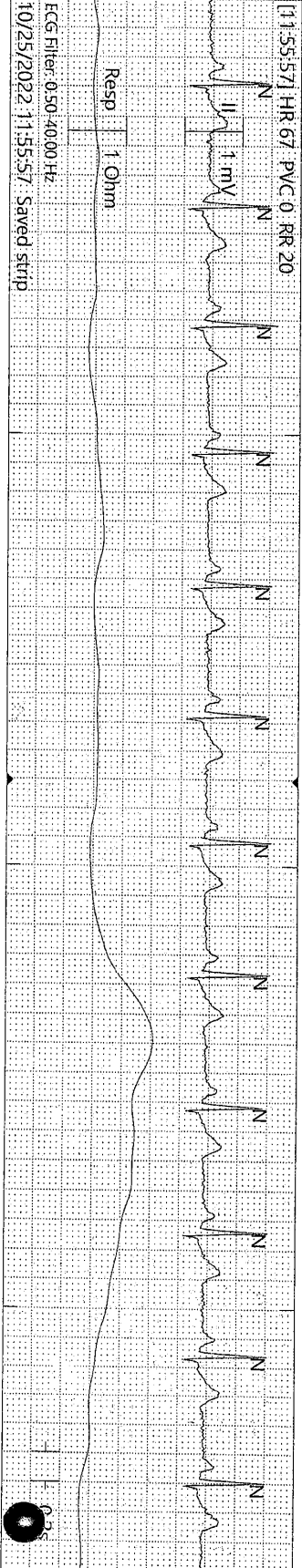
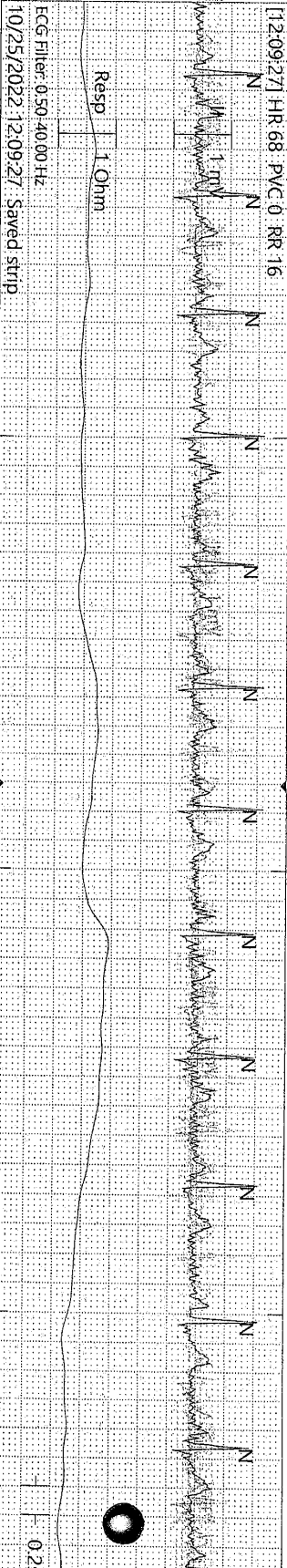
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BR

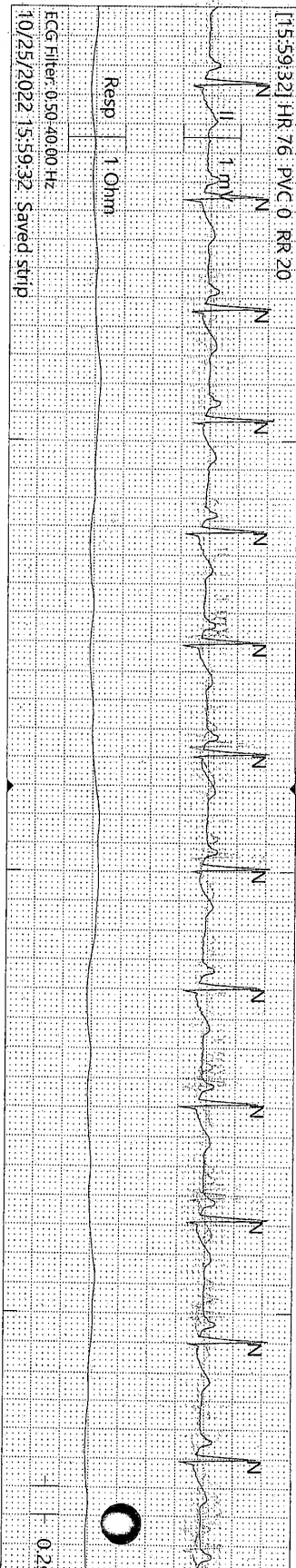
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LYONS, KATHLEEN

QH0054940416

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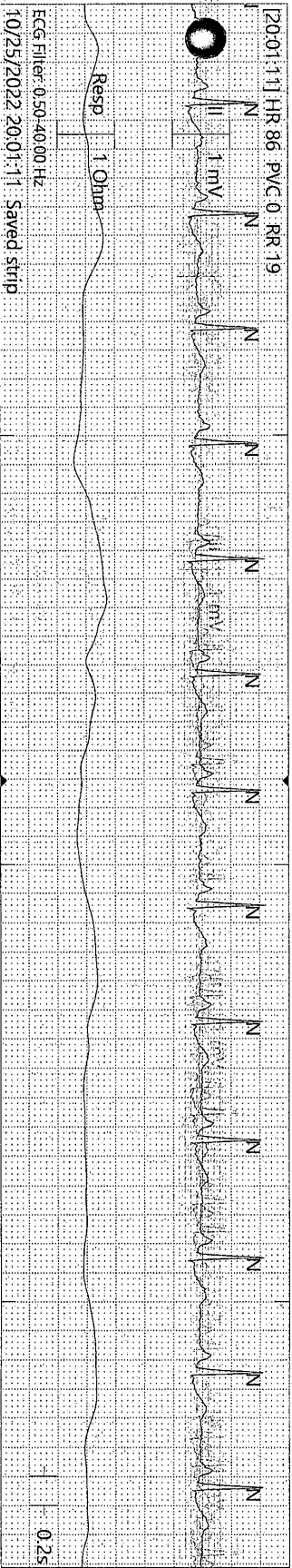


*BN*

LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE1



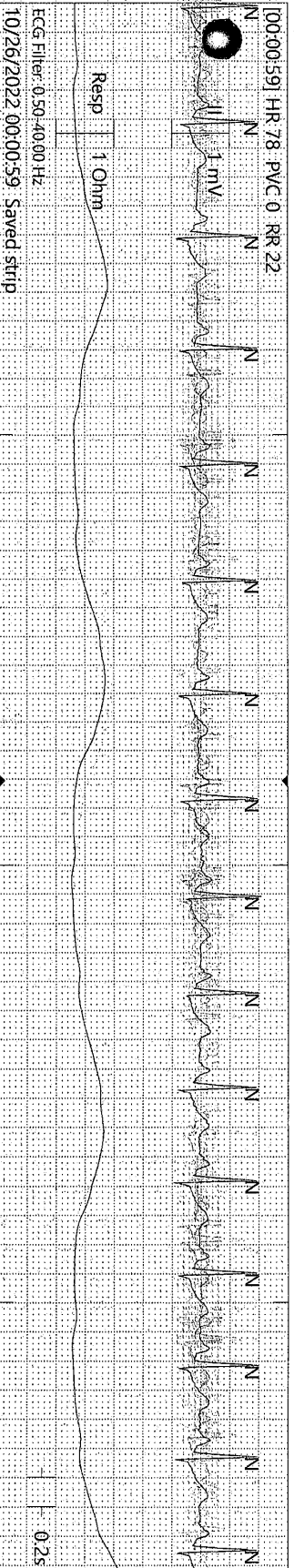
6TELE

Emanate Health Queen of the Valley

LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE11

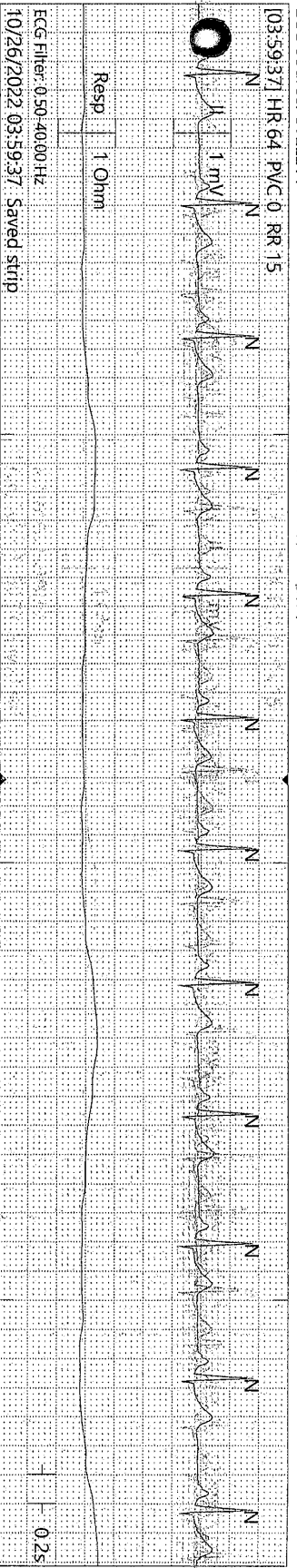


6TELE Emanate Health Queen of the Valley

LYONS, KATHLEEN

QH0054940416

ECG source: 6TELE11



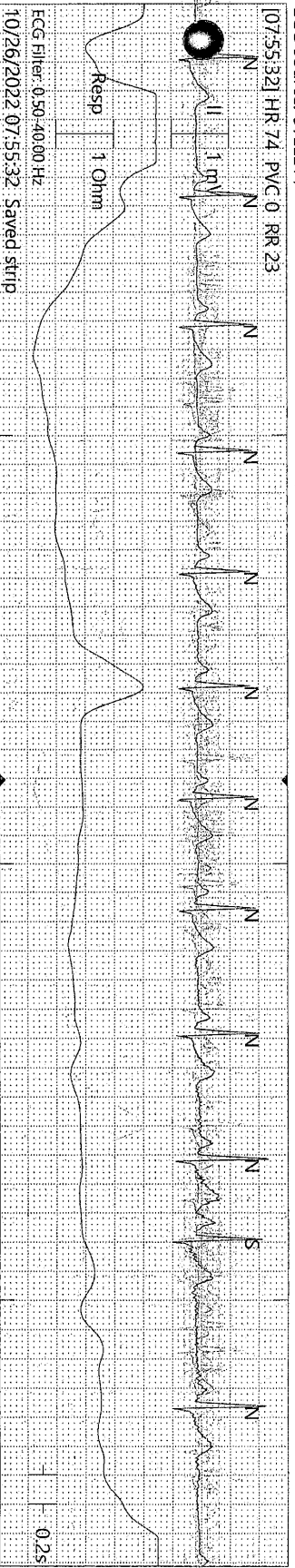
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Emanate Health Queen of the Valley

LYONS, KATHLEEN

QH0054940416

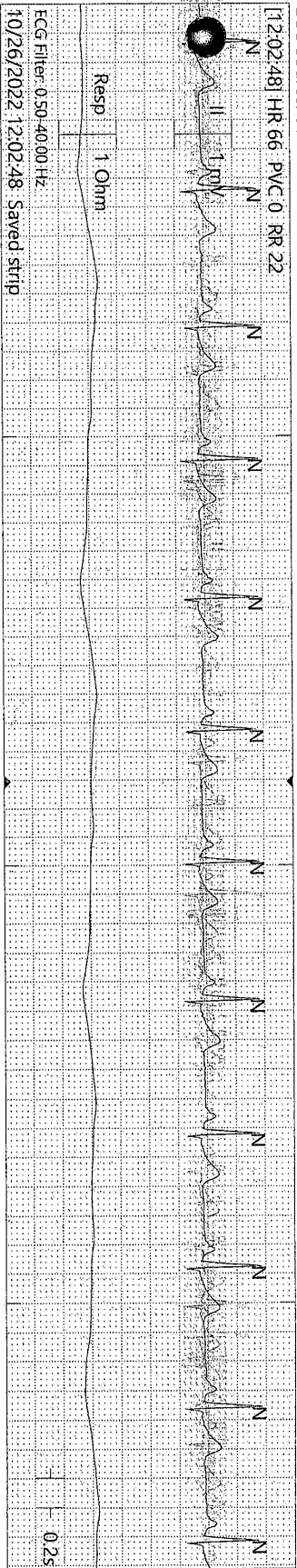
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6TELE Emanate Health Queen of the Valley



ECG source: 6TELE11



6TELE Emanate Health Queen of the Valley

Alarm Review Report

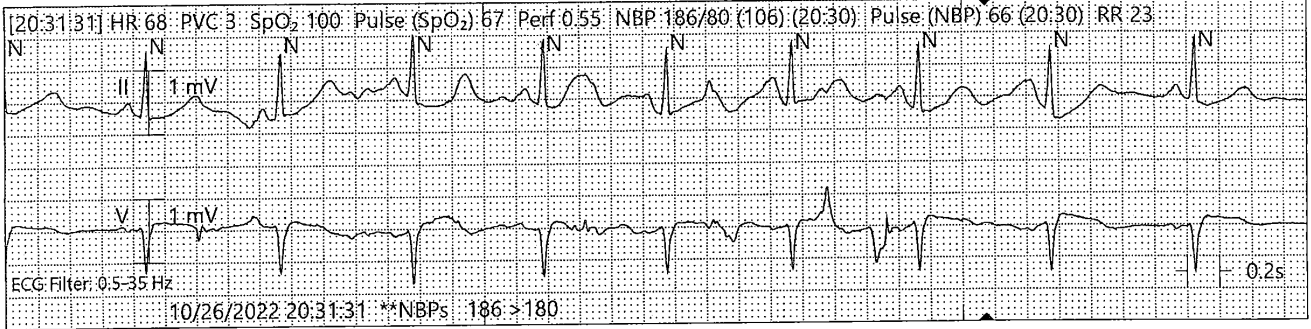
ICU 7

LYONS, KATHLEEN

QH0054940416

*admit to ICU*

ECG source: MICU7

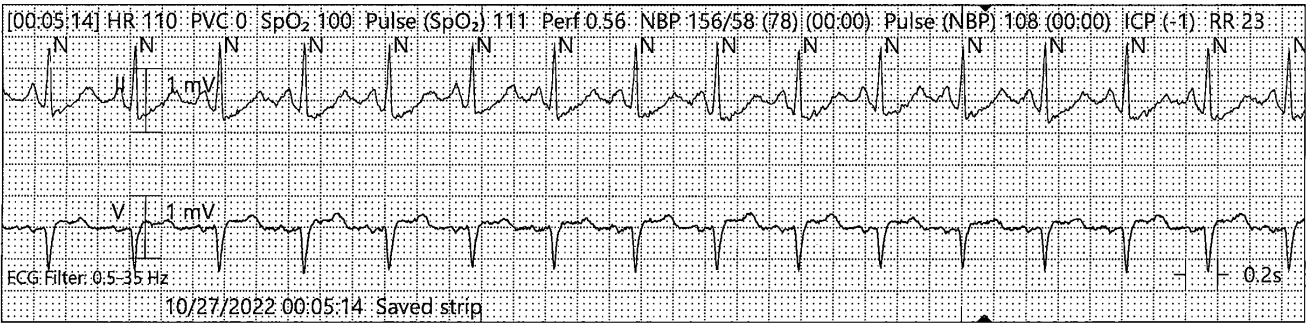
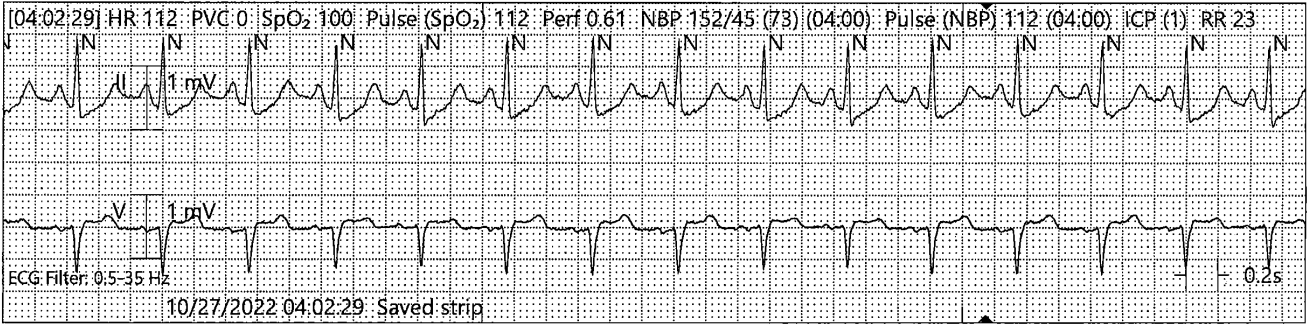


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ICU 7

LYONS, KATHLEEN	QH0054940416	
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ECG source: MICU7



	ICU	My Institution
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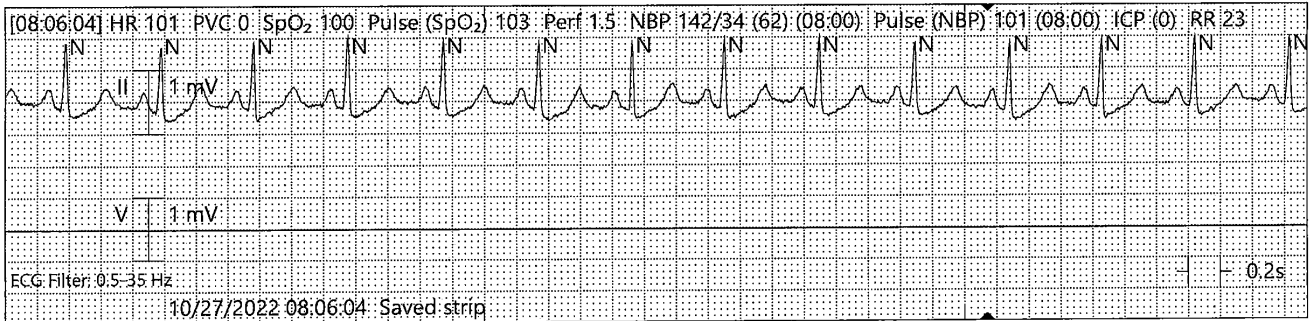
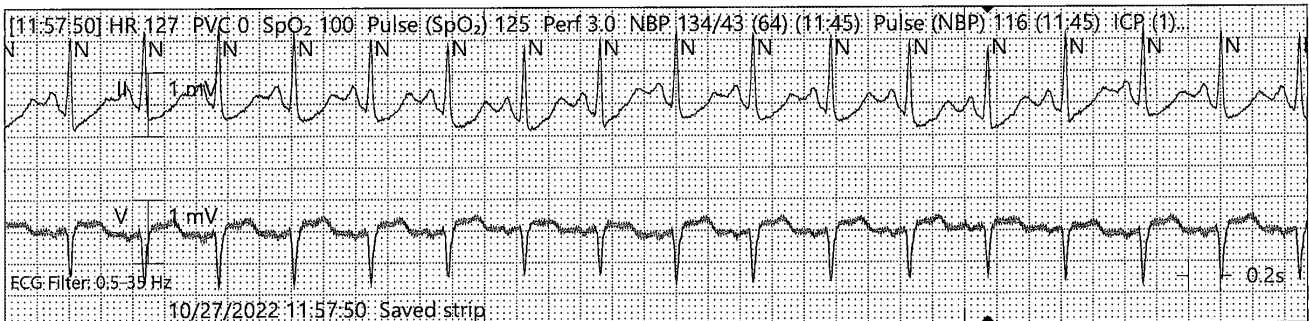
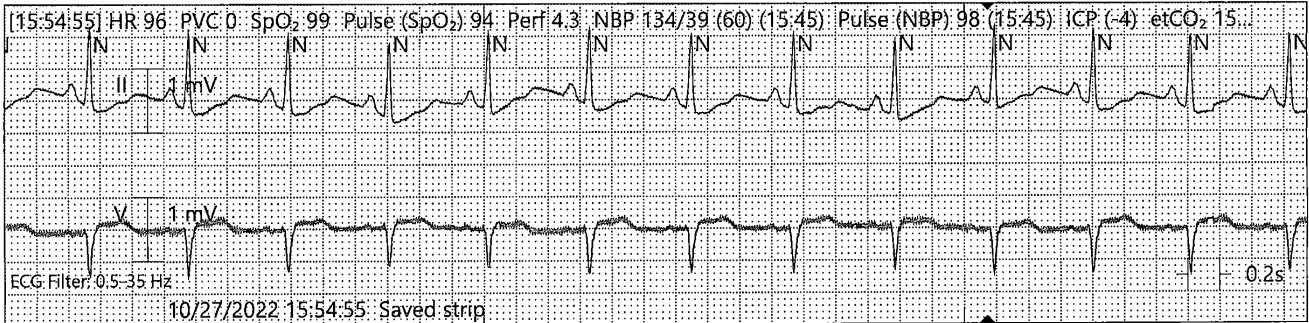
Alarm Review Report

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ECG source: MICU7



ICU My Institution

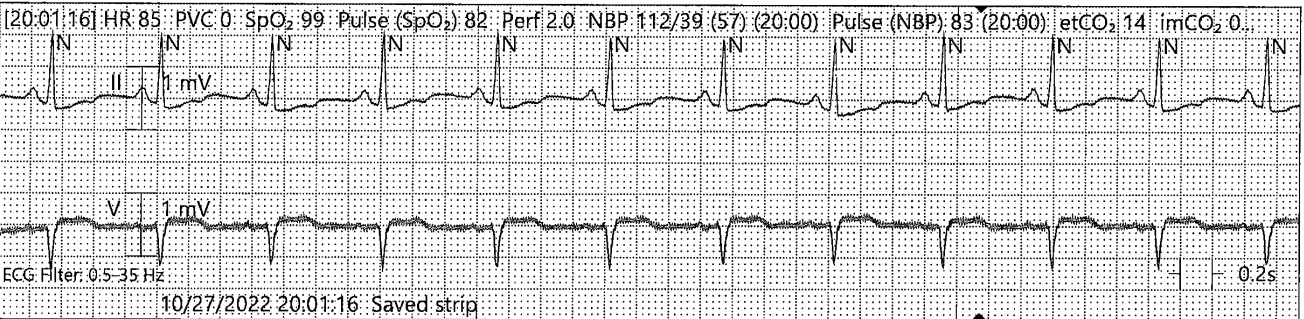
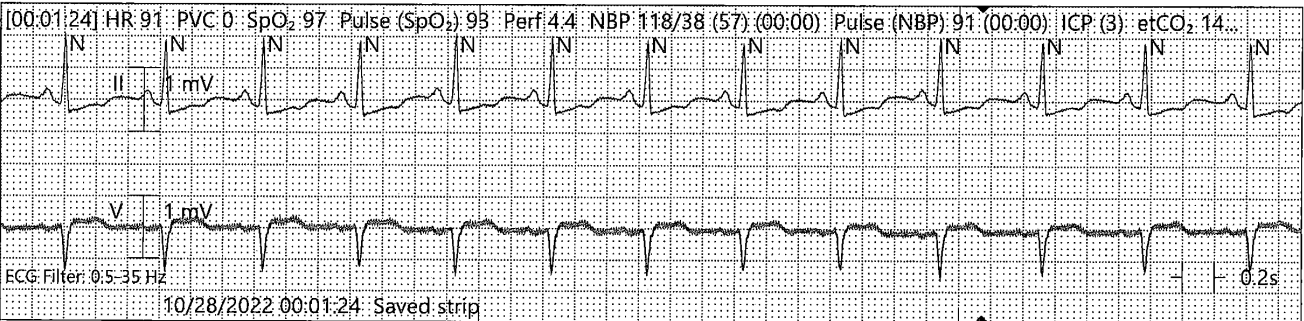
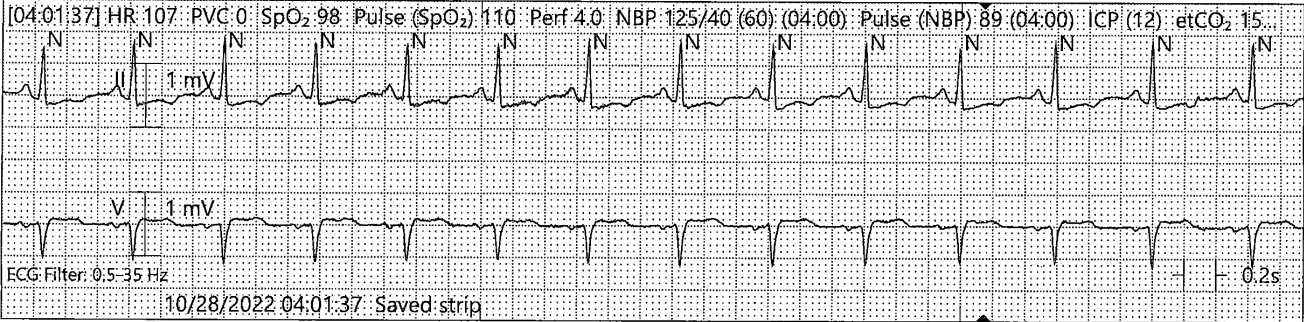
Alarm Review Report

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ECG source: MICU7



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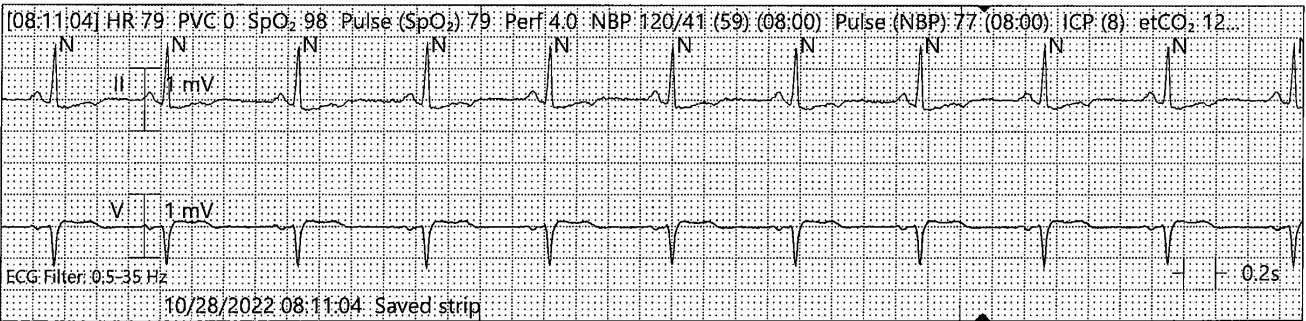
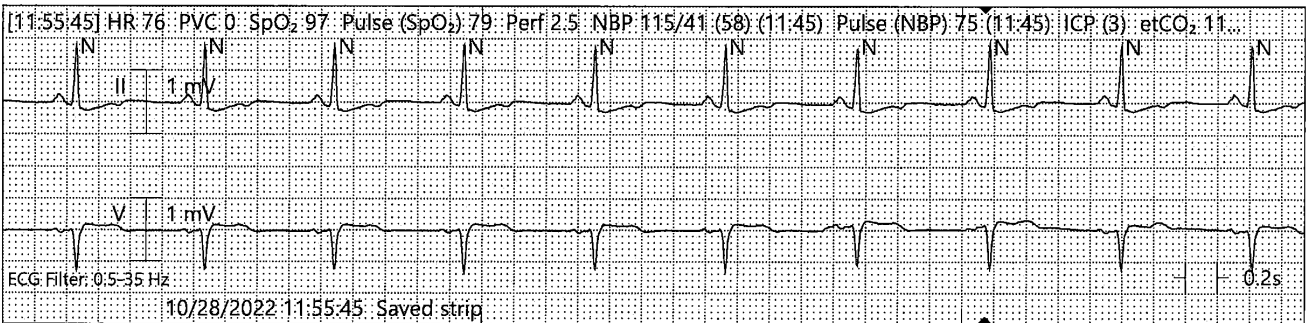
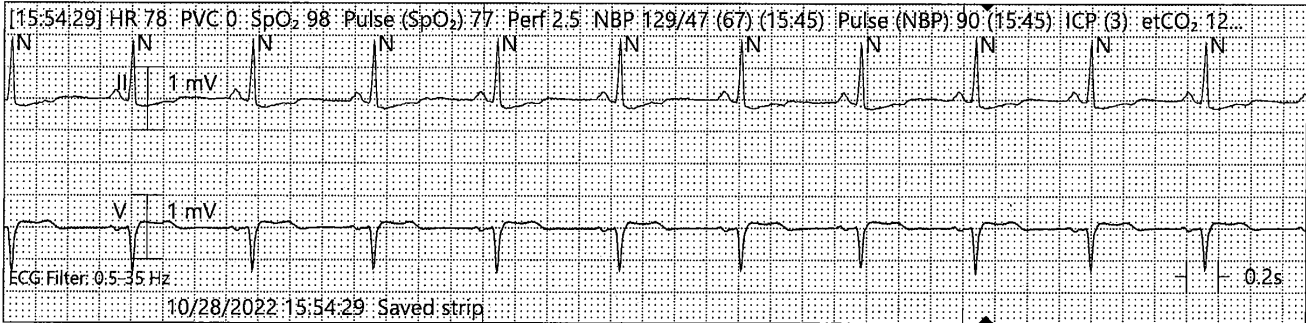
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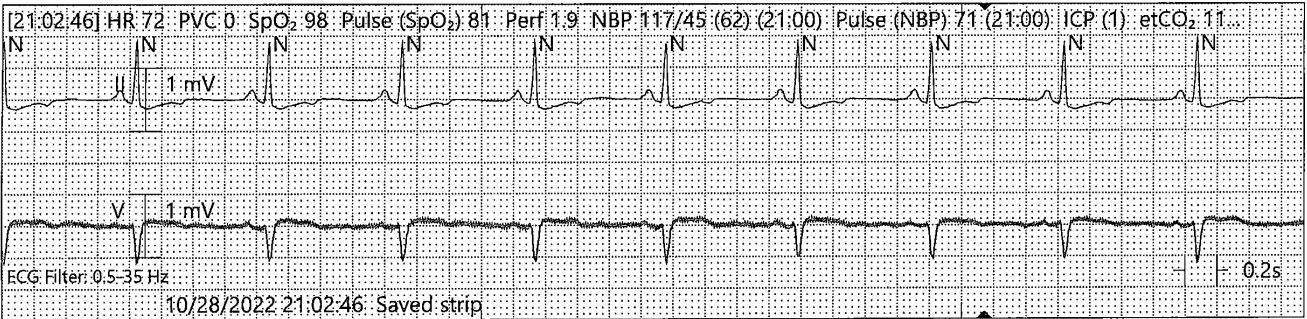
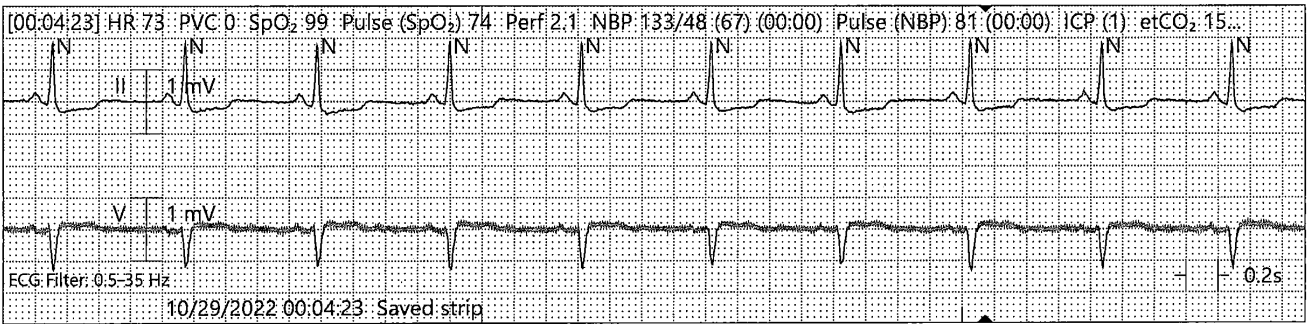
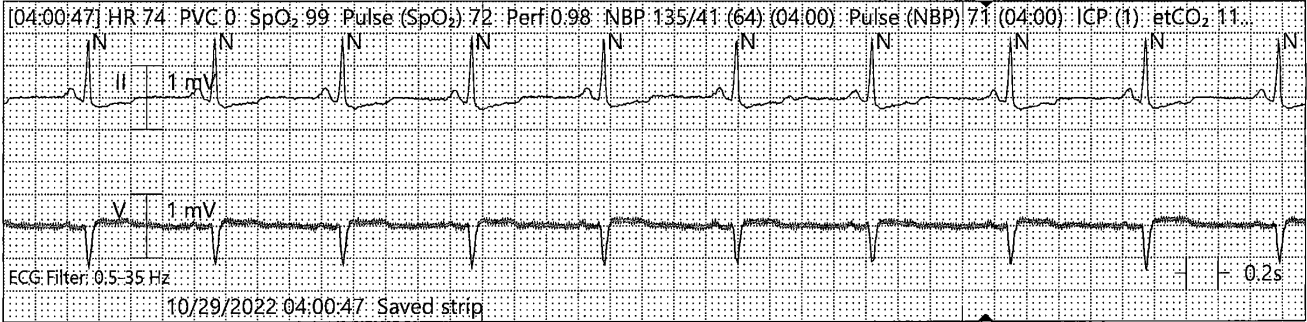
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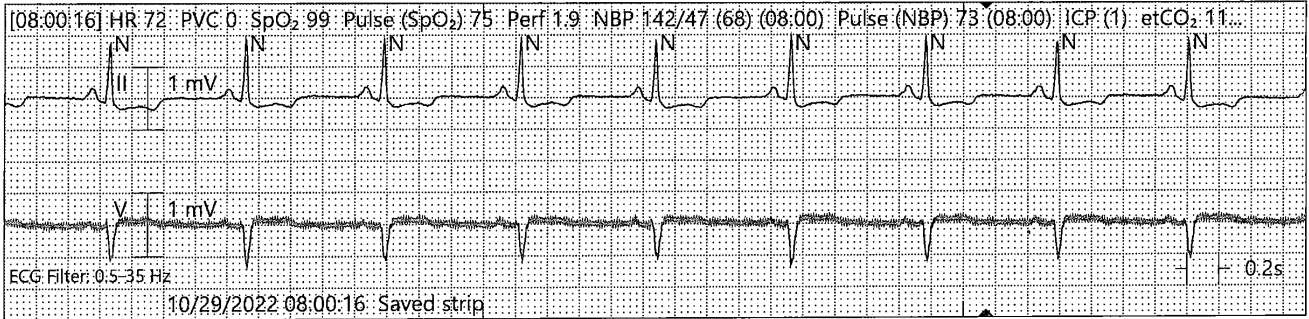
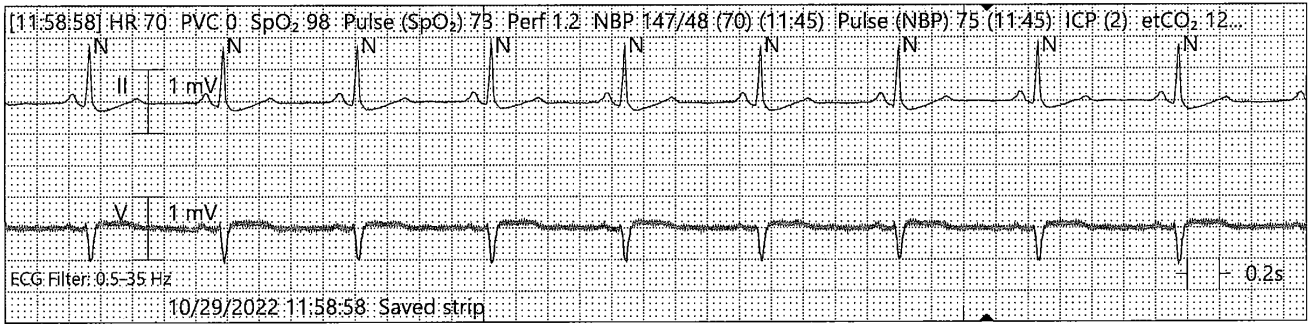
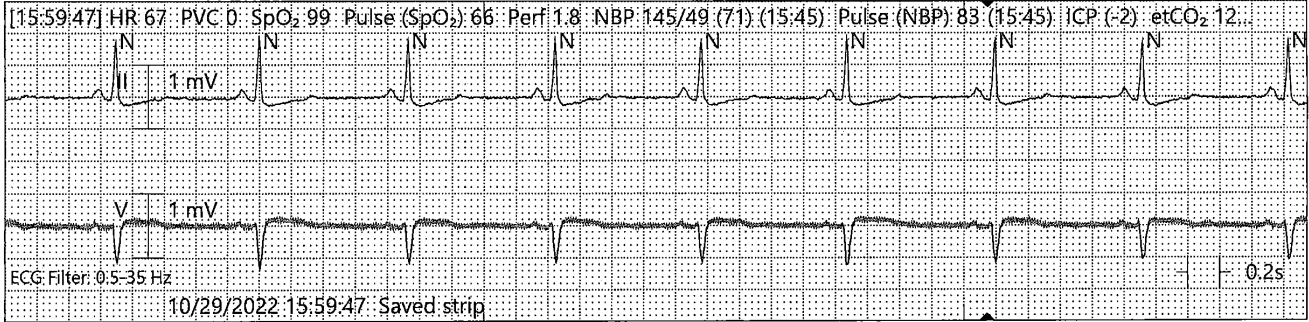
ICU	My Institution
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ECG source: MICU7



	ICU	My Institution
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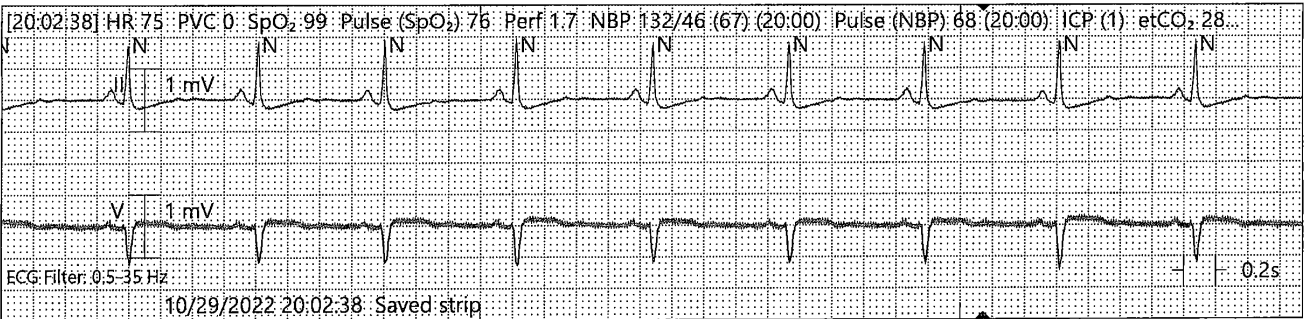
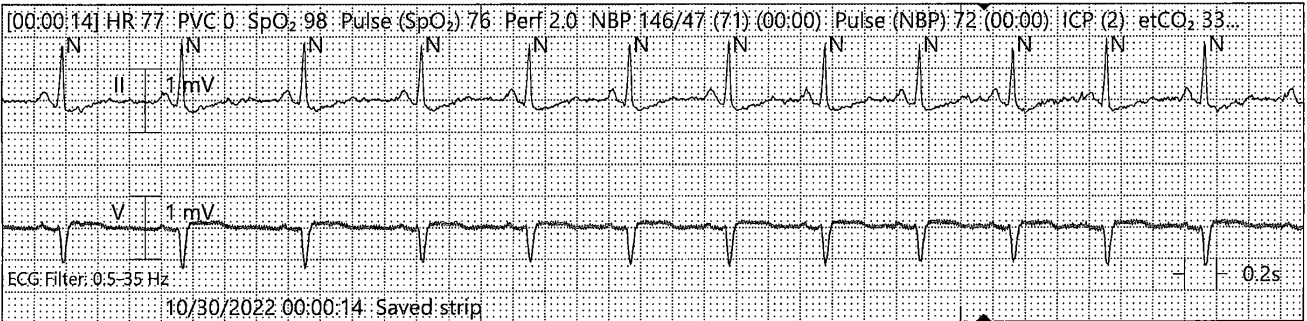
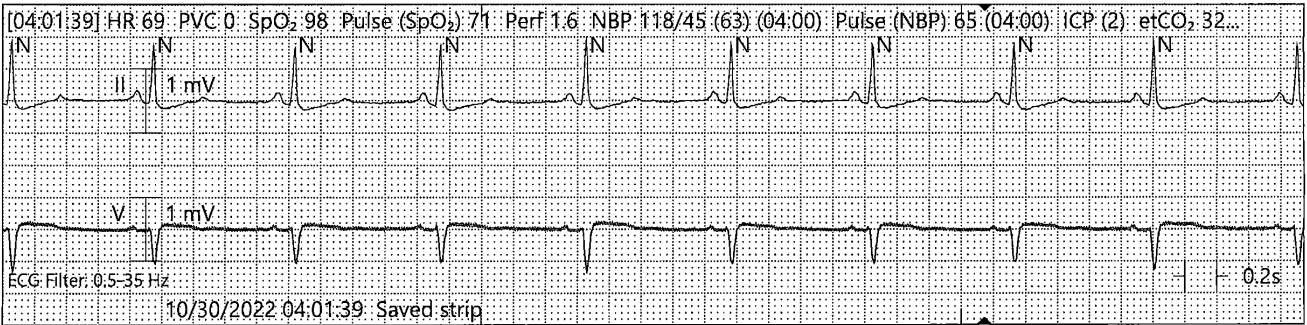
Alarm Review Report

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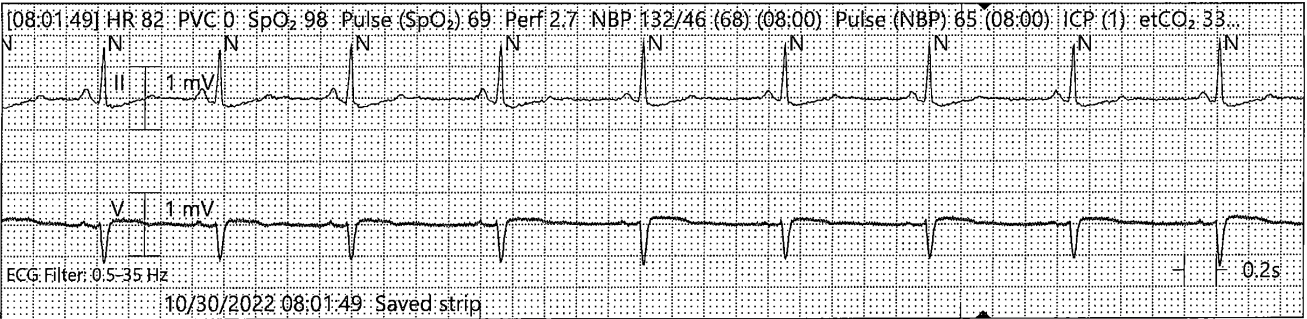
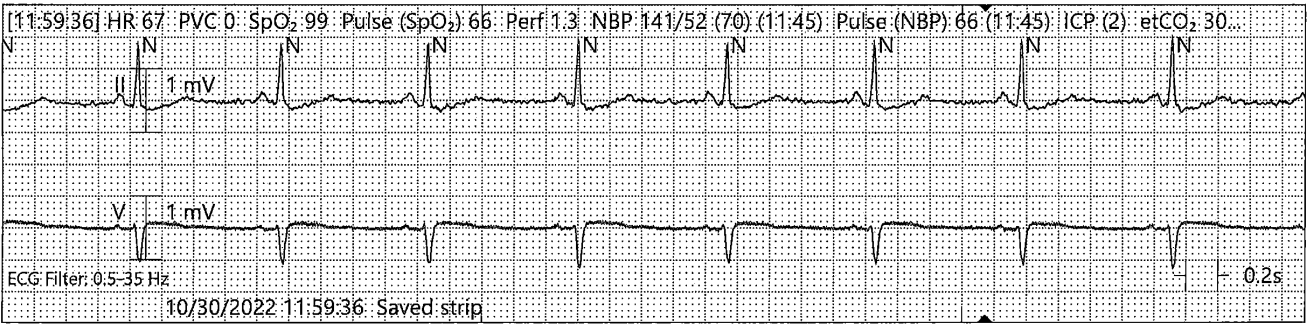
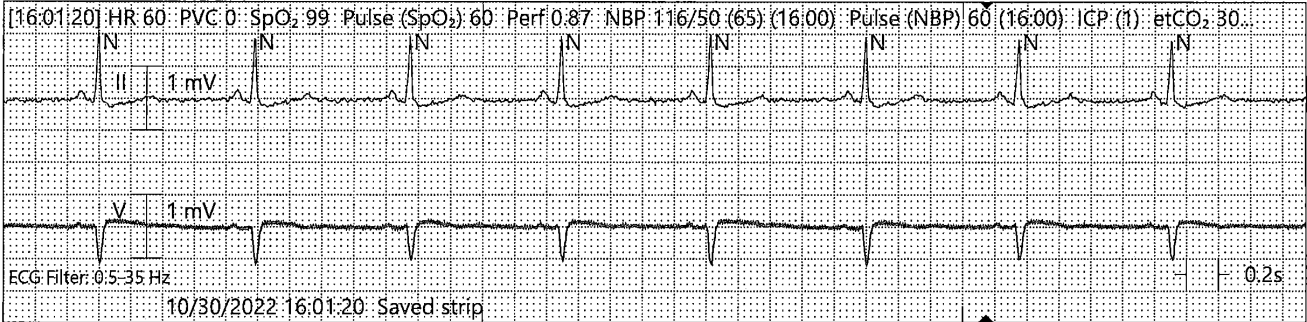


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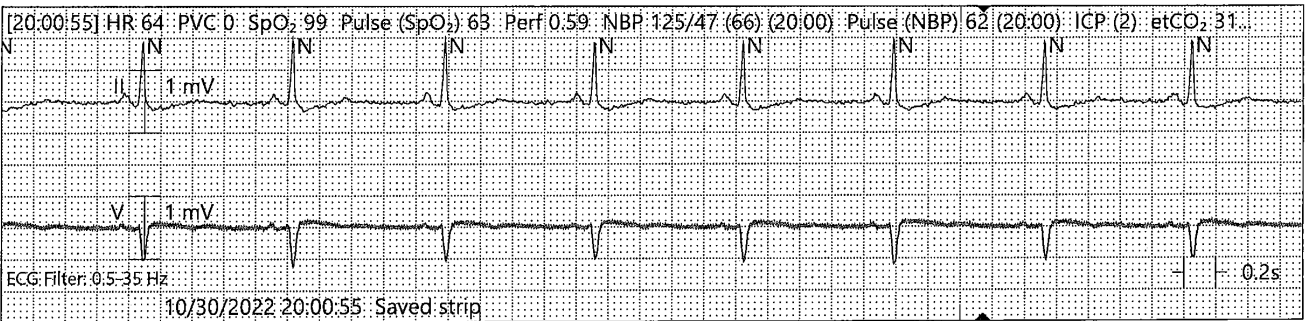
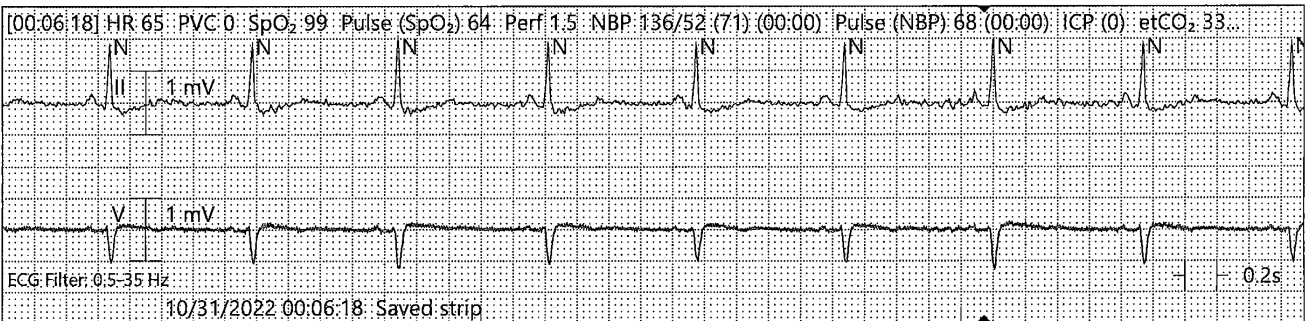
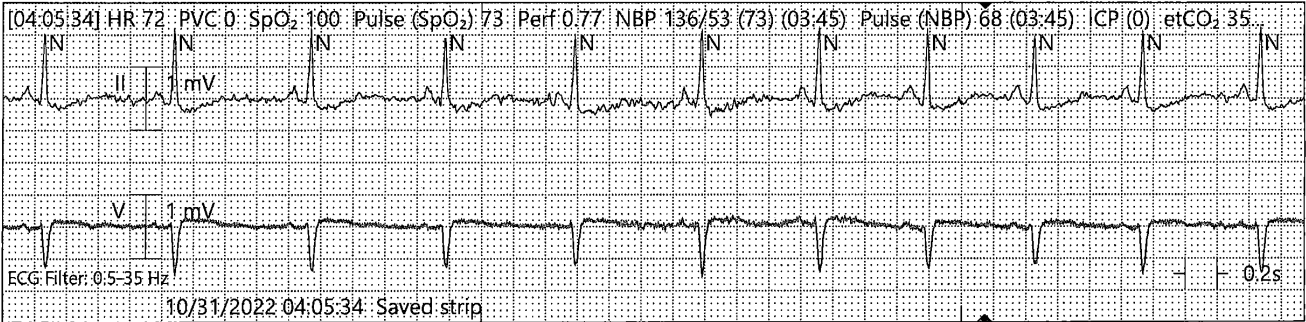
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LYONS, KATHLEEN	QH0054940416	
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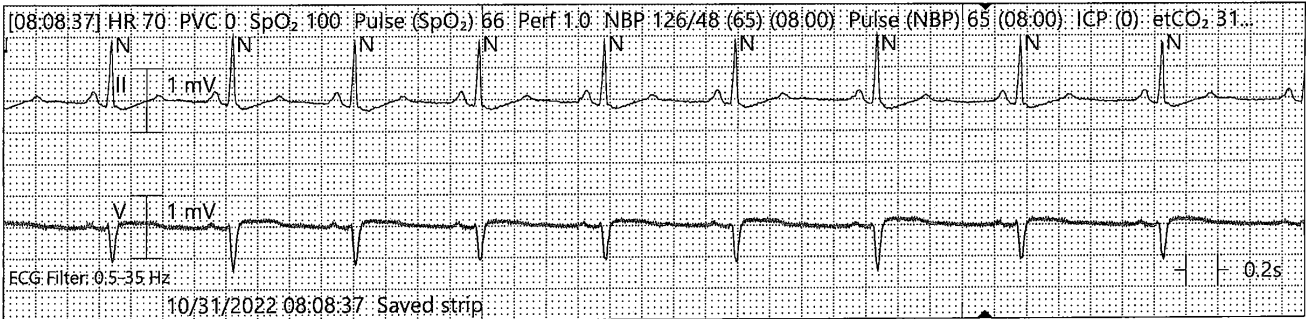
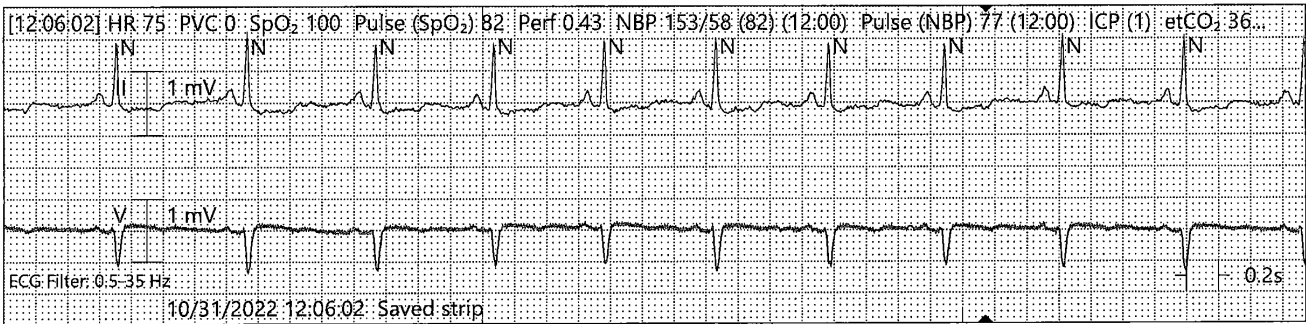
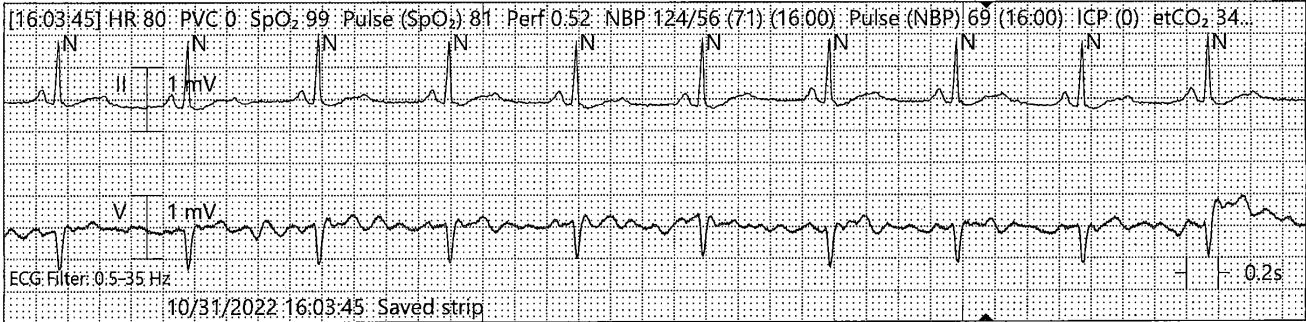
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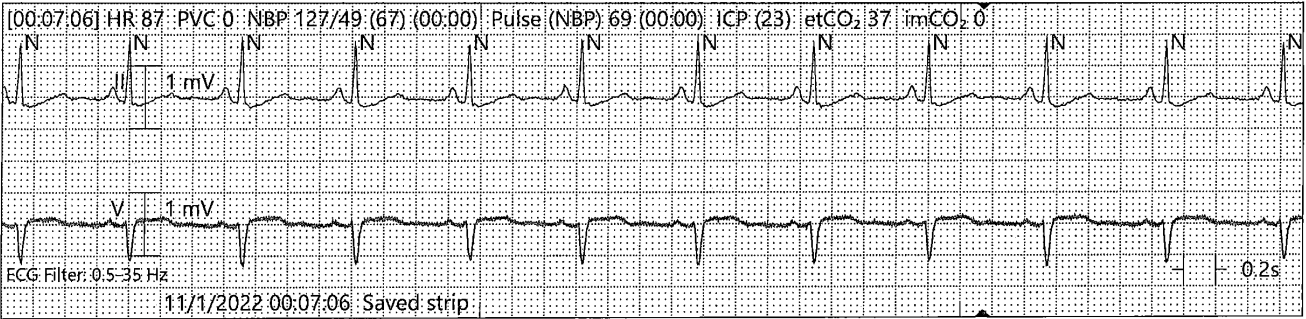
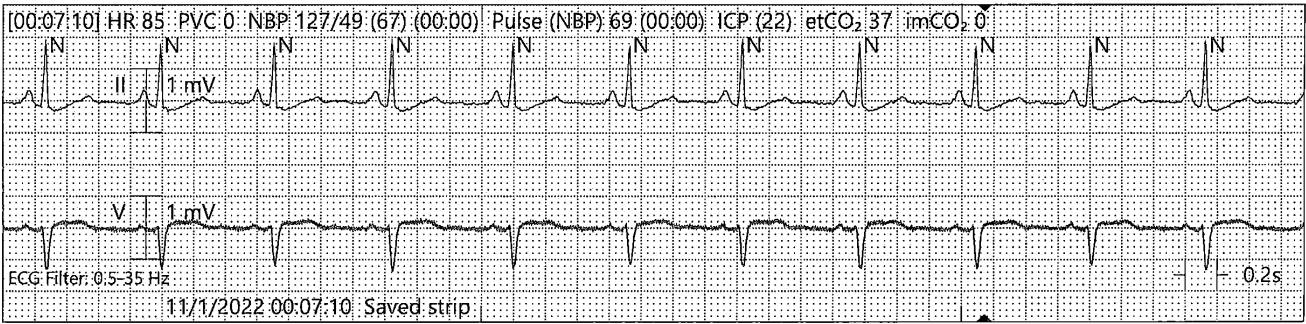
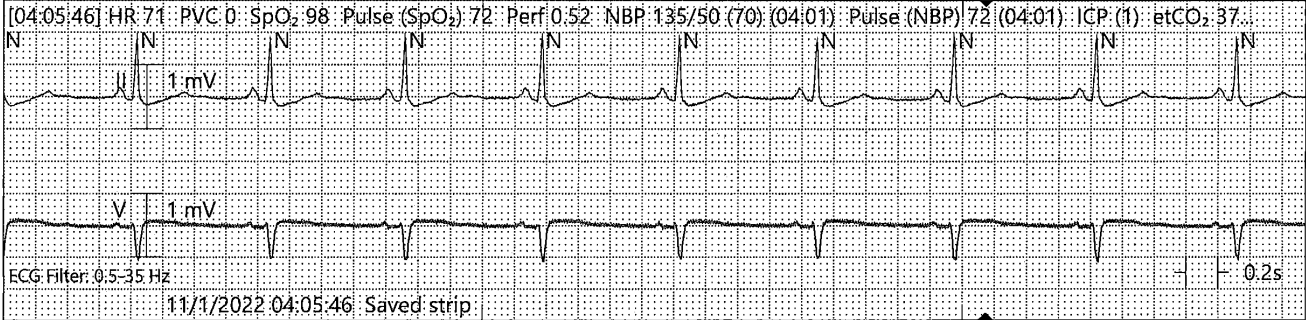
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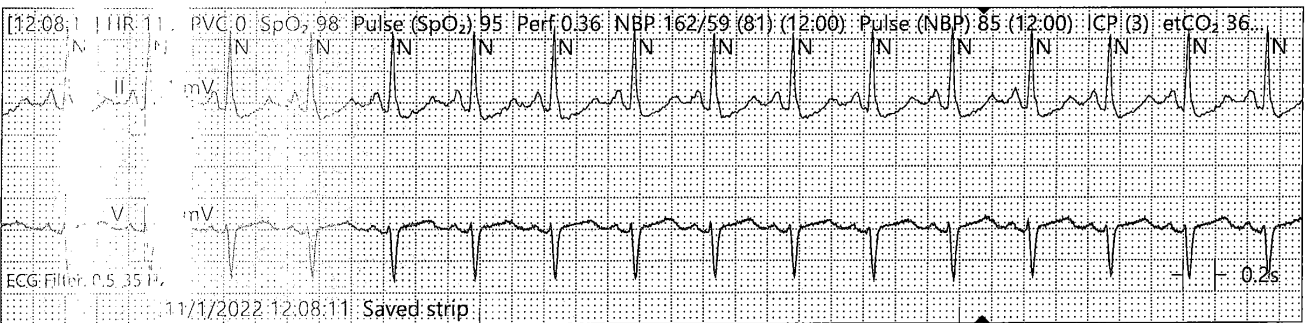
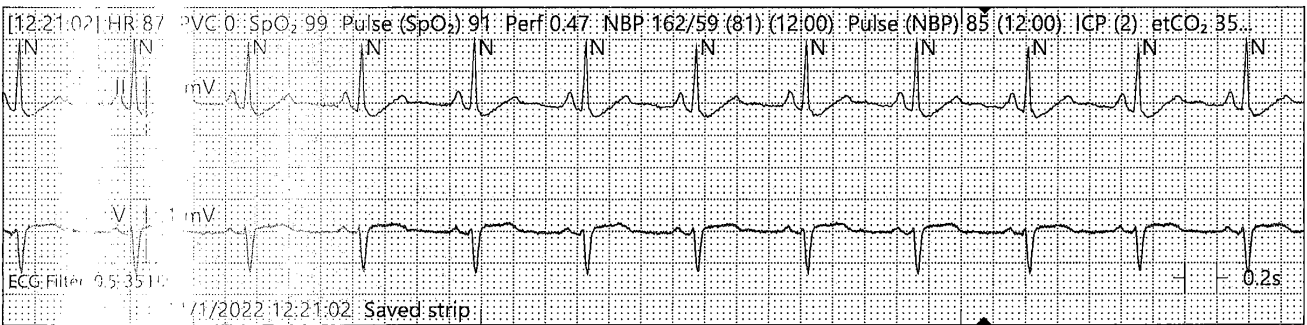
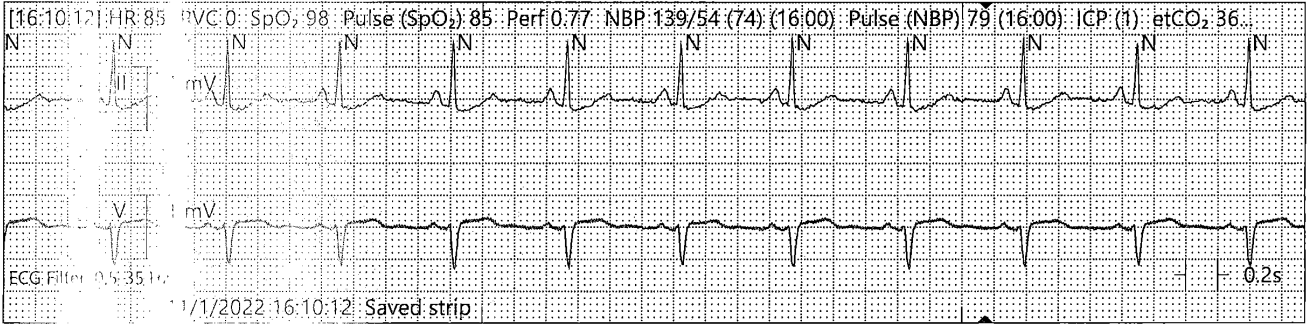
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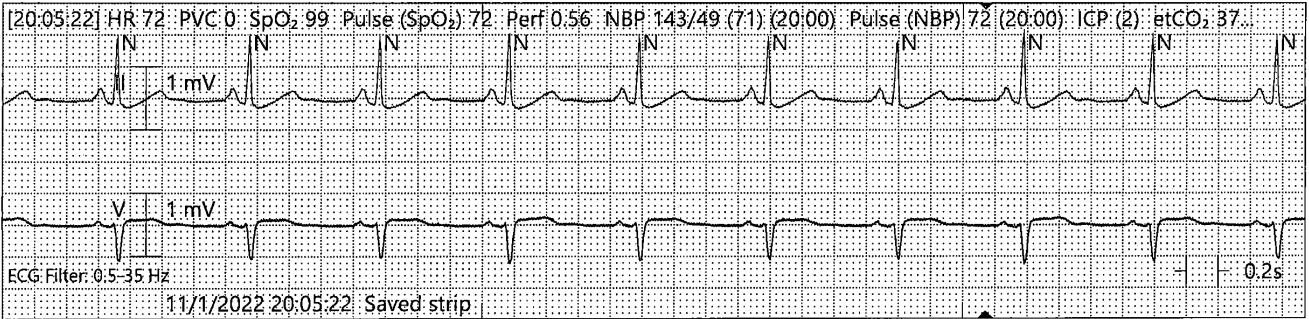
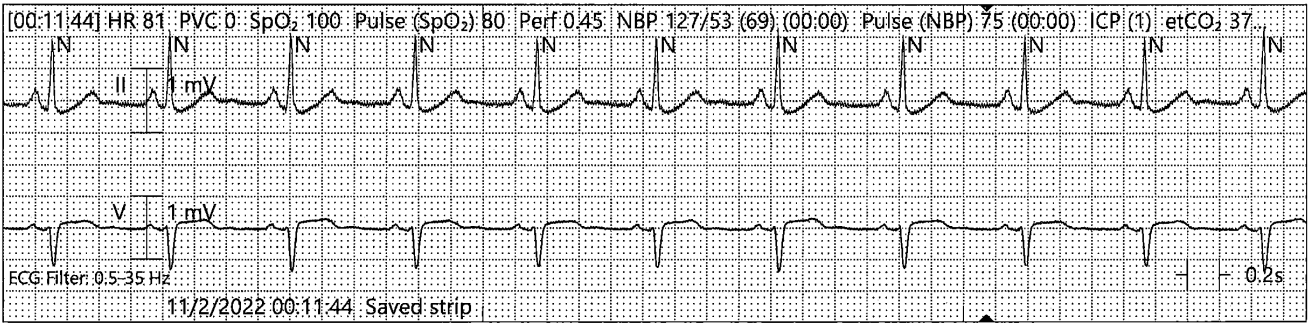
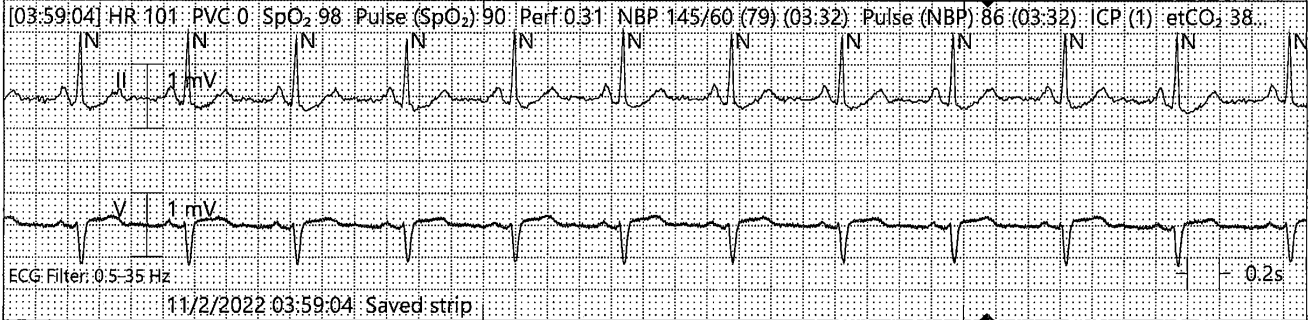
ICU My Institution

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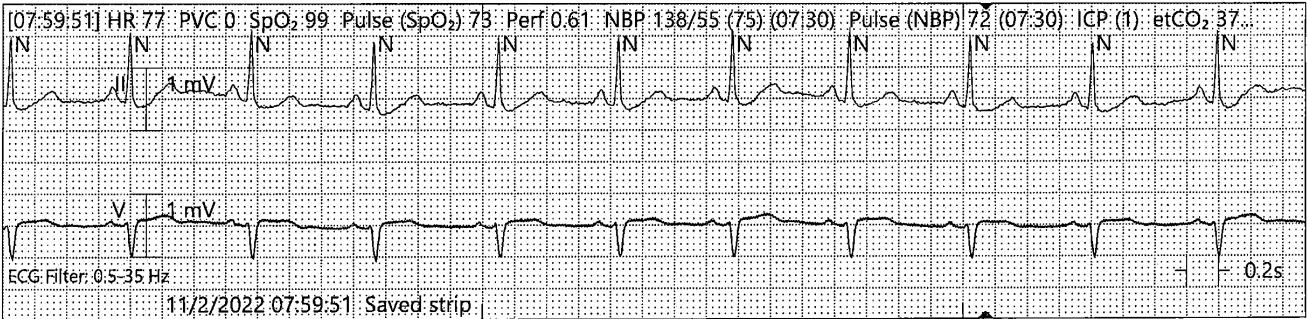
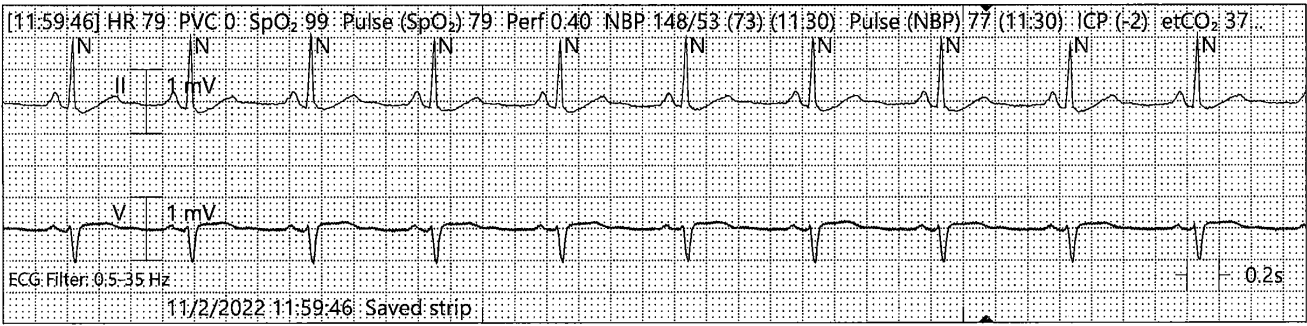
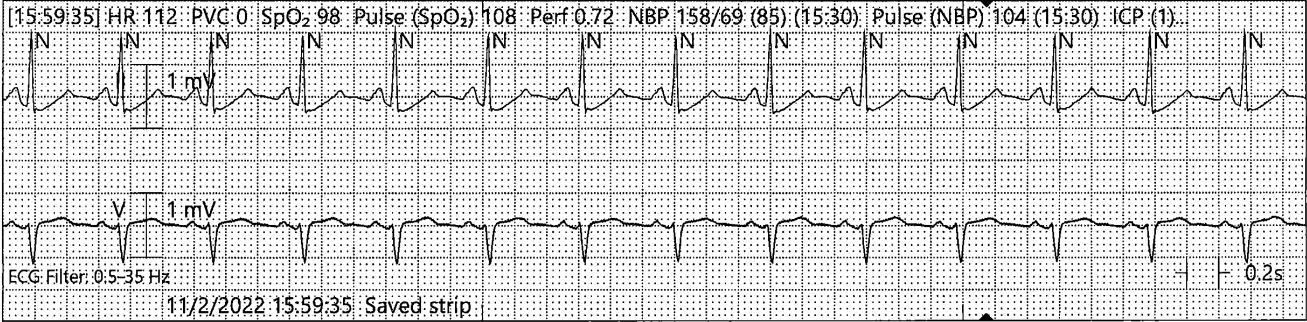
ICU My Institution

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	ICU	My Institution
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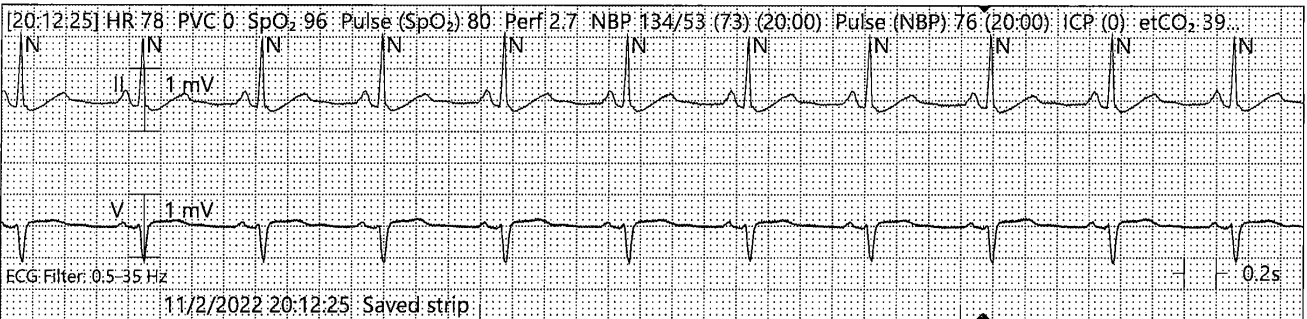
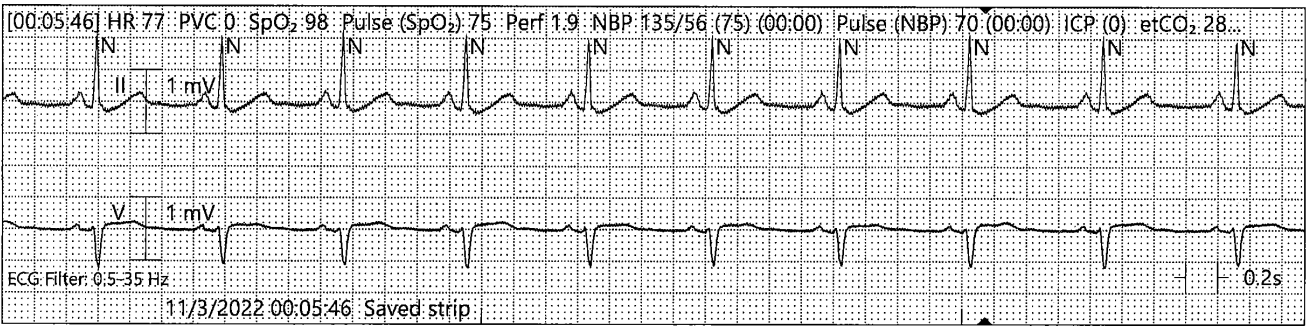
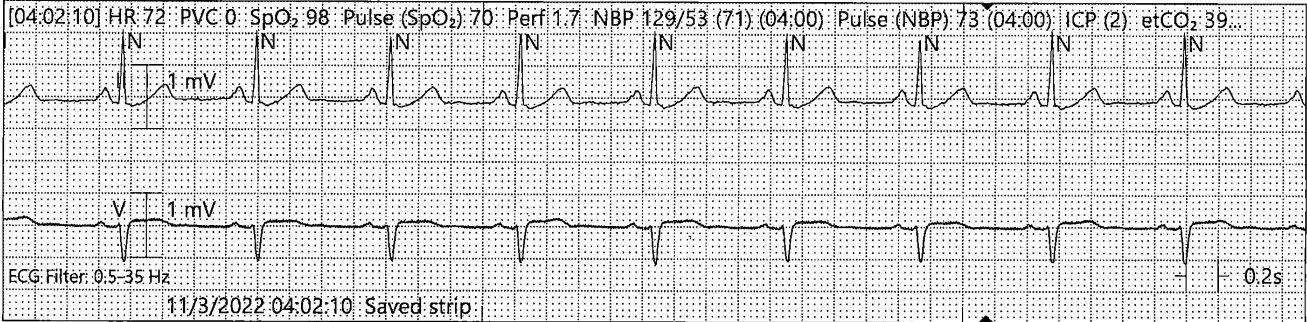


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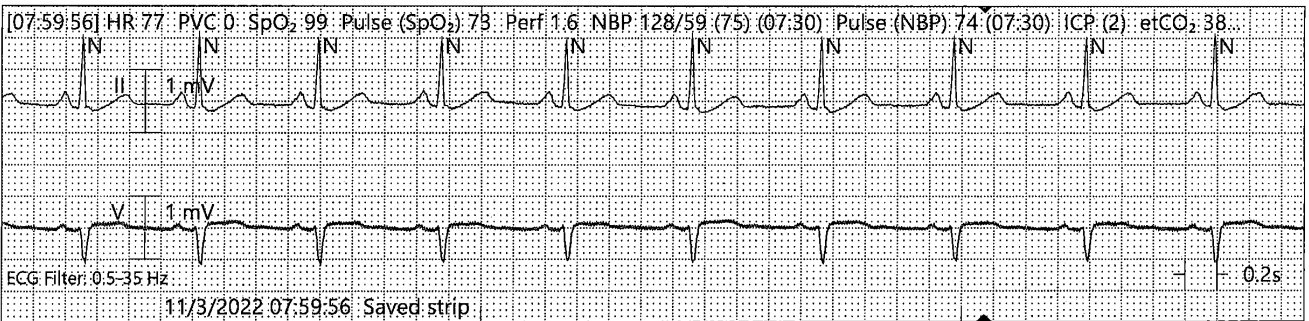
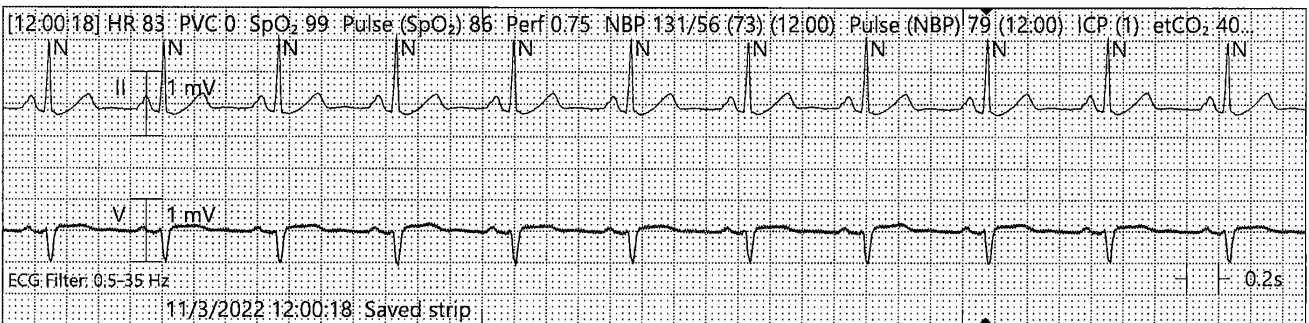
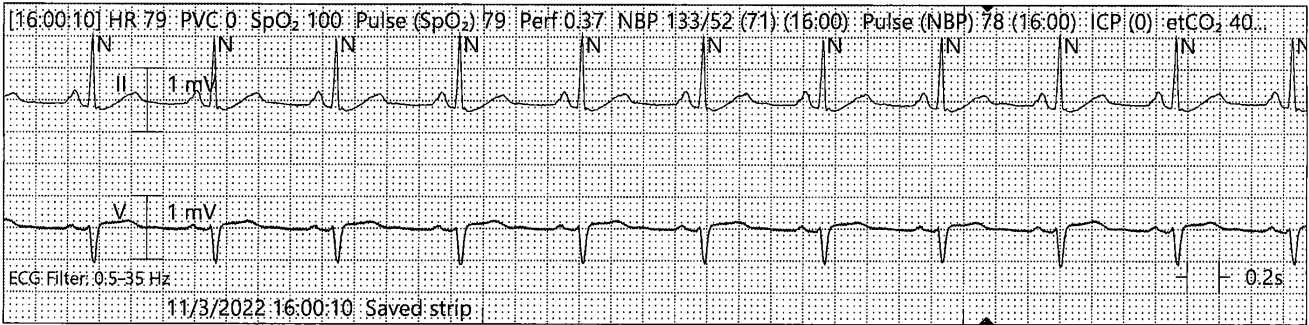
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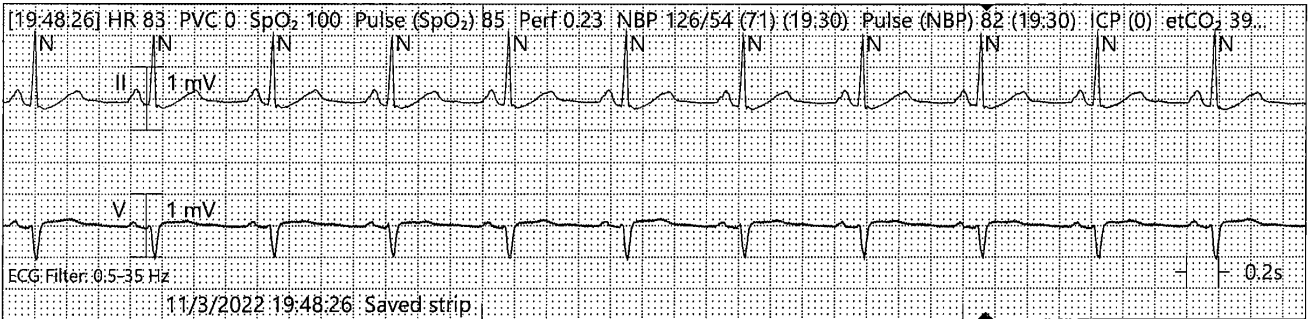
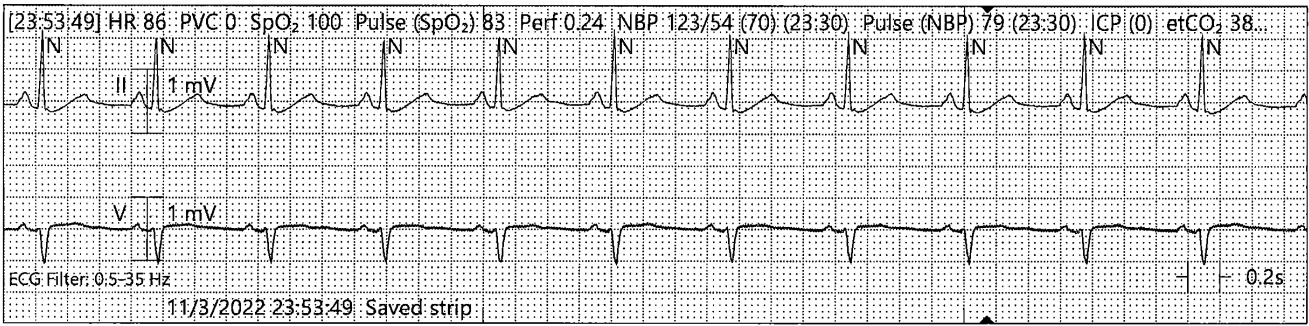
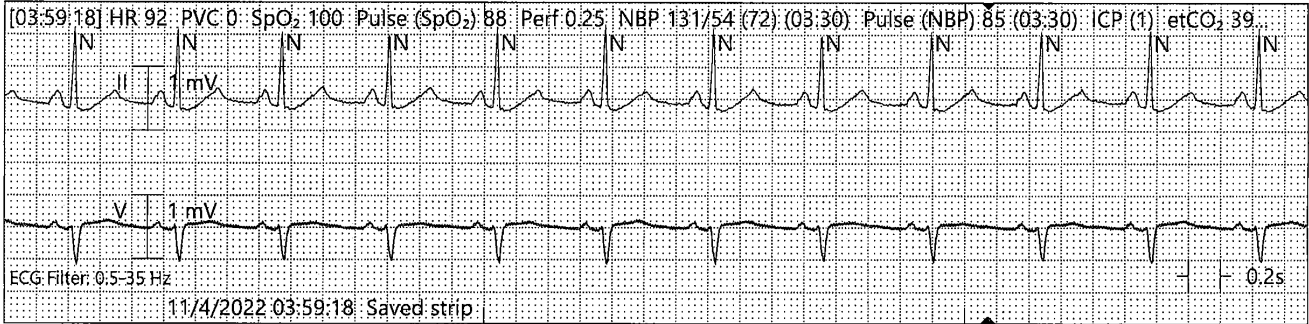
ICU	My Institution
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LYONS, KATHLEEN	QH0054940416
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	ICU	My Institution
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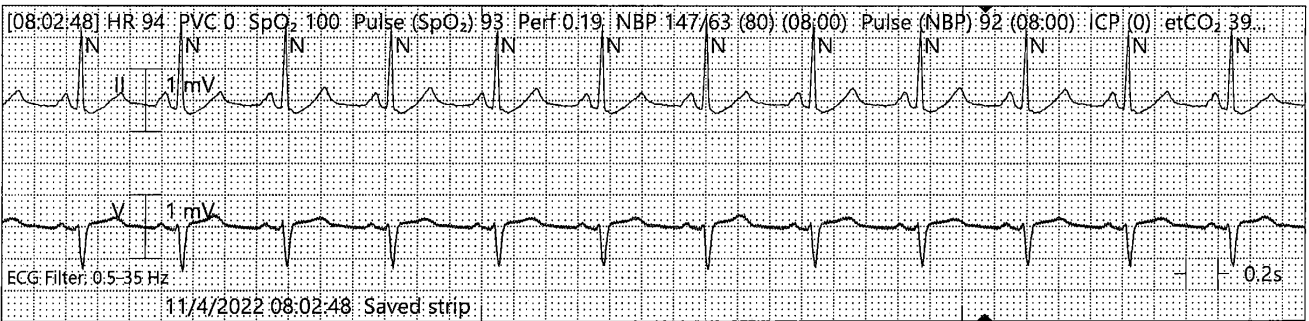
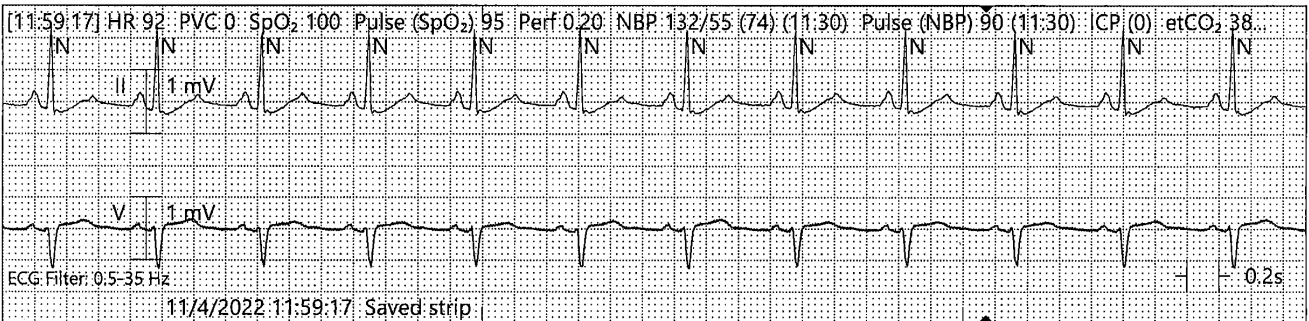
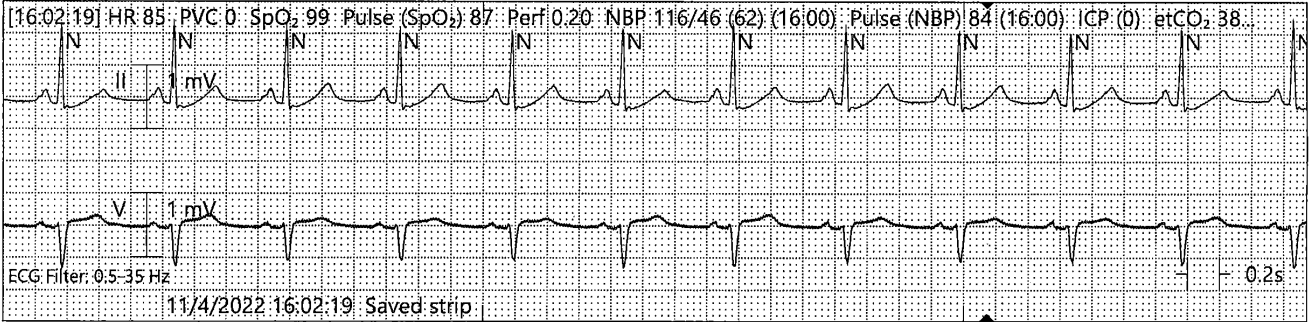
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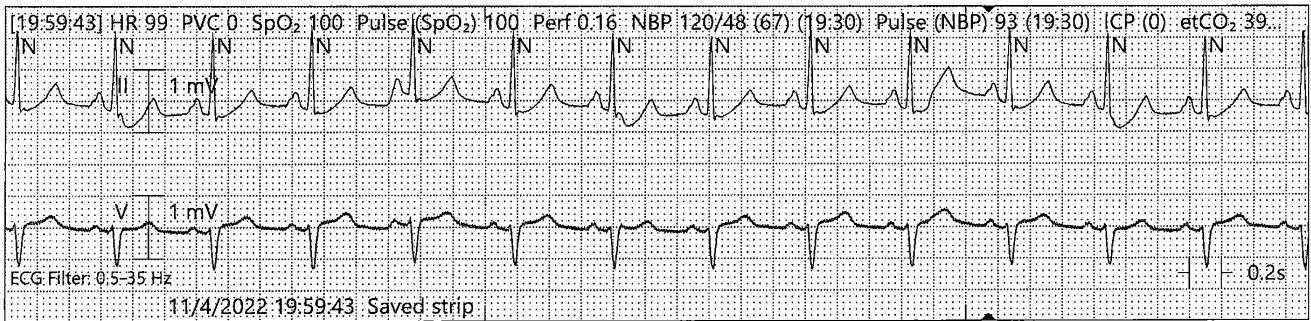
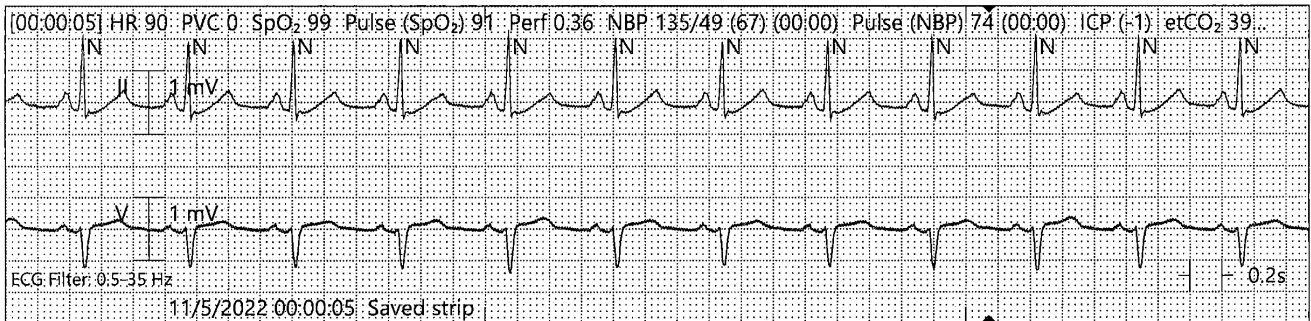
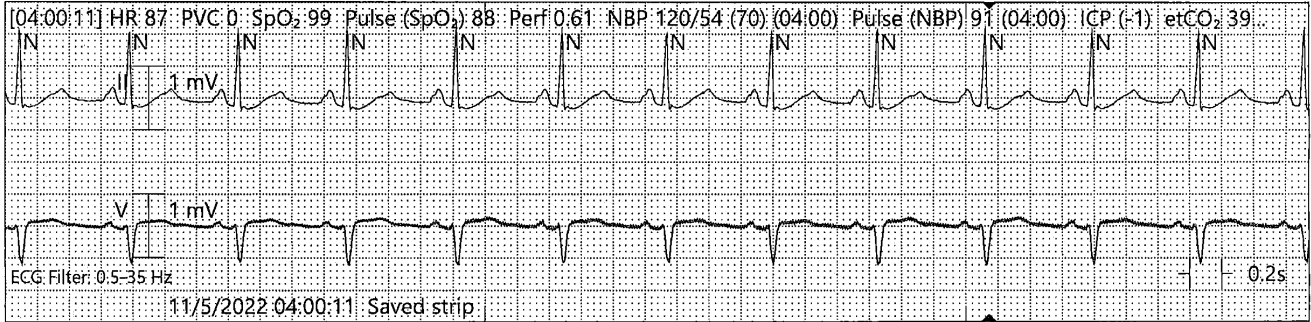


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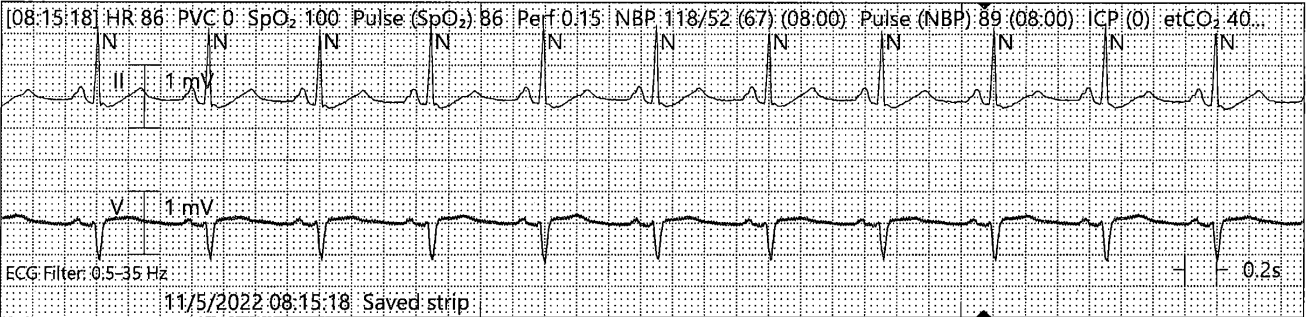
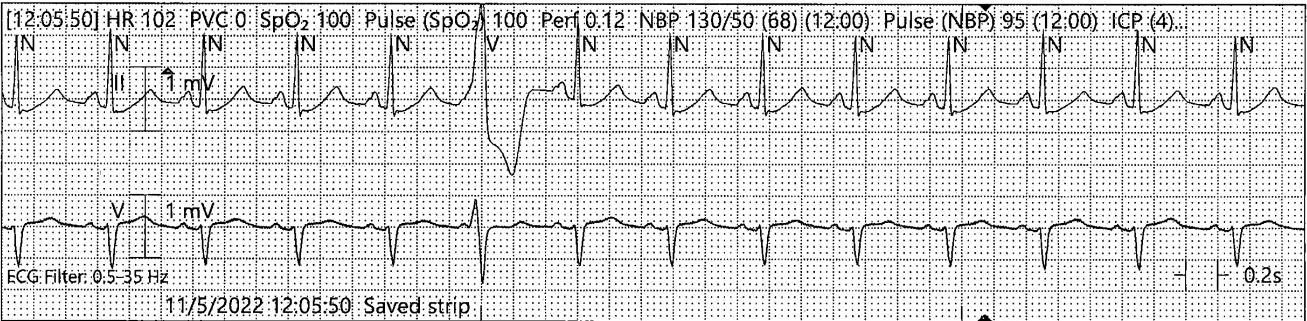
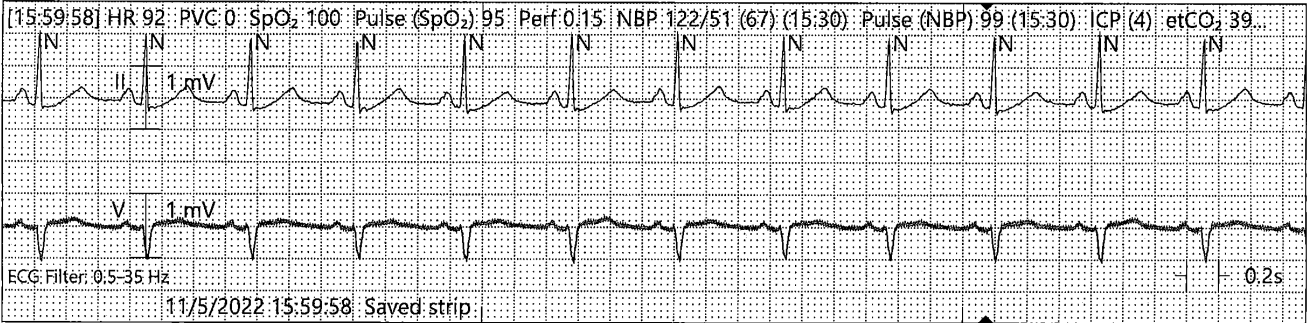
ICU | My Institution

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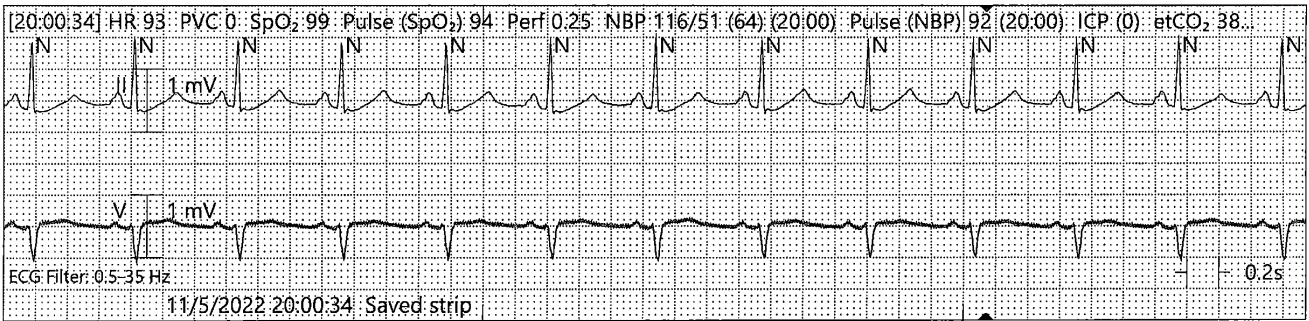
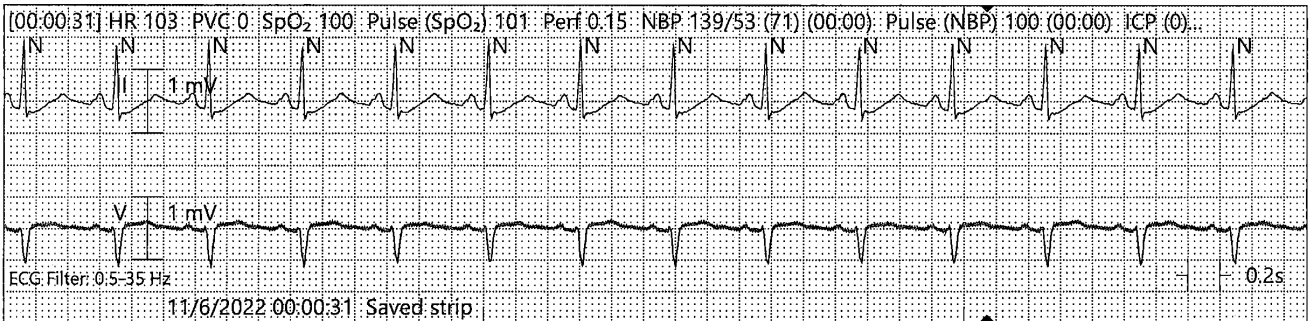
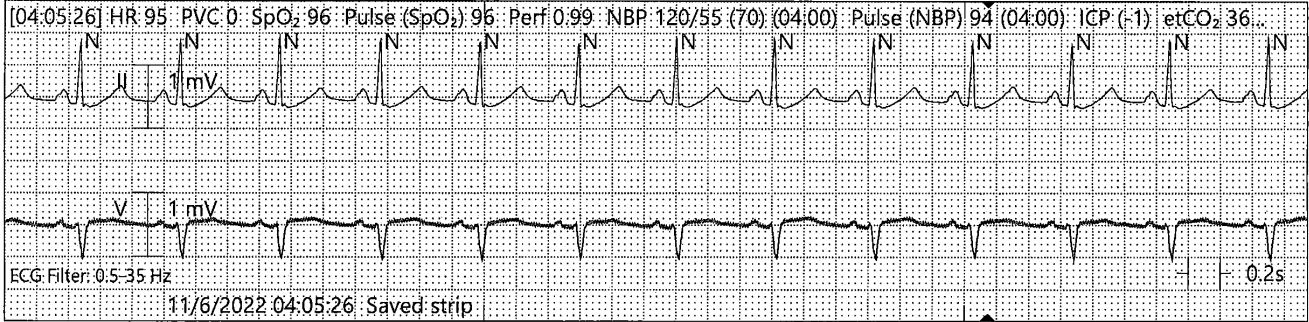
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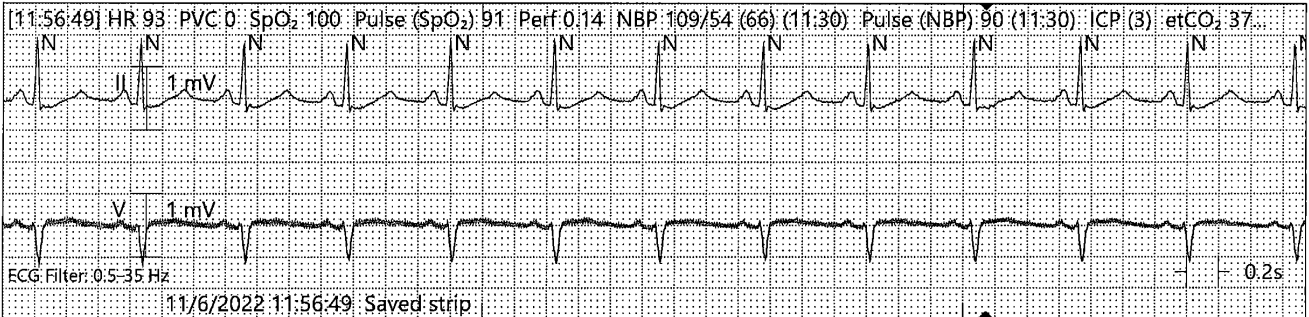
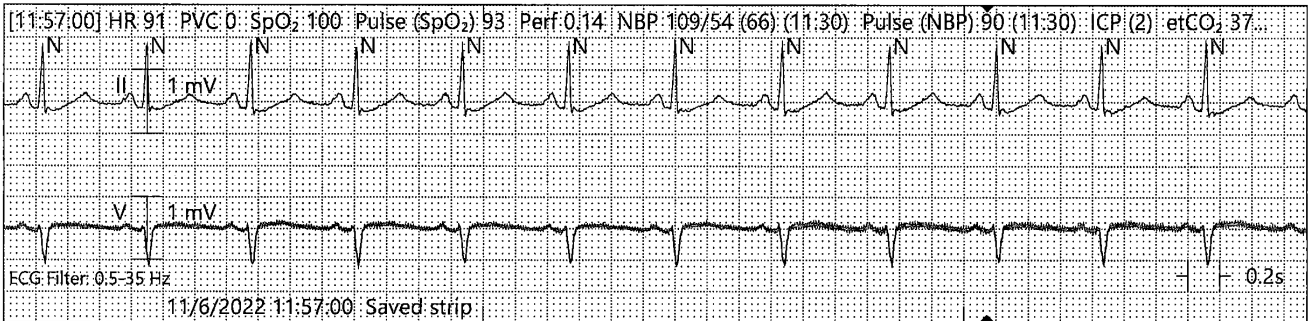
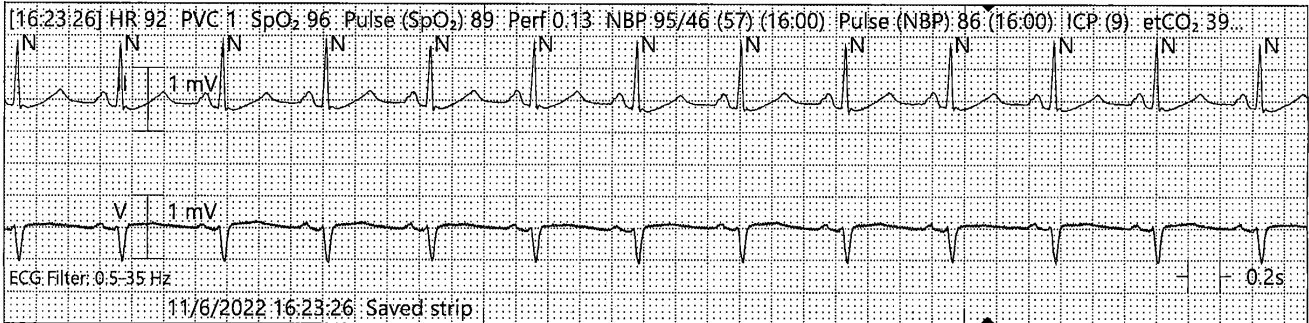
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ECG source: MICU7



	ICU	My Institution
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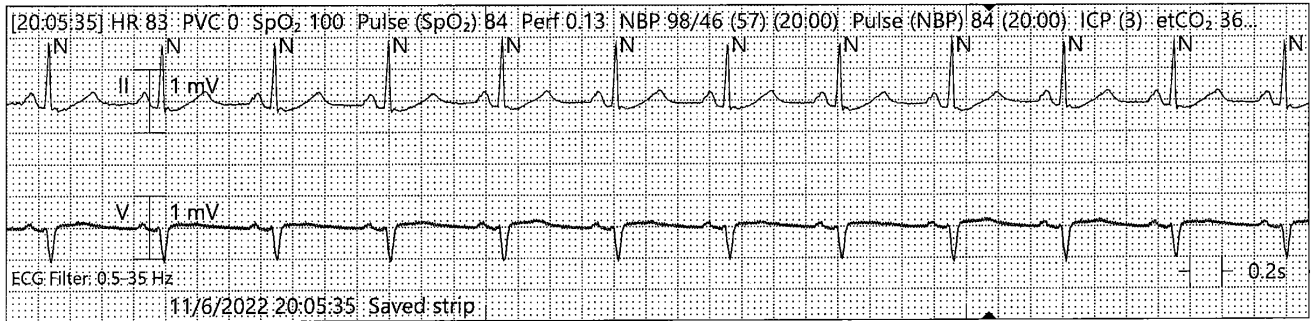
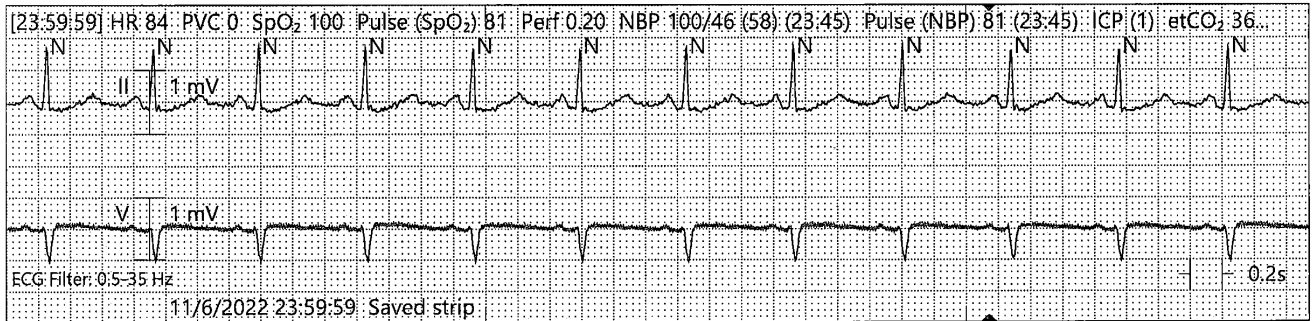
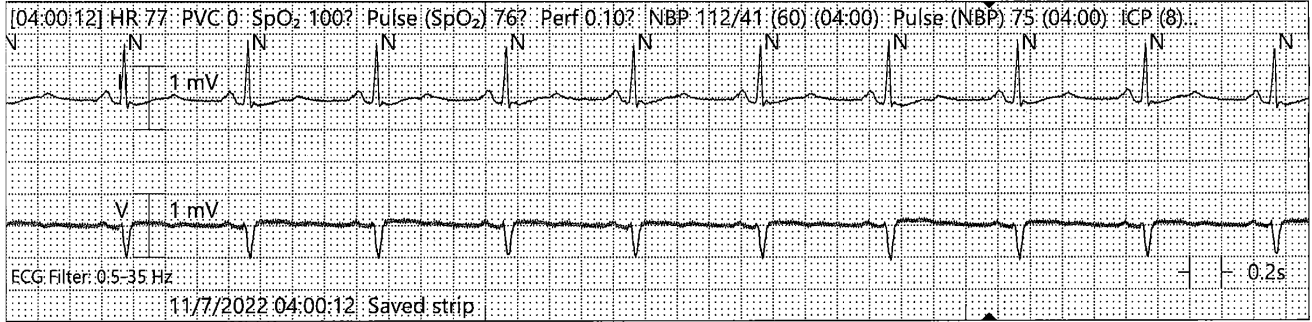
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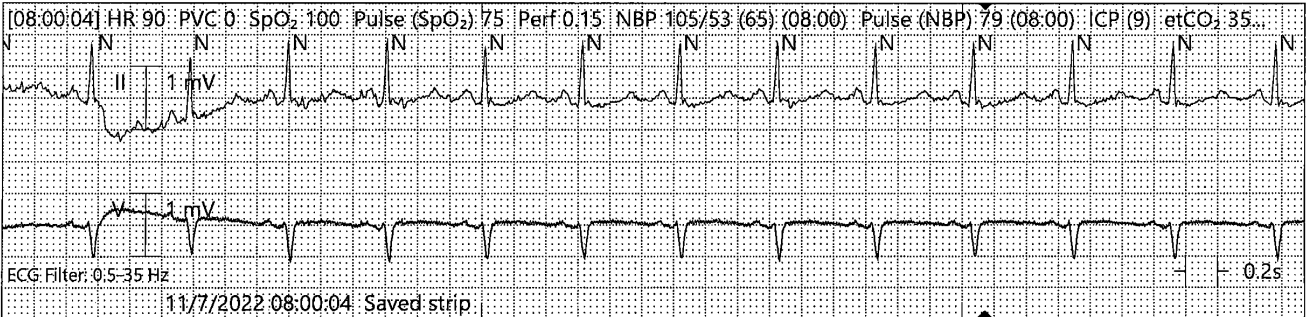
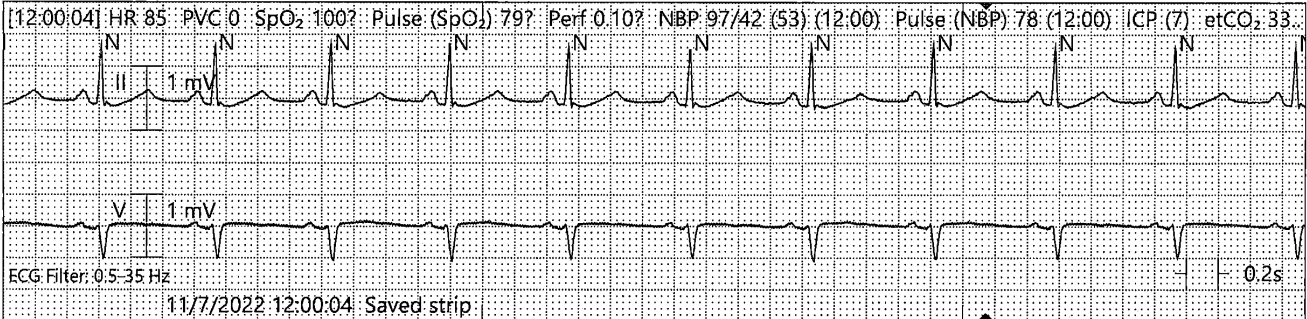
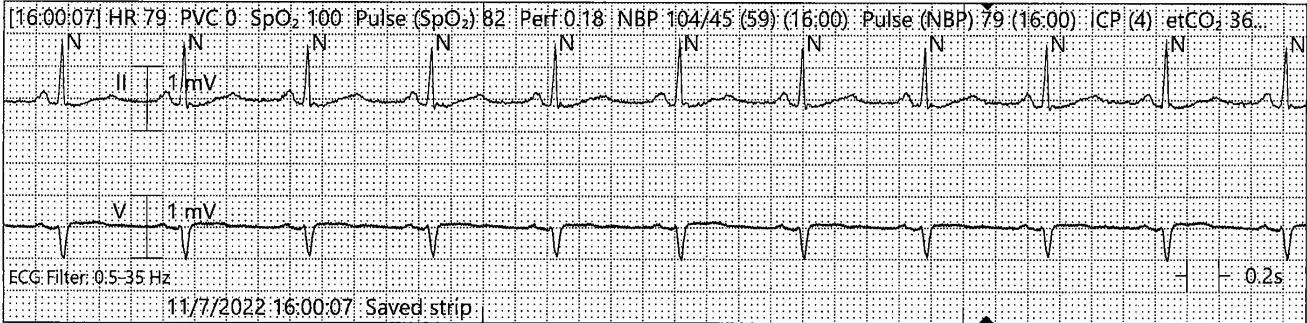


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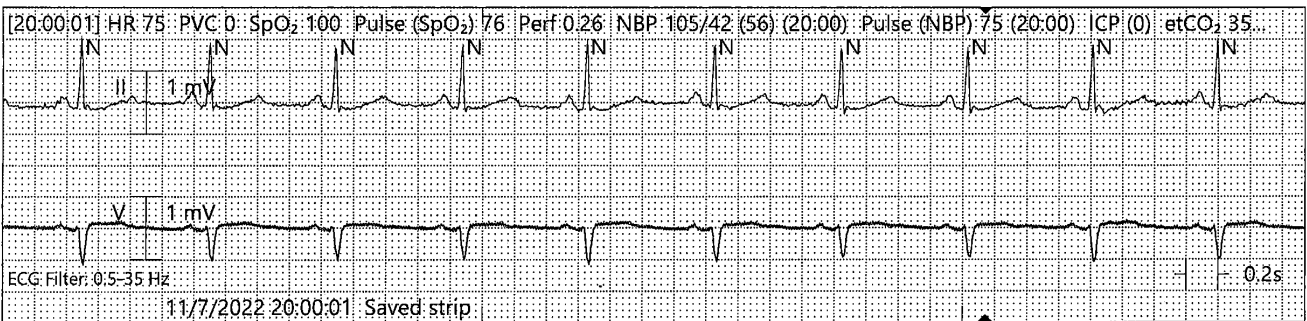
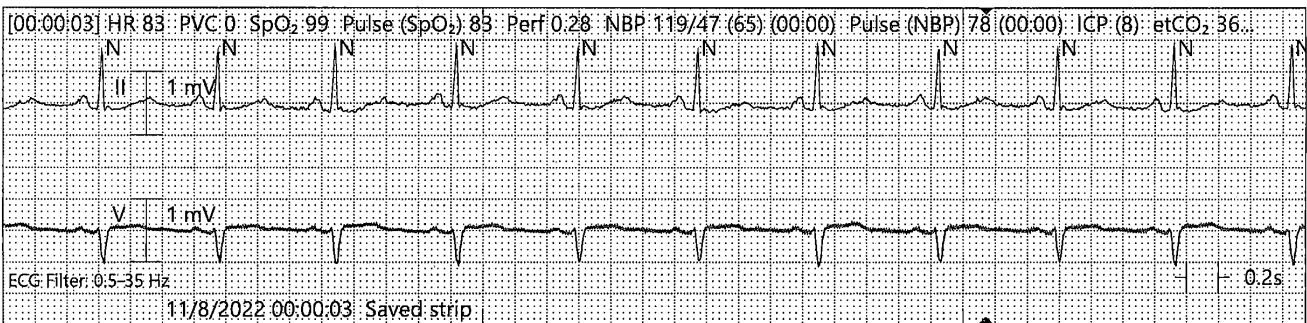
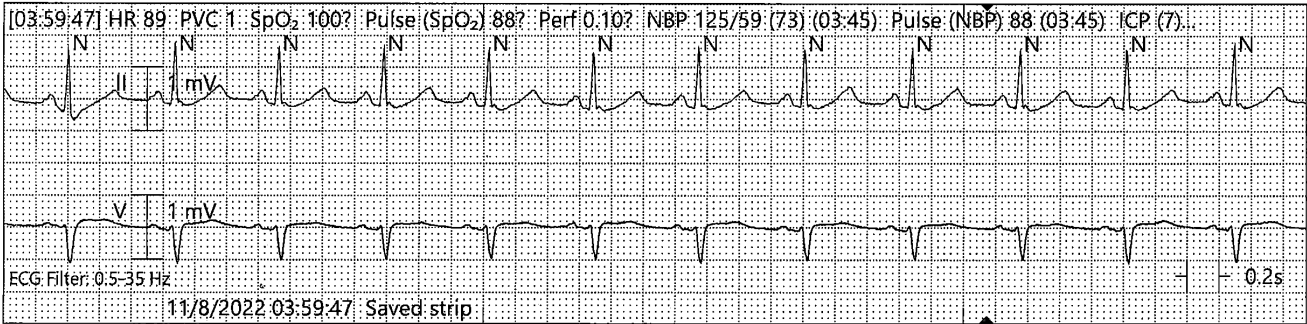
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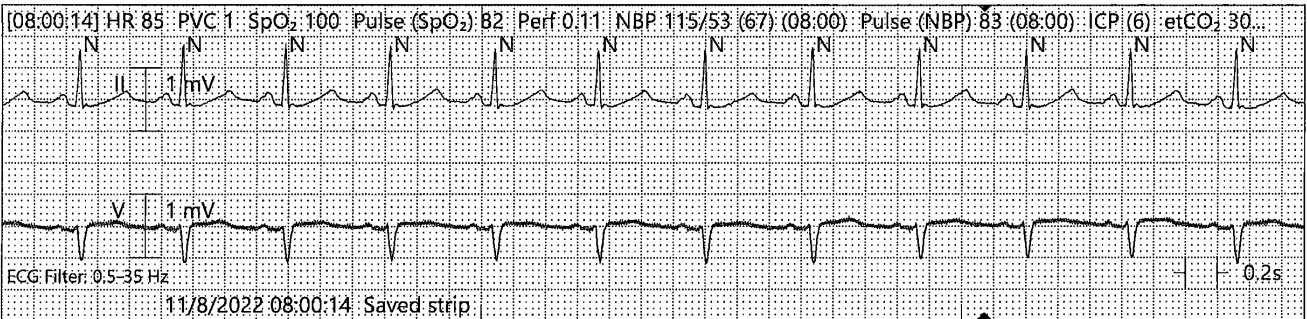
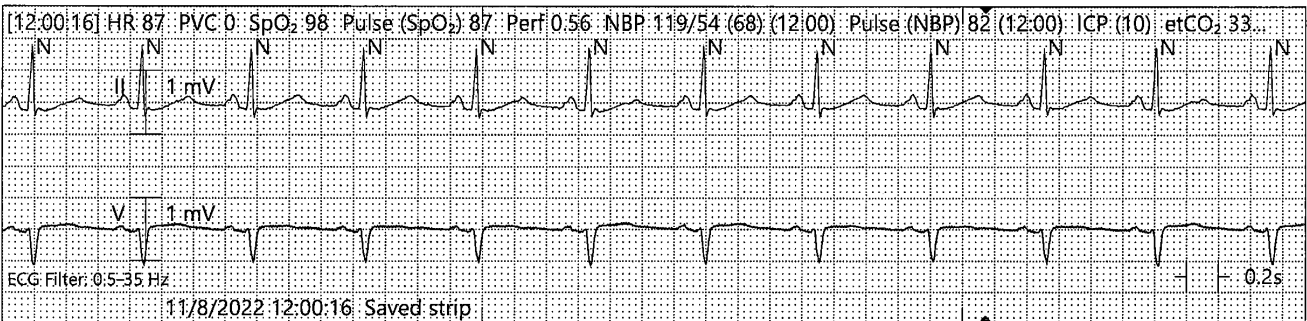
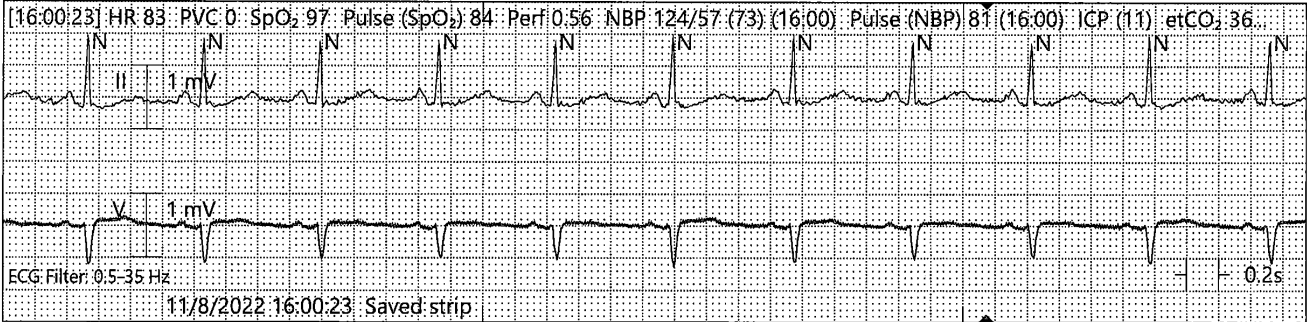
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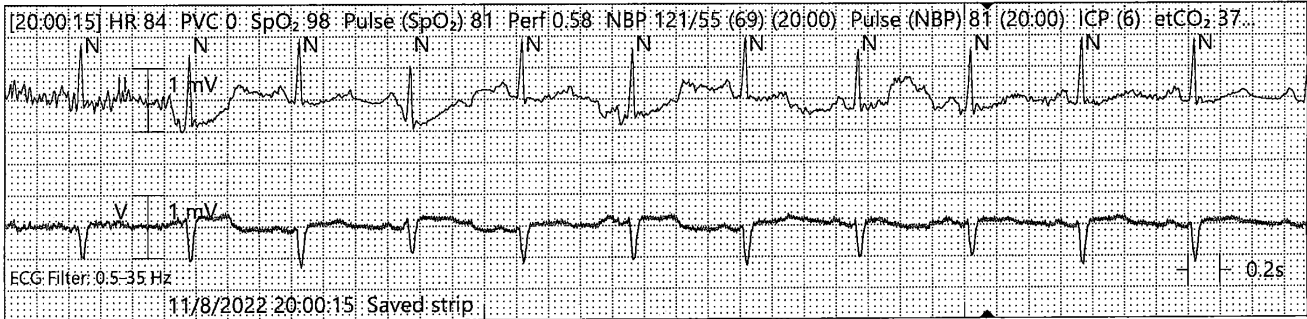
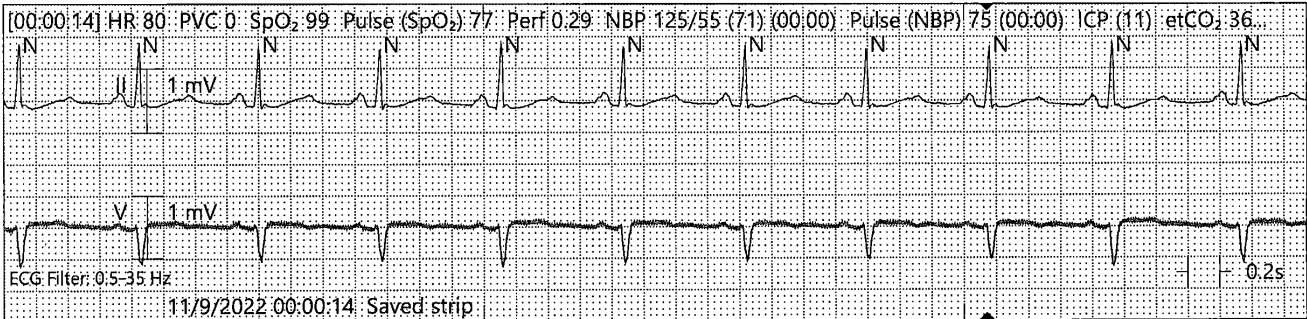
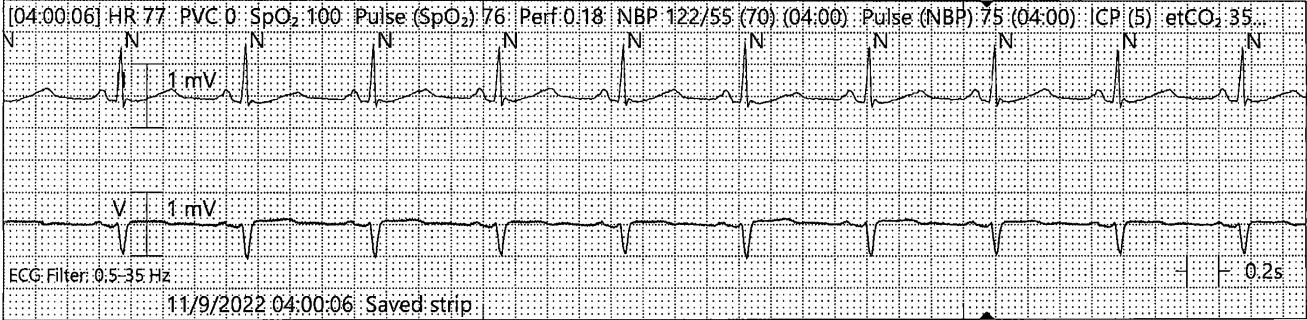
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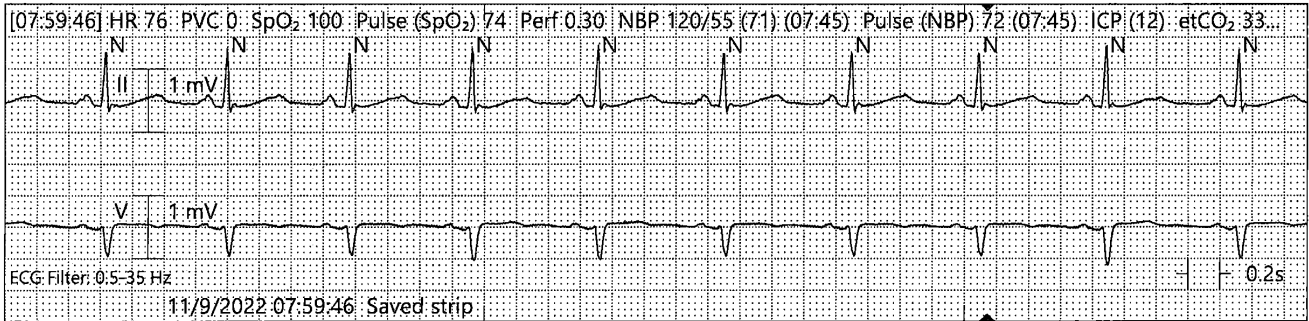
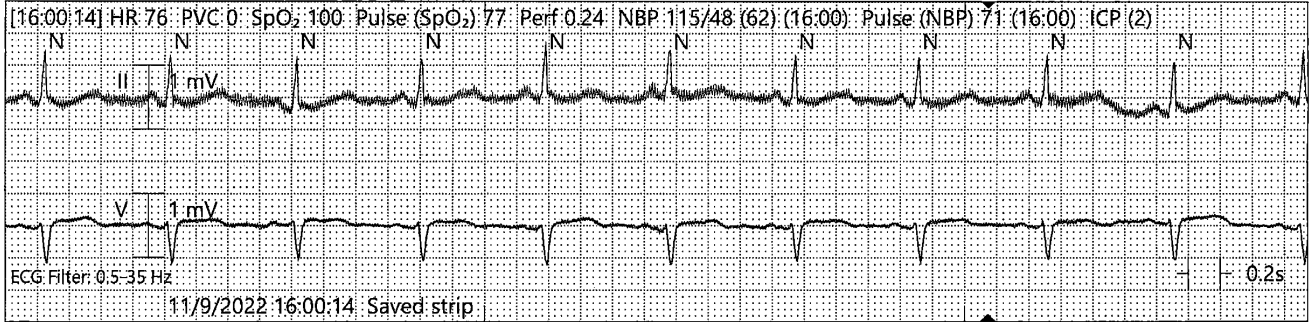
	ICU	My Institution
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416	
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ECG source: MICU7



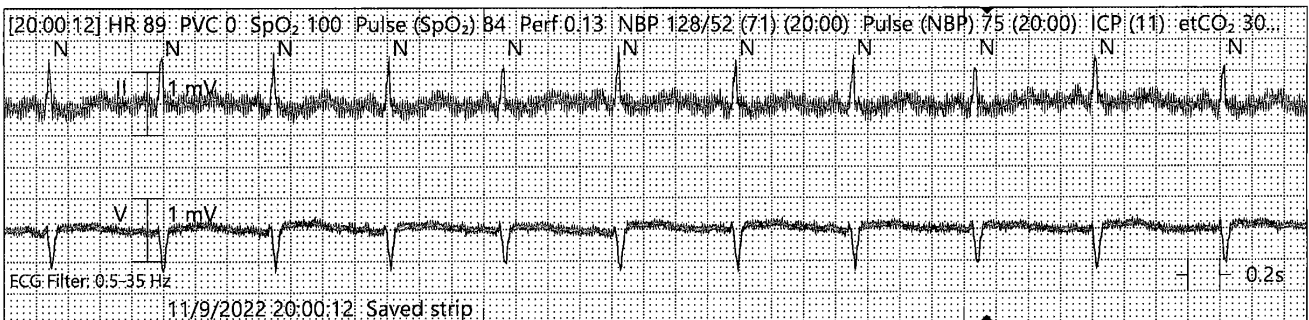
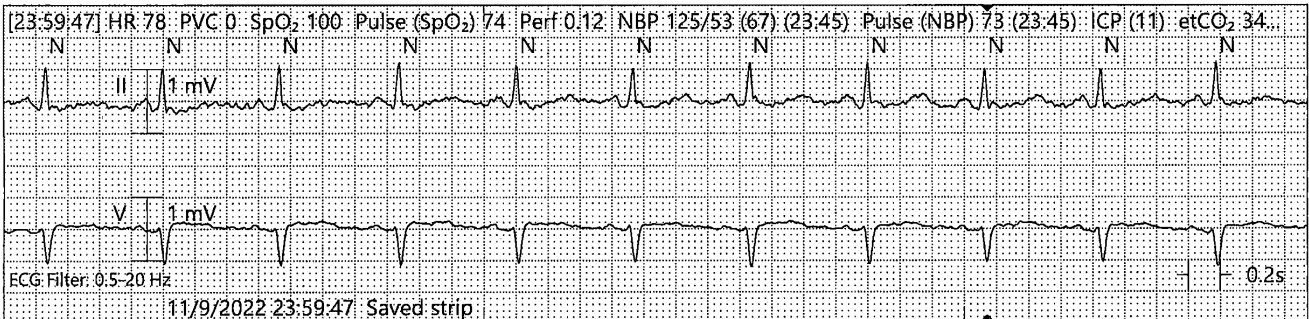
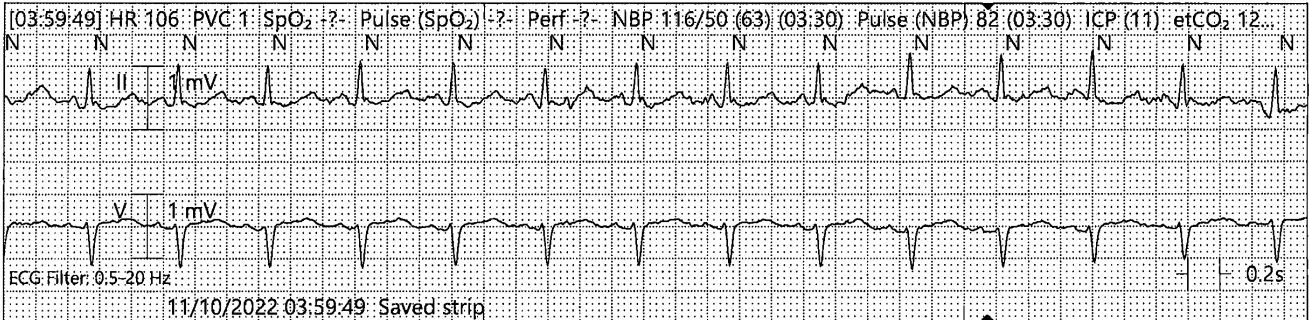
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Alarm Review Report

ICU 7

LYONS, KATHLEEN                      QH0054940416

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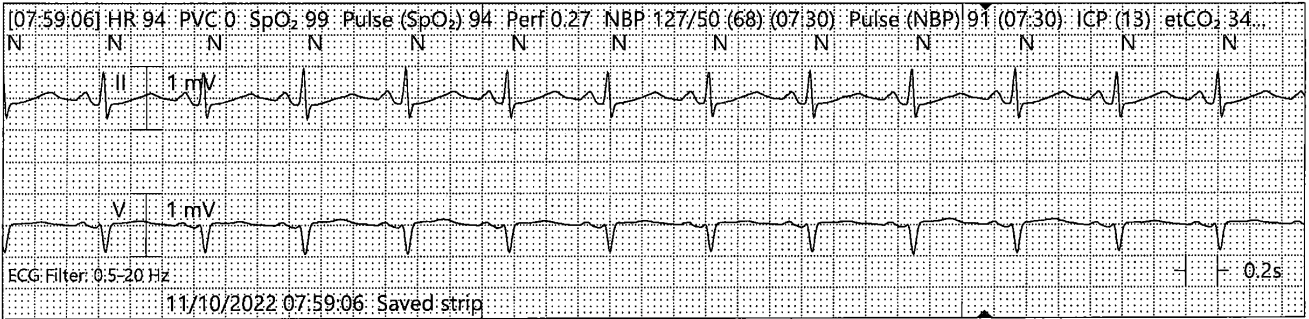
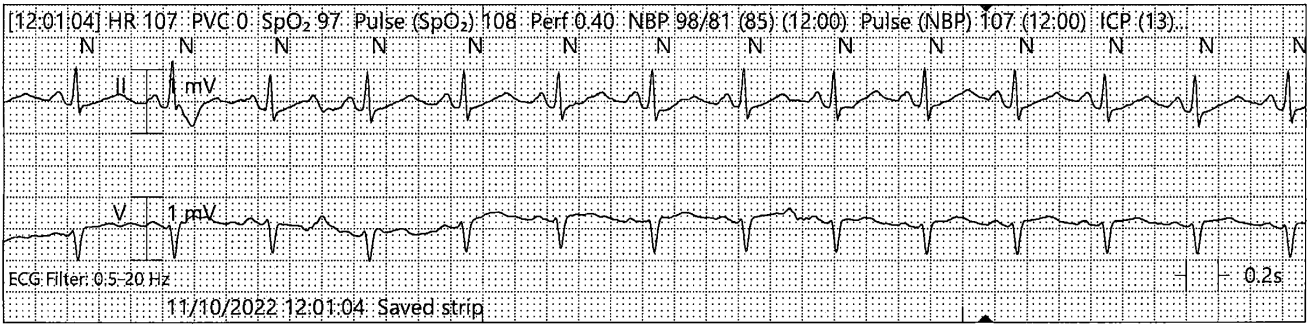
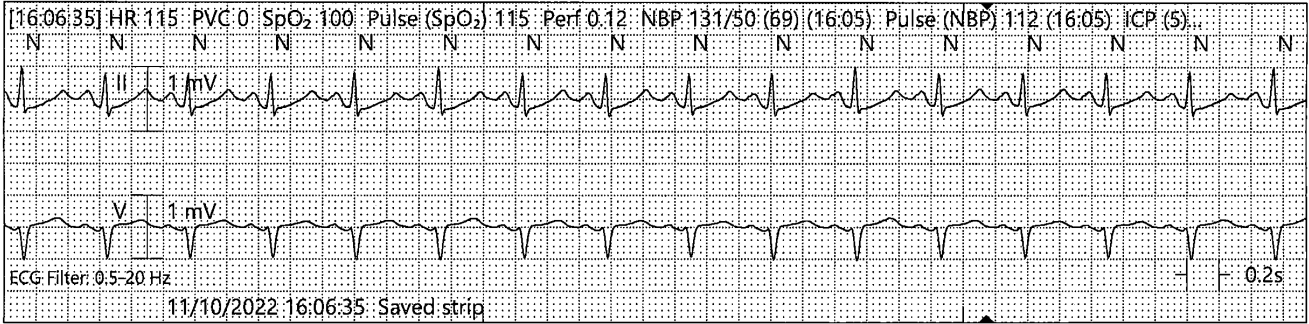
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ICU 7

LYONS, KATHLEEN	QH0054940416
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ECG source: MICU7



	ICU	My Institution
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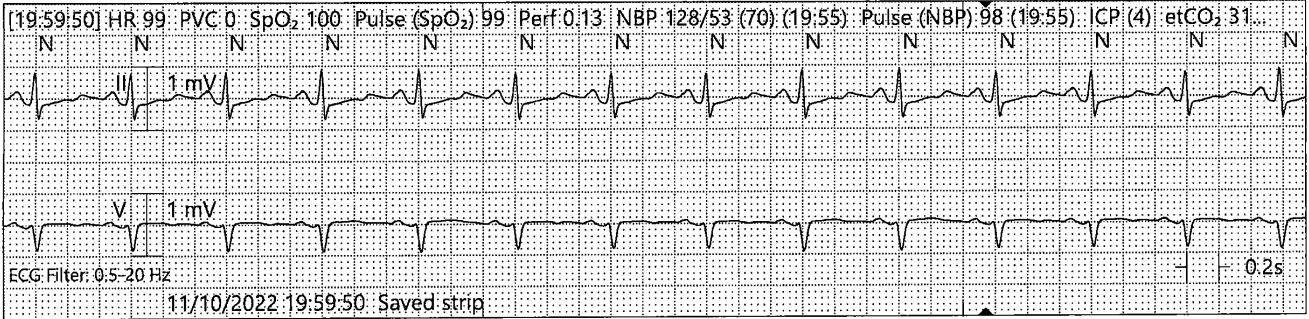
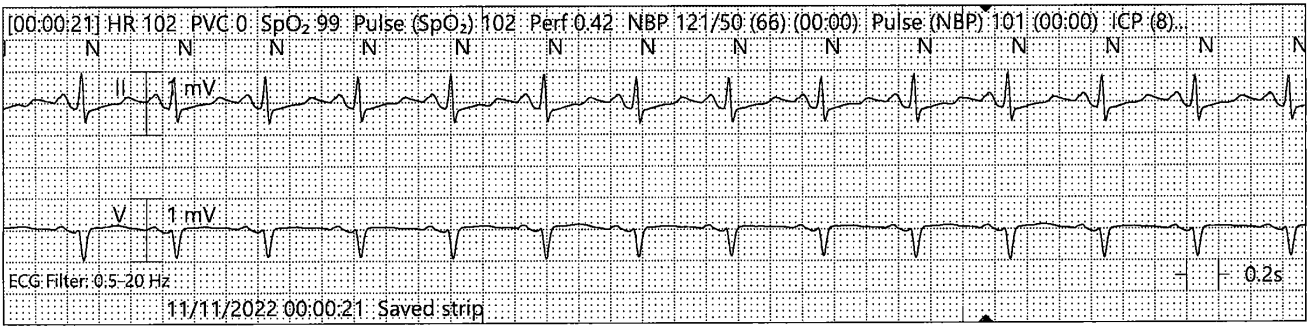
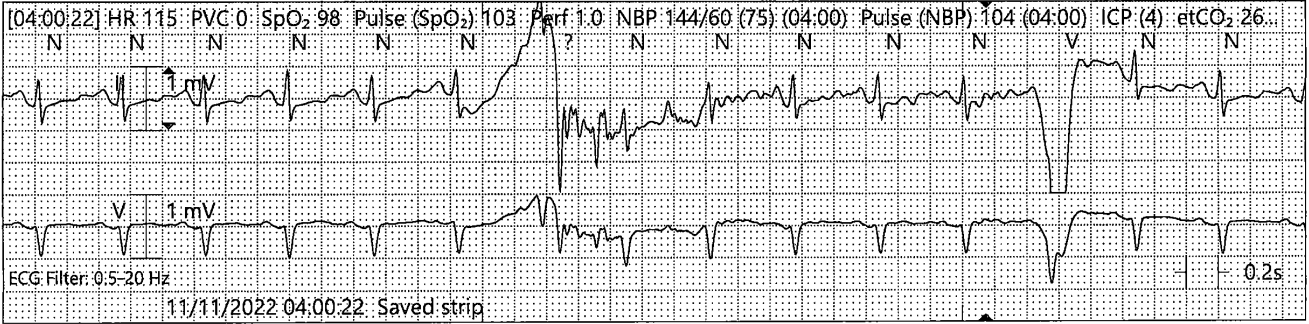
Alarm Review Report

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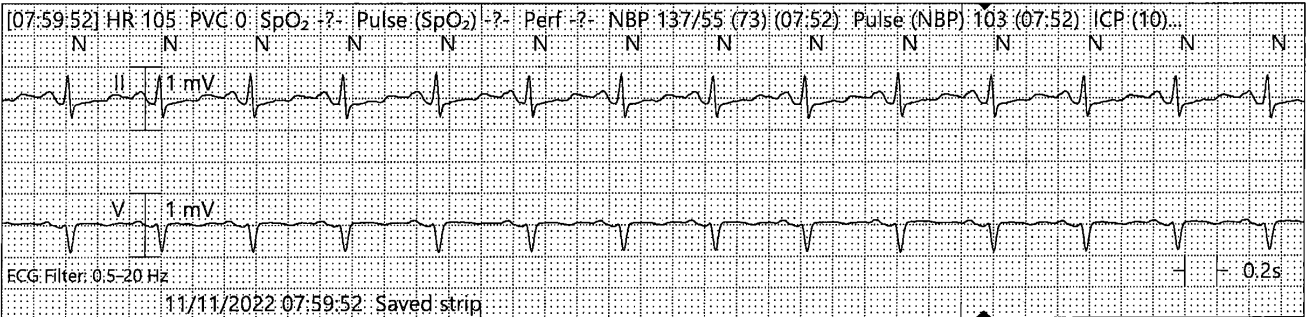
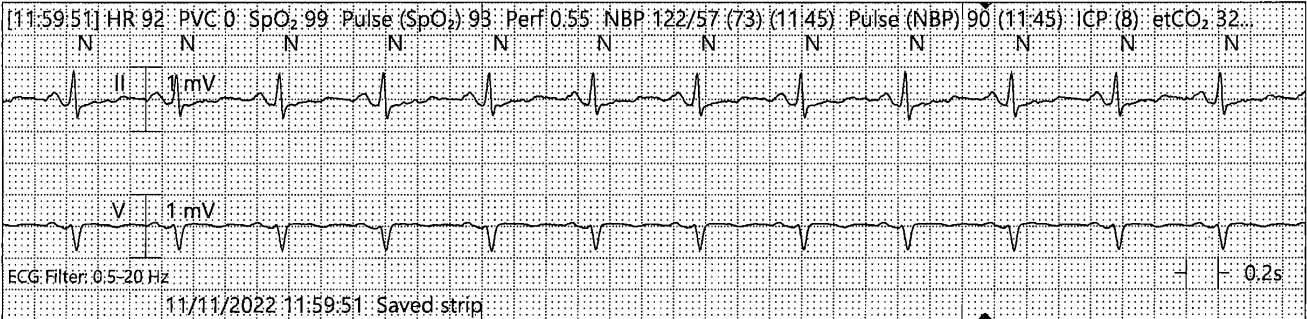
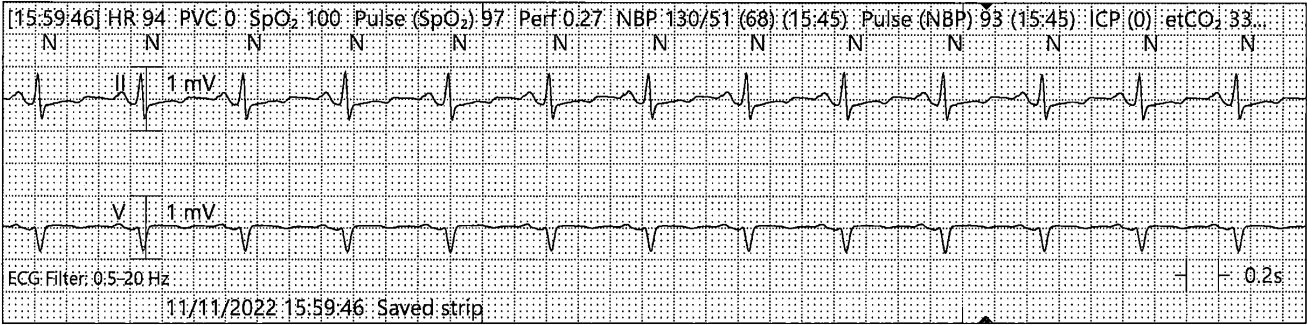
ICU My Institution

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ICU 7

LYONS, KATHLEEN	QH0054940416
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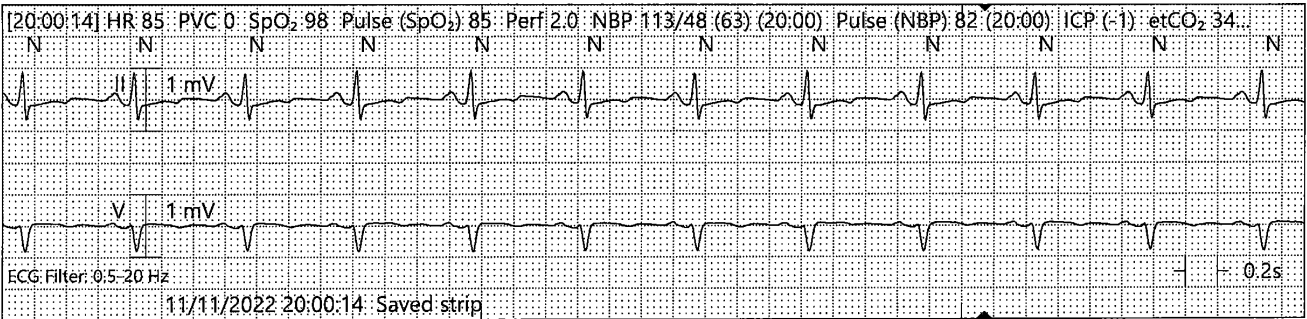
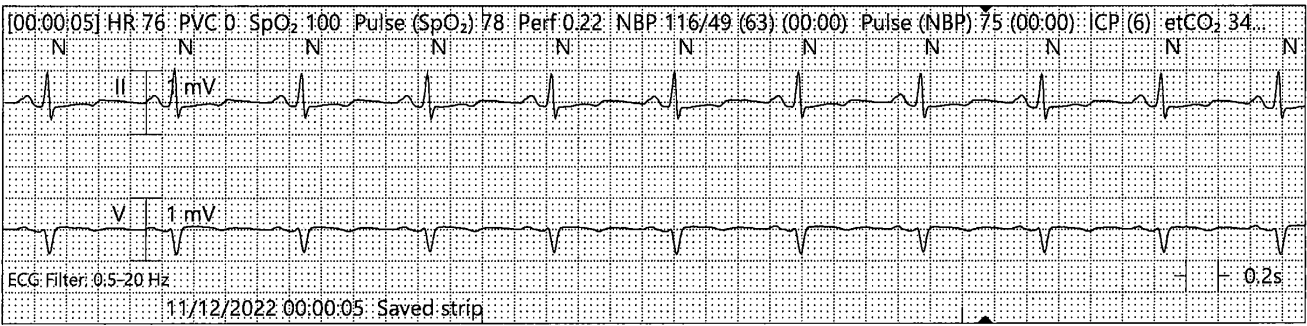
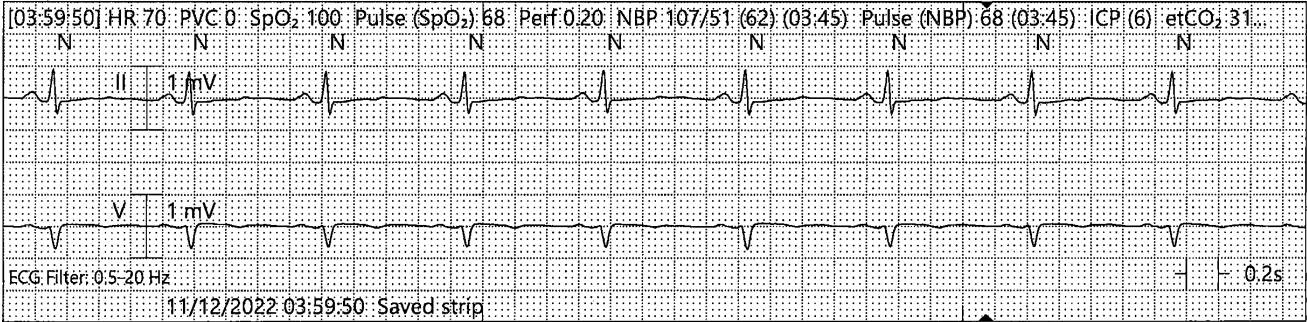
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ICU 7

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ECG source: MICU7



ICU My Institution

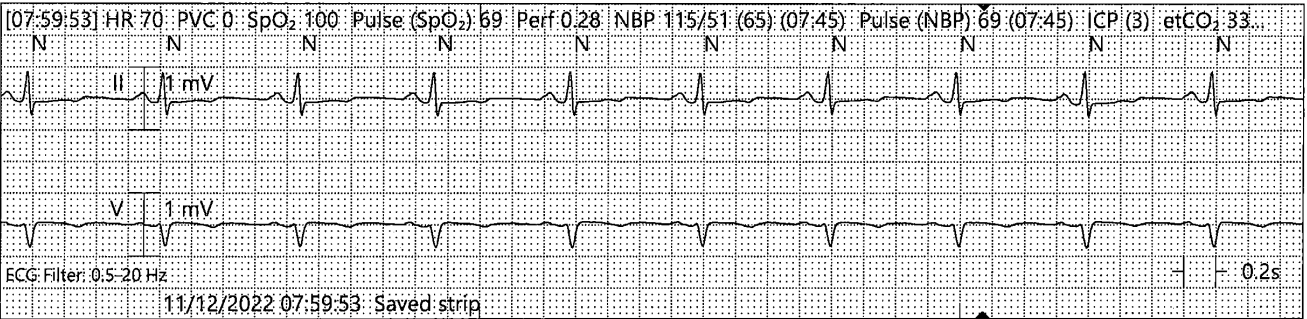
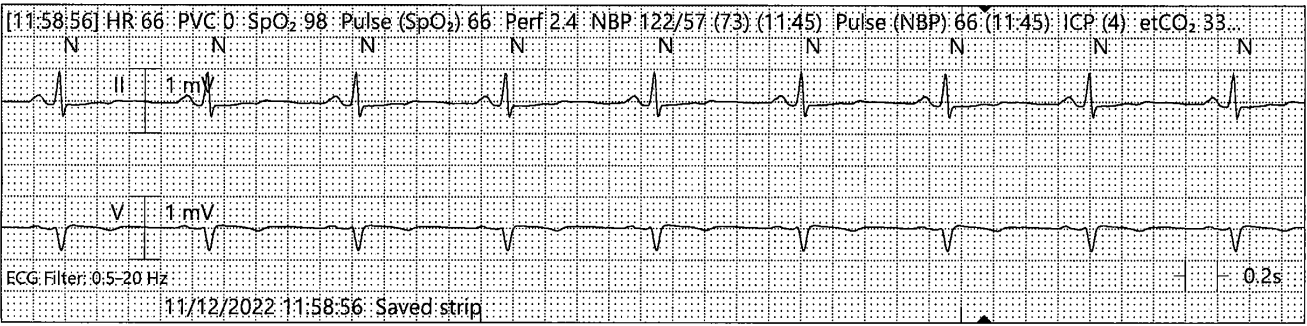
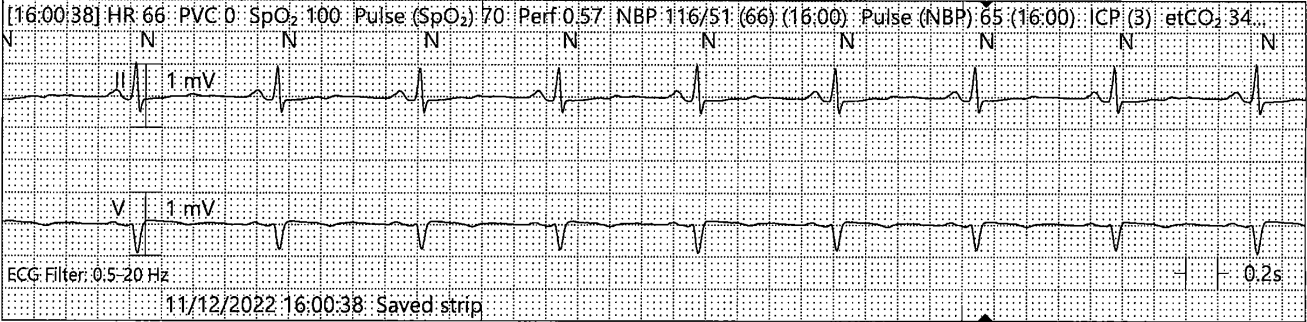
Alarm Review Report

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LYONS, KATHLEEN

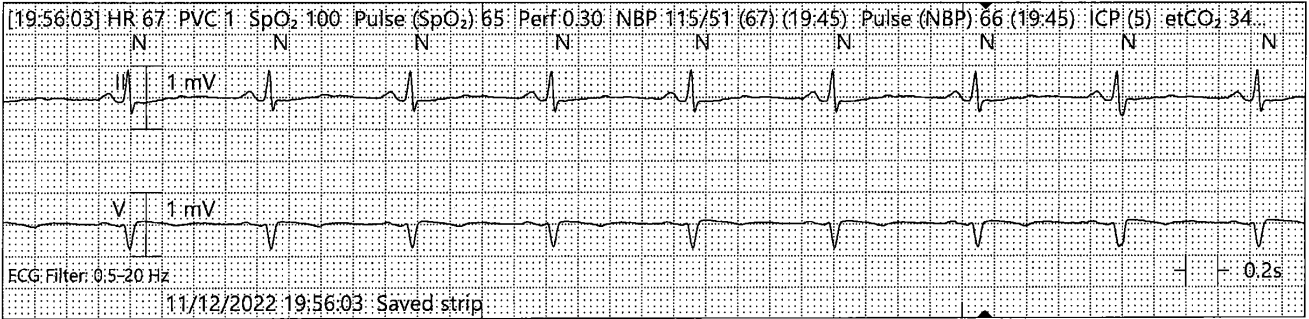
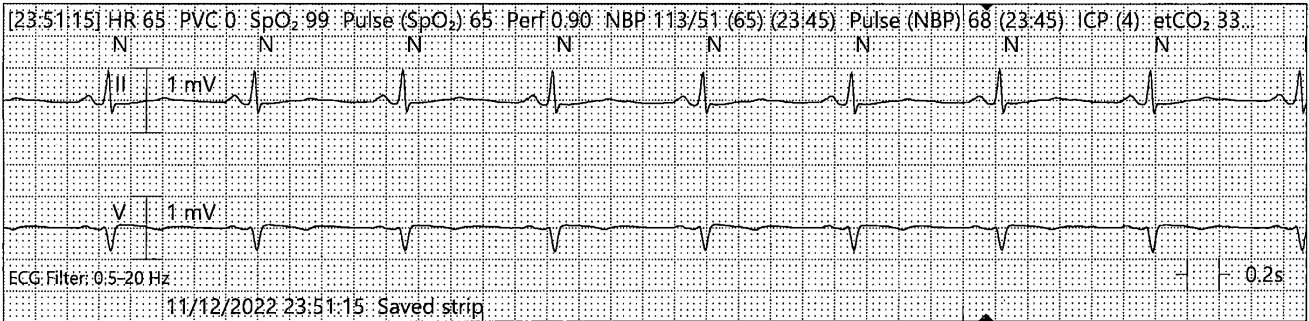
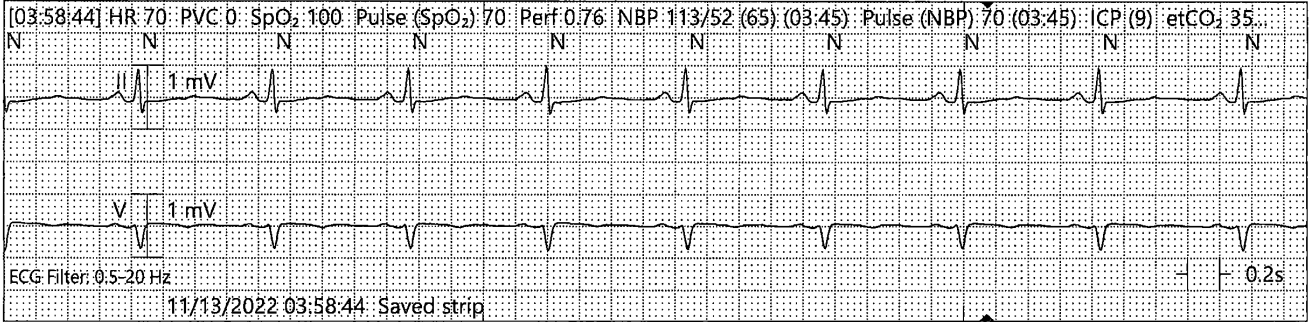
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LYONS, KATHLEEN	QH0054940416
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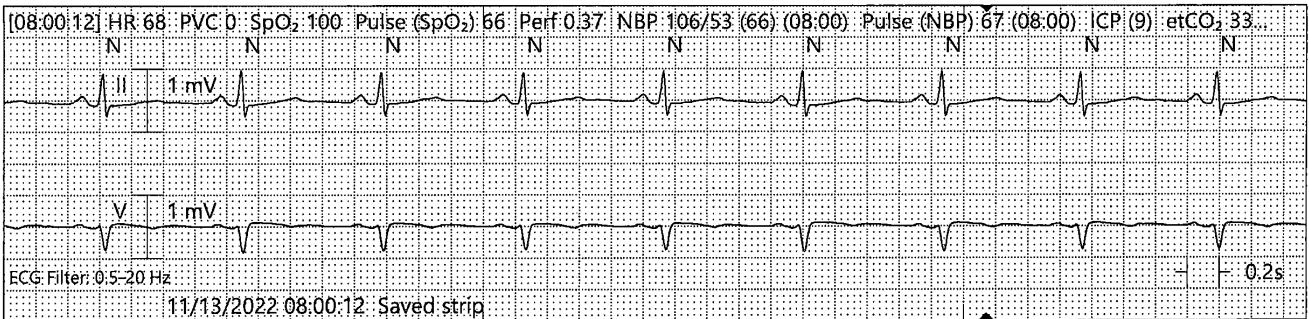
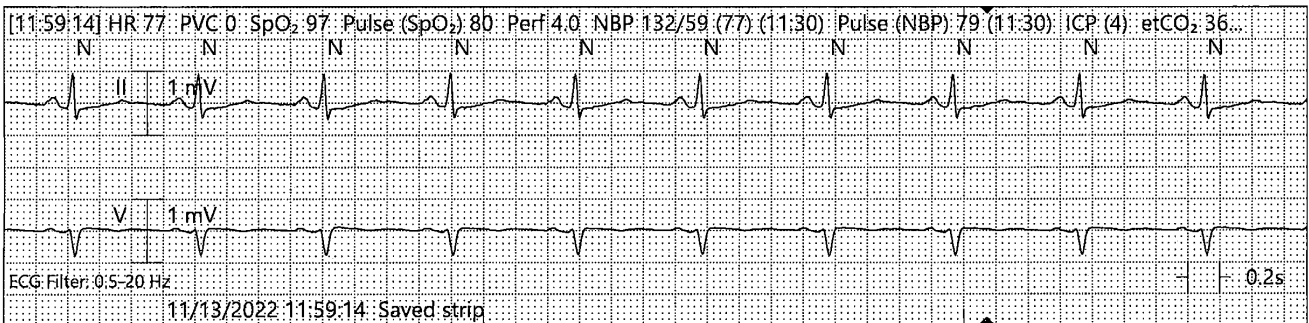
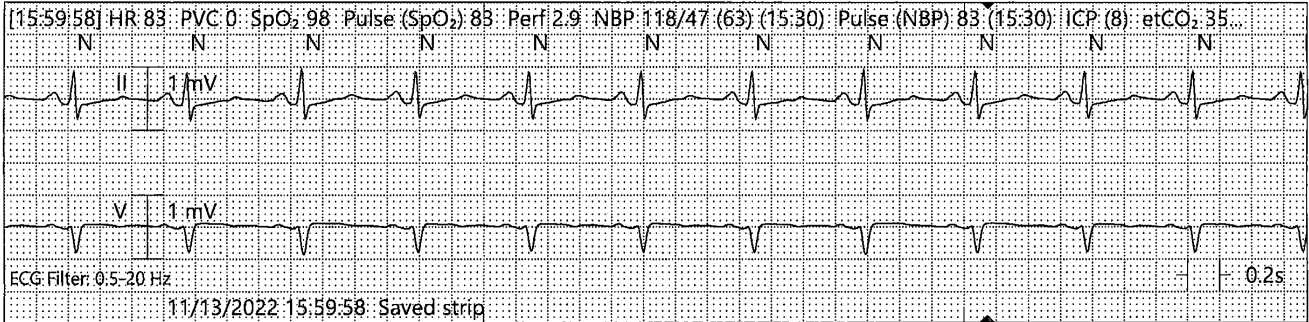
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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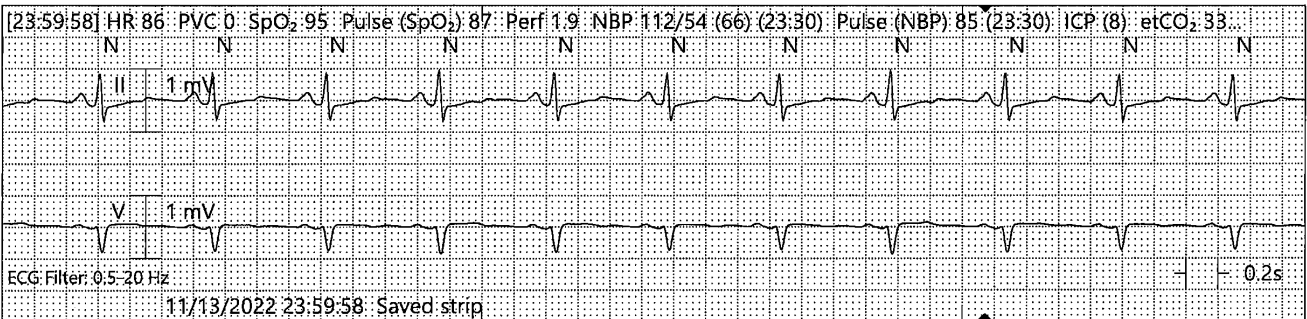
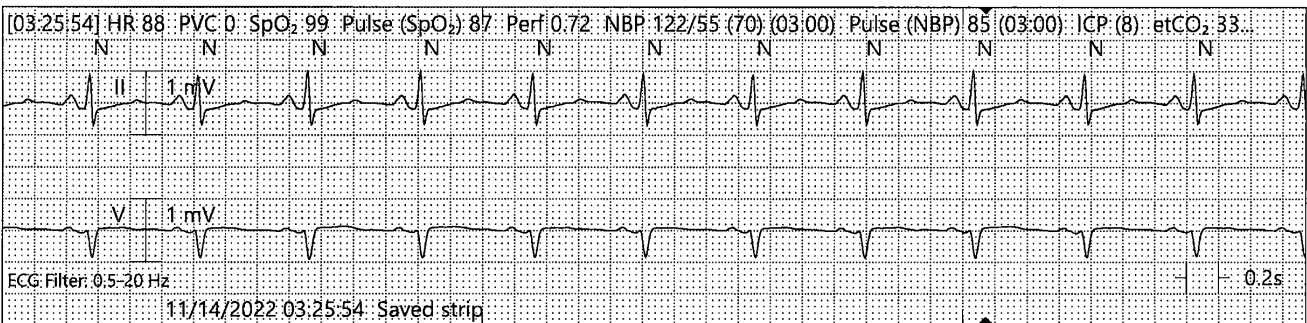
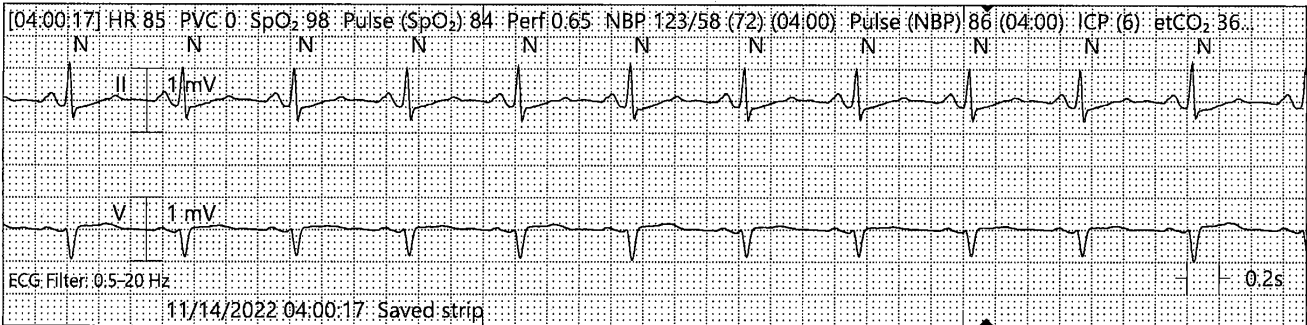
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ICU 7

LYONS, KATHLEEN	QH0054940416
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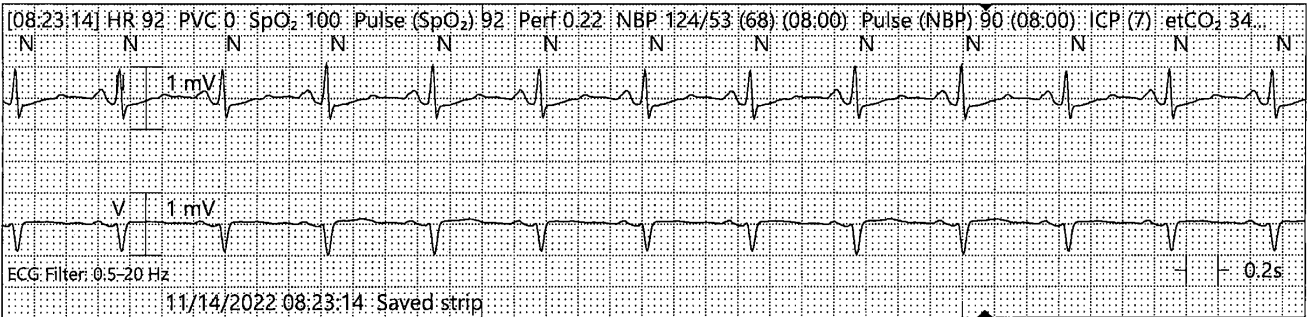
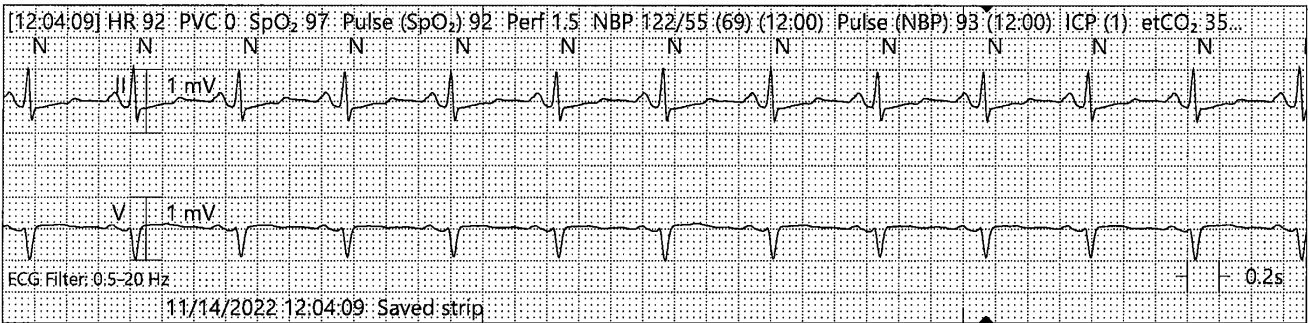
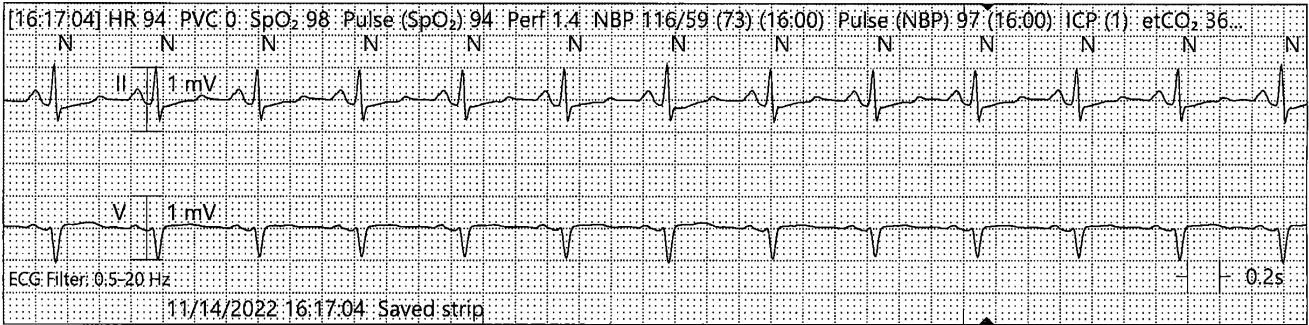
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ICU 7

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	ICU	My Institution
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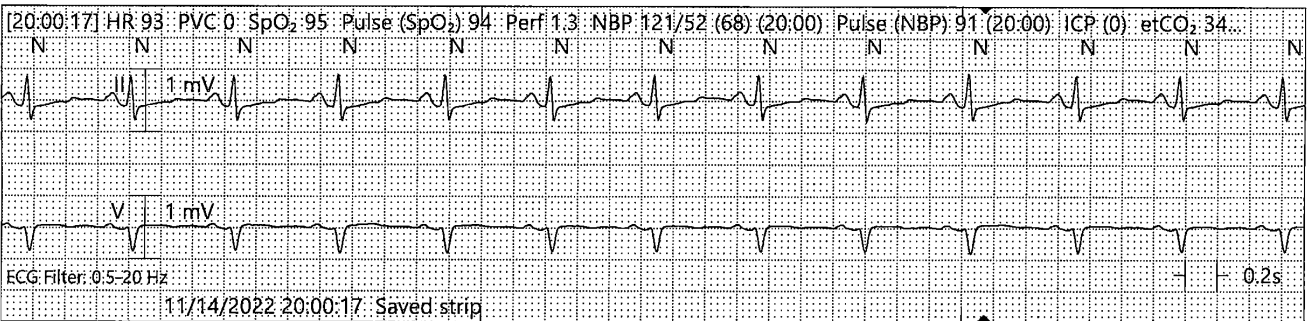
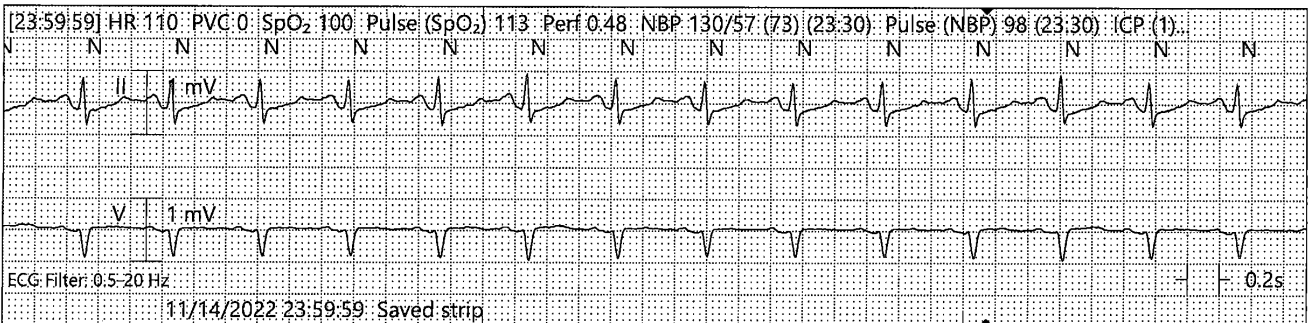
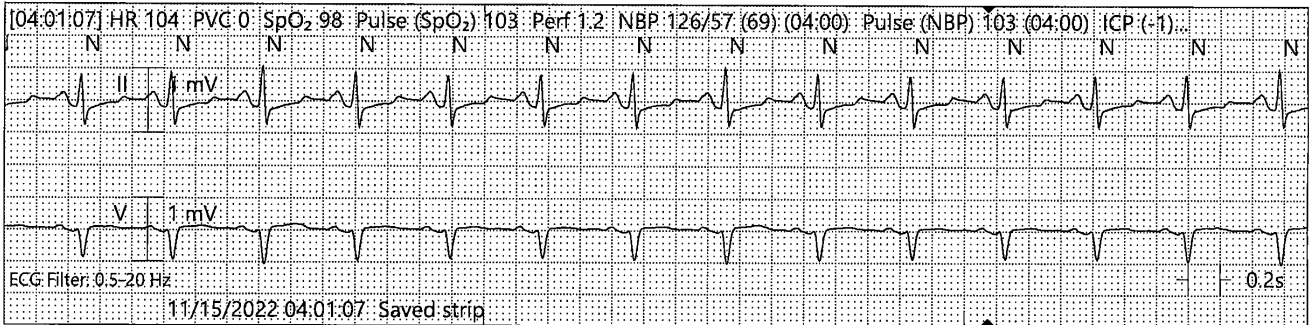


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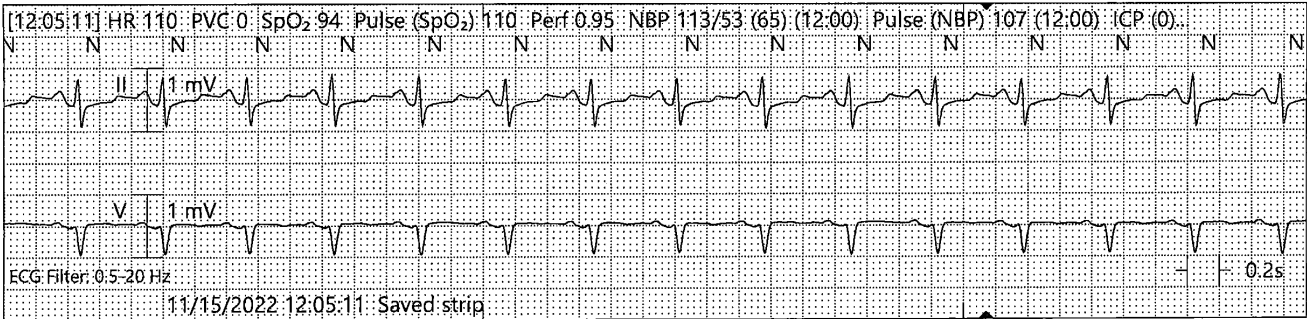
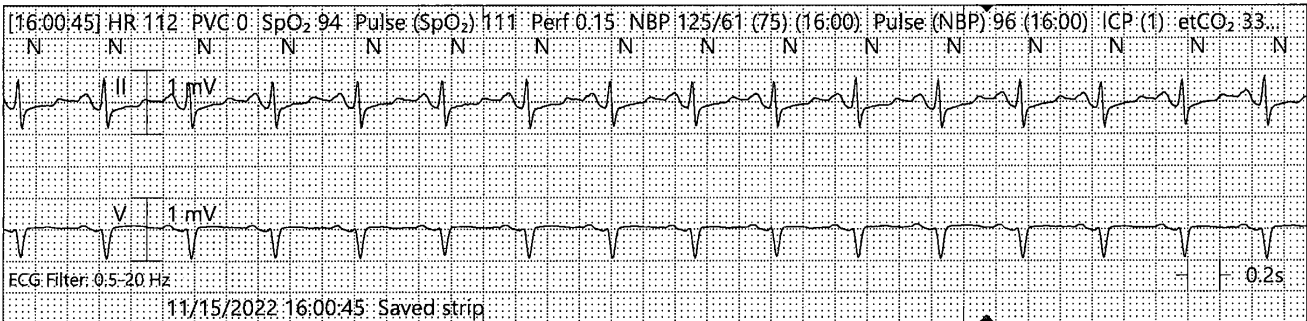
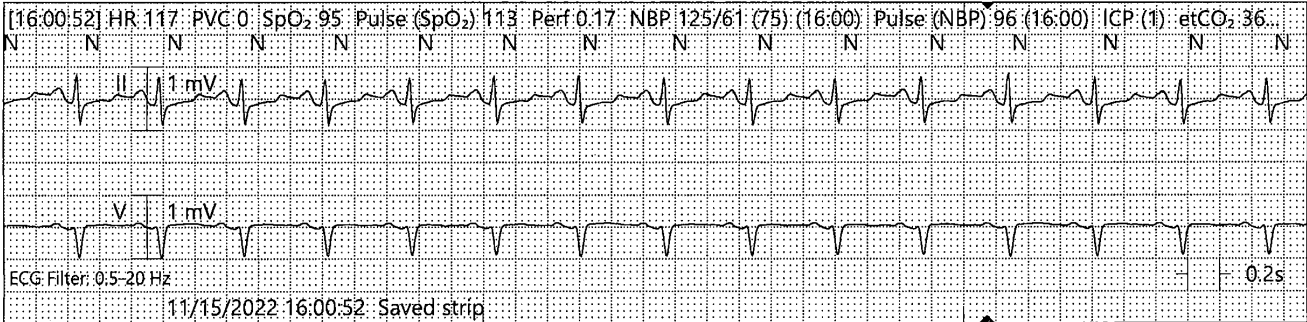
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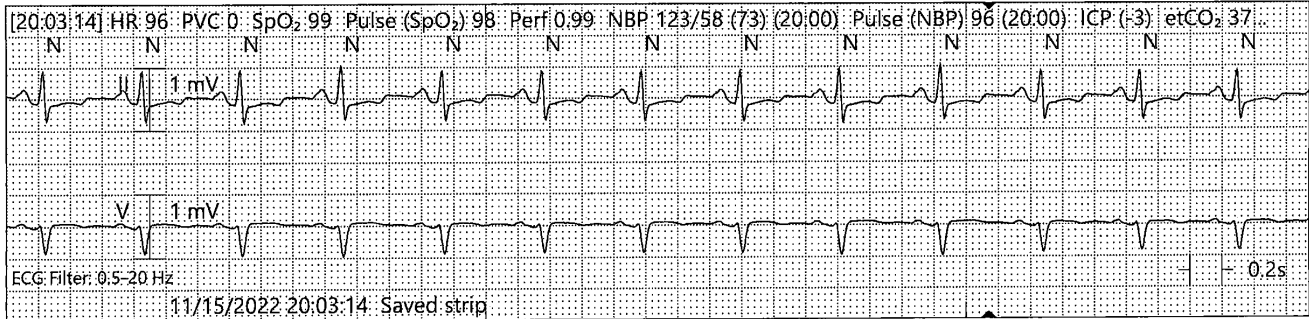
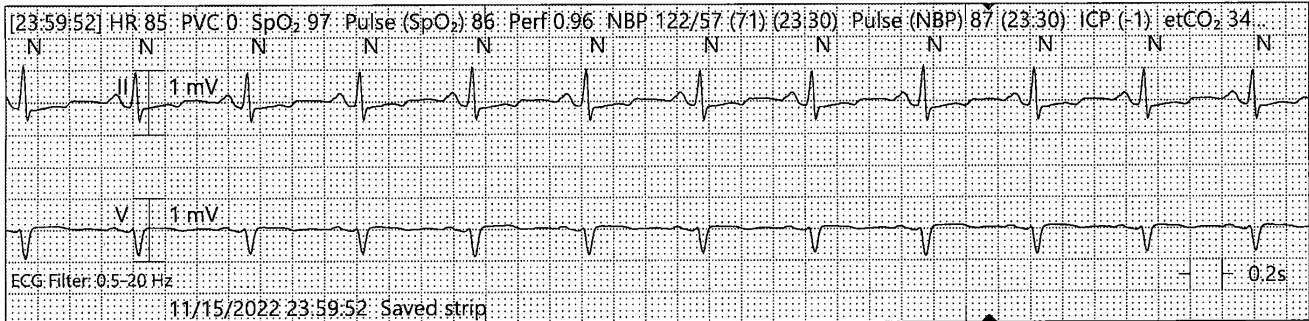
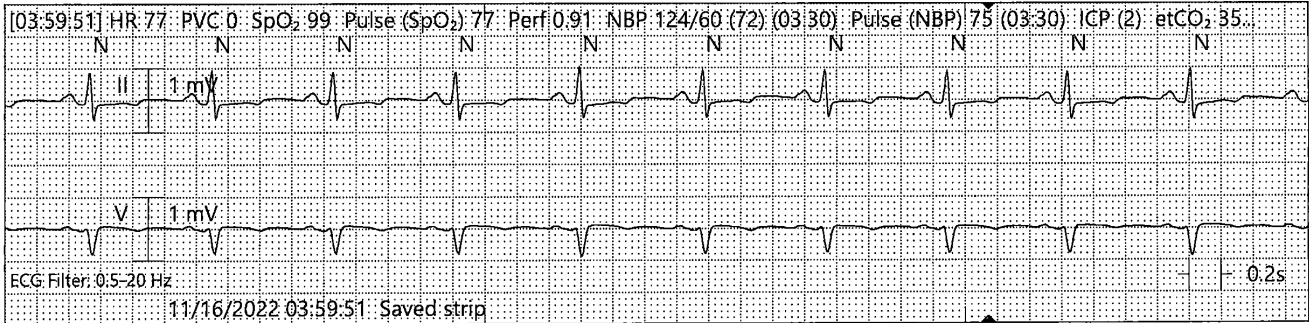
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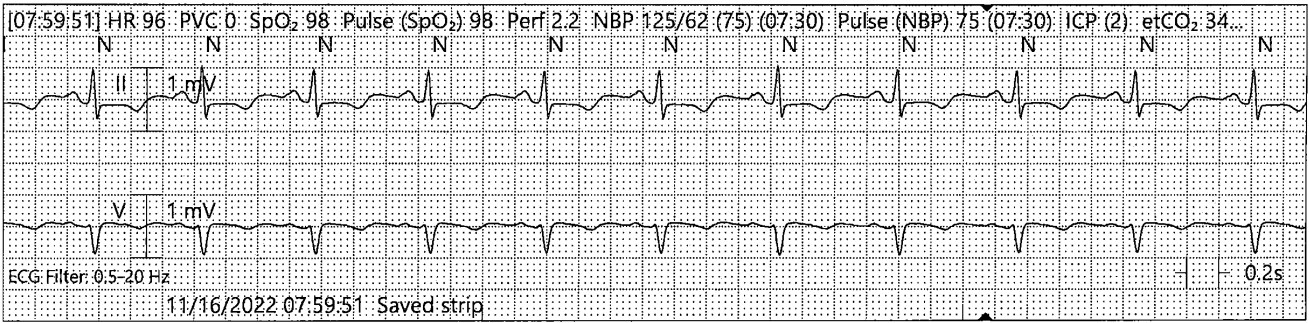
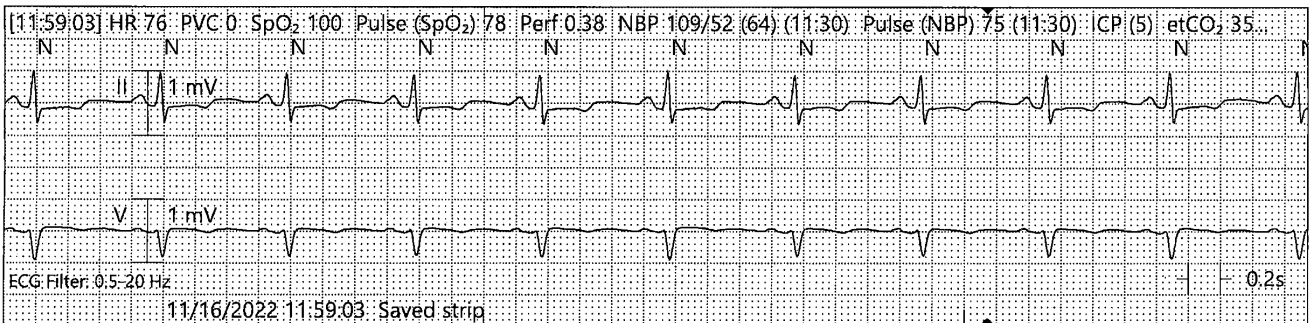
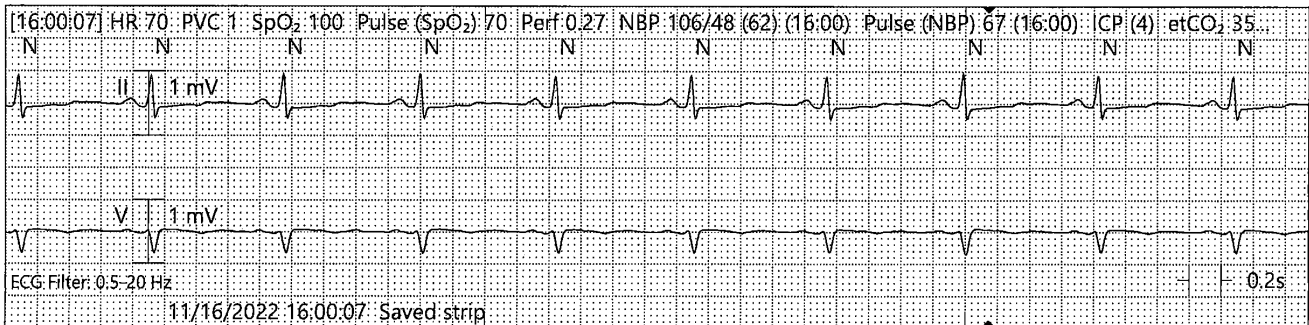
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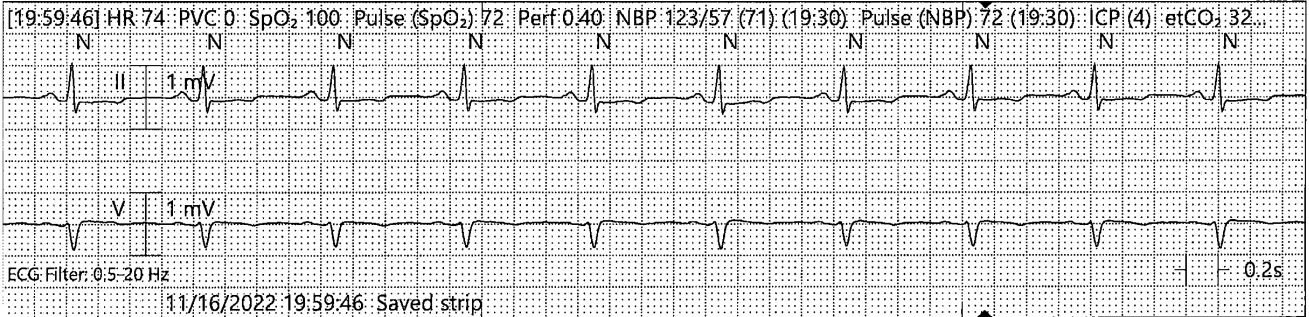
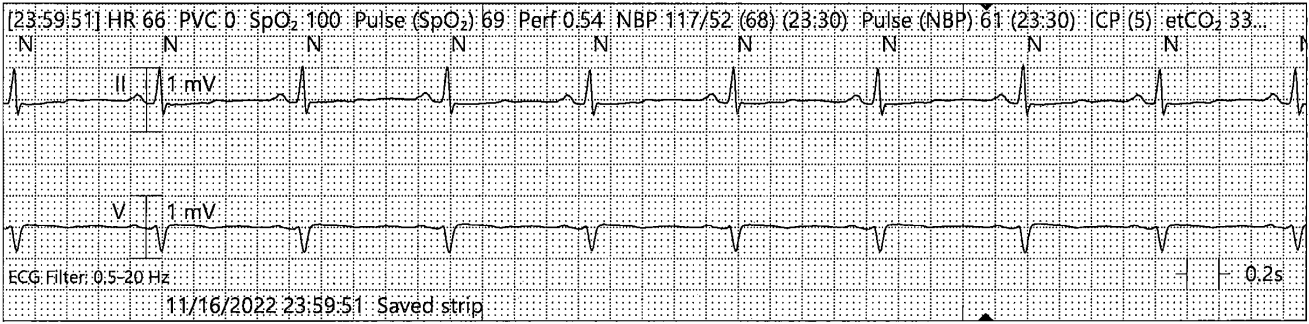
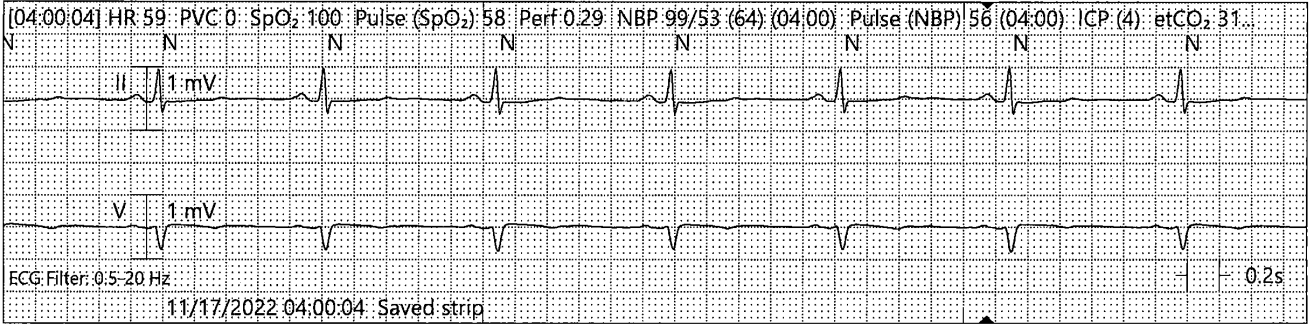
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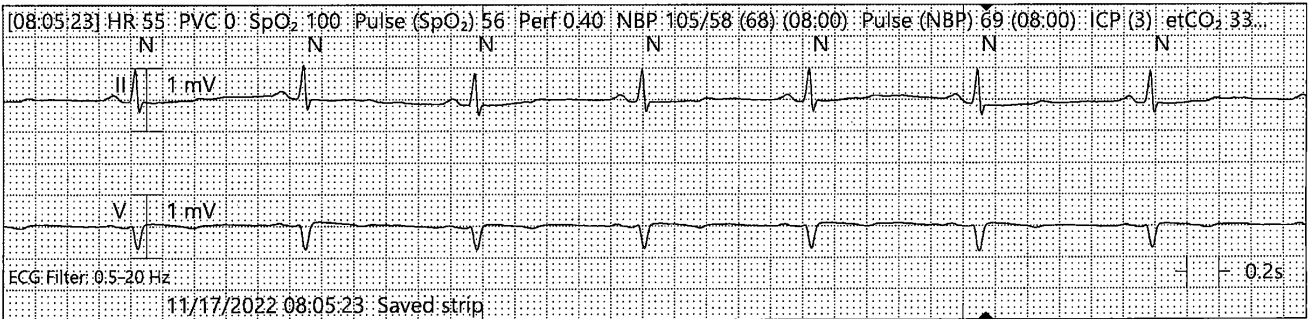
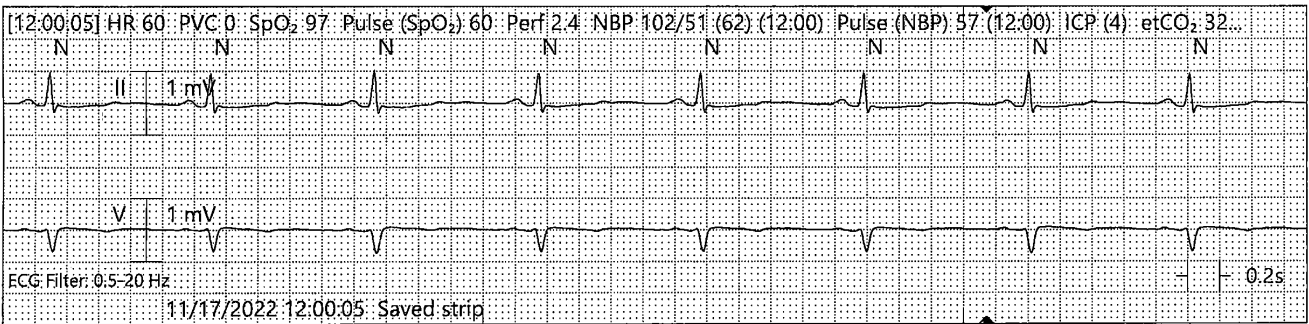
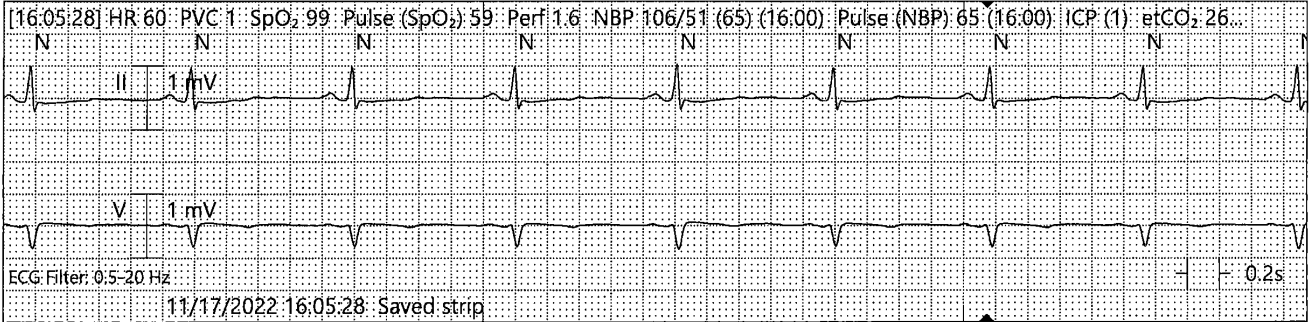
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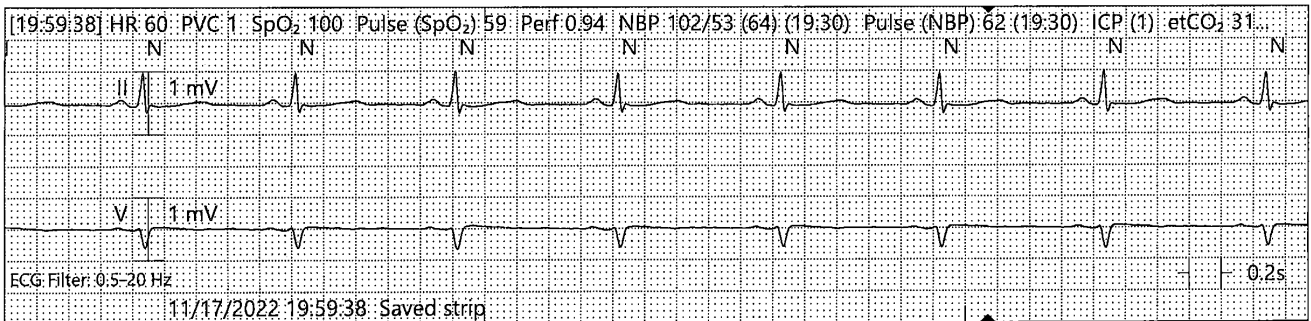
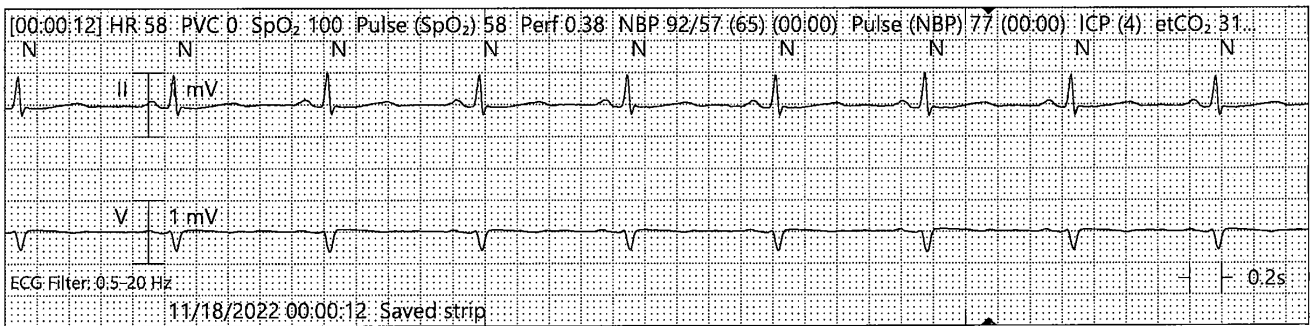
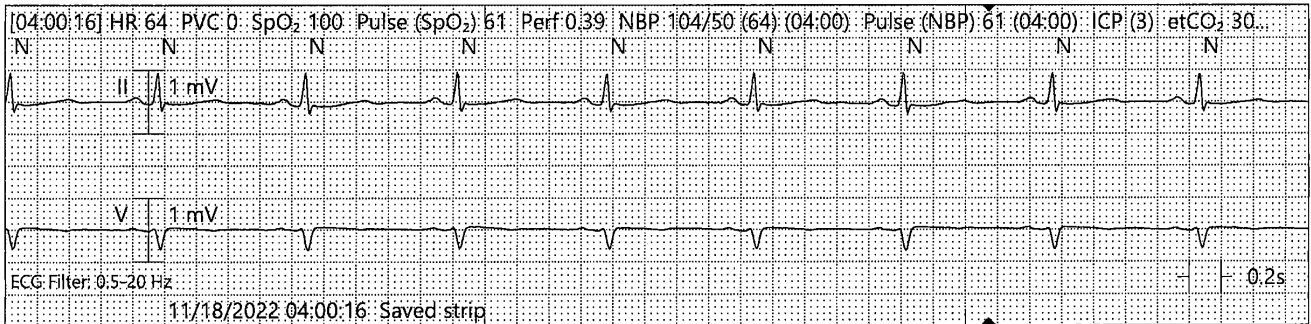
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LYONS, KATHLEEN	QH0054940416
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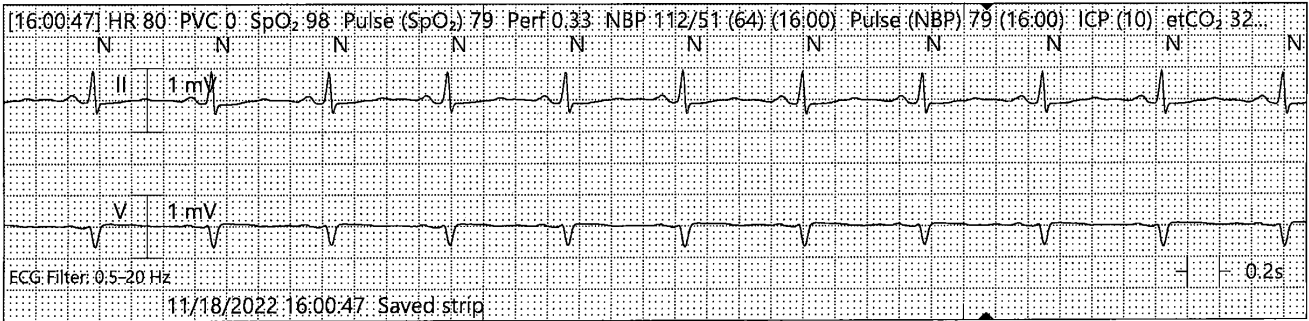
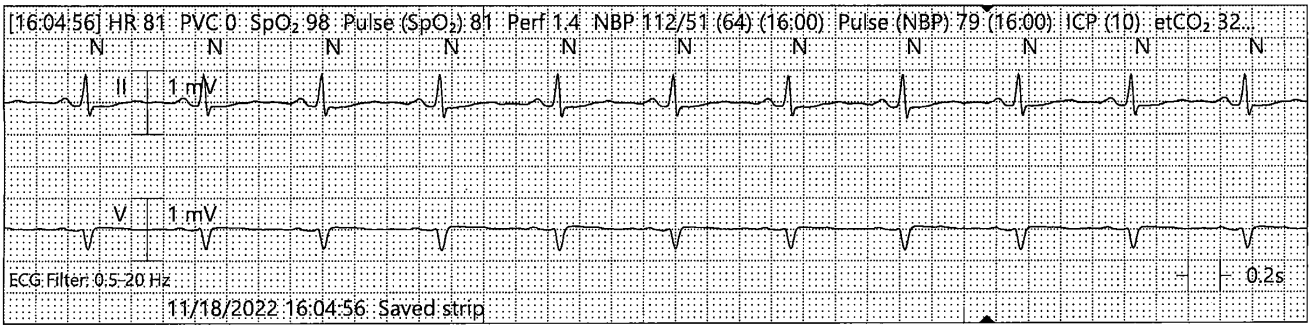
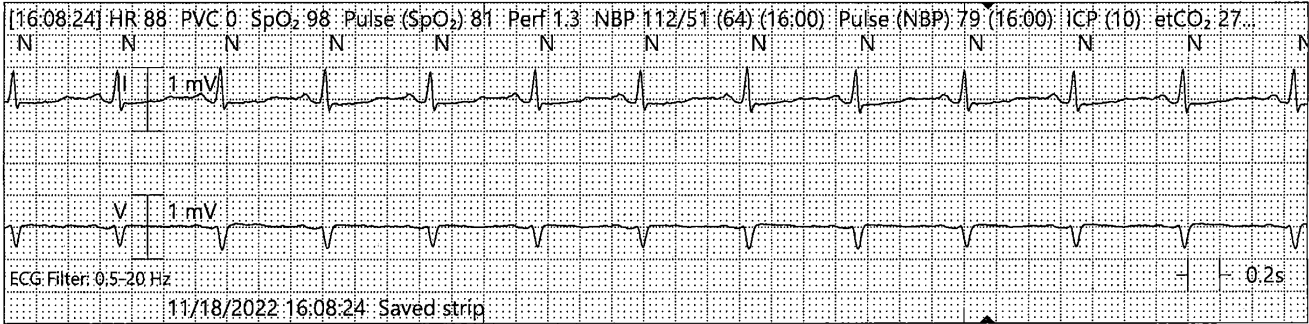
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LYONS, KATHLEEN	QH0054940416
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	ICU	My Institution
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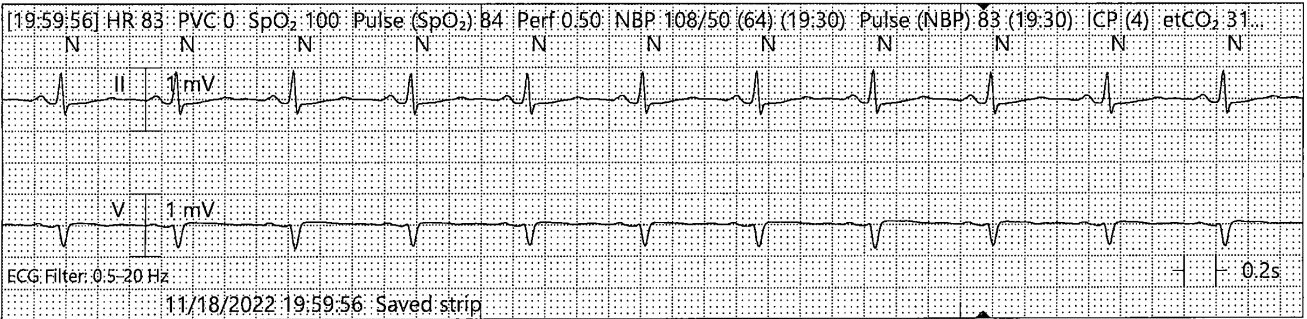
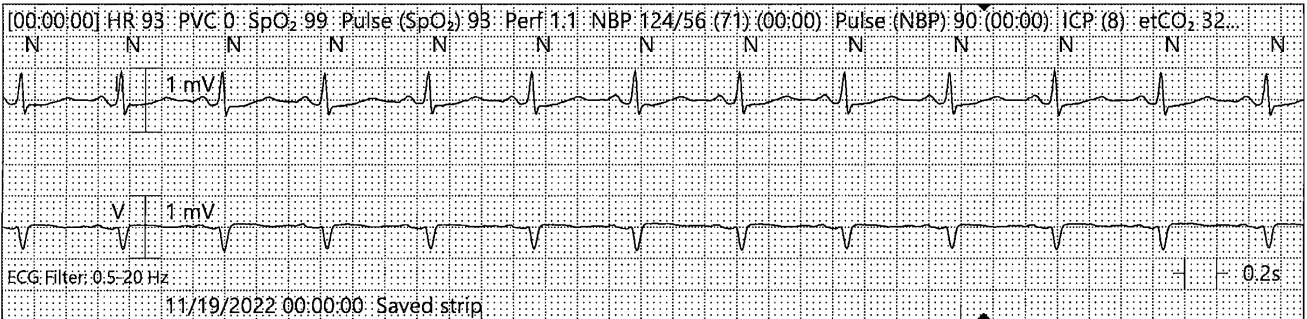
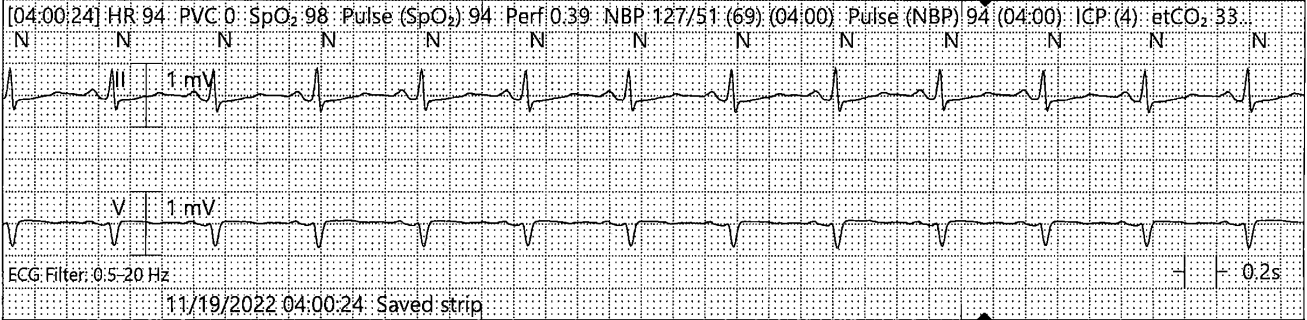


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LYONS, KATHLEEN	QH0054940416
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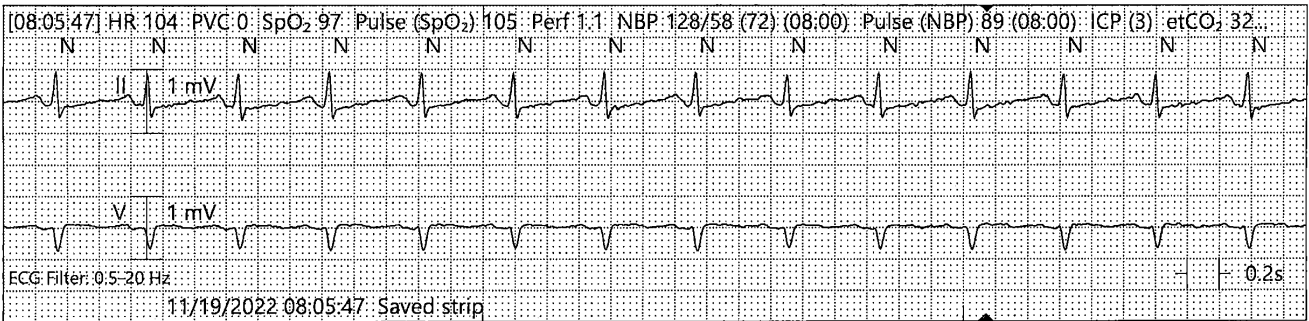
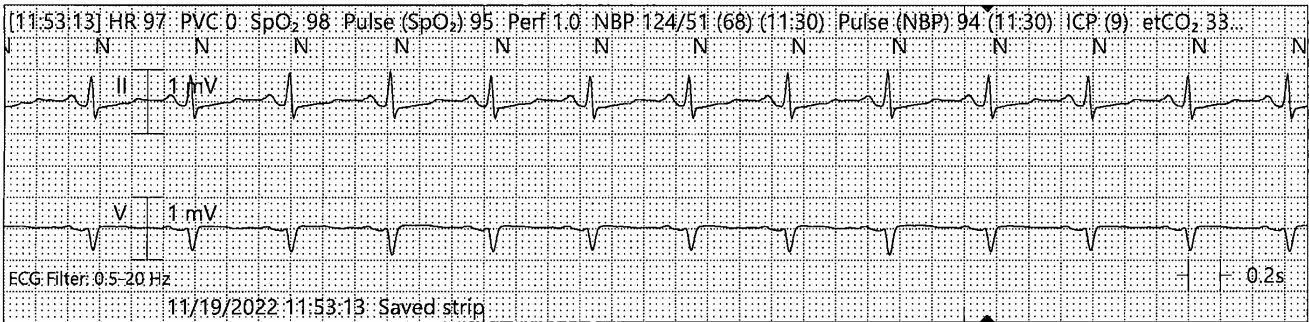
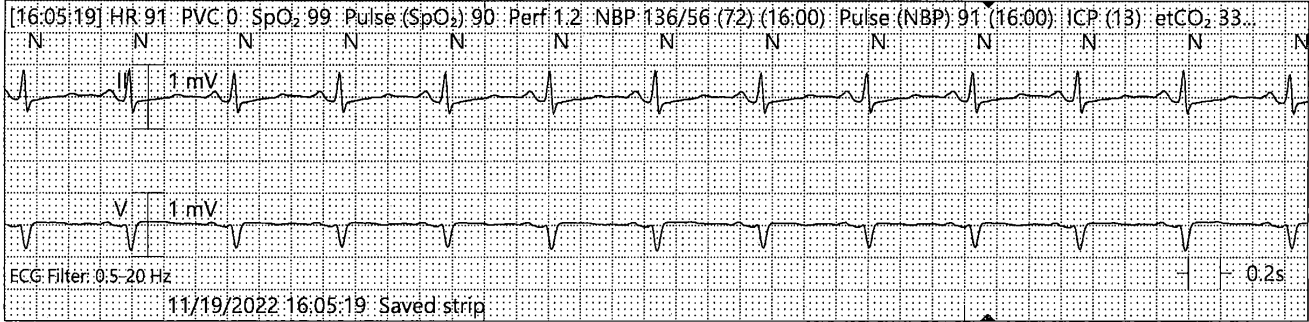
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LYONS, KATHLEEN | QH0054940416

ECG source: MICU7



ICU | My Institution

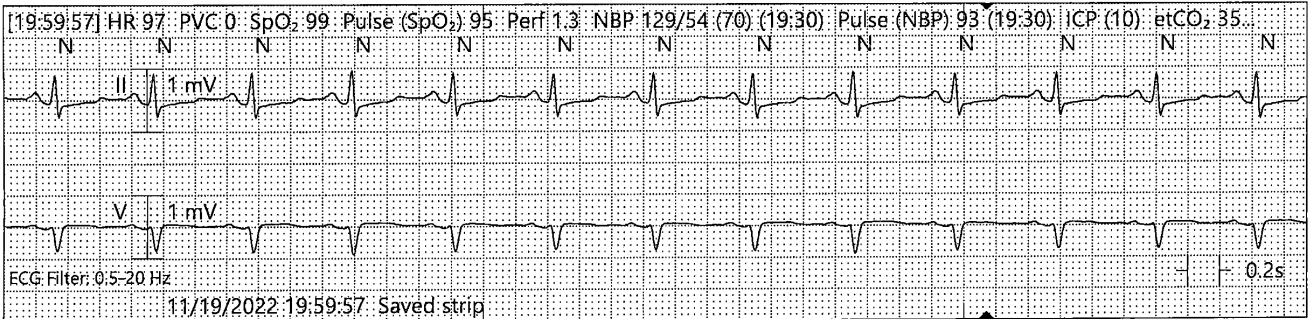
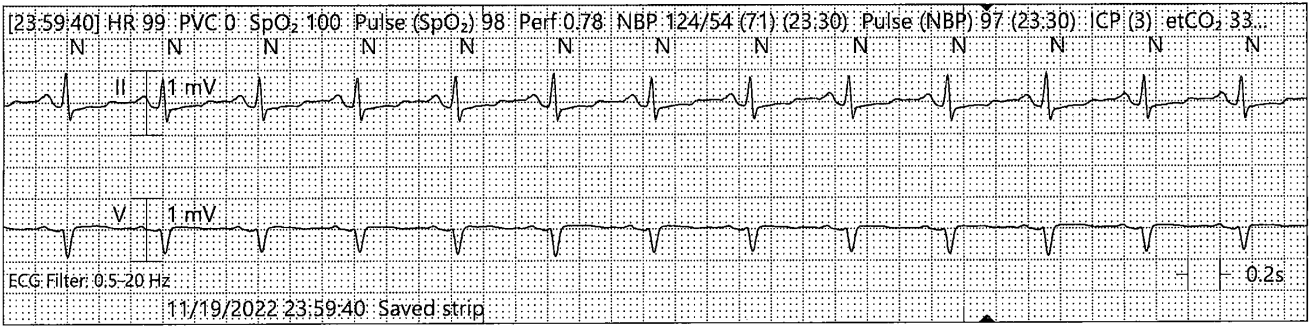
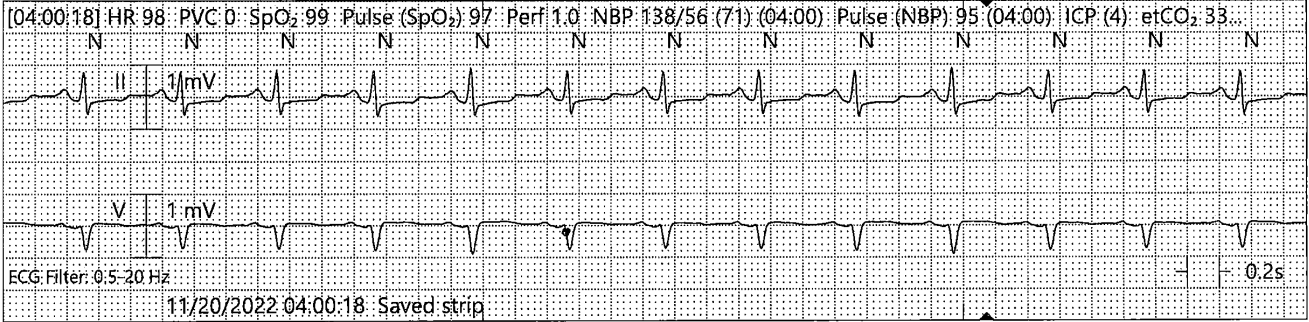
Alarm Review Report

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LYONS, KATHLEEN

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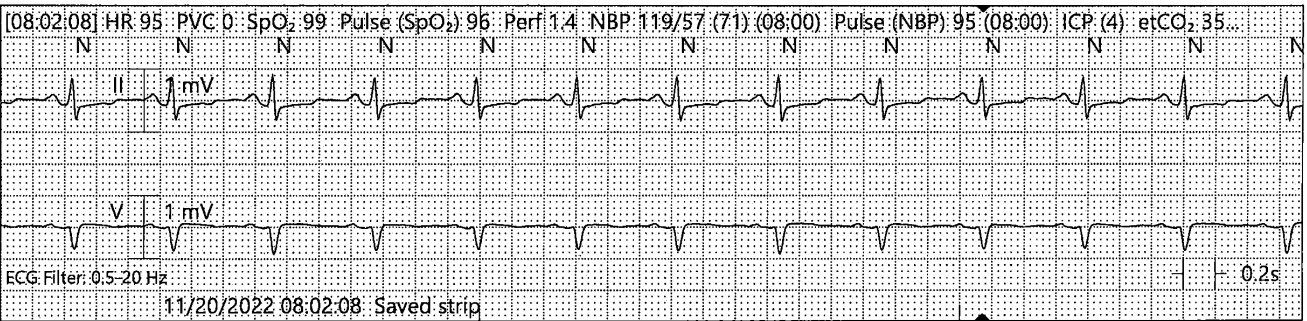
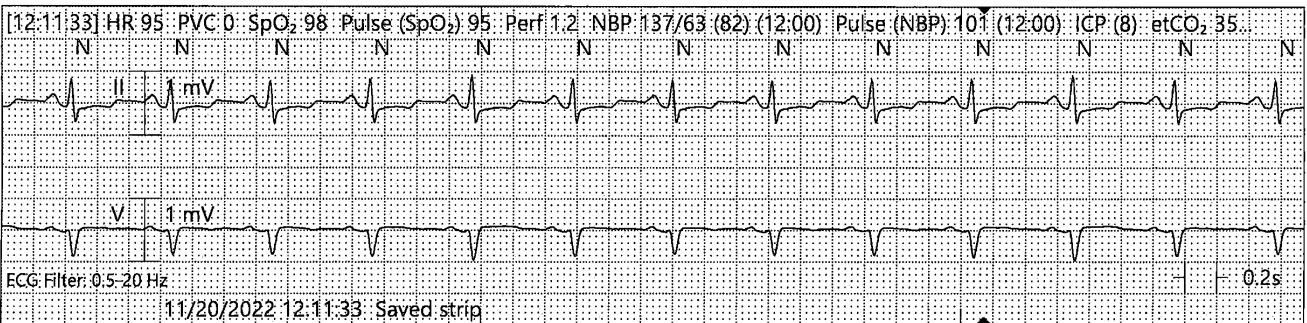
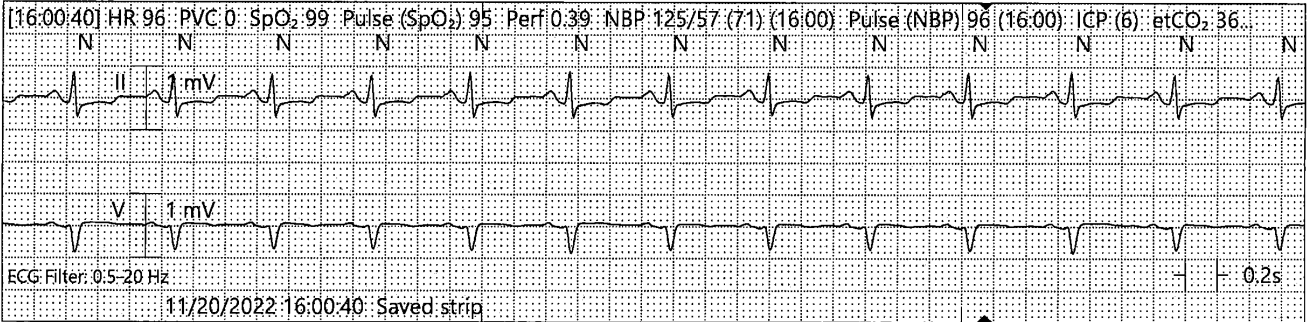
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ICU 7

LYONS, KATHLEEN	QH0054940416	
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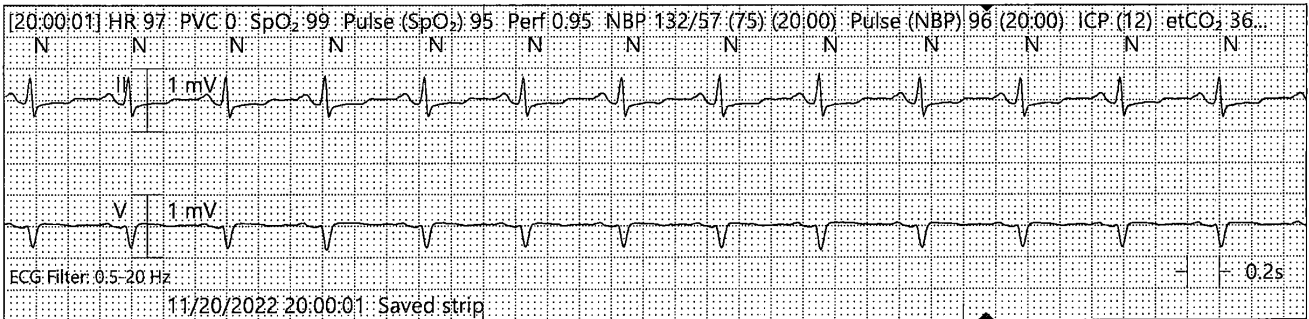
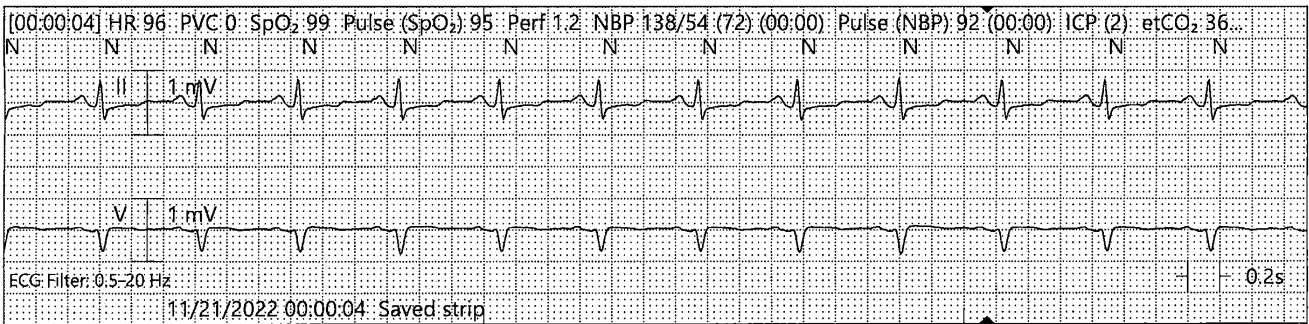
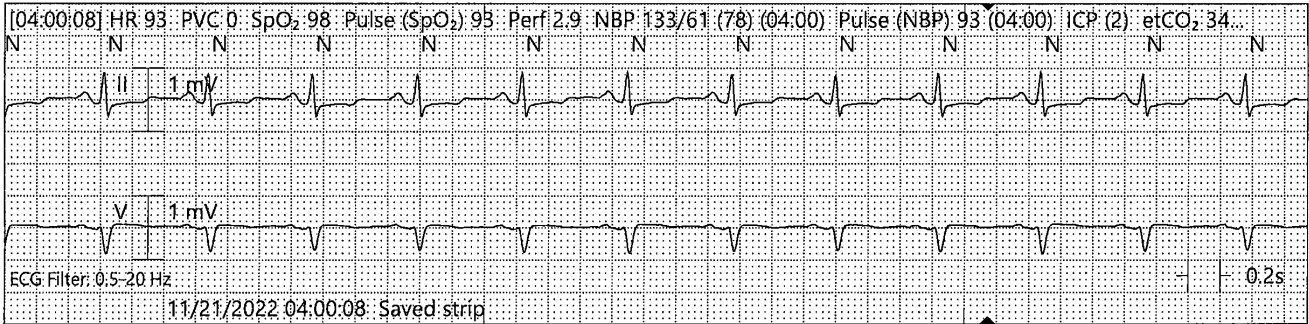
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ICU 7

LYONS, KATHLEEN	QH0054940416
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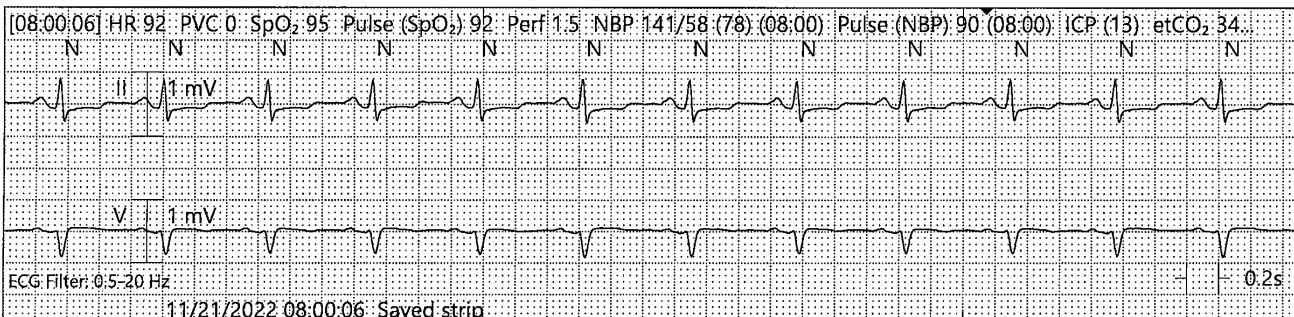
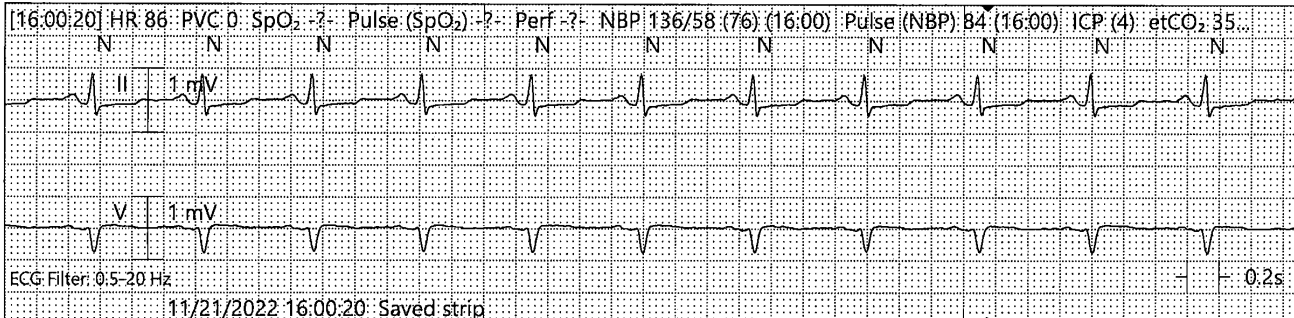
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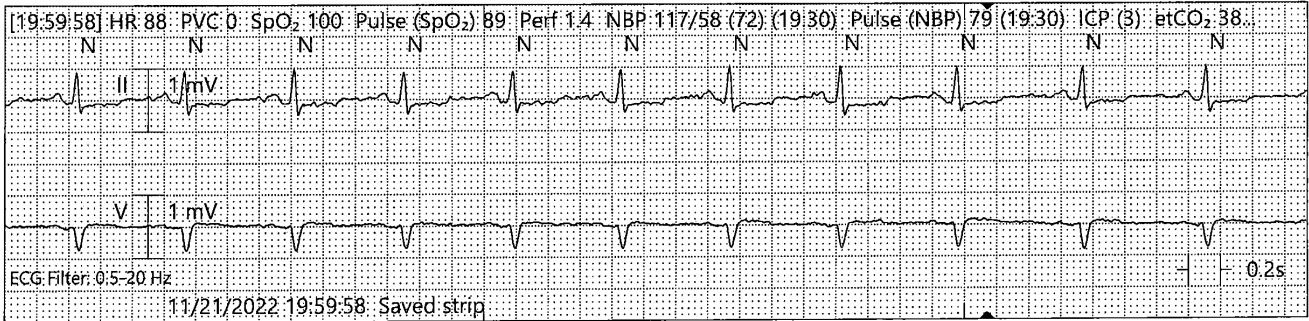
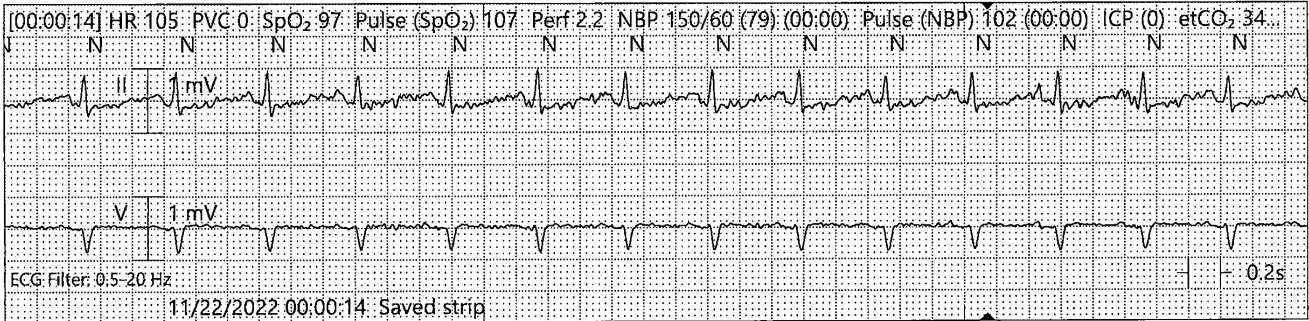
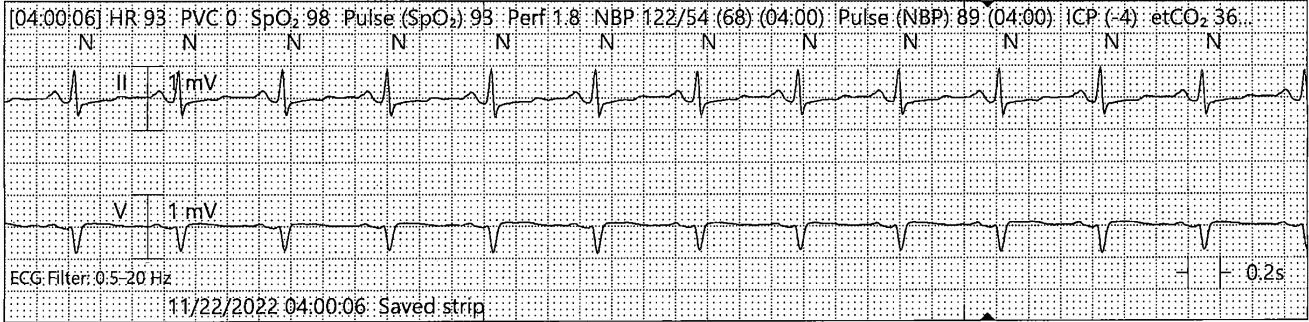
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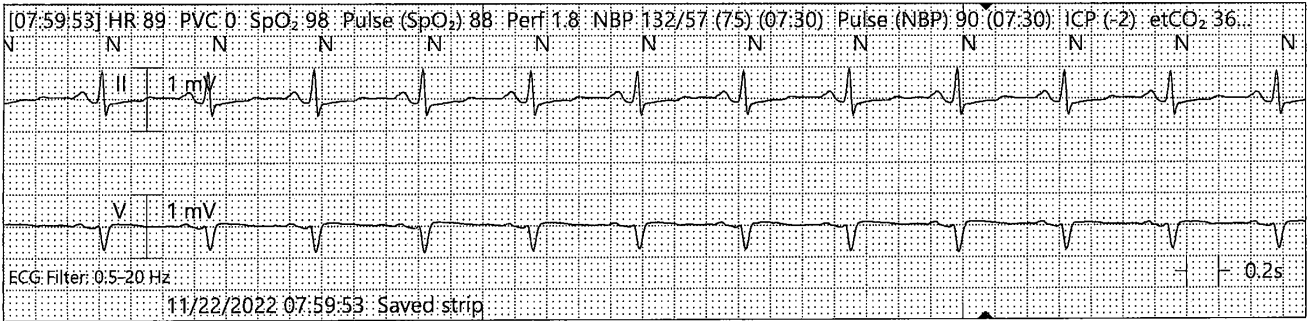
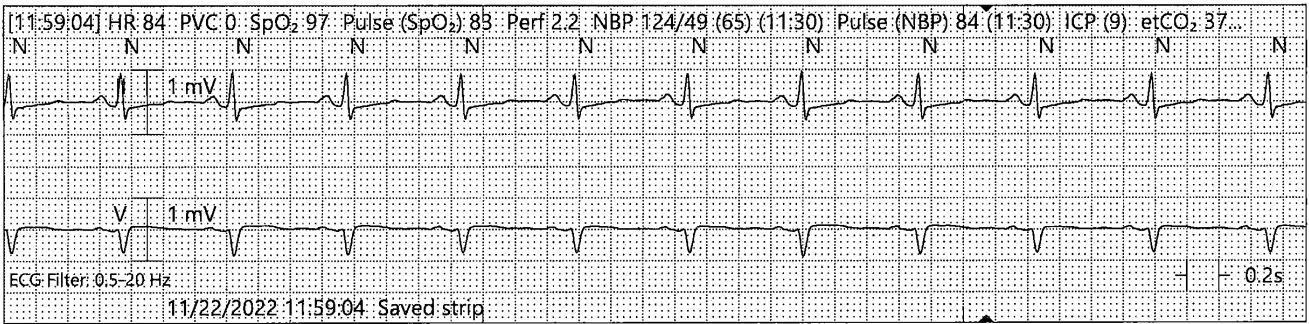
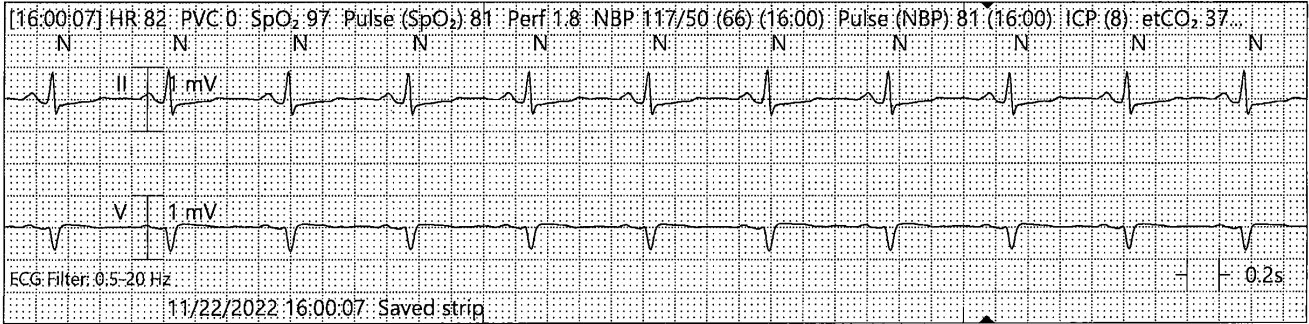
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ECG source: MICU7



ICU My Institution

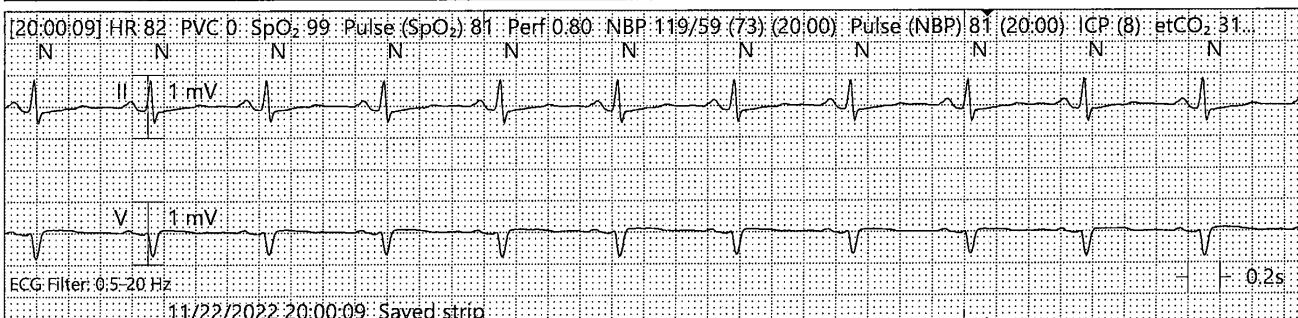
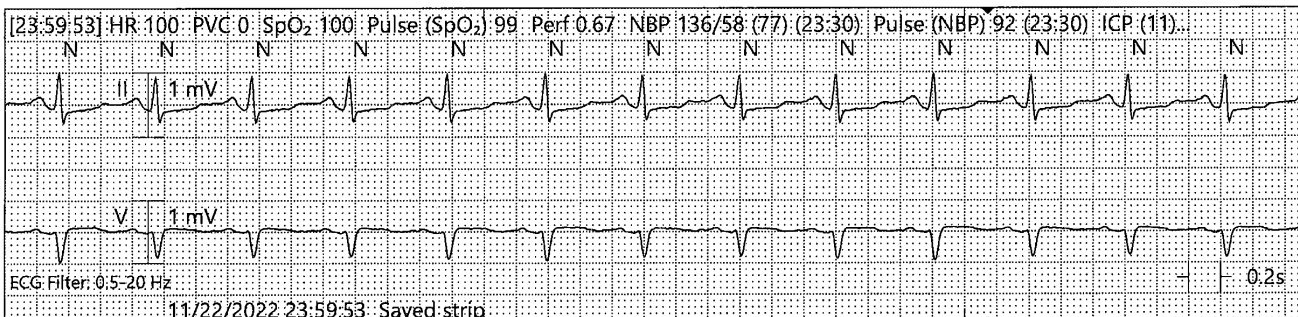
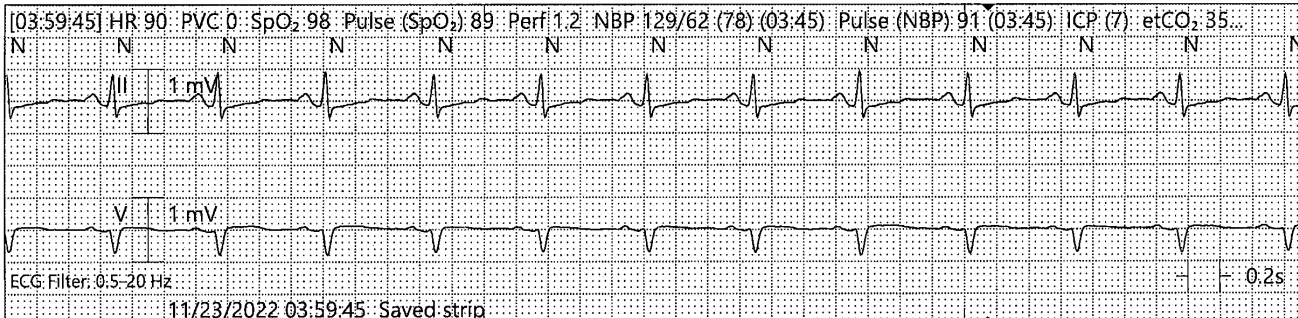


Alarm Review Report

ICU 7

LYONS, KATHLEEN | QH0054940416

ECG source: MICU7



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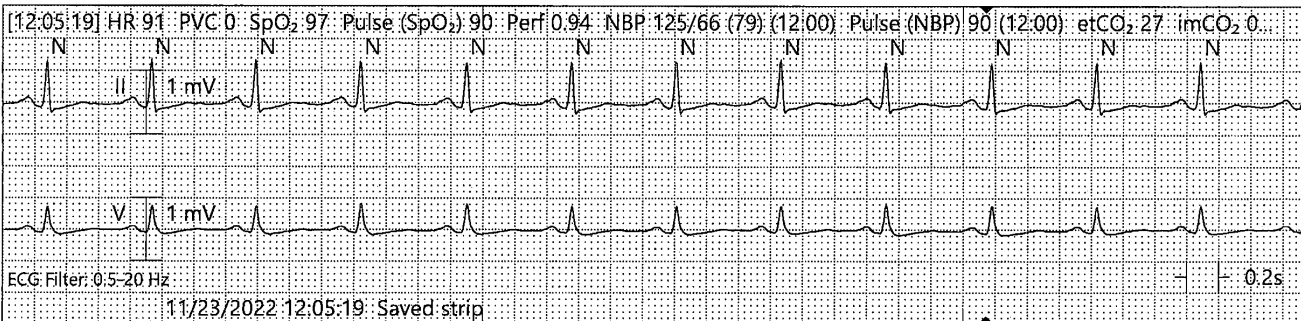
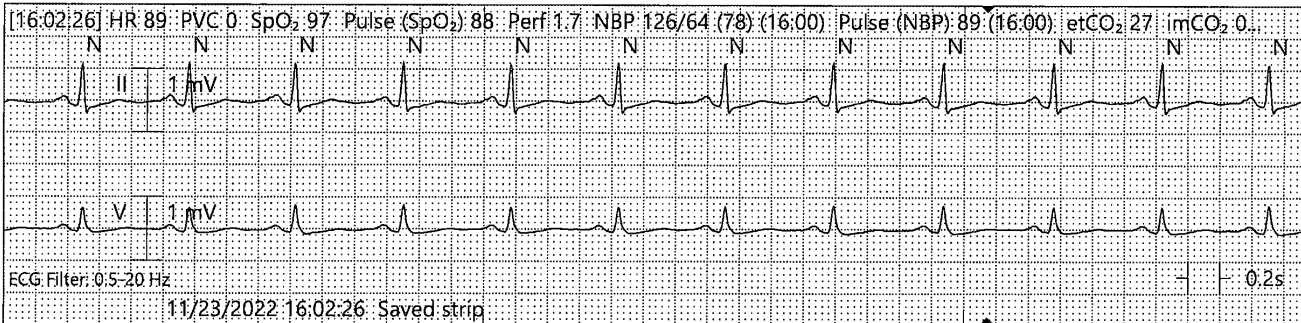
Alarm Review Report

ICU 7

LYONS, KATHLEEN

QH0054940416

ECG source: MICU7



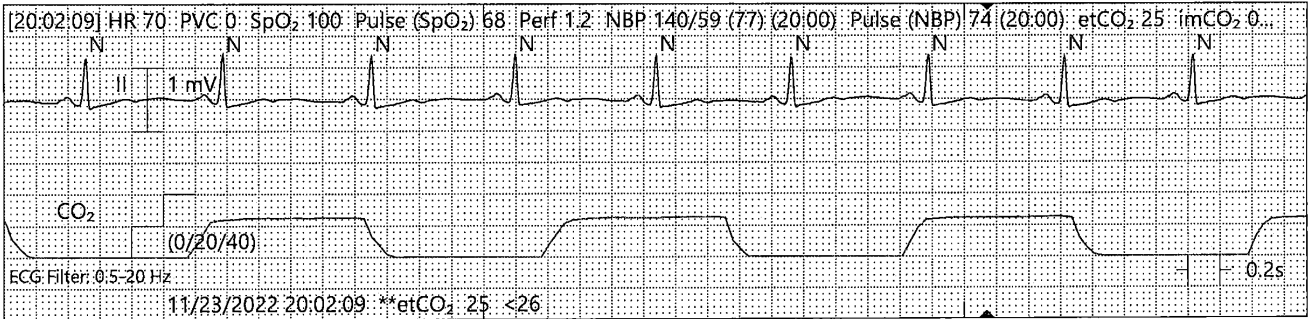
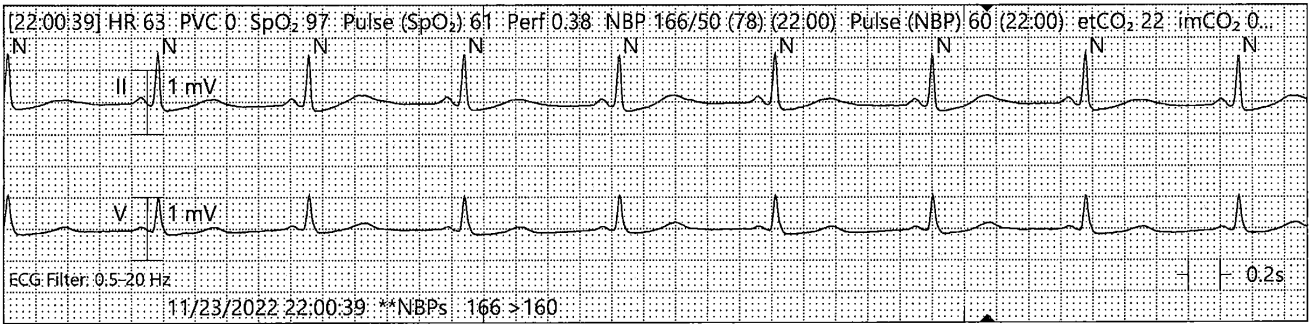
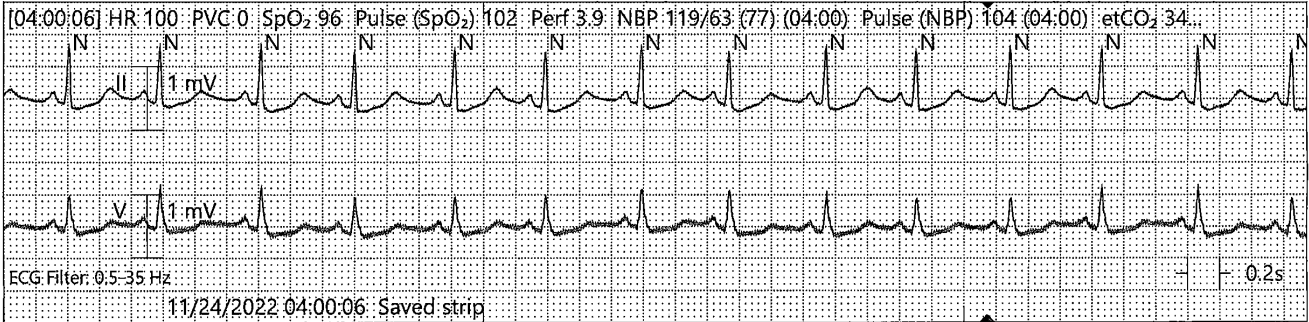
Alarm Review Report

ICU 7

LYONS, KATHLEEN

QH0054940416

ECG source: MICU7



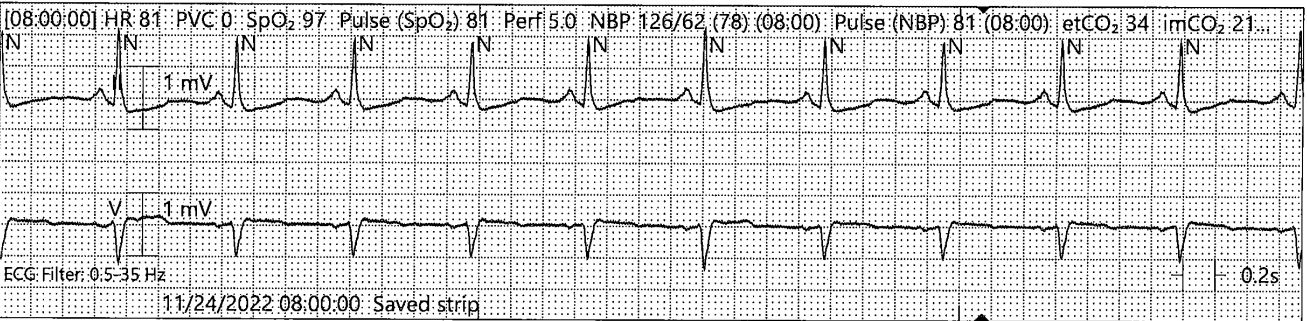
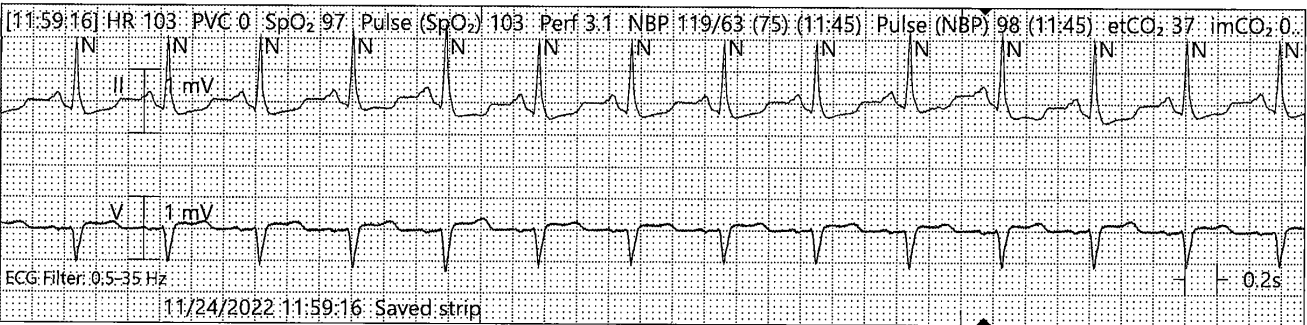
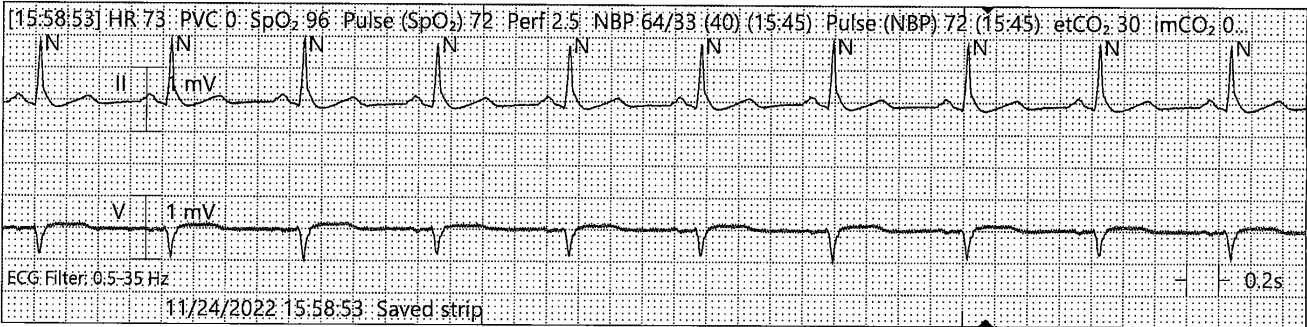
ICU My Institution

Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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ECG source: MICU7



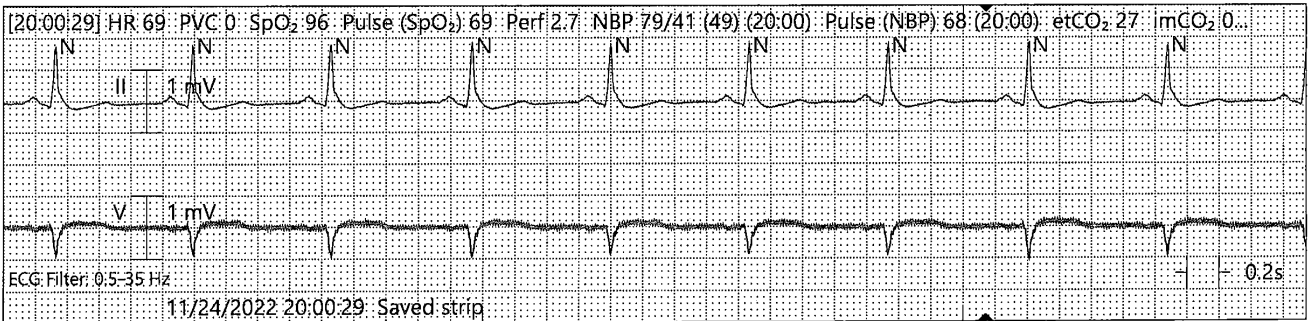
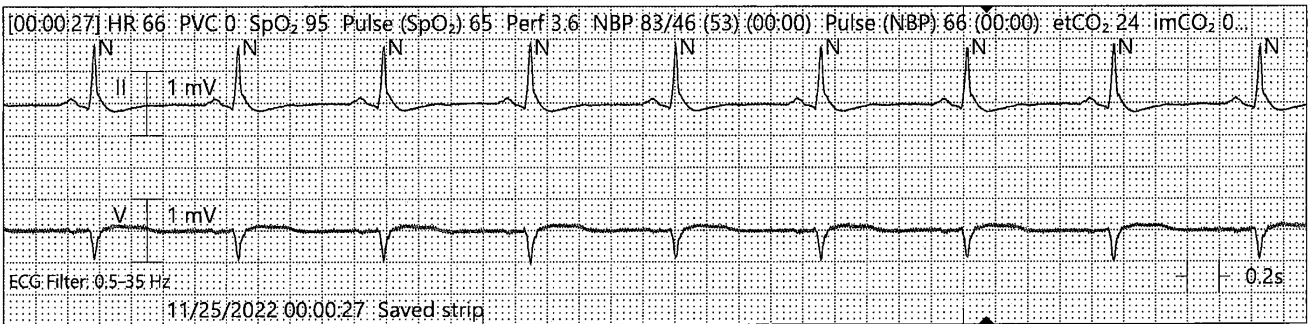
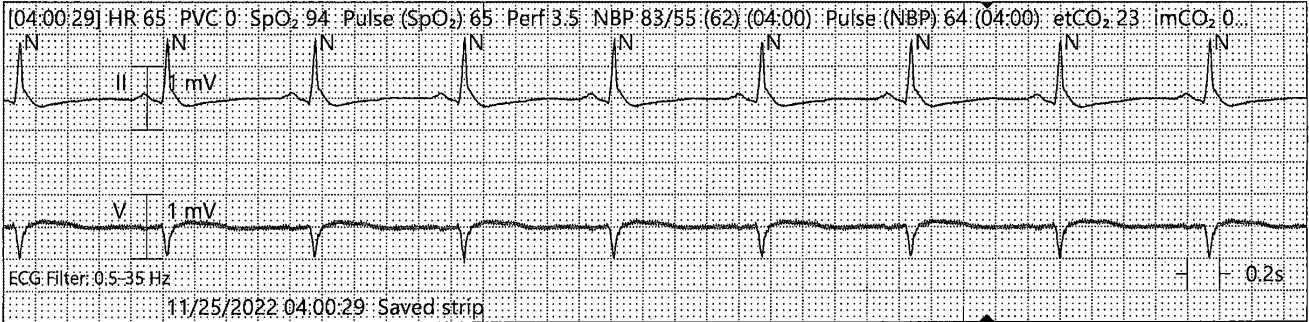
ICU	My Institution
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416	
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ECG source: MICU7



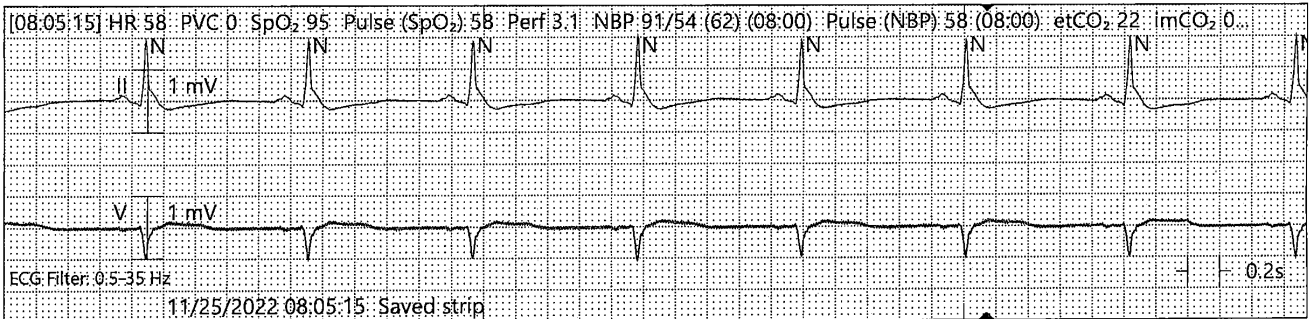
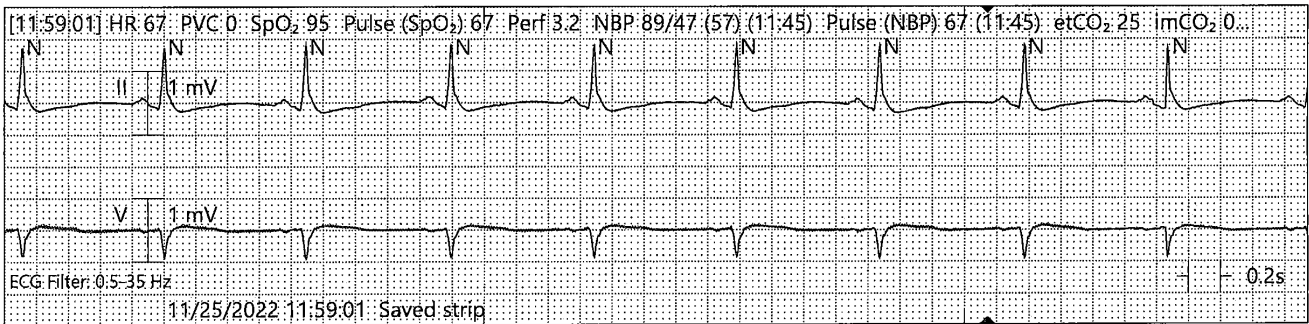
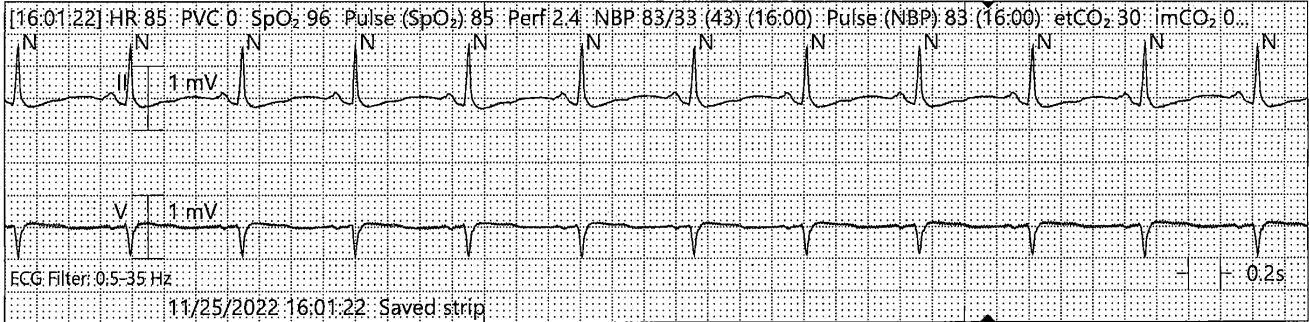
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416	
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ECG source: MICU7



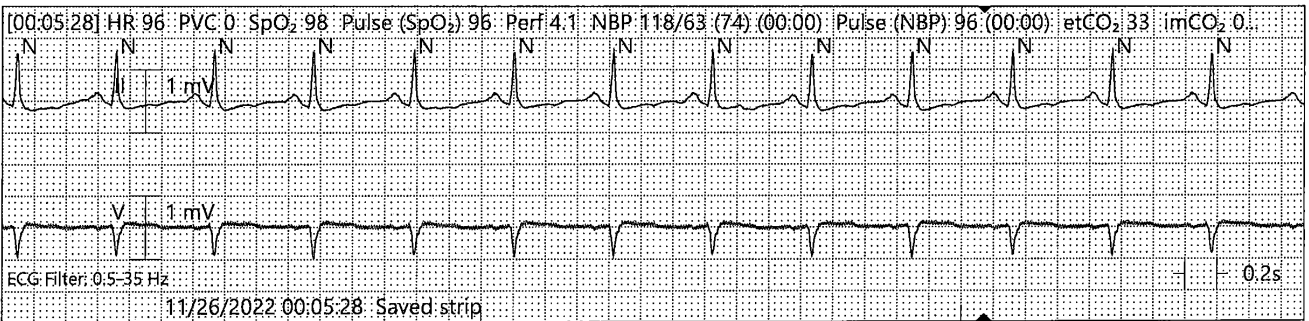
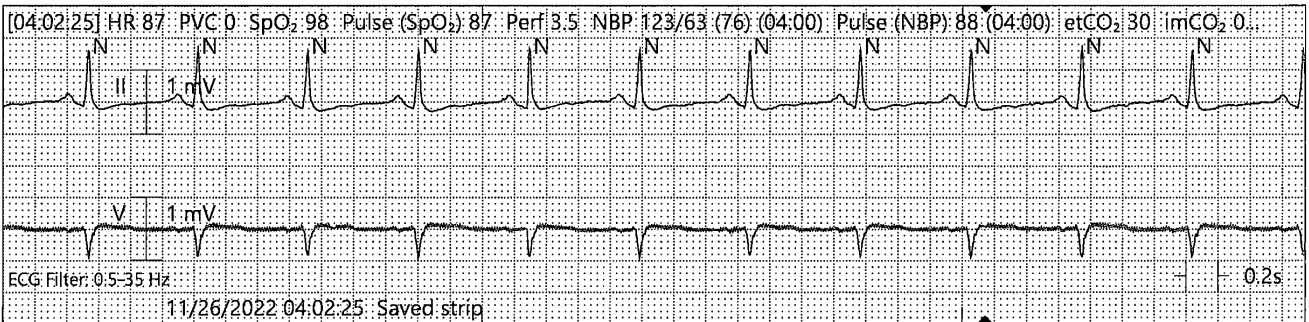
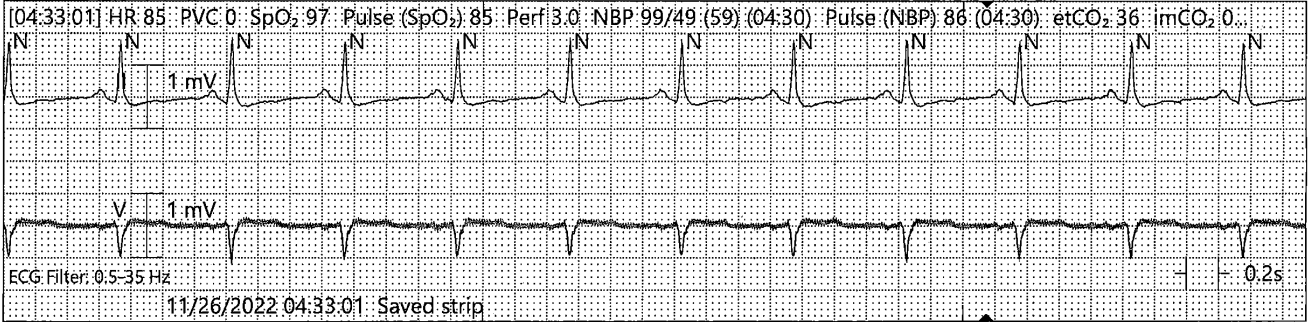
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Alarm Review Report

ICU 7

LYONS, KATHLEEN QH0054940416

ECG source: MICU7



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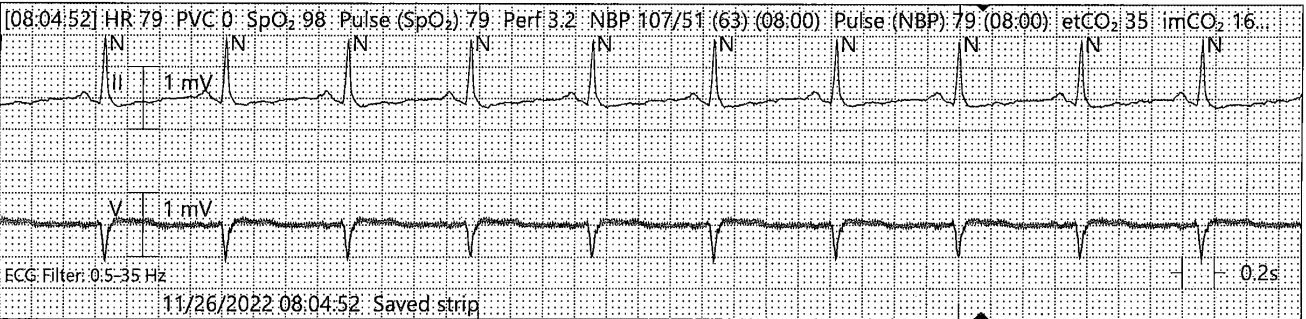
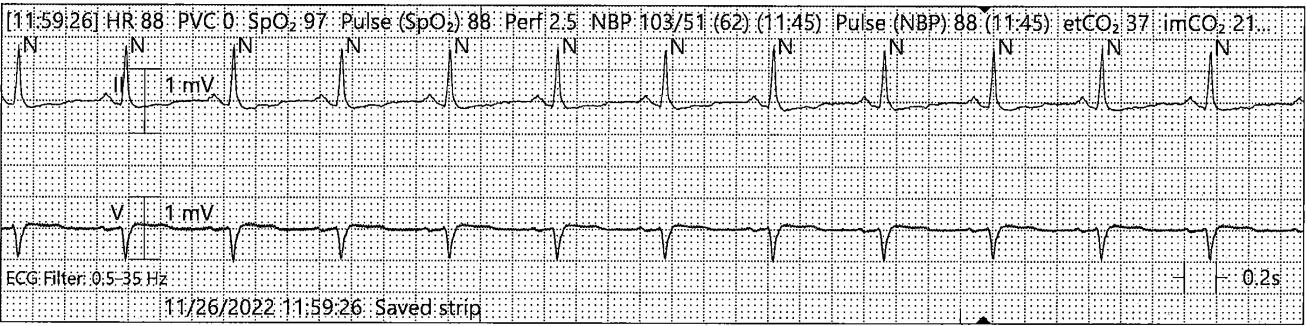
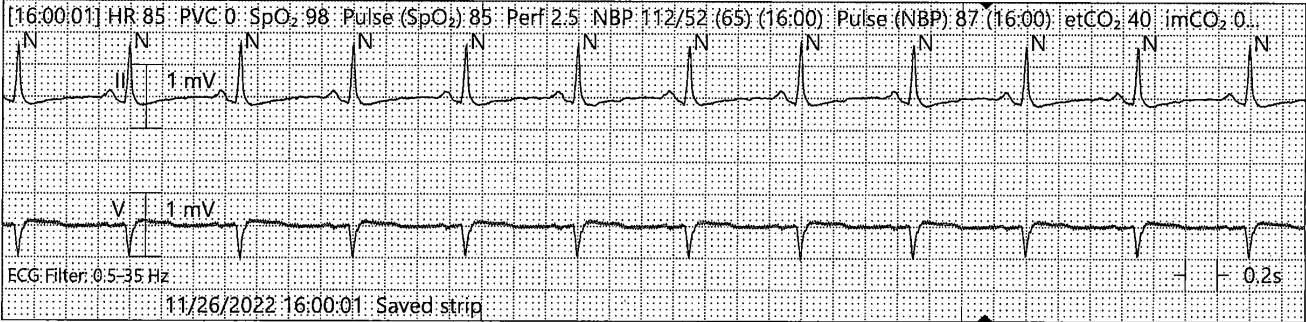
Alarm Review Report

ICU 7

LYONS, KATHLEEN

QH0054940416

ECG source: MICU7



ICU

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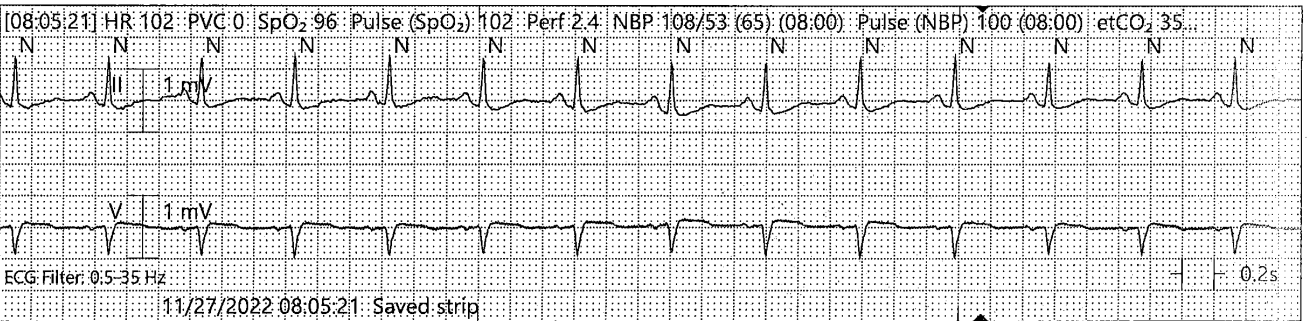
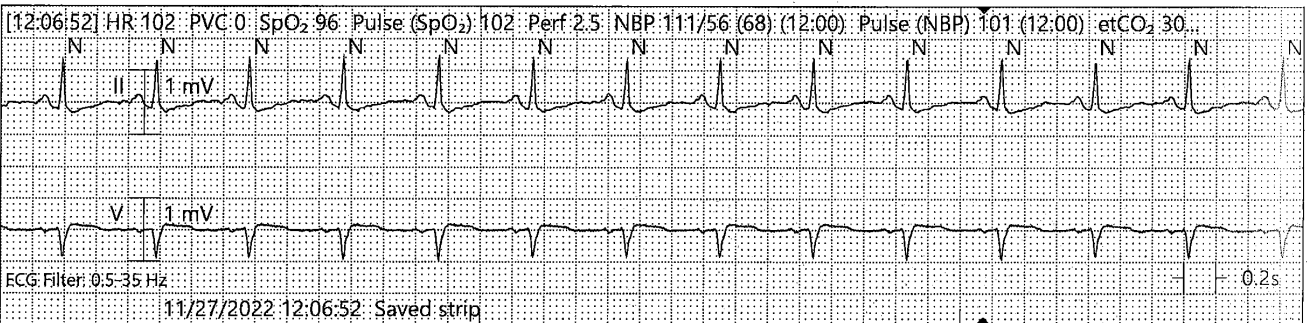
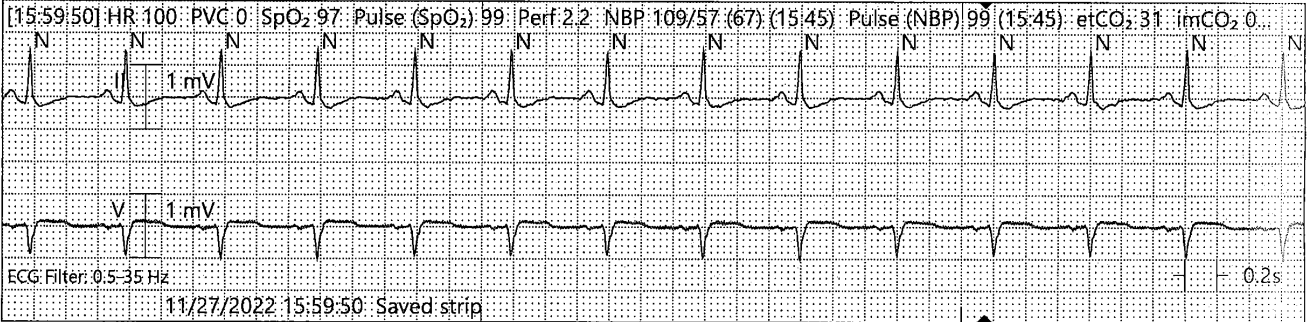
Alarm Review Report

ICU 7

LYONS, KATHLEEN

QH0054940416

ECG source: MICU7



ICU

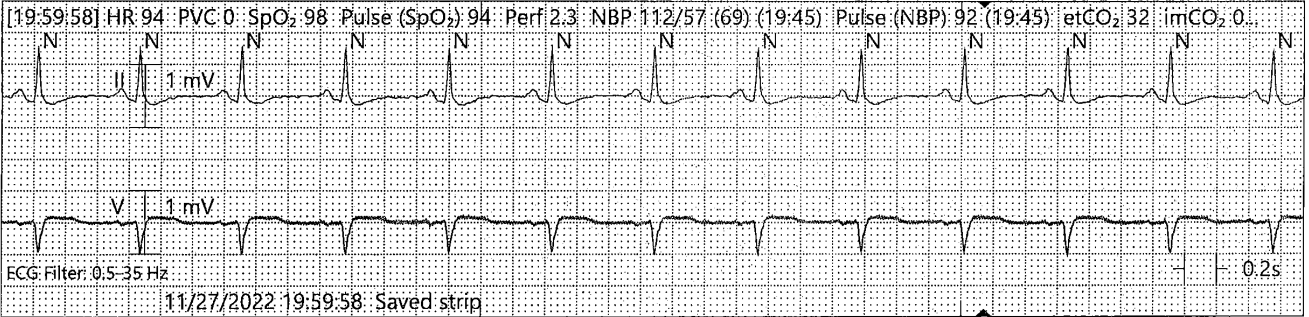
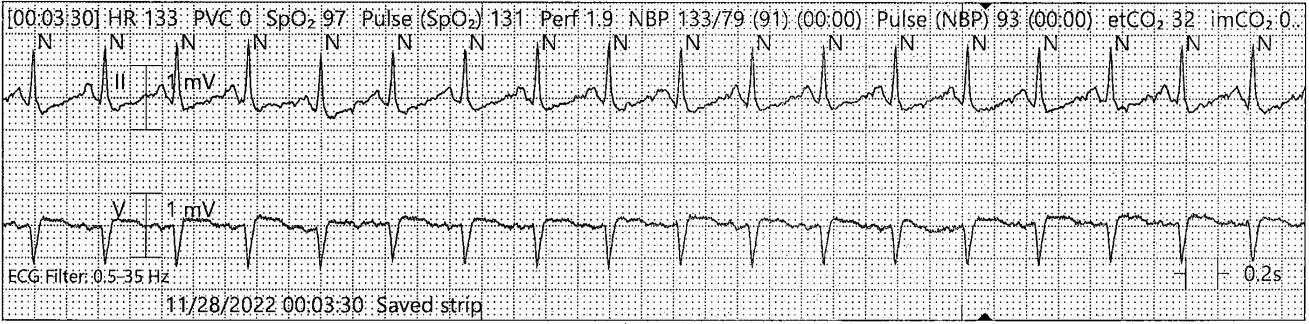
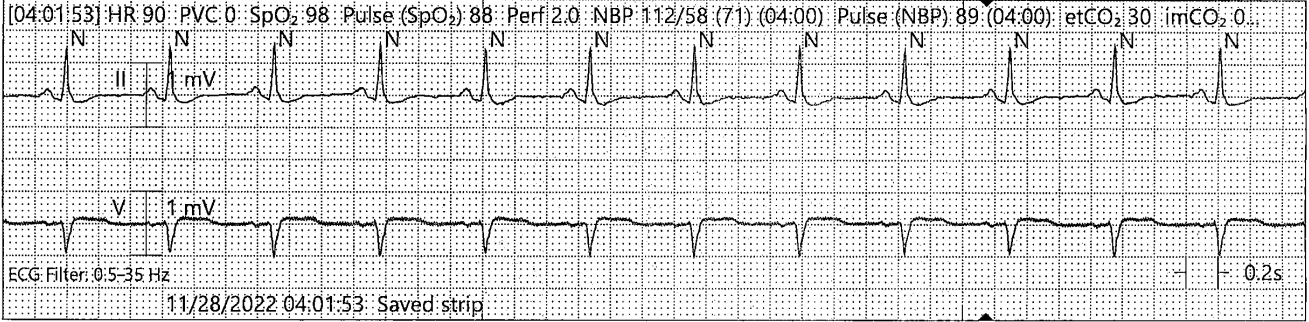
My Institution

Alarm Review Report

ICU 7

LYONS, KATHLEEN | QH0054940416

ECG source: MICU7

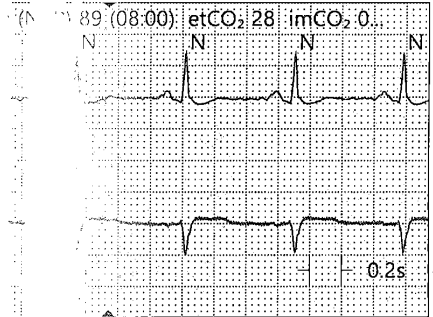
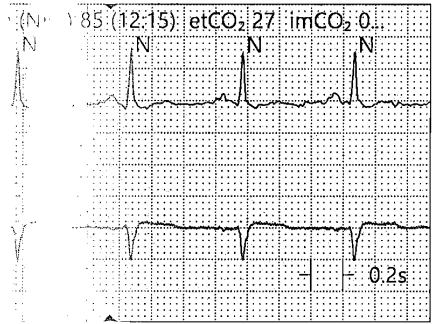
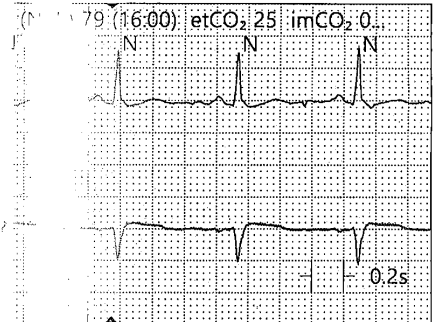
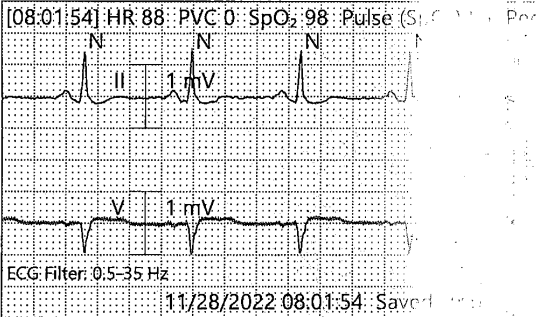
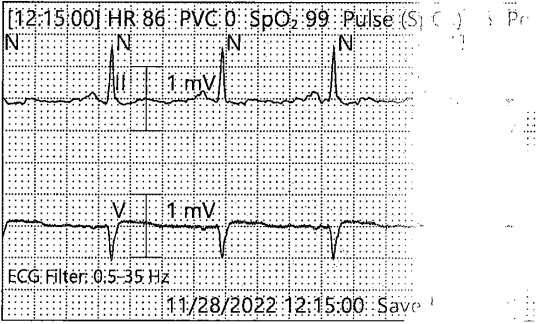
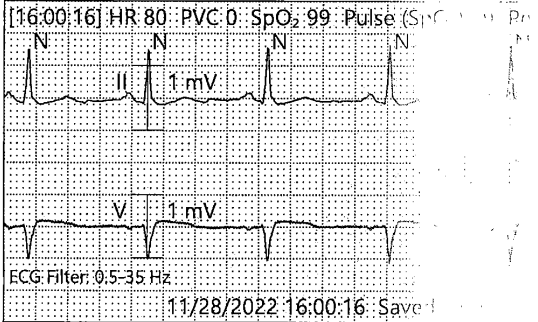


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Alarm Review Report

LYONS, KATHLEEN

ECG source: MICU7



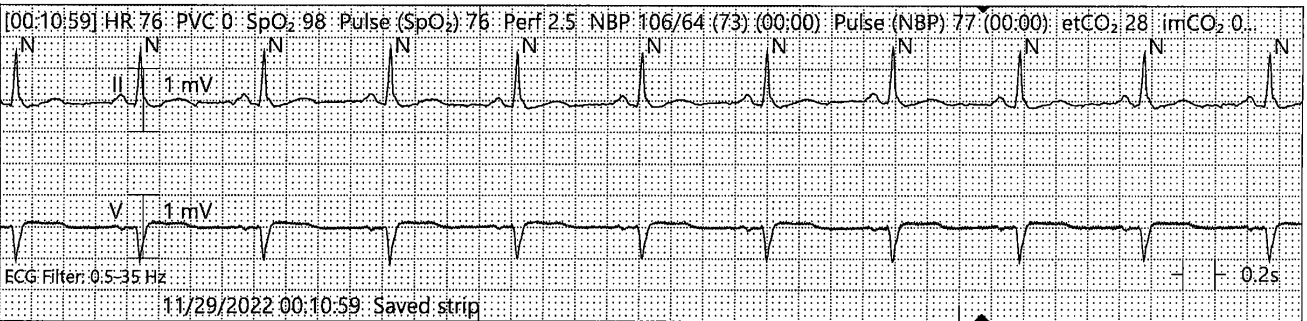
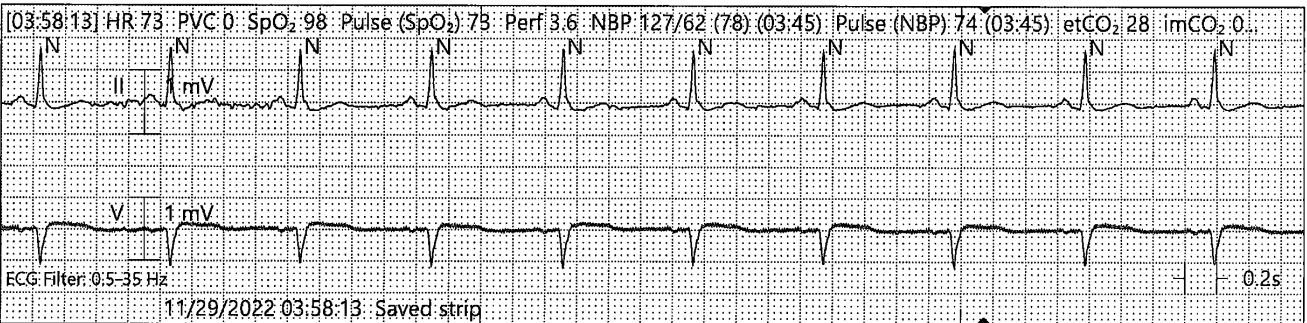
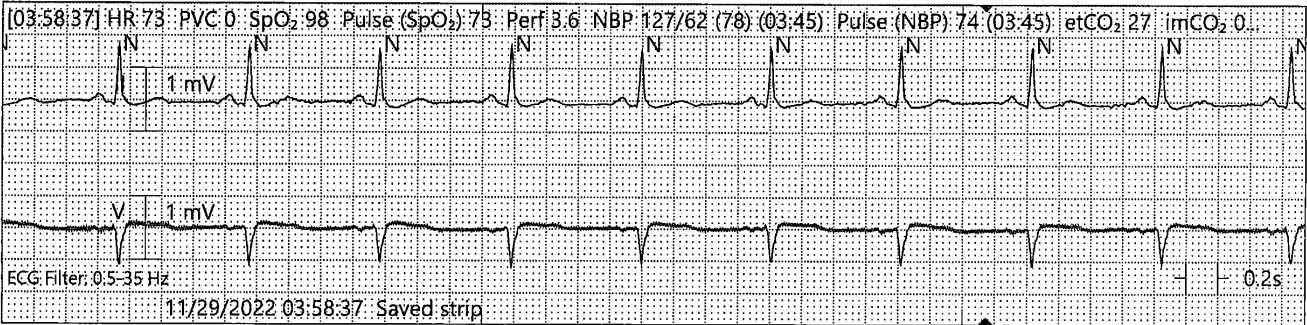
Alarm Review Report

ICU 7

LYONS, KATHLEEN

QH0054940416

ECG source: MICU7



ICU

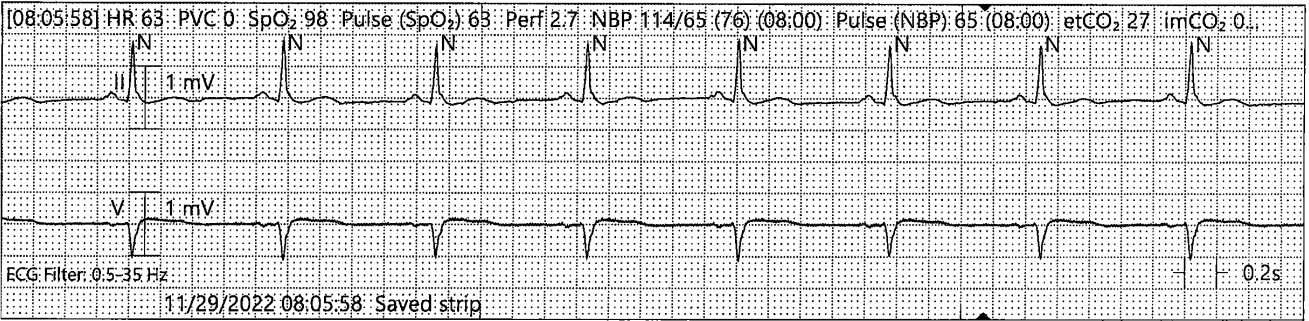
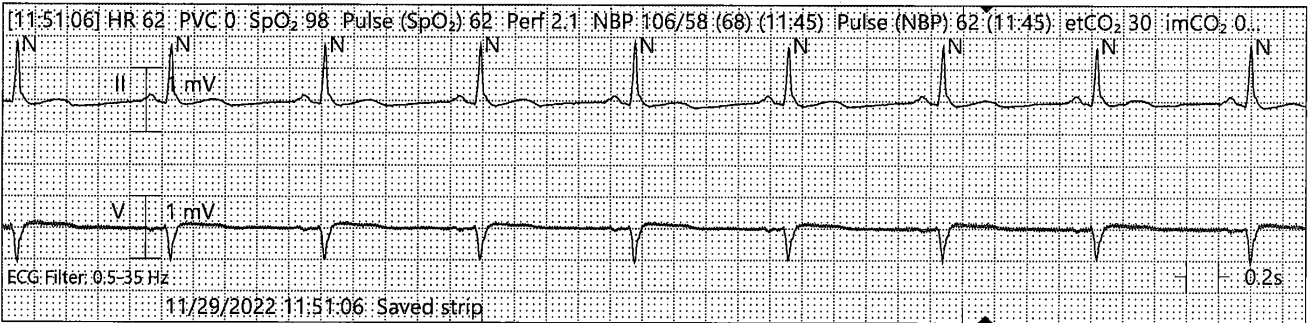
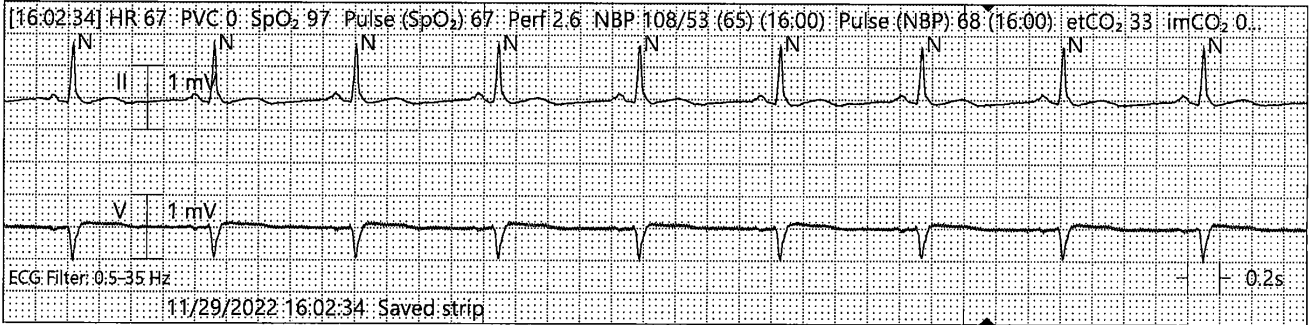
My Institution

Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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ECG source: MICU7



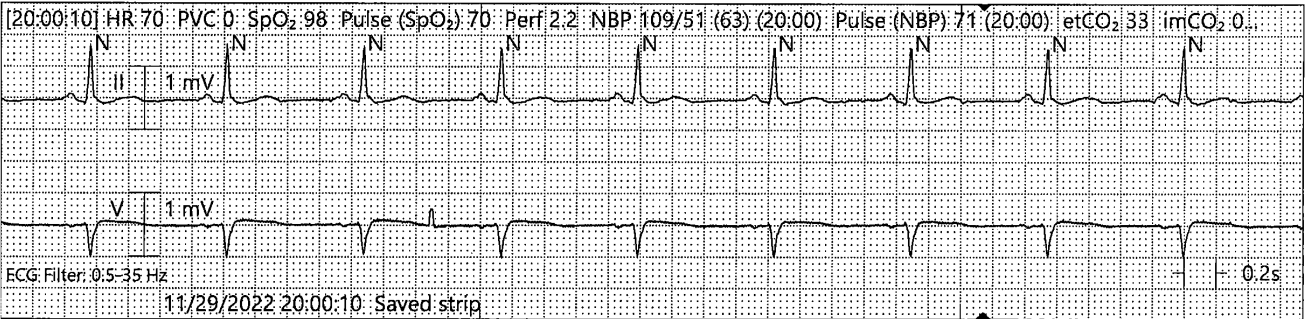
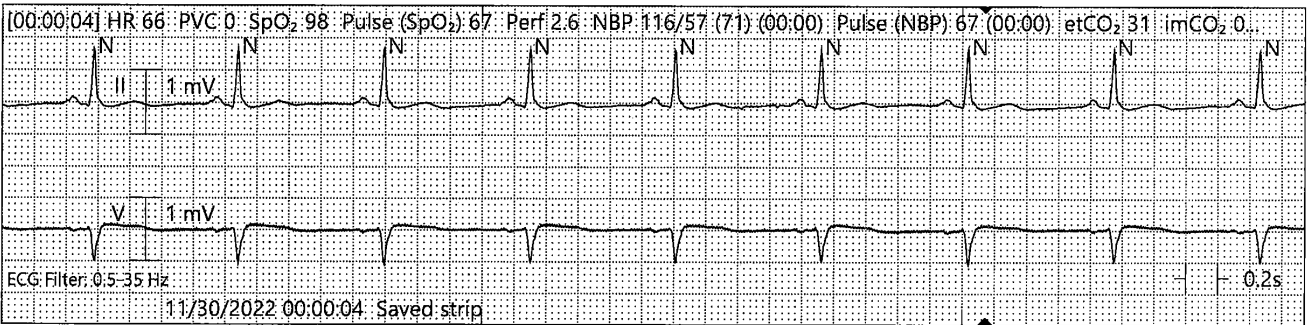
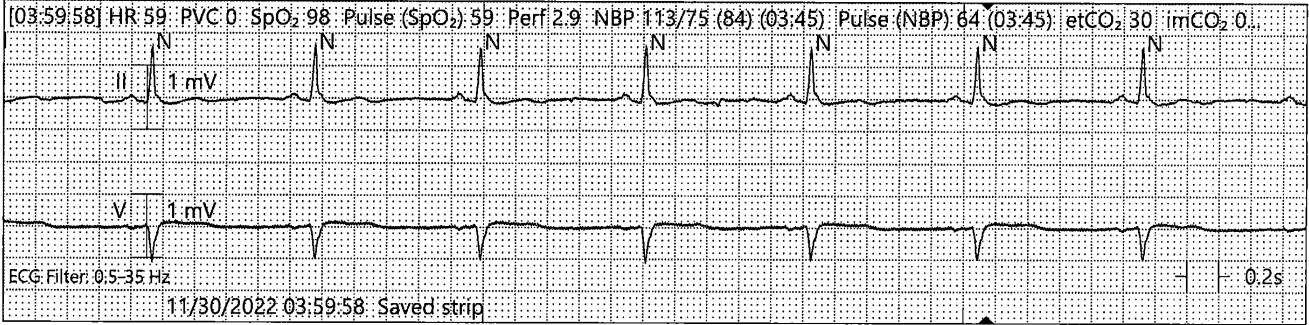
ICU	My Institution
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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ECG source: MICU7



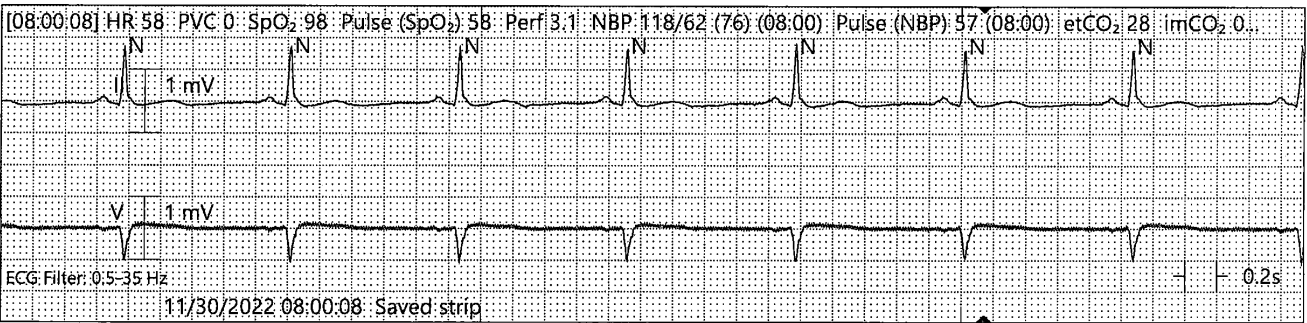
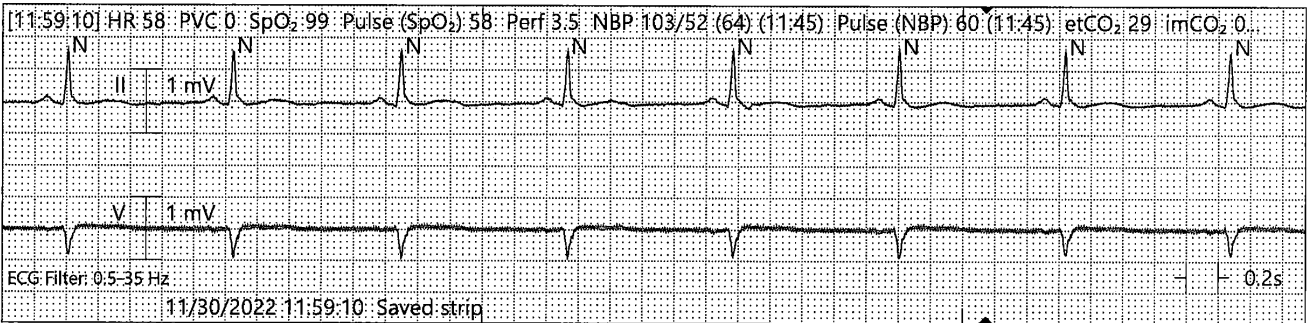
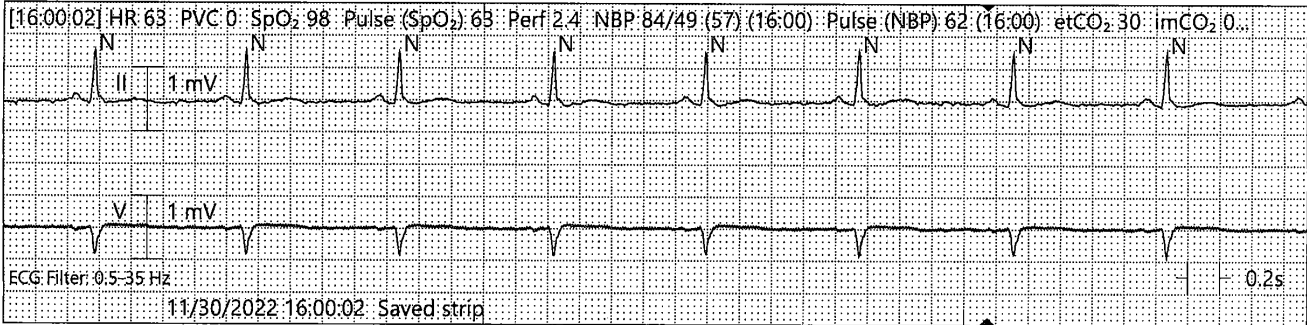
ICU	My Institution
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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ECG source: MICU7



	ICU	My Institution
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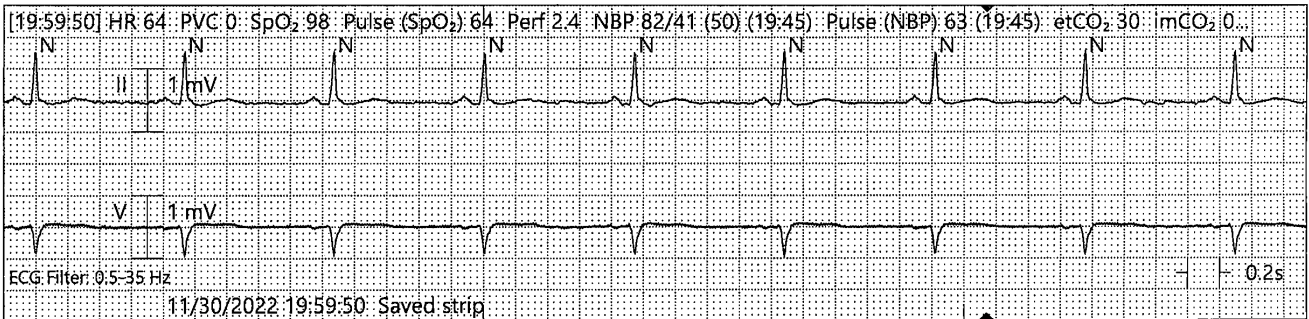
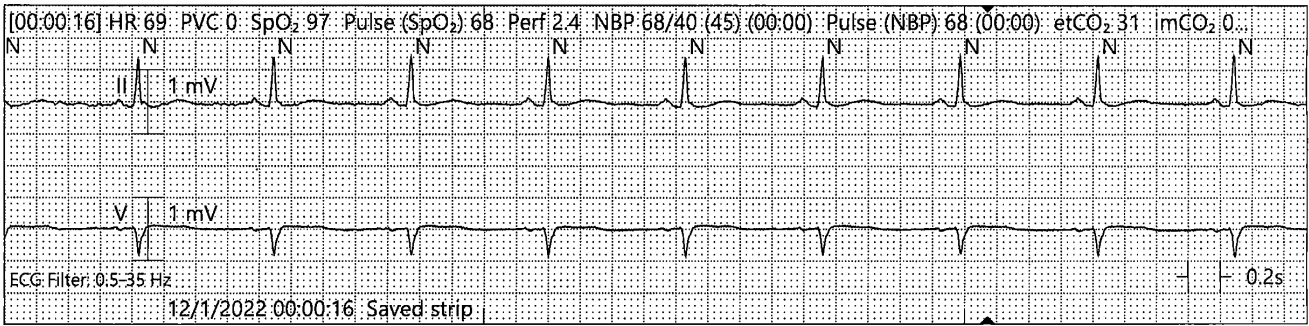
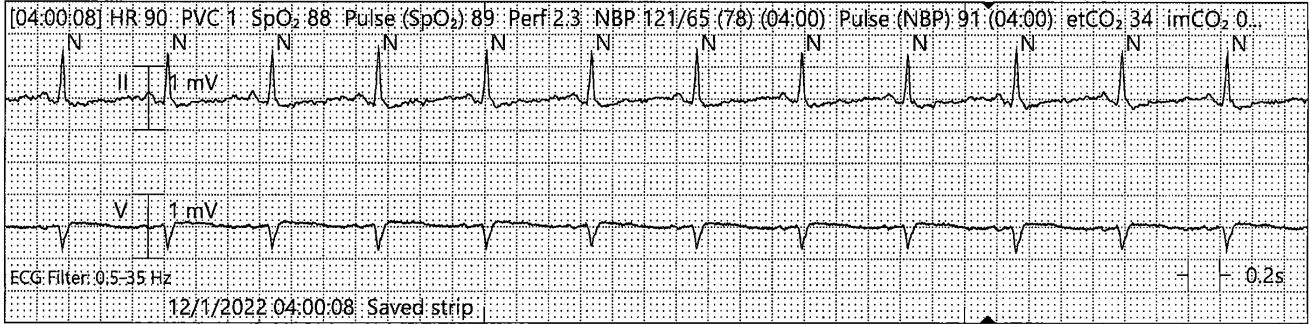
Alarm Review Report

ICU 7

LYONS, KATHLEEN

QH0054940416

ECG source: MICU7



ICU My Institution

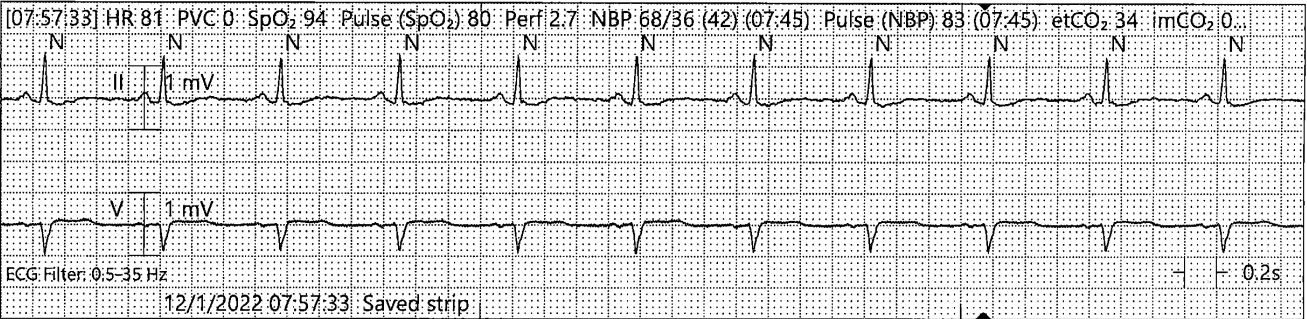
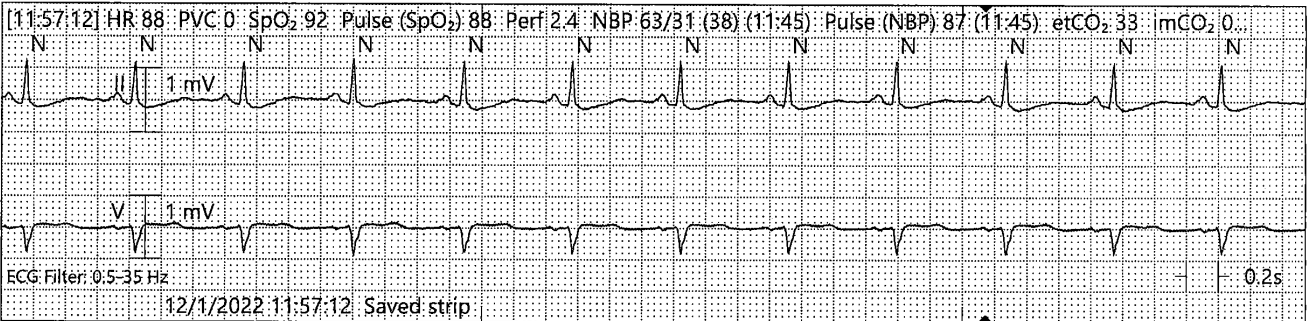
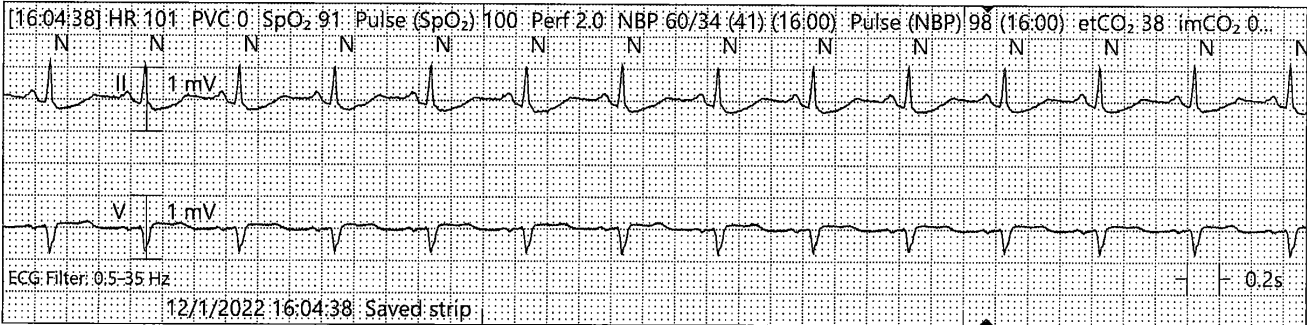


Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416
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ECG source: MICU7



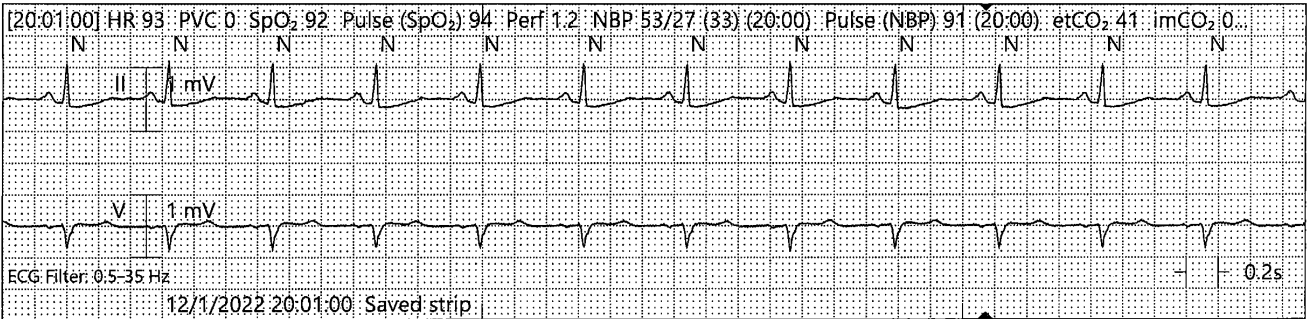
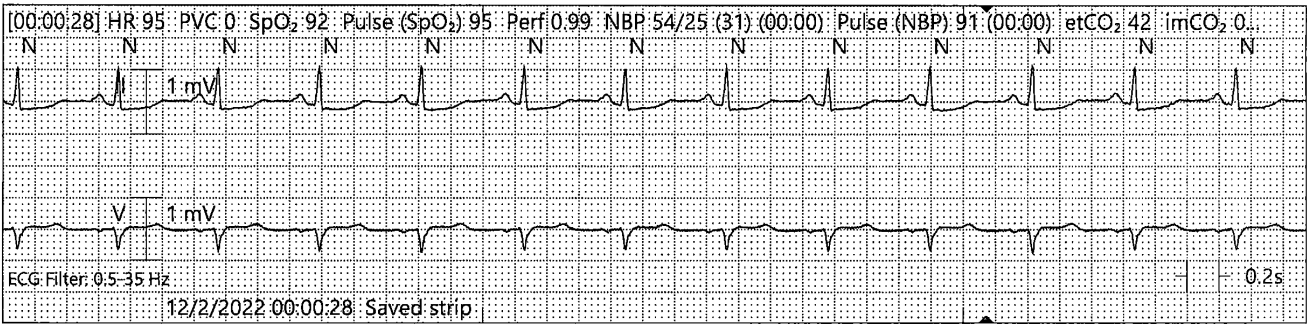
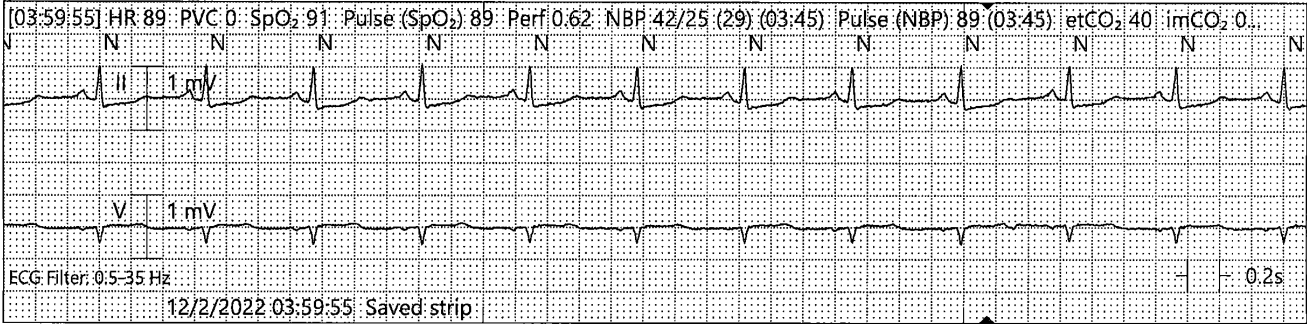
	ICU	My Institution
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Alarm Review Report

ICU 7

LYONS, KATHLEEN	QH0054940416	
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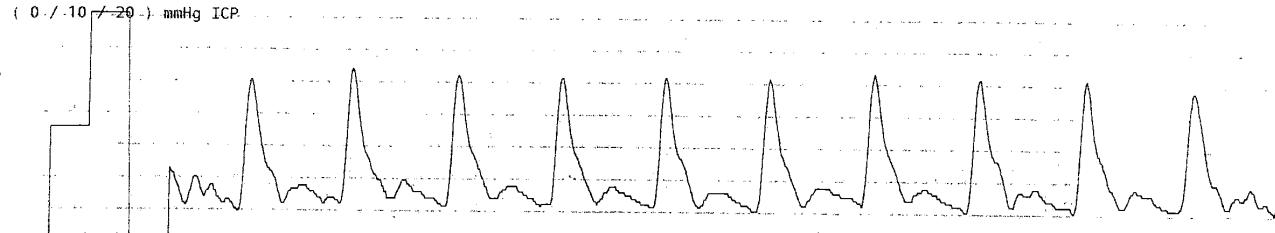
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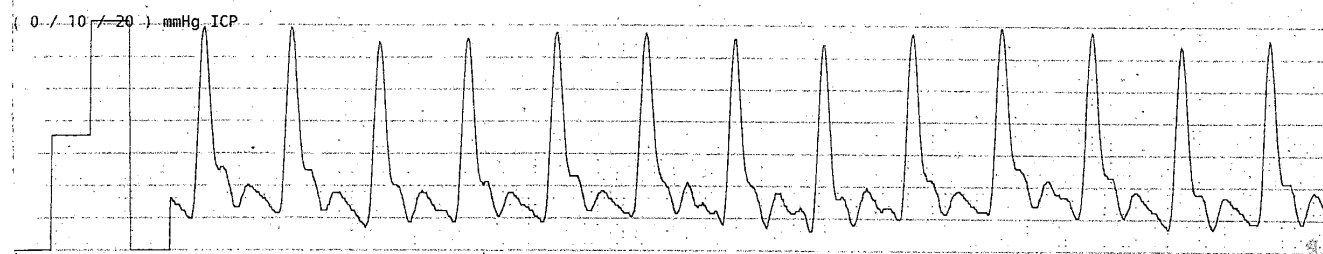
	ICU	My Institution
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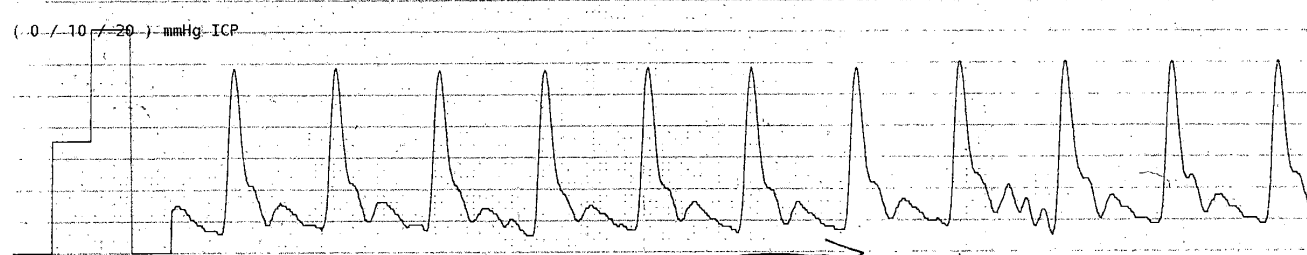
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10/27/2022 23:06:11 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 107 Sinus Tach PVC 0 Sp02 97 Pulse (SpO2) 106 Perf 4.4 NBP 11



10/28/2022 04:01:53 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 90 Sinus Rhythm PVC 0 Sp02 98 Pulse (SpO2) 90 Perf 6.0 NBP



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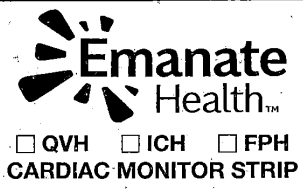
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(60) (04:00) Pulse (NBP) 89 (04:00) ICP (6) e



Patient Information

Lyons, Kathleen A  
 DOB: 07/13/1961          61Y - F  
 Acct#: QH0054940416      MRN#: MR01483046  
 Adm/Svc: 10/18/2022      Loc: Q11CU    Q1007-A  
 Att: Batou, Augen



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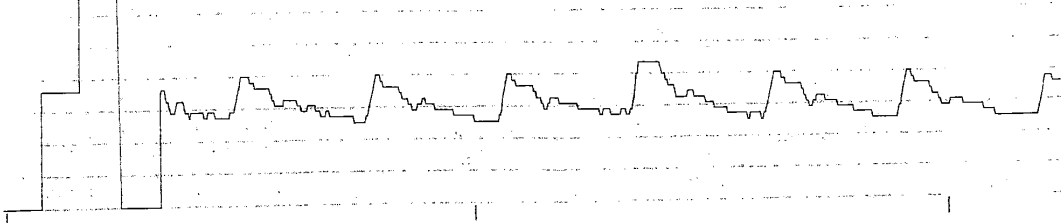


QH0054940416 LYONS, KATHLEEN, A MR01483046



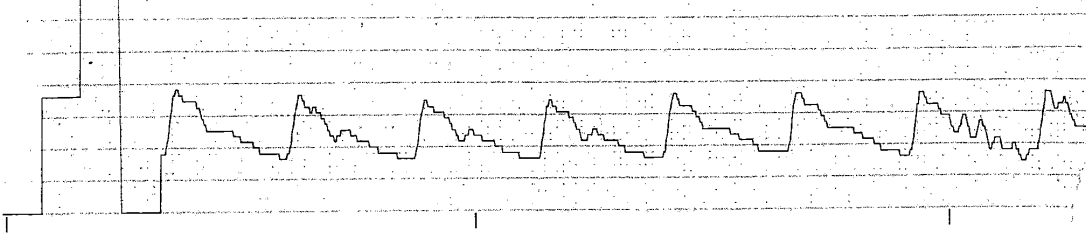
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( 0 / 5 / 10 ) mmHg-ICP



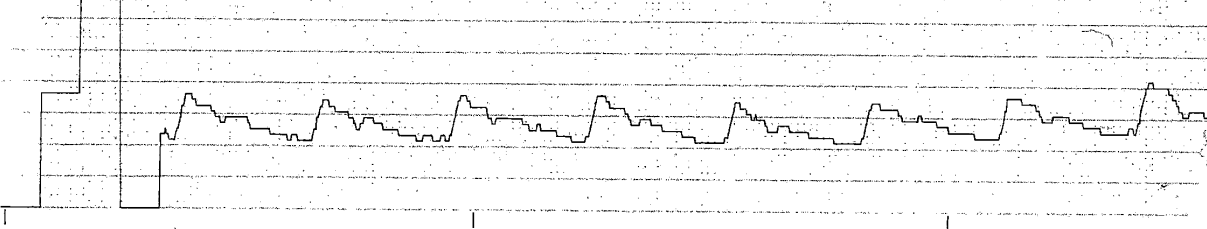
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( 0 / 5 / 10 ) mmHg-ICP



10/30/2022 04:01:59 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 69 Sinus Rhythm PVC 0 SpO2 98 Pulse (SpO2) 68 Perf

( 0 / 5 / 10 ) mmHg-ICP



QVH  ICH  FPH  
CARDIAC MONITOR STRIP



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Patient Information

Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q6NSU Q0605-B  
Att: Batou, Augen

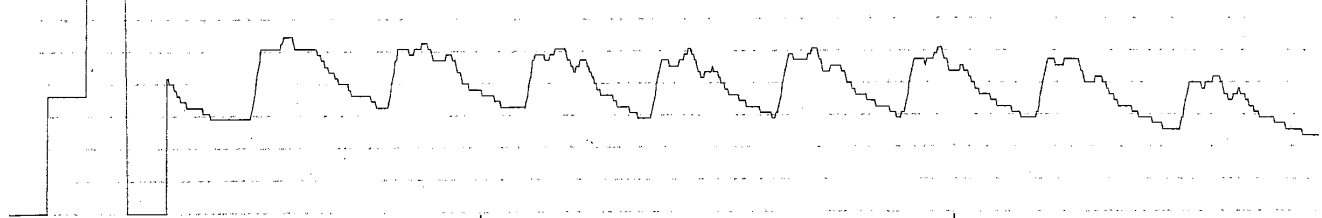
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QH0054940416 LYONS, KATHLEEN, A MR01483046

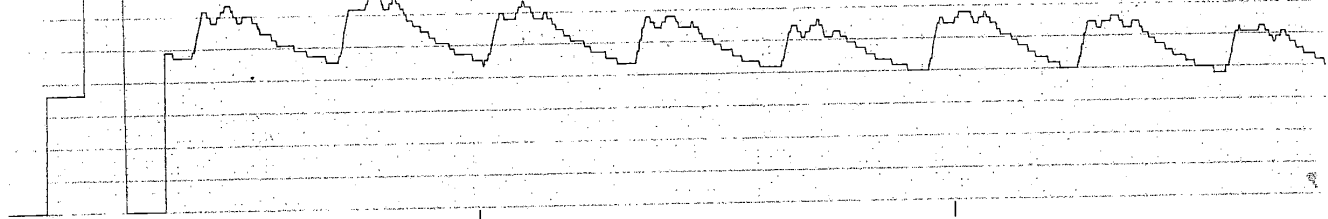
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( 0 / 5 / 10 ) mmHg-ICP



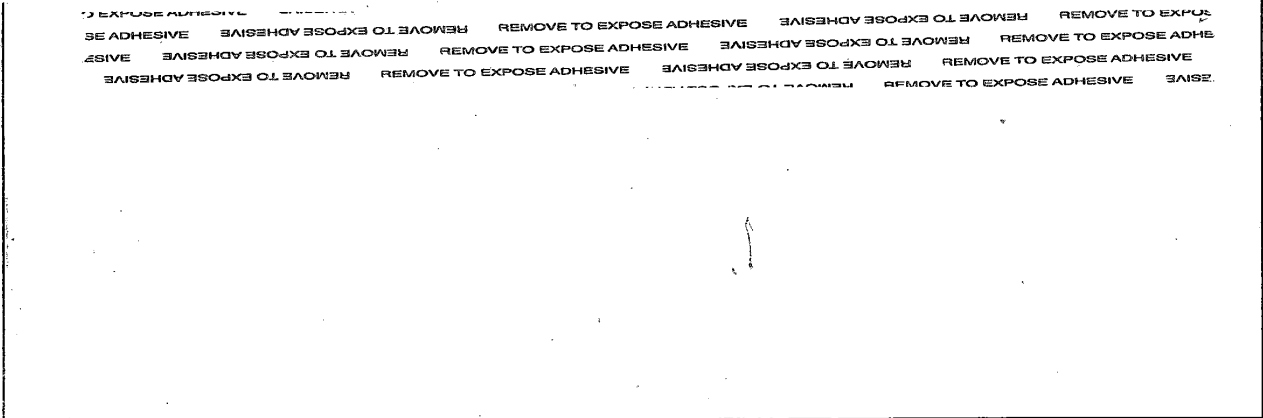
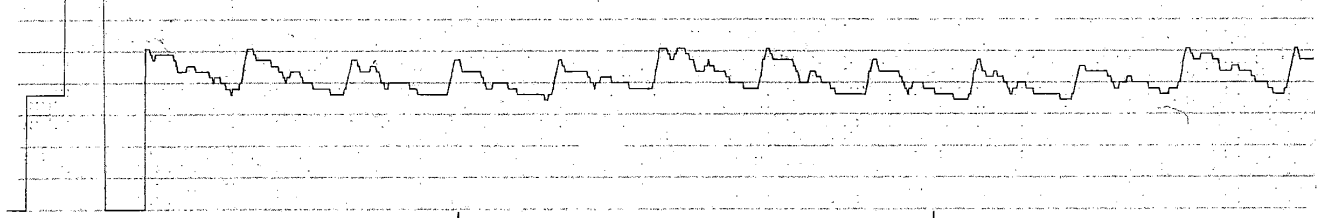
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( 0 / 5 / 10 ) mmHg-ICP



10/31/2022 03:52:57 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 91 Sinus Rhythm PVC 0 SpO2 98 Pulse (SpO2) 91 Perf 1.2 NBP 136

( 0 / 5 / 10 ) mmHg-ICP



QVH  ICH  FPH  
CARDIAC MONITOR STRIP



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Patient Information

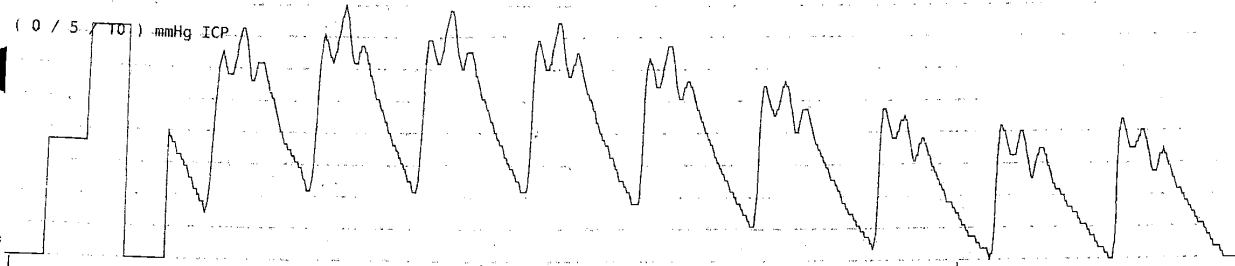
Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q6NSU Q0605-B  
Att: Batou, Augen



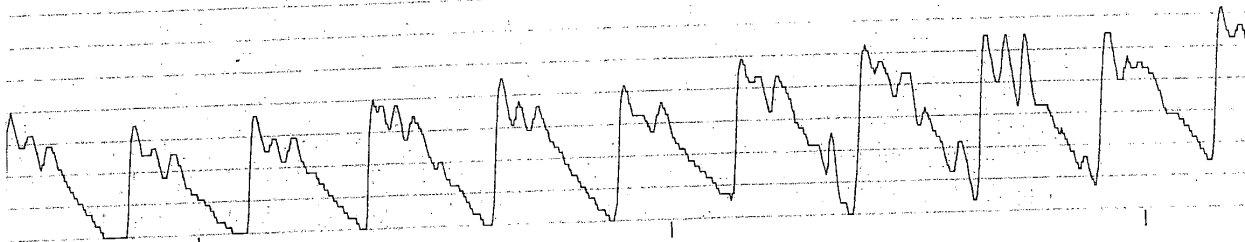
QH0054940416 LYONS, KATHLEEN, A MR01483046

11/2/2022 01:56:42 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 82 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 81 Perf 0.

( 0 / 5 (T0)) mmHg ICP



44 NBP 138/52 (73) (01:30) Pulse (NBP) 73 (01:30) ICP (5) etCO2 39 inCO2 0



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QVH  ICH  FPH  
 CARDIAC MONITOR STRIP



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Patient Information

Lyons, Kathleen A  
 DOB: 07/13/1961 61Y - F  
 Acct#: QH0054940416 MRN#: MR01483046  
 Adm/Svc: 10/18/2022 Loc: Q11CU Q1007-A  
 Att: Batou, Augen



QH0054940416 LYONS, KATHLEEN, A MR01483046

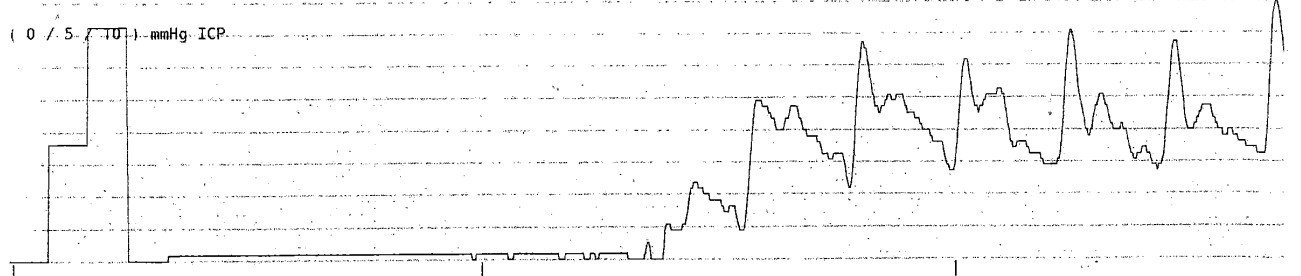






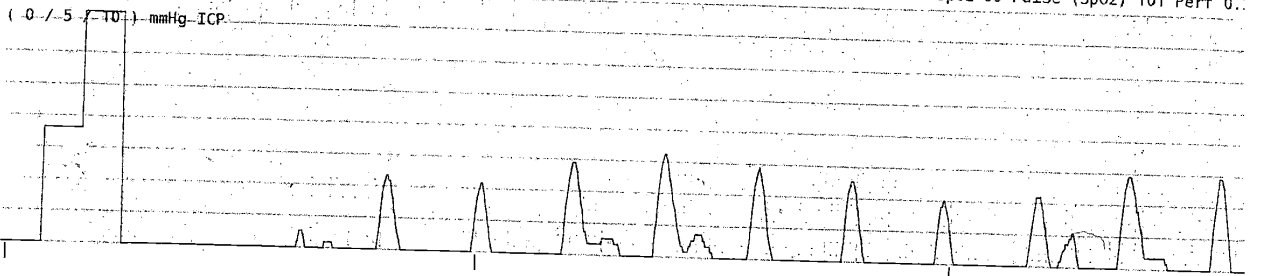
11/5/2022 19:57:53 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 91 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 93 Perf 0.21 NE

( 0 / 5 / 10 ) mmHg ICP



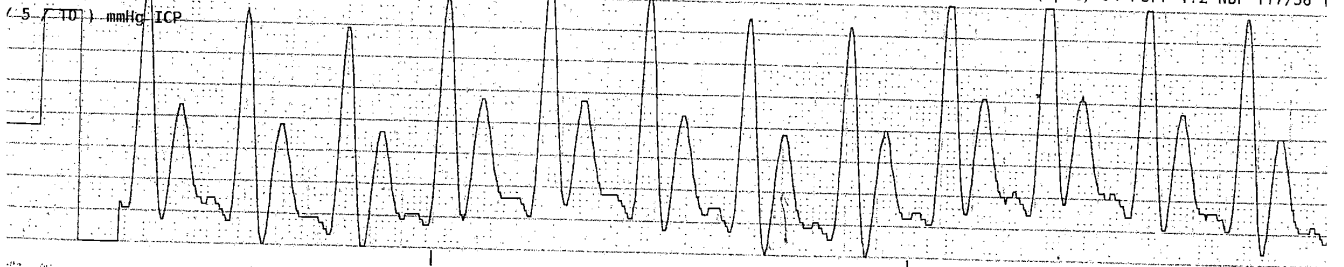
11/6/2022 00:33:05 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 103 Sinus Tach PVC 0 SpO2 99 Pulse (SpO2) 101 Perf 0.21 NE

( 0 / 5 / 10 ) mmHg ICP



11/6/2022 03:33:51 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 96 Sinus Rhythm PVC 0 SpO2 96 Pulse (SpO2) 94 Perf 1.2 NBP 117/56

( 0 / 5 / 10 ) mmHg ICP



QVH  ICH  FPH  
CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Patient Information

Patient Name

Unit #

D.O.B.

Lyons, Kathleen A

DOB: 07/13/1961

Acct#: QH0054940416

Adm/Svc: 10/18/2022

Att: Batou, Augen

61Y - F

MRN#: MR01483046

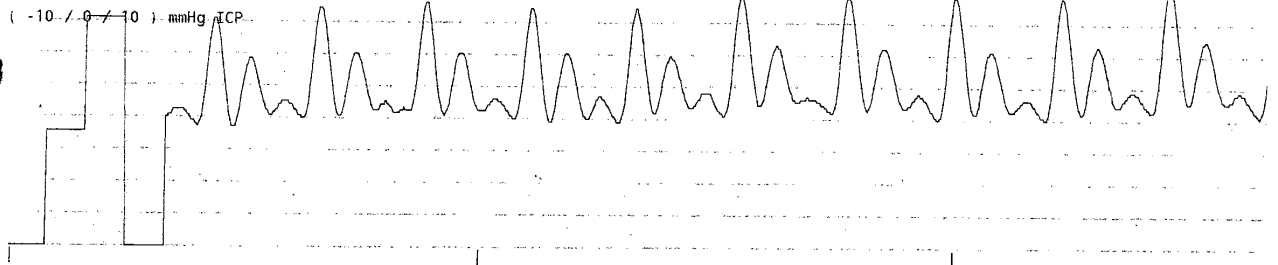
Loc: Q11CU Q1007-A



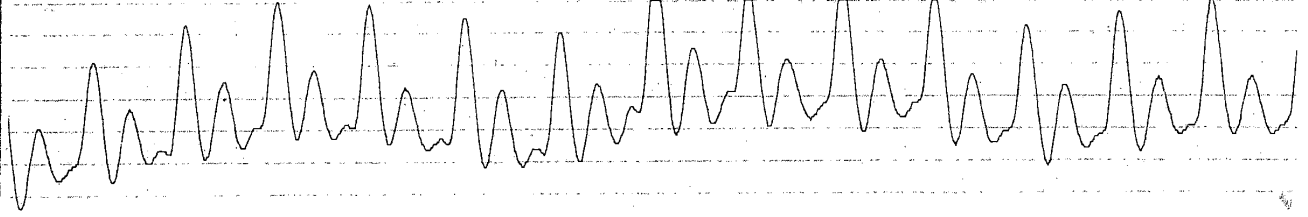
QH0054940416 LYONS, KATHLEEN, A MR01483046

11/6/2022 19:36:14 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 89 Sinus Rhythm PVC 0 SpO2 100? Pulse (SpO2) 88? Perf 0.

( -10 / 0 / 10 ) mmHg ICP

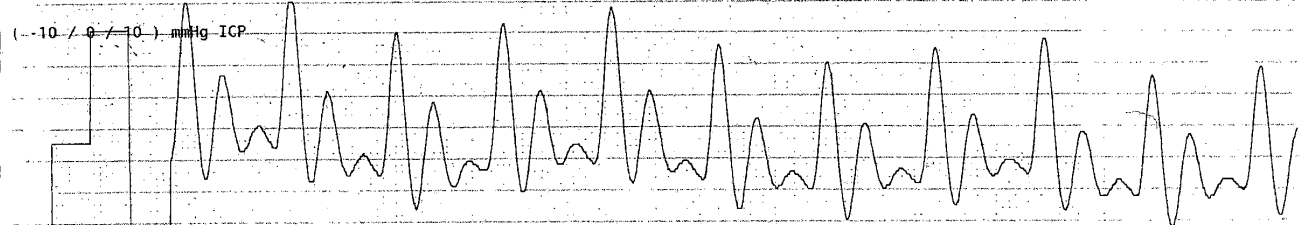


11/6/2022 23:53:54 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 92



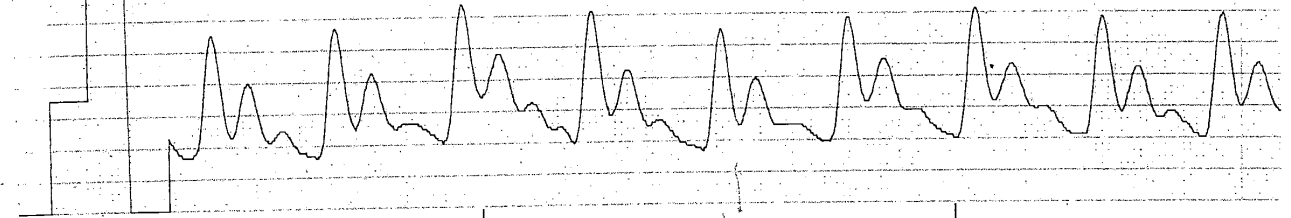
11/6/2022 23:53:18 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 88 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 93 Perf 0.14 NE

( -10 / 0 / 10 ) mmHg ICP



11/7/2022 04:20:18 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 77 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 76 Perf 0.14

( 0 / 10 / 20 ) mmHg ICP



QVH  ICH  FPH  
CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Patient Information

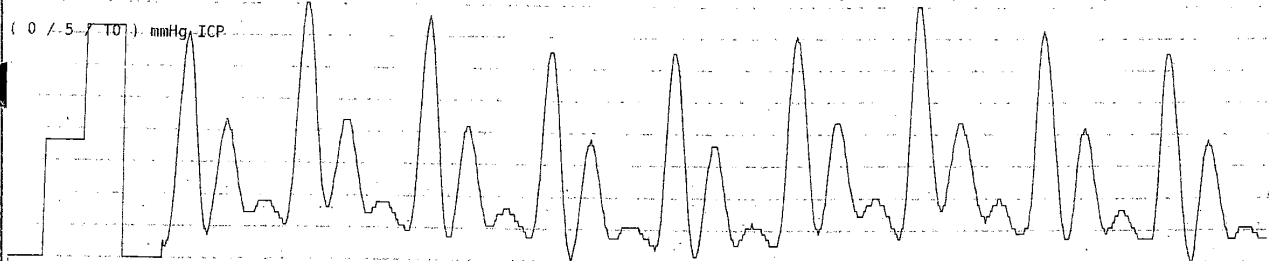
Pat  
Un  
D. Lyons, Kathleen A 61Y - F  
DOB: 07/13/1961 MRN#: MR01483046  
Acct#: QH0054940416 Adm/Svc: 10/18/2022 Loc: Q11CU QI007-A  
Att: Kamdar, Sana



QH0054940416 LYONS, KATHLEEN, A MR01483046

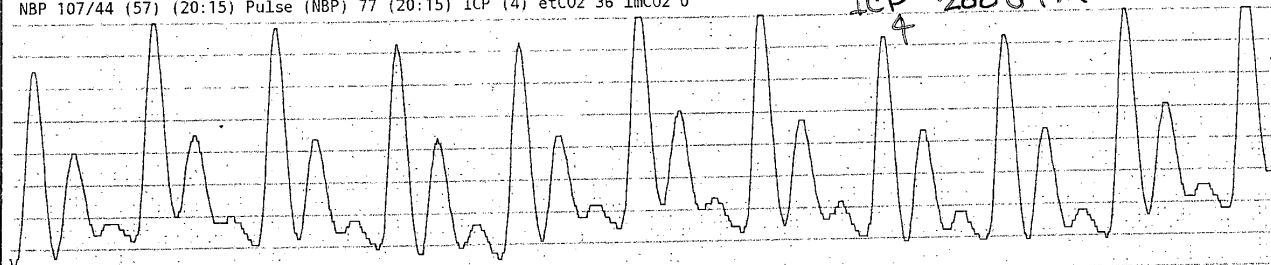
11/7/2022 20:18:42 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 77 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 79 Perf 0.24

( 0 / 5 / 10 ) mmHg ICP



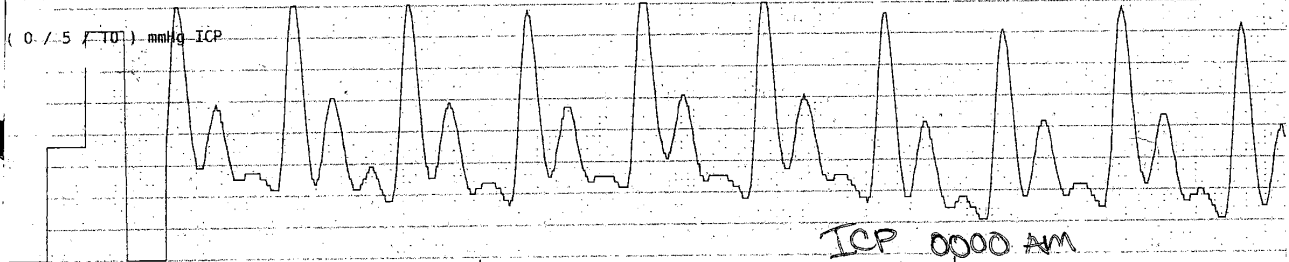
NBP 107/44 (57) (20:15) Pulse (NBP) 77 (20:15) ICP (4) etCO2 36 imCO2 0

ICP 2800 PM



11/8/2022 00:01:01 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 81 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 81 Perf 0.27 NB

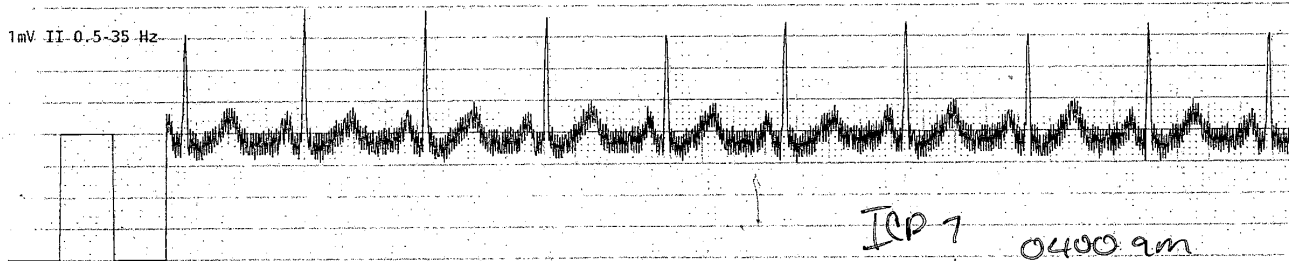
( 0 / 5 / 10 ) mmHg ICP



ICP 0900 AM

11/8/2022 04:08:52 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 79 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 80 Perf 0.13 NB

1mV II-0.5-35 Hz



ICP 7 0400 am



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CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q11CU Q1007-A  
Att: Kamdar, Sana

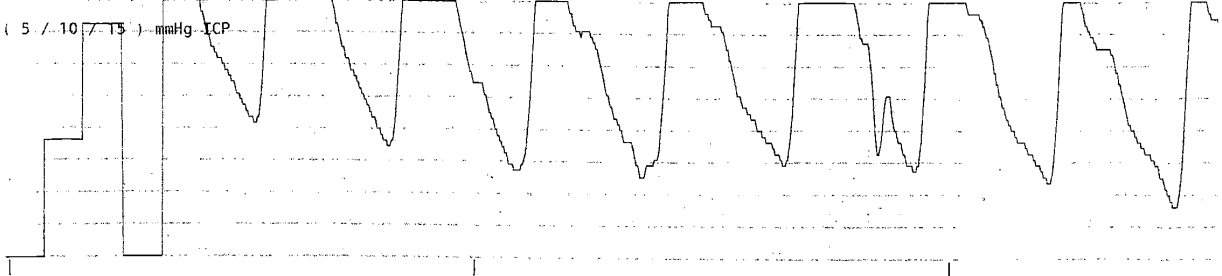


QH0054940416 LYONS, KATHLEEN, A MR01483046



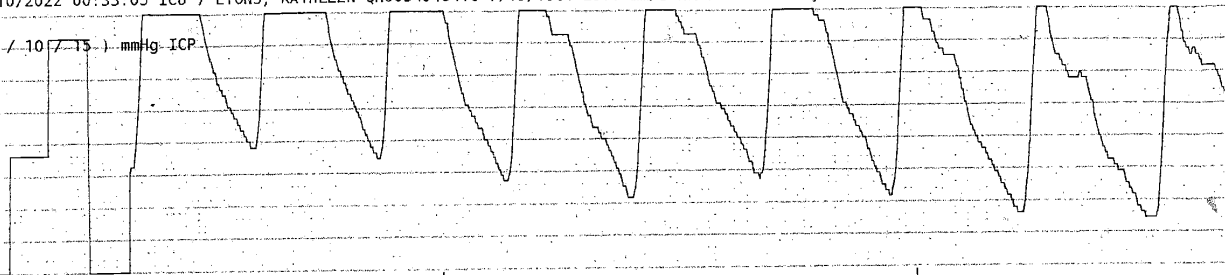
11/10/2022 20:20:23 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 72 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 73 Perf

( 5 / 10 / 15 ) mmHg ICP



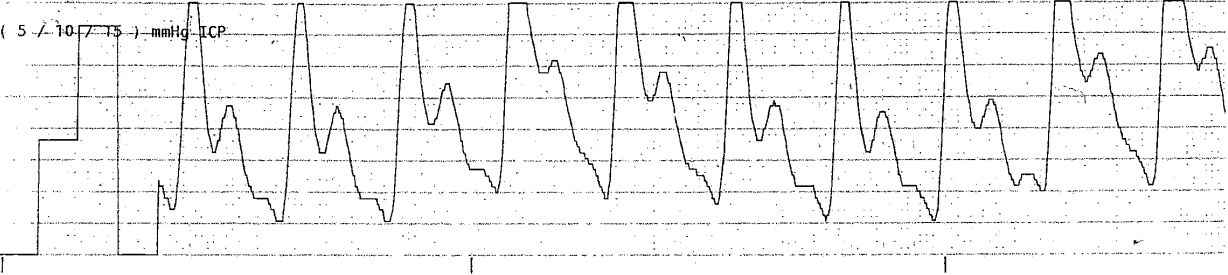
11/10/2022 00:33:05 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 74 Sinus Rhythm PVC 0 SpO2 100? Pulse (SpO2) 74? Perf

( 5 / 10 / 15 ) mmHg ICP



11/10/2022 03:54:12 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 87 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 86 Perf

( 5 / 10 / 15 ) mmHg ICP



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QVH  ICH  FPH  
CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Patient Information

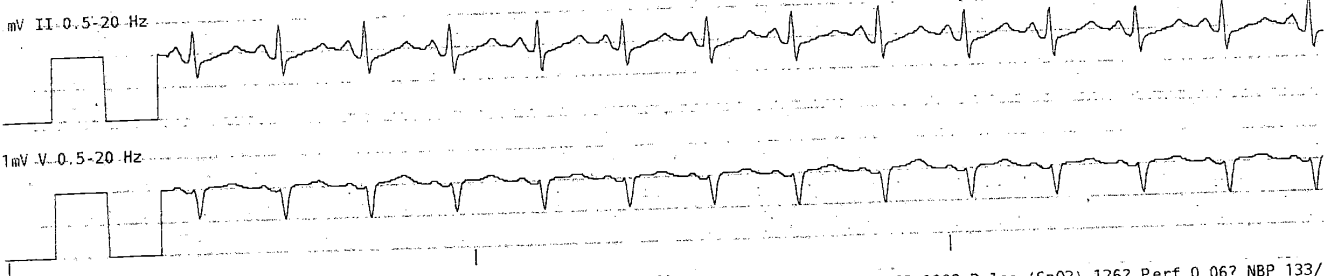
Patient Name

Unit #

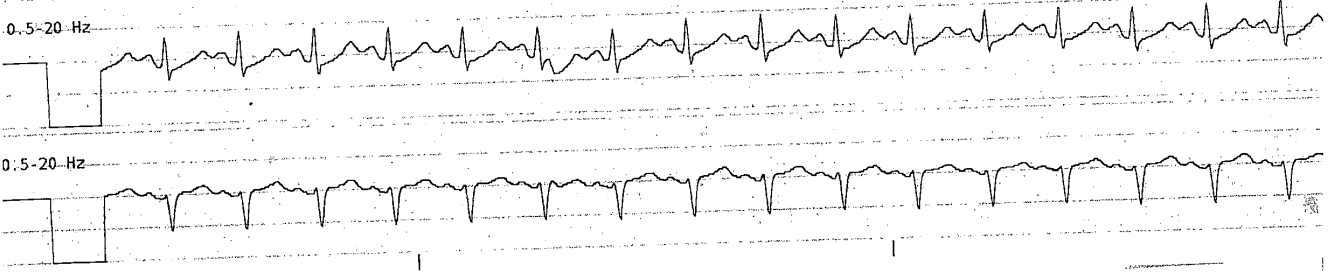
D.O.B.

QH0054940416 LYONS, KATHLEEN, A MR01483046

1/10/2022 13:55:37 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 111 Sinus Tach PVC 0 SpO2 100 Pulse (SpO2) 110 Perf 0.25 NBP 1



2022 14:28:56 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 128 Sinus Tach PVC 0 SpO2 100? Pulse (SpO2) 126? Perf 0.06? NBP 133/



LYONS, KATHLEEN ICU 7		QH0054940416										
Vital Signs Report		Standard										
		10 Nov 22 14:29:40										
10 Nov	13:35	13:40	13:45	13:50	13:55	14:00	14:05	14:10	14:15	14:20	14:25	(14:25)
HR	110	110	110	110	110	111	110	125	129	134	137	
SpO2	100	100	100	100	100	100	100	100	?100	-?	?100	
NBPs					114	114	121	140	162	143	133	
NBPd					48	48	45	50	80	62	61	
NBPm					63	65	64	73	93	80	80	
					13:55	14:00	14:05	14:10	14:15	14:20	14:25	
etCO2	32	33	32	32	32	33	33	32	34	34	34	
imCO2	0	0	0	0	0	0	0	0	0	0	0	
ICPm	13	13	13	13	13	13	13	13	13	13	13	



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CARDIAC MONITOR STRIP



40-357 (Rev 7-22)

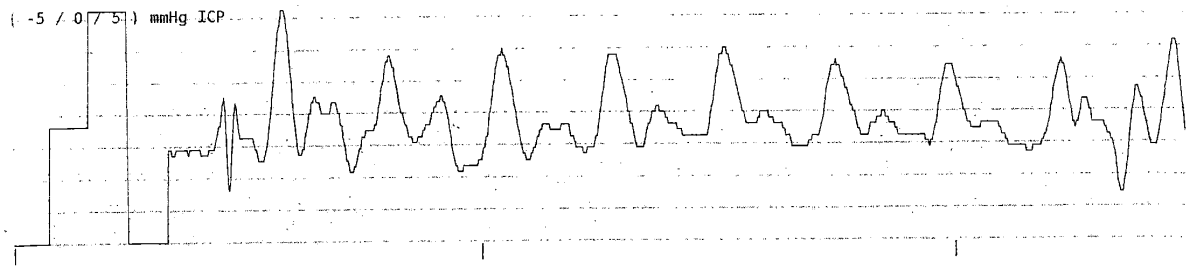
Patient Information

Patient Name: **Lyons, Kathleen A**  
 Unit #: **61 F**  
 D.O.B.: **DOB: 07/13/1961**  
**ACCT: QH0054940416 MRN: MR01483046**  
**Att: BATAUG**  
**Loc: Q11CU**

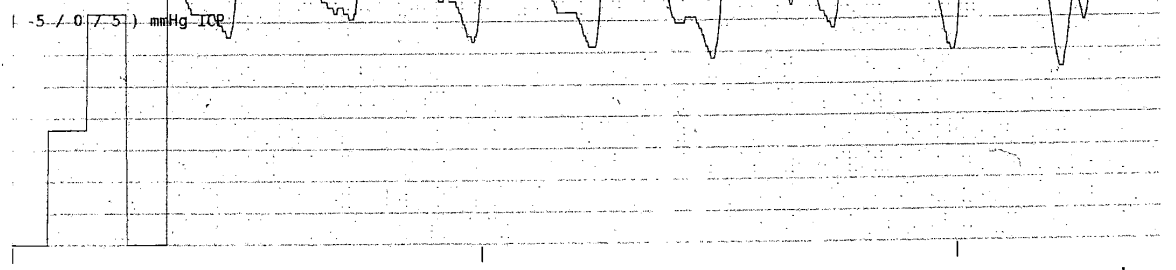
QH0054940416 LYONS, KATHLEEN, A MR01483046



11/11/2022 20:00:17 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 85 Sinus Rhythm PVC 0 SpO2 98 Pulse (SpO2) 85



11/12/2022 00:01:26 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 77 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2)



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CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

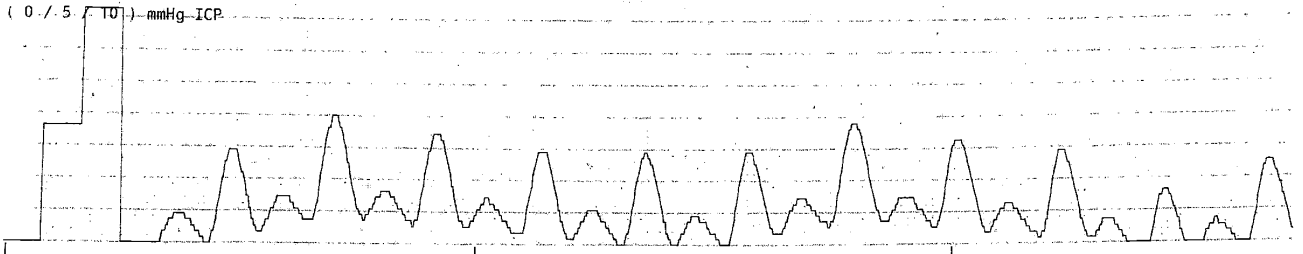
Patient Information

Patient Name  
 Unit # Lyons, Kathleen A  
 D.O.B. DOB: 07/13/1961 61Y - F  
 Acct#: QH0054940416 MRN#: MR01483046  
 Adm/Svc: 10/18/2022 Loc: Q11CU Q1007 - A  
 Att: Batou, Augen

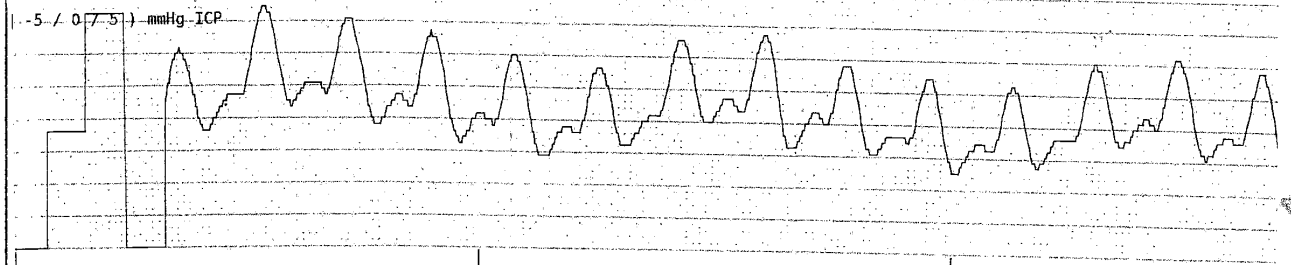




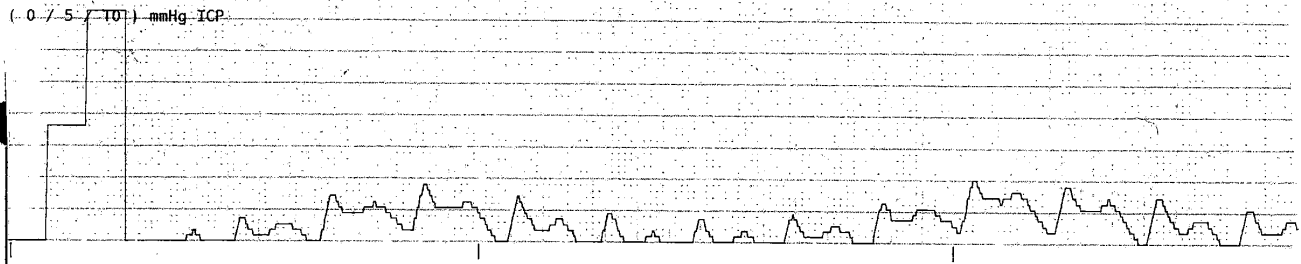
11/14/2022 19:57:47 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 93 Sinus Rhythm PVC 0 SpO2 92 Pulse (SpO2) 91 Perf 1.2 NBP



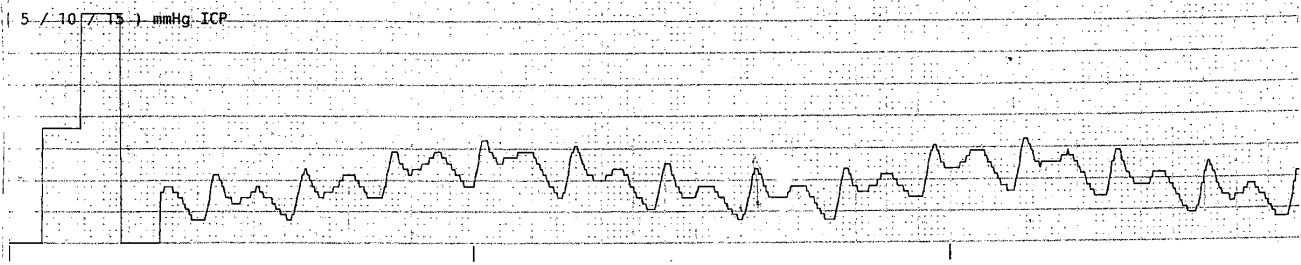
11/15/2022 00:04:18 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 114 Sinus Tach PVC 0 SpO2 100 Pulse (SpO2) 109 Perf 0.51



11/15/2022 04:22:59 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 104 Sinus Tach PVC 0 SpO2 98 Pulse (SpO2) 103 Perf 1.2 NE



11/15/2022 04:37:38 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 106 Sinus Tach PVC 0 SpO2 97 Pulse (SpO2) 105 Perf 1.4 NBP



QVH  ICH  FPH  
CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

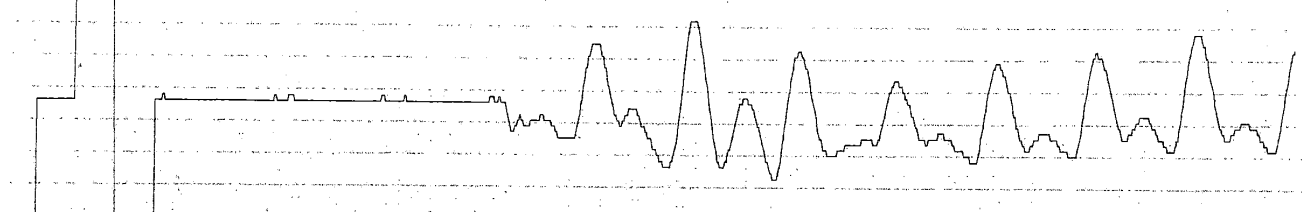
Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q1ICU QI007-A  
Att: Batou, Augen



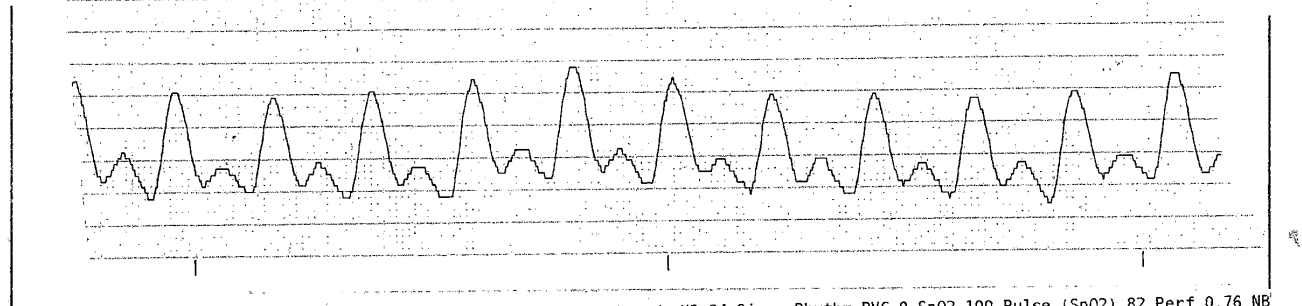
QH0054940416 LYONS, KATHLEEN, A MR01483046

1/15/2022 21:06:10 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 95 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 94 Perf 1.2 NBP

-5 / 0 / 7.5 mmHg-ICP

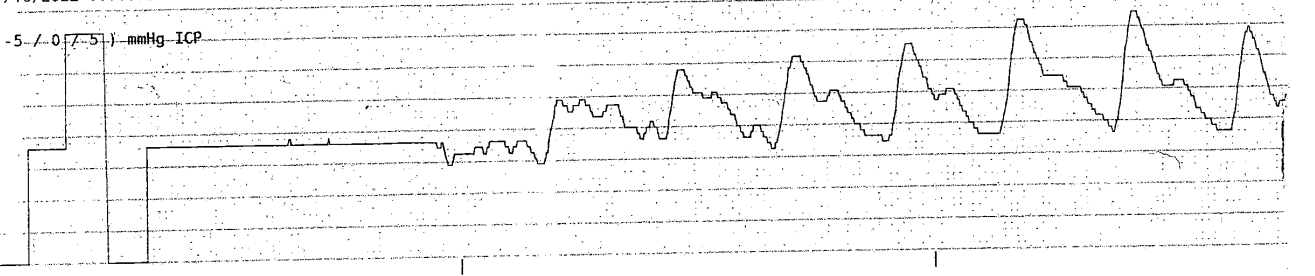


132/57 (77) (21:00) Pulse (NBP) 93 (21:00) ICP (-1) etCO2 37 imCO2 0



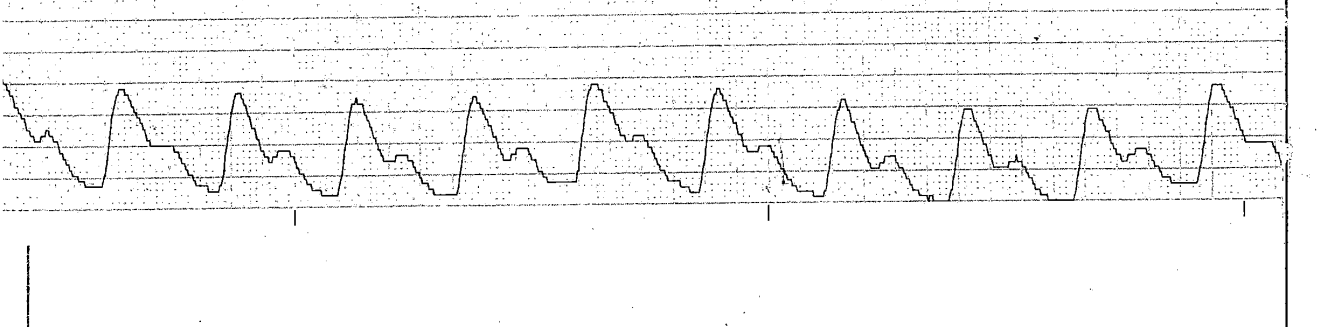
1/16/2022 00:11:34 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 84 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 82 Perf 0.76 NB

-5 / 0 / 7.5 mmHg-ICP



ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 78 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 79 Perf 1.1 NBP 124/60 (72) (03:

ICP



QVH  ICH  FPH  
CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

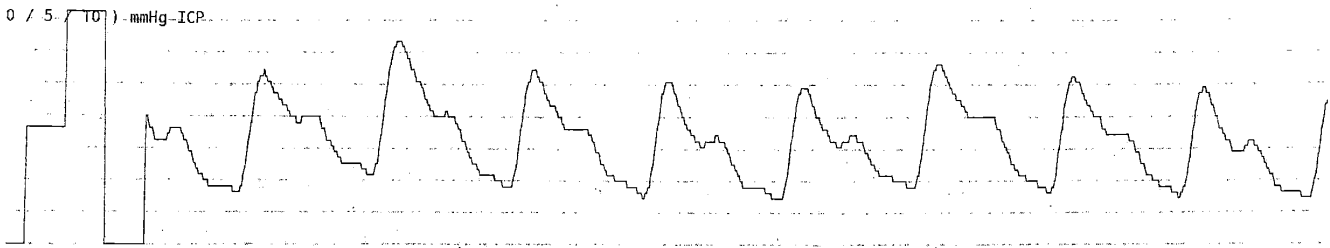
Patient Information

Pat  
Uni Lyons, Kathleen A 61Y - F  
DOB: 07/13/1961 MRN#: MR01483046  
D.O Acct#: QH0054940416 Adm/Svc: 10/18/2022 Loc: Q1ICU QI007-A  
Att: Batou, Augen

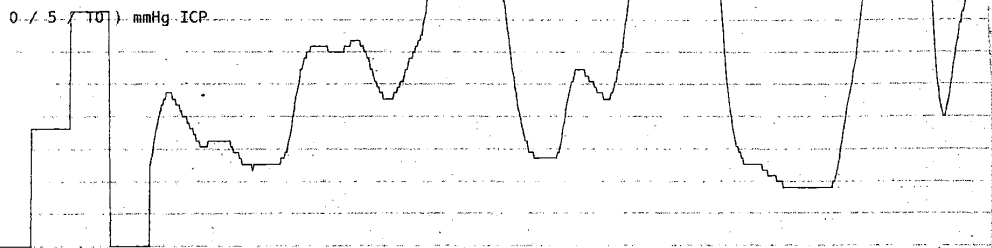


QH0054940416 LYONS, KATHLEEN, A MR01483046

/16/2022 21:06:17 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 71 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 69 Perf 0.44 NBP 11



/17/2022 00:33:33 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 70 Sinus Rhythm PVC 0 SpO2



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QVH  ICH  FPH  
CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

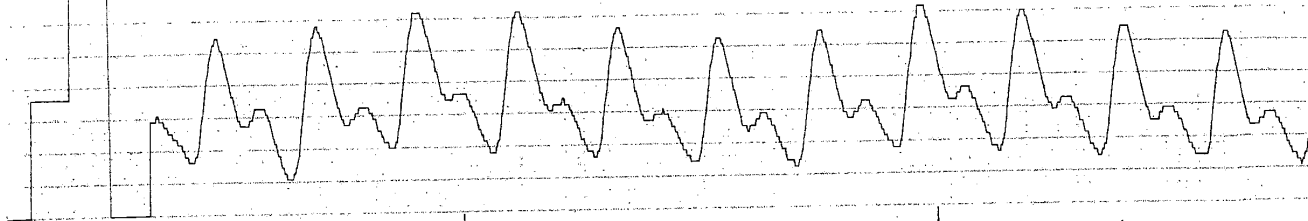
Patient Information

Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q1ICU QI007-A  
Att: Batou, Augen

QH0054940416 LYONS, KATHLEEN, A MR01483046

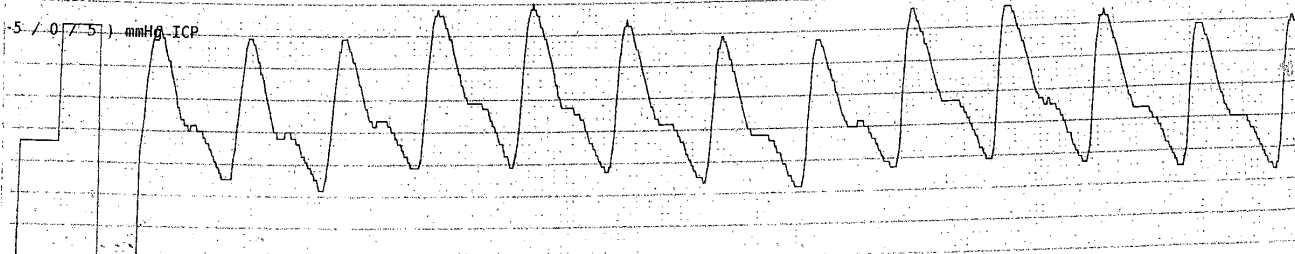
11/19/2022 20:06:30 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 94 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 95 Perf 0.95 NBP

-5 / 0 (7.5) mmHg-ICP



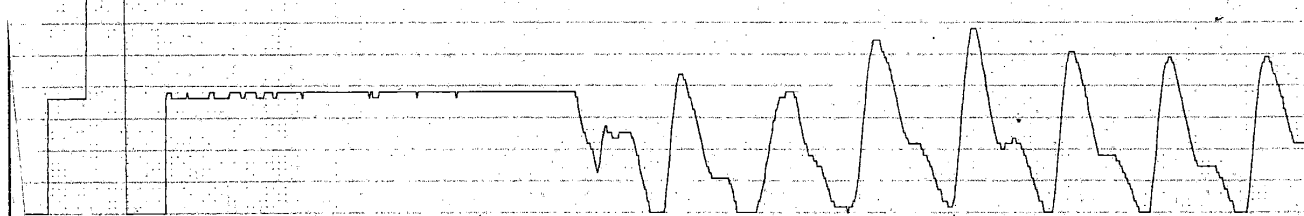
11/19/2022 23:53:01 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 100 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 100 Perf 0.79 NBP

-5 / 0 (7.5) mmHg-ICP



11/20/2022 04:19:56 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 98 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 96 Perf 1.1 NBP

-5 / 0 (7.5) mmHg-ICP



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CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Patient Information

Patie

Unit Lyons, Kathleen A

DOB: 07/13/1961

61Y - F

D.O Acct#: QH0054940416

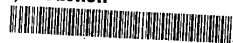
MRN#: MR01483046

Adm/Svc: 10/18/2022

Loc: Q11CU

Q1007-A

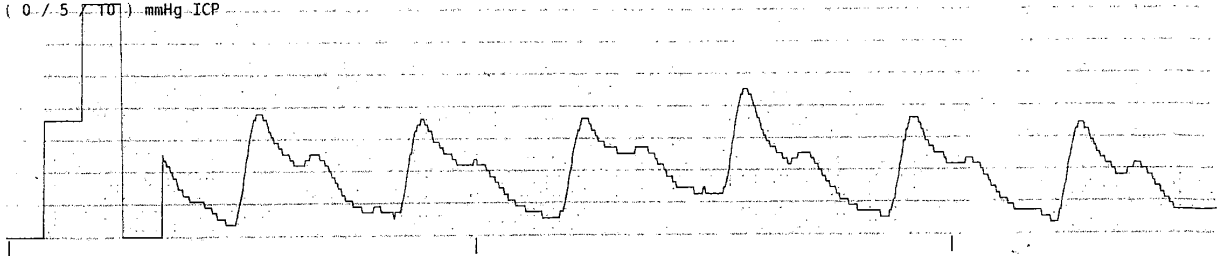
Att: Ashouri, Anousheh



QH0054940416 LYONS, KATHLEEN, A MR01483046

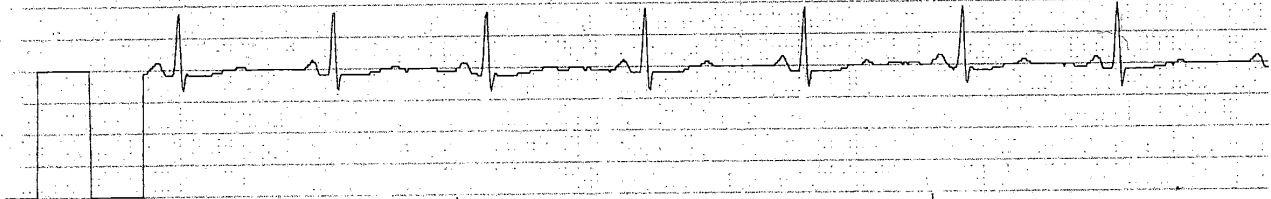
11/17/2022 20:12:25 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 58 Sinus Brady PVC 0 SpO2 100 Pulse (SpO2) 58 Perf

( 0.5 / 10 ) mmHg-ICP



11/18/2022 01:38:05 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 57 Sinus Brady PVC 0 SpO2 100 Pulse (SpO2) 56 Perf 0.46 NF

mV II 0.5-20 Hz



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CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Patient Information

Patient

Unit # Lyons, Kathleen A

DOB: 07/13/1961

61Y - F

D.O.B. Acct#: QH0054940416

MRN#: MR01483046

Adm/Svc: 10/18/2022

Loc: Q1ICU QI007-A

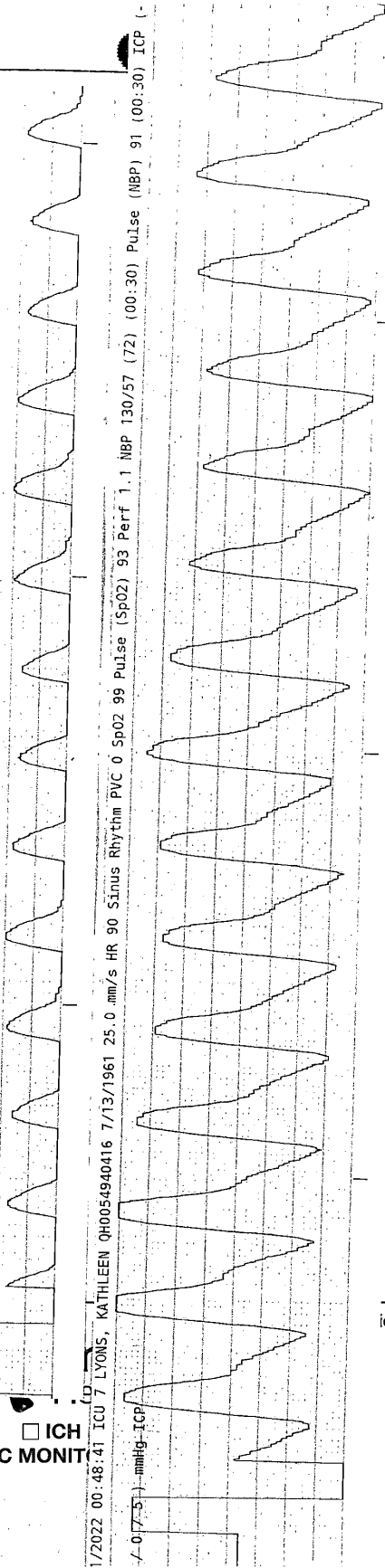
Att: Batou, Augen



QH0054940416 LYONS, KATHLEEN, A MR01483046

0/2022 21:03:37 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 96 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 95 Perf 1.2 ICP (1) etCO2 36 ImCO  
/-10/-20/- mmHg-ICP

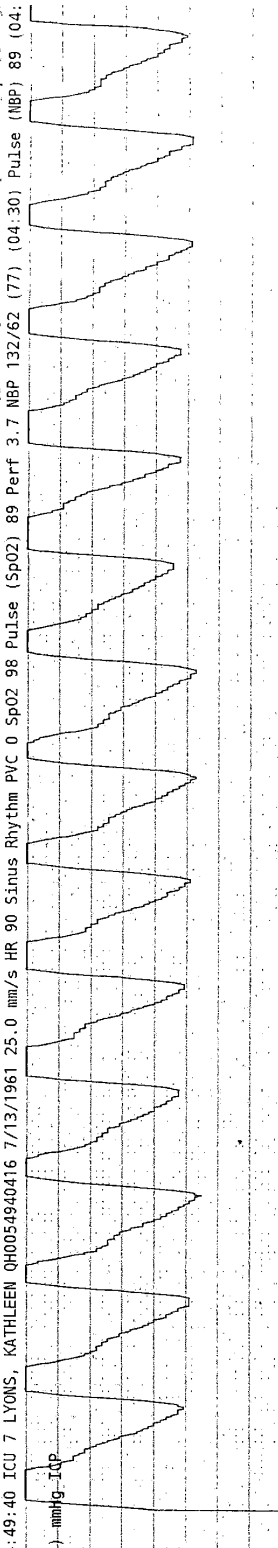
QVH  ICH  
CARDIAC MONIT



1/2022 00:48:41 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 90 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 93 Perf 1.1 NBP 130/57 (72) (00:30) Pulse (NBP) 91 (00:30) ICP (-)  
/-0/-5/- mmHg-ICP

ient Infor

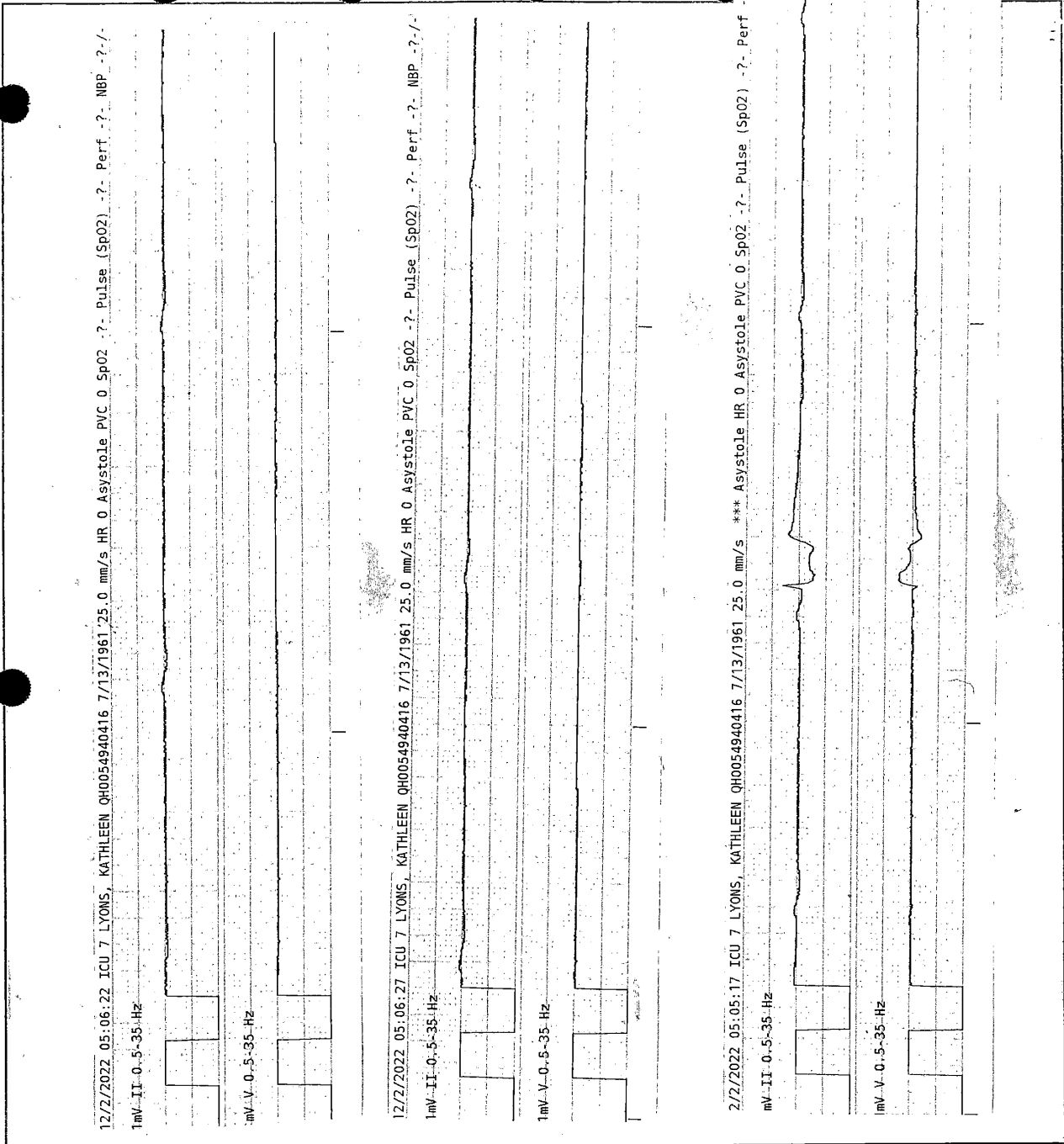
Lyons, K  
DOB: 07/13/1961  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q11CU Q1007-A  
Att: Ashouri, Anousheh











QVH  ICH  FPH  
 CARDIAC MONITOR STRIP



40-357 (Rev 5-19)

Patient Information

Patient Name

Unit #

D.O.B.

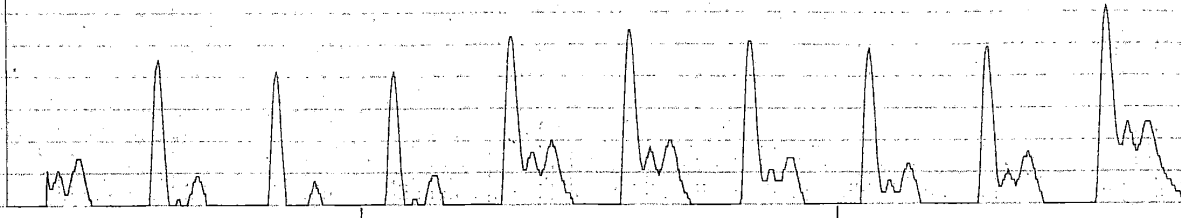
Lyons, Kathleen A  
 DOB: 07/13/1961 61Y - F  
 Acct#: QH0054940416 MRN#: MR01483046  
 Adm/Svc: 10/18/2022 Loc: Q11CU QI007-A  
 Att: Lau, Tsang

QH0054940416 LYONS, KATHLEEN, A MR01483046



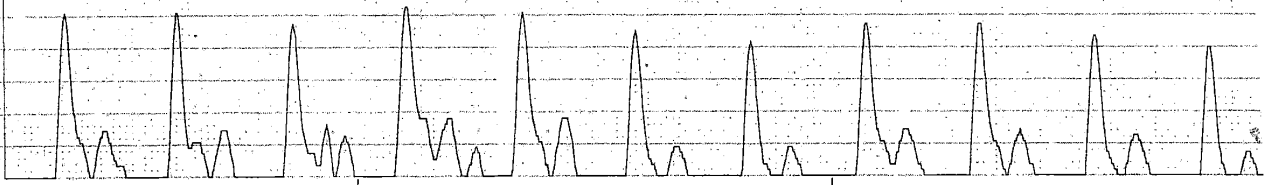
20:02:38 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s [20:02:48] HR 81 PVC 0 SpO2 100 Pulse (SpO2) 82 Perf 0.23

mmHg-ICP



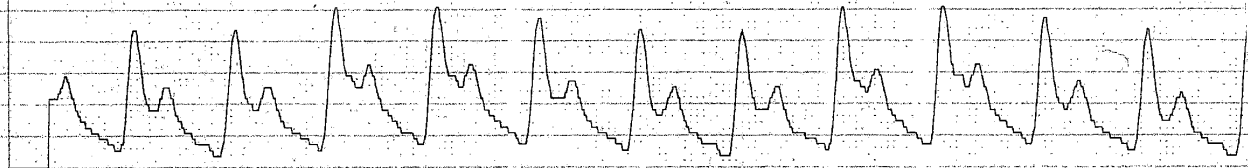
00:05:55 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 83 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 82 Perf 0.24 NBP 135/52

mmHg-ICP



04:46:23 ICU 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 93 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 91 Perf 0.22 NBP 126/62

mmHg-ICP



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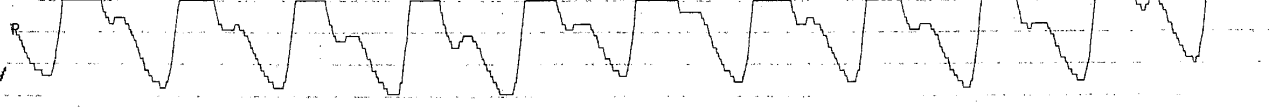
40-357 (Rev 5-19)

Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q11CU Q1007-A  
Att: Batou, Augen

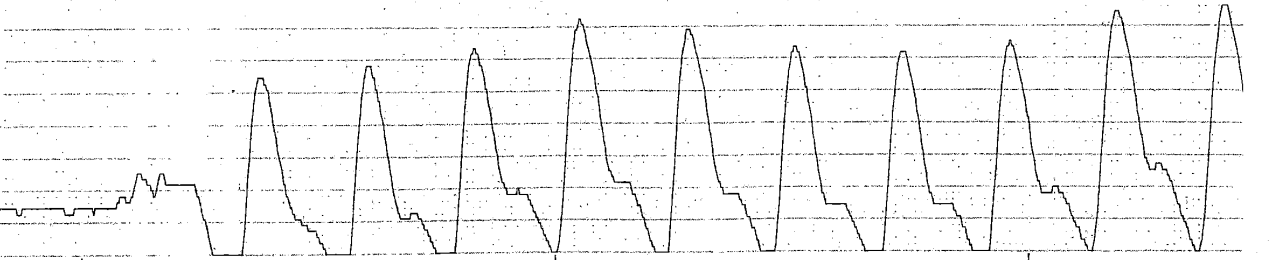


QH0054940416 LYONS, KATHLEEN, A MR01483046

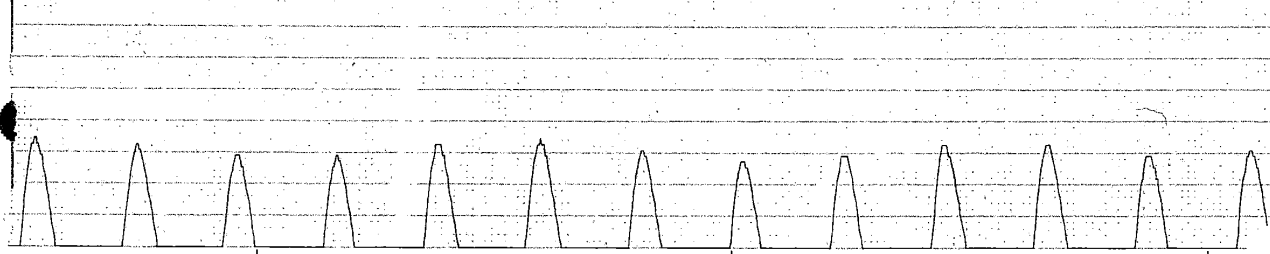
U 7 LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 83 Sinus Rhythm PVC 0 SpO2 100 Pulse (SpO2) 83 Perf 0.58 NBP 113/50 (64) (20)



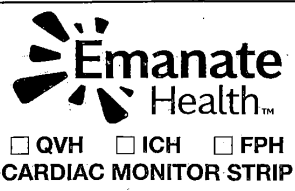
QH0054940416 7/13/1961 25.0 mm/s HR 89 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 88 Perf 1.4 NBP 124/56 (71) (00:00) Pulse (NBP) 90



LYONS, KATHLEEN QH0054940416 7/13/1961 25.0 mm/s HR 94 Sinus Rhythm PVC 0 SpO2 99 Pulse (SpO2) 94 Perf 1.5 NBP 127/51 (69) (04:00) P



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40-357 (Rev 5-19)

Patient Information

Patie  
Unit  
D.O.I

Lyons, Kathleen A  
DOB: 07/13/1961 61Y - F  
Acct#: QH0054940416 MRN#: MR01483046  
Adm/Svc: 10/18/2022 Loc: Q11CU Q1007-A  
Att: Ashouri, Anousheh



QH0054940416 LYONS, KATHLEEN, A MR01483046



Tabular Trend Report

ICU 7

11/23/2022 06:29:34

LYONS, KATHLEEN	QH0054940416
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Start Time 11/22/2022 18:55:21  
View Duration 12 Hours  
Tabular Interval 15 Minutes

	06:55	06:45	06:30	06:15	06:00	05:45	05:30	05:15
HR	113	110	106	101	98	98	90	87
Pulse (SpO <sub>2</sub> )	111	111	106	102	100	97	90	87
Pulse (NBP)		108 (06:45)	108 (06:30)	103 (06:15)	102 (06:00)	101 (05:45)	94 (05:30)	94 (05:15)
SpO <sub>2</sub>	97	97	97	96	97	98	97	97
NBP		152/68 (85) (06:45)	155/71 (91) (06:30)	138/79 (91) (06:15)	137/65 (81) (06:00)	145/66 (82) (05:45)	140/67 (83) (05:30)	122/64 (79) (05:15)
etCO <sub>2</sub>	33	33	33	33	34	34	35	36
imCO <sub>2</sub>	0	0	0	0	0	0	0	0
RR	27	26	26	21	23	22	18	16
PVC	0	0	0	0	0	0	0	0
ICPm	9	9	9	9	9	9	9	7

Start Time 11/22/2022 18:55:21  
View Duration 12 Hours  
Tabular Interval 15 Minutes

	05:00	04:45	04:30	04:15	04:00	03:45	03:30
HR	90	88	88	94	92	93	88
Pulse (SpO <sub>2</sub> )	90	88	88	93	92	92	88
Pulse (NBP)	91 (05:00)	86 (04:45)	91 (04:30)	90 (04:15)	89 (04:00)	91 (03:45)	92 (03:30)
SpO <sub>2</sub>	98	98	98	98	98	98	99
NBP	129/62 (78) (05:00)	120/61 (74) (04:45)	124/63 (78) (04:30)	127/61 (76) (04:15)	119/59 (72) (04:00)	129/62 (78) (03:45)	123/65 (77) (03:30)
etCO <sub>2</sub>	36	36	36	34	33	33	36
imCO <sub>2</sub>	0	0	0	0	0	0	0
RR	17	16	16	18	18	19	16
PVC	0	0	0	0	0	0	0
ICPm	8	8	8	9	7	7	8

Start Time 11/22/2022 18:55:21  
View Duration 12 Hours  
Tabular Interval 15 Minutes

	03:15	03:00	02:45	02:30	02:15	02:00	01:45
HR	90	89	93	89	88	89	93
Pulse (SpO <sub>2</sub> )	89	88	92	88	88	89	92
Pulse (NBP)	89 (03:15)	88 (03:00)	88 (02:45)	89 (02:30)	93 (02:15)	93 (02:00)	108 (01:45)
SpO <sub>2</sub>	98	99	99	99	99	98	99
NBP	124/63 (76) (03:15)	120/63 (75) (03:00)	125/59 (74) (02:45)	123/59 (74) (02:30)	128/66 (81) (02:15)	124/64 (76) (02:00)	117/69 (77) (01:45)
etCO <sub>2</sub>	34	34	35	36	36	36	33
imCO <sub>2</sub>	0	0	0	0	0	0	0
RR	17	17	19	16	16	16	17
PVC	0	0	0	0	0	0	0
ICPm	8	2	3	3	5	7	7

	ICU	My Institution
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Tabular Trend Report

ICU 7

11/24/2022 02:09:54

LYONS, KATHLEEN	QH0054904416	
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Start Time 11/23/2022 14:19:19

View Duration 12 Hours

Tabular Interval NBP Interval

	02:15	02:00	01:45	01:30	01:15	01:00	00:45	00:30	00:15	00:00	23:45
HR	118	122	123	122	123	120	124	128	126	127	128
Pulse (SpO <sub>2</sub> )	116	123	123	121	122	120	124	127	125	126	129
Pulse (NBP)	108 (02:15)	122 (02:00)	113 (01:45)	122 (01:30)	117 (01:15)	122 (01:00)	117 (00:45)	123 (00:30)	116 (00:15)	125 (00:00)	122 (23:45)
SpO <sub>2</sub>	96	96	97	96	97	97	97	97	96	97	97
NBP	124/60 (74)	138/61 (77)	119/60 (73)	146/53 (73)	148/55 (76)	135/60 (79)	136/63 (78)	138/60 (79)	150/57 (78)	142/59 (79)	137/59 (78)
etCO <sub>2</sub>	25	24	24	24	24	23	22	22	22	21	21
imCO <sub>2</sub>	0	0	0	0	0	0	0	0	0	0	0
RR	26	29	30	32	32	32	32	32	32	32	32
PVC	0	0	0	0	1	0	0	0	0	0	0

Start Time 11/23/2022 14:19:19

View Duration 12 Hours

Tabular Interval NBP Interval

	23:30
HR	129
Pulse (SpO <sub>2</sub> )	124
Pulse (NBP)	128 (23:30)
SpO <sub>2</sub>	100
NBP	128/55 (73)
etCO <sub>2</sub>	
imCO <sub>2</sub>	
RR	20
PVC	0

	ICU	My Institution
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**INTRA-PROCEDURAL:**

Local Medications:

IV Medications:

	Drug	Strength	Route	Time
1. <input checked="" type="checkbox"/>	<del>Drug</del> Fentanyl	25 mg	IV	at 1410
2. <input checked="" type="checkbox"/>	<del>Drug</del> Versed	10 mg	IV	at 1410
3. <input type="checkbox"/>	Drug:			at
4. <input type="checkbox"/>	Drug:			at
5. <input type="checkbox"/>	Drug:			at
6. <input type="checkbox"/>	Drug:			at
7. <input type="checkbox"/>	Drug:			at
8. <input type="checkbox"/>	Drug:			at
9. <input type="checkbox"/>	Drug:			at
10. <input type="checkbox"/>	Drug:			at

Other: \_\_\_\_\_

O2 at 28% Liters/min. via:  Nasal Cannula  Mask *mechanical ventil*

**POST-PROCEDURAL ORDERS:**

- Ephedrine 10 mg IVP every 10 mins x 2 if Systolic BP < 80 mmHg or Heart Rate < 50 bpm
- Oxygen 6 L/min for SpO2 < 92%
- IV fluid bolus Lactated Ringers 500 ml for BP < 80 mmHg
- Narcan 0.4 mg IVP for RR < 6/min
- Atropine 0.4mg for Heart Rate <60 (do not give if patient on beta-blockers)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Discharge from PACU when criteria met.

\_\_\_\_\_  
MD Signature Date/Time

*V.O.A.B. Dr. Shaver*  
*W.H. 11/11/19*



**MODERATE SEDATION INTRA AND POST-PROCEDURE PHYSICIAN ORDERS**



1095-16 (Rev 10-19)

PATIENT INFORMATION

PATIENT NAME: **Lyons, Kathleen A**  
 UNIT #: **DOB: 07/13/1961 61 F**  
**ACCT: QH0054940416 MRN: MR01483046**  
 D.O.B. **Adm/Svc: Loc: Q1ICU**  
**Att: BATAUG**

QH0054940416 LYONS,KATHLEEN,A MR01483046

CHECK DESIRED LEVEL:

A FULL CODE WILL BE PERFORMED UNLESS THE FOLLOWING IS COMPLETED AND SIGNED.

- FULL CODE / CPR "CODE BLUE" MUST BE CALLED
- MODIFIED CODE / CPR "CODE BLUE" MUST BE CALLED

Check treatment modalities that you desire during code:

- Chest Compressions
- Resuscitation Bag
- Intubation
- Drugs used during the code as defined in ACLS Guidelines
- Cardioversion / Defibrillation

Note: If All Five (5) Items are Checked, the Patient is Full Code / CPR.

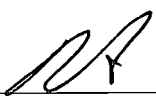
- ALLOW NATURAL DEATH / DO NOT ATTEMPT RESUSCITATION / NO CPR / DNR: "CODE BLUE" WILL NOT BE CALLED

- DISCUSSED WITH PATIENT / FAMILY

MENTAL STATUS OF PATIENT  Comatose  Confused  AAO  Other \_\_\_\_\_

RATIONALE FOR CODE STATUS new elderly (MAY ELEN LYONS - PT'S SISTER) signed per Dr. AMIRMOUIN'S order request

TELEPHONE ORDERS from the physician require two (2) nursing signatures and the physician dictation number.

Physician Name / Dictation #	Nurse Signature	Nurse Signature
	Dr. Amir Mouin	11/24/22
Physician Signature		Date / Time



PHYSICIAN ORDER FOR PATIENT CODE STATUS



169699 (Rev 3-20)

Patient Information

Patie  
 Unit: Lyons, Kathleen A  
 D.O. DOB: 07/13/1961 61Y - F  
 Acct#: QH0054940416 MRN#: MR01483046  
 Adm/Svc: 10/18/2022 Loc: Q11CU Q1007-A  
 Att: Lau, Tsang



QH0054940416 LYONS, KATHLEEN, A MR01483046



Lyons, Kathleen A

MR01483046

61 F 07/13/1961

QH0054940416 ADM IN

Onyekwuluje, Anne N

Q 6 Neuroscience Unit: Q0605-B

221018-235747616

Active

Admit

Allergies: No Known Allergies

Adverse Reactions:

Admit as Inpatient Order

Start: 10/18/22 23:57

Patient Destination Neuroscience

Reason for Visit Brain mass, obstructive hydrocephalus, hyponatremia, hyperglycemia

Estimated Total Length of Stay (Days) >2 Midnights

Admitting Provider: Onyekwuluje, Anne N

Ordered By: Onyekwuluje, Anne N

Entered By: Onyekwuluje, Anne N at 10/18/22 23:56 on Phone



Patient Order Summary

Page: 1 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
61/F Reason: Hydrocephalus Account Number: QH0054940416  
Registration: 10/18/22

Category Order Status Start Entered By  
Transfer 221018-235747991 Completed 10/18/22 23:56 Onyekwulujye, Anne N, MD  
Transfer Order Routine Order Source: Provider

Stop Reason:

Patient Destination Neuroscience

Date & Time	User	Device	Event	Acknowledged
1 10/18/22 23:57	Onyekwulujye, Anne N, MD	Phone	Order Is Entered and Signed	Y
2 10/18/22 23:57		QUV-BG19	Queued to destination: New: Q11339 #3438845 Old:	NA
3 10/18/22 23:57		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer - Order is Completed	NA
5 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Status changed: New: Completed Old: Transmitted	NA
6 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
7 10/19/22 06:54	Zeremeno, Laura M, RN	Desktop	Order acknowledged	NA
Admit 221018-235747616	Transmitted 10/18/22 23:57		Onyekwulujye, Anne N, MD Order Source: Provider	
Admit as Inpatient			ORDER	

Patient Destination Neuroscience

Reason for Visit Brain mass, obstructive hydrocephalus, hyponatremia, hyperglycemia

Estimated Total Length of Stay (Days) >2 Midnights

Admitting Provider: Onyekwulujye, Anne N

Date & Time	User	Device	Event	Acknowledged
1 10/18/22 23:57	Onyekwulujye, Anne N, MD	Phone	Manage Transfer - Order entered	Y
2 10/18/22 23:57	Onyekwulujye, Anne N, MD	Phone	Manage Transfer - Provider signed	NA

Continued on Next Page



Patient Order Summary

Page: 2 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	10/18/22 23:57			Onyekwulije, Anne N, MD	
			Phone		
			Start Time edited:		
			New: 23:57		
			Old: 23:56		
4	10/18/22 23:57			Order is Signed by Onyekwulije, Anne N, MD	Y
5	10/18/22 23:57			Order is Processed "Now"	NA
6	10/18/22 23:57			Queued to destination:	NA
				New: Q11E015 #3438844	
				Old:	
7	10/18/22 23:57			Status changed:	NA
				New: Transmitted	
				Old: Verified	
8	10/19/22 06:54			Order acknowledged	NA
9	11/09/22 12:08			Manage Transfer - Order is set to continue upon transfer	NA
10	11/09/22 12:08			Manage Transfer - Transfer Provider added:	NA
11	11/09/22 22:57			Manage Transfer - Order is continued upon transfer	Y
12	11/09/22 22:57			Process Transfer	NA
13	11/10/22 03:08			Order acknowledged	NA
Routine Care 221018-235820946 Completed 10/18/22 23:57 Onyekwulije, Anne N, MD Glucose Check (Bedside)   NOW   Order source: Provider Stop Reason: Discontinue					
Date & Time	User	Device	Event	Acknowledged	
1 10/18/22 23:58	Onyekwulije, Anne N, MD	Phone	Order is Entered and Signed	Y	
2 10/18/22 23:58		QUV-BG19	Status changed:	NA	
			New: In Process		
			Old: Verified		
3 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y	
4 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA	
5 10/19/22 06:54	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA	
6 10/27/22 09:41	Batou, Augen, DO	QDLK101	Stop Request	Y	

Continued on Next Page



Patient Order Summary

Page: 3 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	7	10/27/22 09:42	Batou, Augen, DO	QDLK101	Order Is Completed
	8	10/27/22 09:47	Hernandez, Lena	Desktop	Order acknowledged

Medications 1 221018-235820962 Completed 10/18/22 23:45 Onyekwulije, Anne N, MD

0.9 % Sodium Chloride

Order Source: Provider

Stop Reason: Discontinue

Medication 0.9% Sodium Chloride [Sodium Chloride 0.9%]  
 Dose Vol Per Bag: 1,000 ML Per  
 QS Drug QS Volume Total Volume 1000 ML

Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Clinical Indication
IV	.Q20H	SCH				
Rate: 50 MLs/HR						
Stop Date/Time:						
Discontinued: 11/01/22 08:42						

Date & Time	User	Device	Event	Acknowledged
1 10/18/22 23:58	Onyekwulije, Anne N, MD	Phone	Order is Entered and Signed	Y
2 10/18/22 23:58		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/18/22 23:58		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA
4 10/18/22 23:59	Bernichl, Bouchra, PharmD	QUV-CH03	Status changed: New: Pha Verified Old: Logged	NA
5 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
6 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
7 10/19/22 00:40	RM 110, CVMC Registry	Desktop	Order acknowledged	NA
8 11/01/22 08:42	Lau, Tsang, MD	QICUK101	Stop Request	Y
9 11/01/22 08:42	Lau, Tsang, MD	QUV-CH03	Status changed:	Y

Continued on Next Page



Patient Order Summary

Page: 4 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

10	11/01/22 10:24	Donske, Ruth	Desktop	Onyekwulije, Anne N, MD	NA
----	----------------	--------------	---------	-------------------------	----

Routine Care 221018-235820962 Completed 10/18/22 23:57 Onyekwulije, Anne N, MD

Order Source: Provider

Glucose Check (Bedside)  
 Stop Reason: Discontinue

Date & Time	User	Device	Event	Acknowledged
1 10/18/22 23:58	Onyekwulije, Anne N, MD	Phone	Order is Entered and Signed	Y
2 10/18/22 23:58	Onyekwulije, Anne N, MD	QUV-BG19	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Verified	
3 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
4 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
5 10/19/22 06:54	Zeremeno, Laura M, RN	Desktop	Order acknowledged	NA
6 10/20/22 09:38	Zeremeno, Laura M, RN	Desktop	Freq added:	Y
			<b>New:</b> ACHS	
			<b>Old:</b>	
7 10/20/22 10:13	Onyekwulije, Anne N, MD	QUV-BG19	Order is Signed by Onyekwulije, Anne N, MD	NA
8 10/20/22 10:49	Zeremeno, Laura M, RN	Desktop	Order acknowledged	NA
9 10/26/22 22:59	Mak, Helen	Desktop	Freq added:	Y
			<b>New:</b> Q6HR	
			<b>Old:</b>	
10 10/26/22 23:12	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
11 10/27/22 11:03	Amani-Yazdi, Rambod, MD	QICUK102	Stop Request	Y
12 10/27/22 11:04	Amani-Yazdi, Rambod, MD	QICUK102	Order is Completed	NA
13 10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA

Medications 221018-235924152 Completed 10/18/22 23:58 Onyekwulije, Anne N, MD Order Source: Provider

Stop Reason: Reached Renew Stop Date  
 Medication Ondansetron [Zofran] Dose 4 MG Per

Continued on Next Page





Patient Order Summary

Page: 5 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Route	Frequency	Status	Sched	PRN	Reason	Start	Device	Ord Provider	Days	Hours	Total Doses	Entered By	Clinical Indication	Acknowledged
	IV-Push	Q6H	PRN			Nausea And Vomiting									
	<b>Stop Date/Time:</b>														
	<b>Discontinued:</b> 11/18/22 23:57														
1		10/18/22 23:59				Onyekwulije, Anne N, MD		Phone							Y
	<b>Event:</b> Order is Entered and Signed														
	<b>Status changed:</b>														
	<b>New:</b> Transmitted														
	<b>OLD:</b> Verified														
2		10/18/22 23:59				Onyekwulije, Anne N, MD		QUV-BG19							NA
	<b>Event:</b> Order Type edited:														
	<b>New:</b> MED														
	<b>OLD:</b>														
	<b>Status changed:</b>														
	<b>New:</b> Logged														
	<b>OLD:</b> Transmitted														
3		10/18/22 23:59				Alcantara, Lay Ruby		Desktop							Y
	<b>Event:</b> Manage Transfer - No transfer decision recorded														
4		10/18/22 23:59				Alcantara, Lay Ruby		Desktop							NA
	<b>Event:</b> Process Transfer														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
5		10/19/22 00:02				Alcantara, Lay Ruby		Desktop							Y
	<b>Event:</b> Order acknowledged														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
6		10/19/22 00:02				Zermeno, Laura M, RN		Desktop							NA
	<b>Event:</b> Manage Transfer - Order is set to continue upon transfer														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
7		10/19/22 00:08				Maglunog, Alexander A, MD		QPAUCUK101							NA
	<b>Event:</b> Manage Transfer - Transfer Provider added:														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
8		10/19/22 06:54				Maglunog, Alexander A, MD		QPAUCUK101							NA
	<b>Event:</b> Manage Transfer - Order is continued upon transfer														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
9		11/09/22 12:08				Maglunog, Alexander A, MD		QPAUCUK101							NA
	<b>Event:</b> Manage Transfer - Order is continued upon transfer														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
10		11/09/22 12:08				Maglunog, Alexander A, MD		QPAUCUK101							NA
	<b>Event:</b> Manage Transfer - Order is continued upon transfer														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
11		11/09/22 22:57				Maglunog, Alexander A, MD		QPAUCUK101							Y
	<b>Event:</b> Process Transfer														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
12		11/09/22 22:57				Maglunog, Alexander A, MD		QPAUCUK101							NA
	<b>Event:</b> Order acknowledged														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
13		11/10/22 03:09				Maglunog, Alexander A, MD		QPAUCUK101							NA
	<b>Event:</b> Order acknowledged														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
14		11/18/22 23:57				Maglunog, Alexander A, MD		QPAUCUK101							Y
	<b>Event:</b> Order acknowledged														
	<b>Status changed:</b>														
	<b>New:</b> Pha Verified														
	<b>OLD:</b> Logged														
15		11/19/22 01:51				Chow, Kristin		Desktop							NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Dietary	221018-235924152	Cancelled	10/18/22 23:59	Onyekwulije, Anne N, MD	Onyekwulije, Anne N, MD
NPO					Order Source: Provider

Stop Reason: Discontinue

Date & Time	User	Device	Event	Acknowledged
1 10/18/22 23:59	Onyekwulije, Anne N, MD	Phone	Order is Entered and Signed	Y
2 10/18/22 23:59		QUV-BG19	Queued to destination: New: QDITFP1 #3438847 Old:	NA
3 10/18/22 23:59		QUV-BG19	Sent to Other Vendor: New: OM Diet Orders to Computritition Old:	NA
4 10/18/22 23:59		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
5 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
6 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
7 10/19/22 00:05	Onyekwulije, Anne N, MD	Phone	Order cancelled	Y
8 10/19/22 00:05	Onyekwulije, Anne N, MD	Phone	Status changed: New: Cancelled Old: Transmitted	Y
9 10/19/22 00:05	Onyekwulije, Anne N, MD	Phone	Queued to destination: New: QDITFP1 #3438861 Old:	NA
10 10/19/22 06:54	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA

Medications 221019-000016090 Completed 10/18/22 23:59 Onyekwulije, Anne N, MD Onyekwulije, Anne N, MD

Tylenol Order Source: Provider

Stop Reason: Order Change

Medication Acetaminophen [Tylenol] Dose 650 MG Par

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
PR	Q6H	PRN	Fever >100.4			

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Stop Date/Time: 11/02/22 10:59  
 Discontinued: 11/02/22 10:59

Label Comments: Maximum acetaminophen (in any form) allowable in 24 hours is 4gm.

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:00	Onyekwulije, Anne N, MD	Phone	Order is Entered and Signed	Y
2 10/19/22 00:00		QUV-BG19	Status changed: New: Transmitted	NA
3 10/19/22 00:00		QUV-CM03	Order Type edited: New: MED Old:	Y
4 10/19/22 00:00		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
6 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
7 10/19/22 00:08	Bernichi, Bouchra, PharmD	QUV-CM03	PRN Reason edited: New: Fever >100.4 Old: Fever	Y
8 10/19/22 00:08	Bernichi, Bouchra, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
9 10/19/22 06:54	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
10 11/02/22 11:00	Contreras, Elsa	Desktop	Stop Request	Y
11 11/02/22 11:01	Contreras, Elsa	QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
12 11/02/22 12:11	Contreras, Elsa	Desktop	Order acknowledged	NA
13 11/03/22 09:46	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Medications 221019-0000160901 Completed 10/18/22 23:59

Onyekwulije, Anne N, MD

Onyekwulije, Anne N, MD

Dulcolax

Order Source: Provider

Stop Reason: Reached Renew Stop Date

Medication Bisacodyl [Dulcolax] Dose 10 MG Per

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
PR	DAILY	PRN	Constipation			
Stop Date/Time: Discontinued: 11/18/22 23:58						

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:00	Onyekwulije, Anne N, MD	Phone	Order Is Entered and signed	Y
2 10/19/22 00:00		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/19/22 00:00		QUV-CM03	Order Type edited: New: MED Old:	Y
4 10/19/22 00:00		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
6 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
7 10/19/22 00:08	Bernichl, Bouchra, Pharmd	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
8 10/19/22 06:54	Zeremeno, Laura M, RN	Desktop	Order acknowledged	NA
9 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
10 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
11 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon	Y

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Patient Order Summary

Page: 9 of 550  
 Date: 12/07/22 02:56  
 User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
12	11/09/22 22:57			Apa, Mary Jurem	transfer
13	11/10/22 03:08			Apa, Mary Jurem	Process Transfer
14	11/18/22 23:58				Order acknowledged
15	11/19/22 01:51			Chow, Kristin	Status changed:
					New: Completed
					Old: Pha Verified
					Order acknowledged
					NA
Routine Care	221019-000016074	Completed	10/18/22 23:59	Onyekwulije, Anne N, MD	Order acknowledged
SCD [Sequential Compression Device]					ONCE
					Order Source: Provider

Intervention Text

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:00	Onyekwulije, Anne N, MD	Phone	Order is Entered and signed	Y
2 10/19/22 00:00		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
4 10/19/22 00:02	Alcantara, Lay Ruby	Desktop	Process Transfer	NA
5 10/19/22 01:06	RN 110, CVMC Registry	Desktop	Status changed:	NA
			New: Completed	
			Old: In Process	
6 10/19/22 06:54	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA

Medications 221019-000040966 Completed 10/19/22 00:00 Onyekwulije, Anne N, MD Order Source: Provider  
 Glucose 15  
 Stop Reason: Completed by Pha

Medication Dextrose Gel 40% [Glucose 15] Dose 1 EACH Per  
 Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 PO PROTOCOL PRN Hypoglycemia  
 Stop Date/Time:  
 Discontinued: 10/27/22 08:05  
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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category**      **Order**      **Status**      **Start**      **Ord Provider**      **Entered By**

**Label Comments:** 93.75 ml tube of Glucose 15 delivers 15 gms of glucose.  
 Give IF BS < 70 with or without symptoms of hypoglycemia.

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:00	Onyekwuluye, Anne N, MD	Phone	Order Is Entered and Signed	Y
2 10/19/22 00:00		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>OLD:</b> Verified	
3 10/19/22 00:01		QUV-CH03	Dose edited:	Y
			<b>New:</b> each	
			<b>OLD:</b> 93.75 ml	
3 10/19/22 00:01		QUV-CH03	Order Type edited:	Y
			<b>New:</b> MED	
			<b>OLD:</b>	
4 10/19/22 00:01		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>OLD:</b> Transmitted	
5 10/19/22 00:02	Alcantara, Ley Ruby	Desktop	Manage Transfer - No transfer decision recorded	Y
6 10/19/22 00:02	Alcantara, Ley Ruby	Desktop	Process Transfer	NA
7 10/19/22 00:09	Bernichi, Bouchra, PharmD	QUV-CH03	Dose added:	Y
			<b>New:</b> 1 each	
			<b>OLD:</b>	
8 10/19/22 00:09	Bernichi, Bouchra, PharmD	QUV-CH03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>OLD:</b> Logged	
9 10/19/22 06:54	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
10 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	Copied to Glucose 15 221027-080542792	Y
11 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	Status changed:	Y
			<b>New:</b> Completed	
			<b>OLD:</b> Pha Verified	
12 10/27/22 08:34	Hernandez, Lena	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category: Novolin Regular  
 Order: 221019-000151594  
 Status: Completed  
 Start: 10/19/22 00:00  
 Ord Provider: Onyekwulufe, Anne N, MD  
 Entered By: Onyekwulufe, Anne N, MD  
 Order Source: Provider

Stop Reason: DISC

Medication: Insulin \*Regular\* [Novolin Regular]  
 Dose: 0 UNIT  
 Per: Regular]

Route: SUB-Q  
 Frequency: W.MEALS.HS  
 Sched: PRN  
 PRN Reason: Glucoscan Coverage  
 Stop Date/Time:  
 Discontinued: 10/27/22 11:03

Days Hours Total Doses

Clinical Indication

Condition	Dose/Route	Instruction
Fingertstick Blood Glucose	Insulin Units	
70-150 mg/dl		units
151-200 mg/dl	2	units
201-250 mg/dl	4	units
251-300 mg/dl	6	units
301-350 mg/dl	8	units
351-400 mg/dl	10	units
>400 mg/dl	Call md	units

Protocol text:  
 Label Comments: LA/SA warning: order is for Novolin  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	Acknowledged
10/19/22 00:01	Onyekwulufe, Anne N, MD	Phone	Order Is Entered and Signed	Y
10/19/22 00:02		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
10/19/22 00:02		QUV-CH03	Order Type edited: New: MED	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>Old:</b> Status changed: <b>New:</b> Logged <b>Old:</b> Transmitted Manage Transfer - No transfer decision recorded Process Transfer Status changed: <b>New:</b> Pha Verified <b>Old:</b> Logged Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	4		10/19/22 00:02		QUV-CM03 <b>New:</b> Logged <b>Old:</b> Transmitted Manage Transfer - No transfer decision recorded Process Transfer Status changed: <b>New:</b> Pha Verified <b>Old:</b> Logged Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	5		10/19/22 00:02		Alcantara, Lay Ruby Desktop Manage Transfer - No transfer decision recorded Process Transfer Status changed: <b>New:</b> Pha Verified <b>Old:</b> Logged Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	6		10/19/22 00:02		Alcantara, Lay Ruby Desktop Process Transfer Status changed: <b>New:</b> Pha Verified <b>Old:</b> Logged Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	7		10/19/22 00:09		Bernichi, Bouchra, PharmD QUV-CM03 Status changed: <b>New:</b> Pha Verified <b>Old:</b> Logged Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	8		10/19/22 06:54		Zermeno, Laura M, RN Desktop Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	9		10/19/22 16:23		Dajkovich, George, NP Desktop Order acknowledged Dose/Route edited: <b>New:</b> 2 <b>Old:</b>
	10		10/19/22 16:49		Zermeno, Laura M, RN Desktop Order acknowledged Order is Signed by Goshasbi, Mana, MD Stop Request Status changed: <b>New:</b> Completed <b>Old:</b> Pha Verified Order acknowledged
	11		10/19/22 21:22		Goshasbi, Mana, MD QUV-BG19 Order is Signed by Goshasbi, Mana, MD Stop Request Status changed: <b>New:</b> Completed <b>Old:</b> Pha Verified Order acknowledged
	12		10/27/22 11:03		Amani-Yazdi, Rambod, MD QTCUK102 Status changed: <b>New:</b> Completed <b>Old:</b> Pha Verified Order acknowledged
	13		10/27/22 11:04		Amani-Yazdi, Rambod, MD QUV-CM03 Status changed: <b>New:</b> Completed <b>Old:</b> Pha Verified Order acknowledged
	14		10/27/22 12:40		Hernandez, Lena Desktop Order acknowledged
<b>Consultations</b> 221019-000317613 <b>Transmitted</b> 10/19/22 00:02 <b>Onyekwulufe, Anne N, MD</b> <b>Order source:</b> Provider					
<b>Consult to Physician</b>   Routine					
<b>Consulting Provider</b> Ye, Donald					
<b>Reason for consultation</b> Hydrocephalus, DM, hyponatremia, ventricular cyst					
<b>Person Notified:</b> JESSICA					
<b>Date Notified:</b> 10/19/22					
<b>Time Notified:</b> 00:10					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/19/22 00:03	Onyekwulufe, Anne N, MD	Phone	Order is Entered and Signed	Y
2	10/19/22 00:03		QUV-BG19	Queued to destination: <b>New:</b> Q6D0UP3 #3438855	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	10/19/22 00:03			QUV-BG19	
		Old:		Status changed:	NA
		New:		Transmitted	
4	10/19/22 00:13			Alcantara, Lay Ruby	
		Old:		Verified	
		New:		Query Date Notified: edited:	Y
4	10/19/22 00:13			Alcantara, Lay Ruby	
		Old:		Query Person Notified: edited:	Y
		New:		JESSICA	
4	10/19/22 00:13			Alcantara, Lay Ruby	
		Old:		Query Time Notified: edited:	Y
		New:		00:10	
5	10/19/22 00:13			Alcantara, Lay Ruby	
		Old:		Queued to destination:	NA
		New:		Q6DUP3	
		Old:			
6	10/19/22 02:36			Onyekwulije, Anne N, MD	
		Old:		Order is Signed by Onyekwulije, Anne N, MD	NA
		New:		Order acknowledged	NA
7	10/19/22 06:54			Zeremeno, Laura M, RN	
		Old:		Manage Transfer - Order is set to continue upon transfer	NA
8	11/09/22 12:08			Maglunog, Alexander A, MD	
		Old:		Manage Transfer - Transfer Provider added:	NA
		New:		Maglunog, Alexander, MD	
9	11/09/22 12:08			Maglunog, Alexander A, MD	
		Old:		Manage Transfer - Order is continued upon transfer	Y
10	11/09/22 22:57			Maglunog, Alexander A, MD	
		Old:		Process Transfer	NA
11	11/09/22 22:57			Apa, Mary Jurem	
		Old:		Order acknowledged	NA
12	11/10/22 03:10			Apa, Mary Jurem	
		Old:		Completed	NA
		New:		10/19/22 07:15	

Diabetic [Consistent Carbohydrate Diet (Diabetic)]

Stop Reason: Stop date/time met

Order Source: Provider

Consistent Carbohydrate Diet Low (45gm carb/meal)  
 Low Sodium Diet Yes

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Dietary Comment No seafood

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:08	Onyekwuluye, Anne N, MD	Phone	Order is Entered and Signed	Y
2 10/19/22 00:08		QUV-BG19	Queued to destination: New: QDIFTP1 #3438873 Old:	NA
3 10/19/22 00:08		QUV-BG19	Sent to Other Vendor: New: OM Diet Orders to Computation Old:	NA
4 10/19/22 00:08		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
5 10/19/22 06:54	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
6 10/21/22 18:38	Lopez, Kamille	Desktop	Query Dietary Comment edited: New: No seafood Old:	Y
7 10/21/22 18:38	Lopez, Kamille	Desktop	Queued to destination: New: QDIFTP1 Old:	NA
8 10/21/22 18:38	Lopez, Kamille	Desktop	Order acknowledged	NA
9 10/25/22 09:47	Gibani, Straj M, MD	INI-GIBANI	Diet Stop Dt/Time added: New: 10/26/22 00:01 Old:	Y
10 10/25/22 09:47	Gibani, Straj M, MD	INI-GIBANI	Queued to destination: New: QDIFTP1 Old:	NA
11 10/25/22 19:42	Mondares, Tyrrell Domm	QNSUK104	Order acknowledged	NA
12 10/26/22 00:01		QUV-BG19	New Order Created. Order is Completed via Auto Complete. Status changed: New: Completed Old: Transmitted	Y
13 10/26/22 00:01		QUV-BG19	Order acknowledged	NA
14 10/26/22 00:38	Mondares, Tyrrell Domm	QNSUK104	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** Order **Status** Start **Ord Provider** **Entered By**  
 Medications 221019-000920291 Completed 10/19/22 00:08 Onyekwulufe, Anne N, MD Onyekwulufe, Anne N, MD  
**Prinivil** **Order Source:** Provider

**Stop Reason:** Reached Stop Date

**Medication** Lisinopril [Prinivil] **Dose** 40 MG **Per**  
**Route** PO **Frequency** NOW **Sched** ONE **PRN Reason** **Days Hours Total Doses** **Clinical Indication**  
**Stop Date/Time:** 10/19/22 00:09  
**Discontinued:** 10/19/22 00:09

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:09	Onyekwulufe, Anne N, MD	Phone	Order is Entered and signed	Y
2 10/19/22 00:09		QUV-BG19	Status changed: New: Transmitted	NA
3 10/19/22 00:10		QUV-CM03	Old: Verified New: MED Order Type edited:	Y
4 10/19/22 00:10		QUV-CM03	Old: New: MED Status changed: New: Logged	NA
5 10/19/22 00:12	Bernichi, Bouchra, PharmD	QUV-CM03	Old: Transmitted New: Status changed: New: Pha Verified	NA
6 10/19/22 00:12		QUV-CM03	Old: Logged New: Status changed: New: Completed	Y
7 10/19/22 00:40	RN 110, CVMC Registry	Desktop	Old: Pha Verified New: Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Chemistry 221019-0010125431 Completed 10/19/22 05:53

Onyekwulufe, Anne N, MD

Basic Metabolic Panel

AM

Order Source: Provider

Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time User Device Event Acknowledged

1 10/19/22 00:10 Onyekwulufe, Anne N, MD Phone Order is Entered and Signed Y

2 10/19/22 00:10 QUV-BG19 Status changed: New: Transmitted NA

3 10/19/22 00:14 QUV-CM03 Status changed: OLD: Verified NA

4 10/19/22 01:20 QUV-CM03 Status changed: New: Logged NA

5 10/19/22 05:53 Mungula, Aleyda Phone Specimen Collected: 1019:000322R NA

6 10/19/22 05:53 Mungula, Aleyda Phone Order is collected NA

7 10/19/22 06:16 QUV-CM03 Start time edited: New: In Process NA

8 10/19/22 06:54 Zeremeno, Laura M, RN Desktop Order acknowledged: OLD: 05:50 NA

9 10/19/22 07:23 QUV-CM03 Status changed: New: Completed NA

Chemistry 221019-001012558 Completed 10/20/22 05:01 Onyekwulufe, Anne N, MD Order Source: Provider

Basic Metabolic Panel AM

Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time User Device Event Acknowledged

1 10/19/22 00:10 Onyekwulufe, Anne N, MD Phone Order is Entered and Signed Y

2 10/19/22 06:54 Zeremeno, Laura M, RN Desktop Order acknowledged NA

3 10/20/22 00:01 QUV-BG19 Status changed: NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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4	10/20/22 00:03			QUV-CH03	NA
5	10/20/22 00:59			QUV-CH03	NA
6	10/20/22 05:01			Munguia, Aleyda	NA
7	10/20/22 05:01			Munguia, Aleyda	NA
8	10/20/22 06:44			QUV-CH03	NA

Bedside Testing 221019-004041593 **Completed** 10/19/22 00:31 **Onyekwulije, Anne N, MD** RN 7, ED Registry  
**Glucose (Bedside)** Routine **Order Source:**

**Stop Reason:** Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 00:40	RN 7, ED Registry	QUV-CH03	No Signature is Necessary	NA
1 10/19/22 00:40	RN 7, ED Registry	QUV-CH03	Order is Entered	NA
2 10/19/22 00:40		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Medications 221019-042231307 **Completed** 10/19/22 15:45 **Onyekwulije, Anne N, MD** **Order Source:** Provider  
**Levemir** **Stop Reason:** Order edited - Discontinuing original order

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Insulin Detemir [Levemir]	30 UNIT		SUB-Q	DAILY.W.MEAL	SCH				
<b>Stop Date/Time:</b> 10/20/22 08:00 <b>Discontinued:</b> 10/19/22 21:30									

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	<b>Label Comments:</b> P&T approved sub for: Lantus *DO NOT HOLD IF EATING STATUS CHANGES *NOTIFY PHYSICIAN IF EATING STATUS CHANGES *Hold Insulin only if BS < 100 <b>CAUTION:</b> HIGH RISK/HIGH ALERT MEDICATION <b>REQUIRES 2 SIGNATURES FOR DOCUMENTATION</b>				
1	10/19/22 04:22				
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
	10/19/22 04:22	Onyekwulije, Anne N, MD	Q12511	Order is Entered and Signed	Y
2	10/19/22 04:22		QUV-BG19	Status changed:	NA
				<b>New:</b> Transmitted	
				<b>Old:</b> Verified	
3	10/19/22 04:22		QUV-CH03	Order Type edited:	Y
				<b>New:</b> MED	
				<b>Old:</b>	
4	10/19/22 04:22		QUV-CH03	Status changed:	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	10/19/22 04:44		QUV-CH03	Pending comment added:	Y
		Bernichi, Bouchra, PharmD		<b>New:</b> AWAITING BS LEVEL IN AM	
				<b>Old:</b>	
6	10/19/22 04:44		QUV-CH03	Pending changed:	NA
		Bernichi, Bouchra, PharmD		<b>New:</b> Y	
				<b>Old:</b>	
7	10/19/22 06:54		Desktop	Order acknowledged	NA
		Zermeno, Laura M, RN		Start Time edited:	Y
8	10/19/22 15:40		QUV-CH03	<b>New:</b> 15:45	
		Scheer, Anita K, PharmD		<b>Old:</b> 08:00	
9	10/19/22 15:41		QUV-CH03	Pending comment edited:	Y
		Scheer, Anita K, PharmD		<b>New:</b> Order taken out of pending status by Pharmacy.	
				<b>Old:</b> AWAITING BS LEVEL IN AM	
10	10/19/22 15:41		QUV-CH03	Pending changed:	NA
		Scheer, Anita K, PharmD		<b>New:</b> N	
				<b>Old:</b> Y	
11	10/19/22 15:41		QUV-CH03	Status changed:	NA
		Scheer, Anita K, PharmD		<b>New:</b> Pha Verified	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					Old: Logged
12	10/19/22 15:41	Zermeno, Laura M, RN	Desktop		Order acknowledged
13	10/19/22 16:24	Dajkovich, George, NP	Desktop		Stop Request
14	10/19/22 16:24	Dajkovich, George, NP	Desktop		Copied to Levemir 221019-162455240
15	10/19/22 16:24	Dajkovich, George, NP	QUV-CH03		Pha Stop Date edited: New: Thu Oct 20 Old:
15	10/19/22 16:24	Dajkovich, George, NP	QUV-CH03		Pha Stop Time edited: New: 08:00 Old:
16	10/19/22 16:49	Zermeno, Laura M, RN	Desktop		Order acknowledged
17	10/19/22 21:22	Goshasbi, Mana, MD	QUV-BG19		Order is signed by Goshasbi, Mana, MD
18	10/19/22 21:30	Knapp, Sandy A, PharmD	QUV-CH03		Status changed: New: Completed Old: Pha Verified
19	10/20/22 05:33	RN 101, CVNC Registry	Desktop		Order acknowledged
Stock	221019-081923471	Transmitted 10/19/22 08:18	Goshasbi, Mana, MD	Zermeno, Laura M, RN	
<b>Message to Dietary</b>					
NOW					
<b>Order Source: Nursing Orders</b>					
Date & Time	User	Device	Event	Acknowledged	
1 10/19/22 08:19	Zermeno, Laura M, RN	Desktop	No Signature is Necessary	Y	
1 10/19/22 08:19	Zermeno, Laura M, RN	Desktop	Order is Entered	Y	
2 10/19/22 08:19		QUV-BG19	Queued to destination: New: QDIFTP1 #3439382 Old:	NA	
3 10/19/22 08:19		QUV-BG19	Queued to destination: New: QDIFTP1 #3439383 Old:	NA	
4 10/19/22 08:19		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA	
5 10/19/22 08:28	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA	
6 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA	
7 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	8		11/09/22 22:57	Maglunog, Alexander A, MD	Maglunog, Alexander, MD
					Manage Transfer - Order is continued upon transfer
	9		11/09/22 22:57	Apa, Mary Jurem	Process Transfer
	10		11/10/22 03:08	Apa, Mary Jurem	Order acknowledged
					Order acknowledged
	Bedside Testing 221019-082548433		Completed	10/19/22 08:15	Goshtrashi, Mana, MD
	Glucose (Bedside)				Routine
	Stop Reason: Completed by Lis				Order Source: Zermeno, Laura M, RN

Date & Time	User	Device	Event	Acknowledged
10/19/22 08:25	Zermeno, Laura M, RN	QUV-CH03	No Signature is Necessary	NA
10/19/22 08:25	Zermeno, Laura M, RN	QUV-CH03	Order is Entered	NA
10/19/22 08:26		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	
Bedside Testing 221019-093527314		Completed	10/19/22 09:25	Goshtrashi, Mana, MD
Glucose (Bedside)				Routine
Stop Reason: Completed by Lis				Order Source: Zermeno, Laura M, RN

Date & Time	User	Device	Event	Acknowledged
10/19/22 09:35	Zermeno, Laura M, RN	QUV-CH03	No Signature is Necessary	NA
10/19/22 09:35	Zermeno, Laura M, RN	QUV-CH03	Order is Entered	NA
10/19/22 09:35		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Medications	221019-111339350	Completed	10/20/22 10:00	Dajkovich, George, NP	Dajkovich, George, NP	Order Source: Provider
Prinivil						
Stop Reason: Order edited - Discontinuing original order						
Medication		Dose		Par		
lisinopril [Prinivil]		20 MG				
Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses
PO	DAILY	SCH				
Clinical Indication						

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	Clinical Indication
Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses
PO	DAILY AC	SCH				
Stop Date/Time: Discontinued: 10/27/22 08:05						
Date & Time	User	Device	Event	Acknowledged		
1 10/19/22 11:13	Dajkovich, George, NP	QNSUK101	Order is Entered and Signed	Y		
2 10/19/22 11:13	Dajkovich, George, NP	QNSUK101	First Dose: New: Keep the current schedule: 10/20/22 10:00	NA		
3 10/19/22 11:13		QUV-BG19	Old: Status changed:	NA		
4 10/19/22 11:13		QUV-CM03	New: Transmitted Old: Verified Order Type edited:	Y		
5 10/19/22 11:13		QUV-CM03	New: MED Old:	NA		
6 10/19/22 11:18	Shen, Carol, PharmD	QUV-CM03	Status changed: New: Logged Old: Transmitted	Y		
6 10/19/22 11:18	Shen, Carol, PharmD	QUV-CM03	New: 07:00 Start Time edited: Old: 10:00	Y		
6 10/19/22 11:18	Shen, Carol, PharmD	QUV-CM03	Freq edited: New: DAILY AC Old: DAILY	Y		
7 10/19/22 11:18	Shen, Carol, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA		
8 10/19/22 11:22	Zermeno, Laura M, RN	Desktop	Status changed: New: Pha Verified Old: Logged	NA		
9 10/19/22 12:09	Goshtasbi, Mana, MD	QUV-BG19	Order acknowledged Order is Signed by Goshtasbi, Mana, MD	NA		
10 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CM03	Copied to Synthroid 221027-080513950	Y		
11 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y		

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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12	10/27/22 08:34	Hernandez, Lena			
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Bedside Testing 221019-120053011	Completed	10/19/22 11:49		Goshraabi, Mana, MD	Zermeno, Laura M, RN
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Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/19/22 12:00	Zermeno, Laura M, RN	QUV-CH03	No Signature is Necessary	NA
10/19/22 12:00	Zermeno, Laura M, RN	QUV-CH03	Order is Entered	NA
10/19/22 12:01		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process

Departmental Co 221019-124202930	Transmitted	10/19/22 12:41	Goshraabi, Mana, MD	Zermeno, Laura M, RN
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Routine

Order Source: Nursing Orders

Consult to Spiritual Care Services

Patient's Language: english  
 Patient's Faith: catholic

Requested By Patient

Date & Time	User	Device	Event	Acknowledged
10/19/22 12:42	Zermeno, Laura M, RN	Desktop	No Signature is Necessary	Y
10/19/22 12:42	Zermeno, Laura M, RN	Desktop	Order is Entered	Y
10/19/22 12:42		QUV-BG19	Queued to destination:	NA
			New: QSCP1 #3440291	
			Old:	
10/19/22 12:42		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
10/19/22 12:46	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
7	11/09/22 22:57	Maglunog, Alexander A, MD	QPAUCUK101	Maglunog, Alexander, MD	
8	11/09/22 22:57	Apa, Mary Jurem	QPAUCUK101	Manage Transfer - Order is continued upon transfer	
9	11/10/22 03:10	Apa, Mary Jurem	Desktop	Process Transfer	
Medications	221019-162111954	Completed	10/19/22 16:20	Dajkovich, George, NP	Dajkovich, George, NP
Catapres					Order Source: Provider
<b>Stop Reason:</b> Completed by Pha					

Medication	Dose	Par	Clinical Indication
clonidine [catapres]	0.1 MG		

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
PO	Q6H	PRN	sbp > 160			
<b>Stop Date/Time:</b>						
<b>Discontinued:</b> 10/27/22 08:03						

**Label Comments:** LA/SA warning: this order is for clonidine(catapres)

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 16:21	Dajkovich, George, NP	Desktop	Order is Entered and Signed	Y
2 10/19/22 16:21		QUV-BG19	Status changed: <b>New:</b> Transmitted	NA
3 10/19/22 16:21		QUV-CH03	<b>OLD:</b> Verified Order Type edited:	Y
4 10/19/22 16:21		QUV-CH03	<b>New:</b> MED <b>OLD:</b> Status changed:	NA
5 10/19/22 16:23	Zeremeno, Laura M, RN	Desktop	<b>New:</b> Logged <b>OLD:</b> Transmitted	NA
6 10/19/22 16:41	Vu, Christina Anh	QUV-CH03	Order acknowledged Status changed: <b>New:</b> Pha Verified	NA
7 10/19/22 21:22	Goshtasbi, Mana, MD	QUV-BG19	<b>OLD:</b> Logged Order is Signed by Goshtasbi, Mana, MD	NA
8 10/27/22 08:03	Scheer, Anita K, PharmD	QUV-CH03	Copied to Catapres 221027-080344312	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	10/27/22 08:03	Scheer, Anita K, PharmD	10/20/22 10:00	Dajkovich, George, NP	Dajkovich, George, NP
10	10/27/22 08:34	Hernandez, Lena	Completed	Dajkovich, George, NP	Dajkovich, George, NP

Medication	Route	Frequency	Sched	PRN Reason	Dose	Per	Days Hours	Total Doses	Clinical Indication	Acknowledged
Lisinopril [Prinivil]	PO	DAILY	SCH		40 MG					
<b>Stop Reason:</b> Completed by Pha <b>Stop Date/Time:</b> <b>Discontinued:</b> 10/27/22 08:04										

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 16:20	Dajkovich, George, NP	Desktop	Order created because of edit(s)	Y
1 10/19/22 16:20	Dajkovich, George, NP	Desktop	Copied from Prinivil 221019-111339350	Y
2 10/19/22 16:21	Dajkovich, George, NP	Desktop	Order is Signed by Dajkovich, George, NP	Y
3 10/19/22 16:21		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 10/19/22 16:21		QUV-CH03	Pha Medication edited:	Y
			<b>New:</b> Lisinopril 40 MG TABLET	
			<b>Old:</b> Lisinopril 20 MG TABLET	
5 10/19/22 16:21		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
6 10/19/22 16:23	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
7 10/19/22 16:34	Vu, Christina Anh	QUV-CH03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
8 10/19/22 21:22	Goshtasbi, Mana, MD	QUV-BG19	Order is Signed by Goshtasbi, Mana, MD	NA
9 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	Copied to Prinivil 221027-080456716	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
10	10/27/22 08:05	Scheer, Anita K, PharmD	10/20/22 10:00	Dajkovich, George, NP	Y
11	10/27/22 08:34	Hernandez, Lena	10/20/22 10:00	Dajkovich, George, NP	NA

Medications 221019-162455240 Completed

Levemir

Stop Reason: DISC

Order Source: Provider

Medication Insulin Detemir [Levemir] Dose 35 UNIT Per

Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 SUB-Q DAILY SCH  
 Stop Date/Time: Discontinued: 10/27/22 11:03

Label Comments:

R&T approved sub for: Lantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 16:24	Dajkovich, George, NP	Desktop	Order created because of edit(s)	Y
1 10/19/22 16:24	Dajkovich, George, NP	Desktop	Copied from Levemir 221019-042231307	Y
2 10/19/22 16:24	Dajkovich, George, NP	Desktop	Order is Signed by Dajkovich, George, NP	Y
3 10/19/22 16:24	Dajkovich, George, NP	Desktop	First Dose:	NA
4 10/19/22 16:24		QUV-BG19	New: Keep the current schedule: 10/20/22 10:00 Old: Status changed: New: Transmitted	NA
5 10/19/22 16:25		QUV-CH03	Old: Verified New: Status changed: New: Logged Old: Transmitted	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
6	10/19/22 16:41	Vu, Christina Anh	QUV-CH03	Pending comment added: New: DUPLICATE EXISTING ORDER, NEED TO CLARIFY THE CORRECT DOSTING Old: N	Y
7	10/19/22 16:41	Vu, Christina Anh	QUV-CH03	Pending changed: New: Y Old: N	NA
8	10/19/22 16:49	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
9	10/19/22 21:22	Goshtasbi, Mana, MD	QUV-BG19	Order is Signed by Goshtasbi, Mana, MD	NA
10	10/19/22 21:31	Knapp, Sandy A, PharmD	QUV-CH03	Pending comment edited: New: Order taken out of pending status by Pharmacy. Old: DUPLICATE EXISTING ORDER, NEED TO CLARIFY THE CORRECT DOSTING	Y
11	10/19/22 21:31	Knapp, Sandy A, PharmD	QUV-CH03	Pending changed: New: N Old: Y	NA
12	10/19/22 21:31	Knapp, Sandy A, PharmD	QUV-CH03	Status changed: New: Pha Verified Old: Logged	NA
13	10/20/22 05:33	RN 101, CVMC Registry	Desktop	Order acknowledged	NA
14	10/27/22 11:03	Amani-Yazdi, Rambood, MD	QICUK102	Stop Request	Y
15	10/27/22 11:04	Amani-Yazdi, Rambood, MD	QUV-CH03	Status changed: New: Completed Old: Pha Verified	Y
16	10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA
<b>Medications</b> 221019-162535148 Completed 10/19/22 21:00 Dajkovich, George, NP Dajkovich, George, NP <b>Levmitr</b> <b>Stop Reason:</b> Discontinue <b>Order Source:</b> Provider					
<b>Medication</b> Insulin Detemir [Levemir] <b>Dose</b> 20 UNIT <b>Per</b>					
<b>Route</b> SUB-Q <b>Frequency</b> HS <b>Sched</b> SCH <b>PRN Reason</b> <b>Days Hours Total Doses</b> <b>Clinical Indication</b>					
<b>Stop Date/Time:</b> Discontinued: 10/19/22 21:31					

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Label Comments: P&T approved sub for: Lantus

\*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 16:25	Dajkovich, George, NP	Desktop	Order is Entered and Signed	Y
2 10/19/22 16:25		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 10/19/22 16:25		QUV-CM03	Order Type edited:	Y
			<b>New:</b> MED	
			<b>Old:</b>	
4 10/19/22 16:25		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 10/19/22 16:49	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
6 10/19/22 21:22	Goshtasbi, Mana, MD	QUV-BG19	Order is Signed by Goshtasbi, Mana, MD	NA
7 10/19/22 21:31	Knapp, Sandy A, PharmD	Desktop	Stop Request	Y
8 10/19/22 21:32		QUV-CM03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
9 10/19/22 21:32	Knapp, Sandy A, PharmD	QUV-CM03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
10 10/20/22 01:56	Onyekwulufe, Anne N, MD	QUV-BG19	Order is Signed by Onyekwulufe, Anne N, MD	NA
11 10/20/22 08:05	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
Bedside Testing 221019-153527254 Completed 10/19/22 16:21			Goshtasbi, Mana, MD	
Glucose (Bedside)			Routine	
Stop Reason: Completed by Lis				

Order Source: Zermeno, Laura M, RN

Date & Time	User	Device	Event	Acknowledged
Continued on Next Page				





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By
1	10/19/22 16:35	Zeremeno, Laura M, RN	10/19/22 20:19	QUV-CH03	Goshtrasbi, Mana, MD	NA
1	10/19/22 16:35	Zeremeno, Laura M, RN	10/19/22 20:26	QUV-CH03	Catungal, Marites C	NA
2	10/19/22 16:35	Zeremeno, Laura M, RN	10/19/22 20:26	QUV-CH03	Catungal, Marites C	NA

Stock 221019-202607577 Transmitted 10/19/22 20:19  
 Message to Dietary goshtrasbi, Mana, MD Catungal, Marites C  
NOW Order Source: Nursing Orders

Date & Time	User	Device	Event	Acknowledged
10/19/22 20:26	Catungal, Marites C	Desktop	No Signature is Necessary	Y
10/19/22 20:26	Catungal, Marites C	Desktop	Order is Entered	Y
10/19/22 20:26		QUV-BG19	Queued to destination:	NA
			New: QDIFTP1 #3441595	
			OLD:	
10/19/22 20:26		QUV-BG19	Queued to destination:	NA
			New: QDIFTP1 #3441596	
			OLD:	
10/19/22 20:26		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
10/20/22 08:05	Zeremeno, Laura M, RN	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Process Transfer	NA
11/10/22 03:08	Apa, Mary Jurem	QPACUK101	Order acknowledged	NA
11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged	NA

Stop Reason: Completed by LIS

Bedside Testing 221019-210253282 Completed 10/19/22 20:51  
 Glucose (Bedside) Routine

Order Source: RN 7, ED Registry



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/19/22 21:02	RN 7, ED Registry	10/19/22 21:02	QUV-CH03	No Signature is Necessary
1	10/19/22 21:02	RN 7, ED Registry	10/19/22 21:02	QUV-CH03	Order is Entered
2	10/19/22 21:03		10/19/22 21:03	QUV-CH03	Status changed:
					New: Completed
					Old: In Process

Medications 221019-212107629 Completed 10/19/22 21:20 goshtrasbi,Mana, MD Hyun,Diana S, PharmD

Glucose 15

Order Source: Protocol Orders (Sig Required)

Stop Reason: Completed by Pha

Medication Dextrose Gel 40% [Glucose 15] Dose 1 EACH Per

Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 MICOUS MEM AS DIRECTED PRN Hypoglycemia [Gel]

Stop Date/Time: Discontinued: 10/27/22 08:05

Label Comments: Give if BS < 70 and/or symptoms of hypoglycemia per protocol.

Do not administer if pt NPO or on Tube Feed

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 21:21	Hyun,Diana S, PharmD	QUV-CH03	Signature is Necessary	Y
1 10/19/22 21:21	Hyun,Diana S, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
2 10/19/22 21:22	Goshtrasbi,Mana, MD	QUV-BG19	Order is Signed by Goshtrasbi,Mana, MD	NA
3 10/20/22 05:33	RN 101,CVMC Registry	Desktop	Order acknowledged	NA
4 10/27/22 08:06	Scheer,Anilta K, PharmD	QUV-CH03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	
5 10/27/22 08:34	Hernandez,Lena	Desktop	Order acknowledged	NA

Medications 221019-212108082 Completed 10/19/22 21:30 goshtrasbi,Mana, MD Hyun,Diana S, PharmD

Dextrose 50%

Order Source: Protocol Orders (Sig Required)

Stop Reason: DC'd by Discharge

Medication Dextrose 50% Dose 50 ML Per

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	Rate: 999 MLS/HR				
	Stop Date/Time:				
	Discontinued: 12/02/22 10:08				

Label Comments:

Run D10% 250 ml bag at 999 ml/hr per hypoglycemia protocol #TDP-19

Give if BS < 70 and/or patient has any altered level of consciousness

Give if BS < 50 after 2 oral CHO Treatments

\*If Dextrose 50% Syringe unobtainable

Date & Time	User	Device	Event	Acknowledged
1 10/19/22 21:21	Hyun, Diana S, PharmD	QUV-CH03	Signature is Necessary	Y
1 10/19/22 21:21	Hyun, Diana S, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
2 10/19/22 21:22	Goshkasbi, Mana, MD	QUV-BG19	Order is Signed by Goshkasbi, Mana, MD	NA
3 10/20/22 05:33	RN 101, CVMC Registry	Desktop	Order acknowledged	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
7 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
8 11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged	NA
9 11/16/22 08:23	Huynh, Hanh H, PharmD	Desktop	Order is renewed	NA
10 11/16/22 21:19	Onyekwulufe, Anne N, MD	QUV-BG19	Order is Signed by Onyekwulufe, Anne N, MD	NA
11 12/02/22 10:08		QUV-CH03	Status changed:	N
			New: Completed	
			Old: Pha Verified	
Bedside Testing 221020-080041972 Completed 10/20/22 07:54				
Glucose (Bedside) Completed 10/20/22 07:54				
Goshkasbi, Mana, MD				
Routine				
Order Source: Zeremeno, Laura M, RN				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 10/20/22 08:00	Zeremeno, Laura M, RN	QUV-CH03	No Signature is Necessary	NA
1 10/20/22 08:00	Zeremeno, Laura M, RN	QUV-CH03	Order is Entered	NA
2 10/20/22 08:01		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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		New: Completed			
		OLD: In Process			

Bedside Testing 221020-120544755 Completed 10/20/22 11:51 Goshtrasbi, Mana, MD Entered By Zermeno, Laura M, RN

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/20/22 12:05	Zermeno, Laura M, RN	QUV-CH03	No Signature is Necessary	NA
1 10/20/22 12:05	Zermeno, Laura M, RN	QUV-CH03	Order is Entered	NA
2 10/20/22 12:06		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Bedside Testing 221020-170100641 Completed 10/20/22 16:43 Goshtrasbi, Mana, MD Entered By Zermeno, Laura M, RN

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/20/22 17:01	Zermeno, Laura M, RN	QUV-CH03	No Signature is Necessary	NA
1 10/20/22 17:01	Zermeno, Laura M, RN	QUV-CH03	Order is Entered	NA
2 10/20/22 17:01		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Bedside Testing 221020-203539473 Completed 10/20/22 20:22 Goshtrasbi, Mana, MD Entered By RN 7, ED Registry

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/20/22 20:37	RN 7, ED Registry	QUV-CH03	No Signature is Necessary	NA
1 10/20/22 20:37	RN 7, ED Registry	QUV-CH03	Order is Entered	NA
2 10/20/22 20:38		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221021-080030083 Completed 10/21/22 07:50

Goshkasbi, Mana, MD

Lopez, Kamille

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/21/22 08:00

Lopez, Kamille

QUV-CH03

No Signature is Necessary

NA

1 10/21/22 08:00

Lopez, Kamille

QUV-CH03

Order is Entered

NA

2 10/21/22 08:00

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221021-114029430 Completed 10/21/22 11:33

Goshkasbi, Mana, MD

Lopez, Kamille

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/21/22 11:40

Lopez, Kamille

QUV-CH03

No Signature is Necessary

NA

1 10/21/22 11:40

Lopez, Kamille

QUV-CH03

Order is Entered

NA

2 10/21/22 11:41

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221021-175554247 Completed 10/21/22 16:08

Goshkasbi, Mana, MD

Lopez, Kamille

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/21/22 17:55

Lopez, Kamille

QUV-CH03

No Signature is Necessary

NA

1 10/21/22 17:55

Lopez, Kamille

QUV-CH03

Order is Entered

NA

2 10/21/22 17:56

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221021-211424965	Completed	10/21/22 21:06	Goshhasbi, Mana, MD	Udeshi, Jay Bhavin
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/21/22 21:14	Udeshi, Jay Bhavin	QUV-CH03	No Signature is Necessary	NA
1 10/21/22 21:14	Udeshi, Jay Bhavin	QUV-CH03	Order is Entered	NA
2 10/21/22 21:14		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	
Stock	221022-080606458	Transmitted	10/22/22 08:05	Goshhasbi, Mana, MD
Message to Dietary				Order Source: Nursing Orders

Date & Time	User	Device	Event	Acknowledged
1 10/22/22 08:06	Zermeno, Laura M, RN	Desktop	No Signature is Necessary	Y
1 10/22/22 08:06	Zermeno, Laura M, RN	Desktop	Order is Entered	Y
2 10/22/22 08:06		QUV-BG19	Queued to destination:	NA
			New: QDIEPPI #3447868	
			OLD:	
3 10/22/22 08:06		QUV-BG19	Queued to destination:	NA
			New: QDIEPPI #3447869	
			OLD:	
4 10/22/22 08:06		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
5 10/22/22 08:10	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
6 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
7 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
	Maglunog, Alexander A, MD		Manage Transfer - Order is continued upon transfer	Y
8 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Process Transfer	NA
9 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Order acknowledged	NA
10 11/10/22 03:08	Apa, Mary Jurem	Desktop		NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Bedside Testing 221022-081046699 Completed 10/22/22 08:00 Goshταςbi,Mana, MD RN 7, ED Registry  
**Glucose (Bedside)** Routine **Order Source:**

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/22/22 08:10	RN 7, ED Registry	QUV-CM03	No Signature is Necessary	NA
1 10/22/22 08:10	RN 7, ED Registry	QUV-CM03	Order is Entered	NA
2 10/22/22 08:11		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Hematology 221022-112528304 Completed 10/22/22 11:59 Goshταςbi,Mana, MD **Order Source:** Provider  
**CBC [Complete Blood Count/Auto diff]** Stat

Stop Reason: Completed by LIS

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/22/22 11:25	Goshταςbi,Mana, MD	QDUOK103	Order is Entered and signed	Y
2 10/22/22 11:25		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 10/22/22 11:25		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
4 10/22/22 11:27	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
5 10/22/22 11:59	Nguyen, Phuong	Phone	Specimen Collected: 1022:H00393S	NA
6 10/22/22 11:59	Nguyen, Phuong	Phone	Order is collected	NA
7 10/22/22 12:04		QUV-CM03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
8 10/22/22 12:24		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Chemistry 221022-1125283041 Completed 10/22/22 11:59 Goshatasbi,Mana, MD Goshatasbi,Mana, MD  
**Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/22/22 11:25	Goshatasbi,Mana, MD	QDOUK103	Order is Entered and Signed	Y
2 10/22/22 11:25		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/22/22 11:25		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
4 10/22/22 11:27	Zermeno,Laura M, RN	Desktop	Order acknowledged	NA
5 10/22/22 11:59	Nguyen,Phuong	Phone	Specimen Collected: 1022:C00509S	NA
6 10/22/22 11:59	Nguyen,Phuong	Phone	Order is collected	NA
7 10/22/22 12:04		QUV-CM03	Status changed: New: In Process Old: Logged	NA
8 10/22/22 12:50		QUV-CM03	Status changed: New: Completed Old: In Process	NA

**Bedside Testing** 221022-113546633 **Completed** 10/22/22 11:24 **Order Source:** Zermeno,Laura M, RN  
**Glucose (Bedside)** Routine

**Stop Reason:** Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/22/22 11:35	Zermeno,Laura M, RN	QUV-CM03	No Signature is Necessary	NA
1 10/22/22 11:35	Zermeno,Laura M, RN	QUV-CM03	Order is Entered	NA
2 10/22/22 11:36		QUV-CM03	Status changed: New: Completed Old: In Process	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Medications 221022-140116567 Completed 10/22/22 16:00

Goshtasbi, Mana, MD

Goshtasbi, Mana, MD

Insulin Lispro

Order Source: Provider

Stop Reason: Order Change

Medication  
Insulin Lispro

Dose  
5 UNIT

Per

Route Frequency  
SUB-Q ACHS

Sched PRN Reason  
SCH

Days Hours Total Doses

Clinical Indication

Stop Date/Time:

Discontinued: 10/22/22 16:00

Date & Time	User	Device	Event	Acknowledged
1 10/22/22 14:01	Goshtasbi, Mana, MD	QNSUK101	Order Is Entered and signed	Y
2 10/22/22 14:01		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/22/22 14:01		QUV-CM03	Order Type edited: New: NF Old:	Y
4 10/22/22 14:01		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/22/22 14:07	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
6 10/22/22 14:25	Villegas, Karen, PharmD	QUV-CM03	Pending comment added: New: CLARIFY IF NUTRITIONAL VS SSI Old:	Y
7 10/22/22 14:25	Villegas, Karen, PharmD	QUV-CM03	Pending changed: New: Y Old:	NA
8 10/22/22 14:26	Villegas, Karen, PharmD	QUV-CM03	Pending comment edited: New: Order taken out of pending status by Pharmacy. Old: CLARIFY IF NUTRITIONAL VS SSI	Y
9 10/22/22 14:26	Villegas, Karen, PharmD	QUV-CM03	Pending changed: New: N Old:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				Old: Y	
	10	10/22/22 14:27	Villegas, Karen, PharmD	Desktop	Stop Request
	11	10/22/22 14:27	Villegas, Karen, PharmD	QUV-CH03	Status changed: New: Completed
	12	10/22/22 14:39	Goshdasbi, Mana, MD	QUV-BG19	Old: Logged Order is signed by Goshdasbi, Mana, MD
	13	10/22/22 15:01	Zermeno, Laura M, RN	Desktop	Order acknowledged
	Medications	221022-142731401	Completed	10/22/22 17:00	Goshdasbi, Mana, MD
	Novolog				Villegas, Karen, PharmD
	Stop Reason:	DISC			Order Source: Telephone Orders- Read Back

Medication	Dose	Per	Days	Hours	Total Doses	Clinical Indication
Insulin Aspart [Novolog]	5 UNIT					
Route	Frequency	Sched	PRN Reason			
SUB-Q	TID, W, MEALS	SCH				
Stop Date/Time:						
Discontinued:	10/27/22 11:03					

**Label Comments:** Administer routine doses at same time as food.  
 DO NOT CONFUSE WITH NOVOLIN.  
 0-15 MINUTES BEFORE MEAL  
 \*HOLD AND CALL PHYSICIAN IF MEAL IS SKIPPED, ORAL INTAKE  
 DECREASES SIGNIFICANTLY, OR IF BS PARAMETERS BY PHYSICIAN  
 ARE NOT MET.

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	Acknowledged
10/22/22 14:27	Villegas, Karen, PharmD	Desktop	Signature is Necessary	Y
10/22/22 14:27	Villegas, Karen, PharmD	Desktop	Order is Entered	Y
10/22/22 14:27		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
10/22/22 14:27		QUV-CH03	Order Type edited:	Y

Continued on Next Page



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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4	10/22/22 14:27	QUV-CM03	QUV-CM03	New: MED Old: Status changed: New: Logged Old: Transmitted	NA
5	10/22/22 14:38	Huynh, Hanh H, PharmD	QUV-CM03	New: Pha Verified Old: Logged Status changed: New: Pha Verified	NA
6	10/22/22 14:39	Goshdasbi, Mana, MD	QUV-BG19	Old: Order is Signed by Goshdasbi, Mana, MD New: Order acknowledged	NA
7	10/22/22 15:01	Zermeno, Laura M, RN	Desktop	Old: Stop Request New: Status changed:	Y
8	10/27/22 11:03	Amani-Yazdi, Rambod, MD	QICUK102	Old: Status changed: New: Completed	Y
9	10/27/22 11:04	Amani-Yazdi, Rambod, MD	QUV-CM03	Old: Order acknowledged	NA
10	10/27/22 12:40	Hernandez, Lena	Desktop	Old: Order acknowledged	NA

Medications 221022-153022959 Completed 10/22/22 21:00 Goshdasbi, Mana, MD **Order Source:** Provider  
 Levemir  
 Stop Reason: Order edited - Discontinuing original order

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Insulin Detemir [Levemir]	20 UNIT		SUB-Q	HS	SCH				
<b>Stop Date/Time:</b> Discontinued: 10/23/22 10:12									

**Label Comments:** P&T approved sub for: Lantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	Acknowledged
10/22/22 15:30	Goshdasbi, Mana, MD	QNSUK101	Order is Entered and Signed	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/22/22 20:11	Udeshi, Jay Bhavin	10/22/22 20:11	QUV-CM03	NA
1	10/22/22 20:11	Udeshi, Jay Bhavin	10/22/22 20:11	QUV-CM03	NA
2	10/22/22 20:11	Udeshi, Jay Bhavin	10/22/22 20:11	QUV-CM03	NA
<p>Bedside Testing 221023-024045255 Completed 10/23/22 02:23 Goshtrasbi, Mana, MD Udeshi, Jay Bhavin</p> <p>Glucose (Bedside) Routine Order Source:</p> <p>Stop Reason: Completed by LIS</p>					
<p>OLD: In Process</p>					
<p>Bedside Testing 221023-030039121 Completed 10/23/22 02:50 Goshtrasbi, Mana, MD Udeshi, Jay Bhavin</p> <p>Glucose (Bedside) Routine Order Source:</p> <p>Stop Reason:</p>					
<p>OLD: In Process</p>					
<p>Bedside Testing 221023-034054853 Completed 10/23/22 03:33 Goshtrasbi, Mana, MD Udeshi, Jay Bhavin</p> <p>Glucose (Bedside) Routine Order Source:</p> <p>Stop Reason: Completed by LIS</p>					
<p>OLD: In Process</p>					
Date & Time	User	Device	Event	Acknowledged	
10/23/22 03:00	Udeshi, Jay Bhavin	QUV-CM03	No Signature is Necessary	NA	
10/23/22 03:00	Udeshi, Jay Bhavin	QUV-CM03	Order is Entered	NA	
10/23/22 03:41	Udeshi, Jay Bhavin	QUV-CM03	Status changed:	NA	
<p>NEW: Completed</p>					
Date & Time	User	Device	Event	Acknowledged	
10/23/22 03:40	Udeshi, Jay Bhavin	QUV-CM03	No Signature is Necessary	NA	
10/23/22 03:40	Udeshi, Jay Bhavin	QUV-CM03	Order is Entered	NA	
10/23/22 03:41	Udeshi, Jay Bhavin	QUV-CM03	Status changed:	NA	
<p>NEW: Completed</p>					
<p>OLD: In Process</p>					



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221023-080600525	Completed	10/23/22 07:49	Goshtasbi, Mana, MD	Bowlay-Williams, Phil
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by LIs

Date & Time	User	Device	Event	AcknowLdged
1 10/23/22 08:06	Bowlay-Williams, Phil	QUV-CH03	No Signature is Necessary	NA
1 10/23/22 08:06	Bowlay-Williams, Phil	QUV-CH03	Order is Entered	NA
2 10/23/22 08:06		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Medications 221023-101219537 Completed 10/23/22 21:00

Goshtasbi, Mana, MD Order Source: Provider

Levemir

Stop Reason: DISC

Medication	Dose	Per
Insulin Detemir [Levemir]	10 UNIT	

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
SUB-Q	HS	SCH					
Stop Date/Time: Discontinued: 10/27/22 11:03							

Label Comments: P&T approved sub for: Lantus  
 \*DO NOT HOLD IF EATING STATUS CHANGES  
 \*NOTIFY PHYSICIAN IF EATING STATUS CHANGES  
 \*Hold Insulin only if BS < 100  
 CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	AcknowLdged
1 10/23/22 10:12	Goshtasbi, Mana, MD	QDOUK104	Order created because of edit(s)	Y
1 10/23/22 10:12	Goshtasbi, Mana, MD	QDOUK104	Copied from Levemir 221022-153022959	Y
2 10/23/22 10:12	Goshtasbi, Mana, MD	QDOUK104	Order is Signed by Goshtasbi, Mana, MD	Y
3 10/23/22 10:12		QUV-BG19	Status changed:	NA
			New: Transmitted	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	10/24/22 00:04			QUV-BG19	NA
				<b>New:</b> Transmitted	
				<b>Old:</b> Verified	
4	10/24/22 00:10			QUV-CM03	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	10/24/22 01:08			QUV-CM03	NA
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	10/24/22 05:07			Monroy, Destiny	NA
				<b>New:</b> Specimen Collected: 1024:C00235R	
7	10/24/22 05:07			Monroy, Destiny	NA
				<b>New:</b> Order is collected	
8	10/24/22 06:22			QUV-CM03	NA
				<b>New:</b> Status changed:	
				<b>Old:</b> In Process	
Hematology 221023-1311243991 Completed 10/24/22 05:07 Goshdasbi,Mana, MD Goshdasbi,Mana, MD					
<b>Complete Blood Count/Auto diff</b> AM <b>Order Source:</b> Provider					
<b>Stop Reason:</b> Completed by LIS					
<b>Specimen</b> Has been collected					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/23/22 13:11	Goshdasbi,Mana, MD	Desktop	Order is Entered and Signed	Y
2	10/23/22 20:09	Udeshi, Jay Bhavin	Desktop	Order acknowledged	NA
3	10/24/22 00:04		QUV-BG19	Status changed:	NA
				<b>New:</b> Transmitted	
				<b>Old:</b> Verified	
4	10/24/22 00:10		QUV-CM03	Status changed:	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	10/24/22 01:07		QUV-CM03	Status changed:	NA
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	10/24/22 05:07	Monroy, Destiny	Phone	Specimen Collected: 1024:H00191R	NA
7	10/24/22 05:07	Monroy, Destiny	Phone	Order is collected	NA
8	10/24/22 06:46		QUV-CM03	Status changed:	NA
				<b>New:</b> Completed	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Routine Care	221023-142336451	Completed	10/23/22 14:23	Goshtasbi, Mana, MD	Levy, Shari
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May shower				DAILY	Order Source: Verbal Orders- Read Back
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Stop Reason: Completed by Pcs

Date & Time	User	Device	Event	Acknowledged
1 10/23/22 14:23	Levy, Shari	Desktop	Signature is Necessary	Y
1 10/23/22 14:23	Levy, Shari	Desktop	Order is Entered	Y
2 10/23/22 14:23	Levy, Shari	Desktop	Order acknowledged	NA
3 10/23/22 14:23		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
4 10/23/22 14:51	Goshtasbi, Mana, MD	QUV-BG19	Order is Signed by Goshtasbi, Mana, MD	NA
5 10/27/22 12:46	Hernandez, Lena	Desktop	Status changed:	NA
			New: Completed	
			Old: In Process	
6 10/31/22 07:32	Goshtasbi, Mana, MD	QUV-BG19	Order is Signed by Goshtasbi, Mana, MD	NA

Bedside Testing 221023-171051826	Completed	10/23/22 17:01	Goshtasbi, Mana, MD	Ocio, Pauline Kate
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Glucose (Bedside) Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/23/22 17:10	Ocio, Pauline Kate	QUV-CH03	No Signature is Necessary	NA
1 10/23/22 17:10	Ocio, Pauline Kate	QUV-CH03	Order is Entered	NA
2 10/23/22 17:11		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221023-2050271184	Completed	10/23/22 20:31	Goshtasbi, Mana, MD	Udeshi, Jay Bhavin
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Glucose (Bedside) Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/23/22 20:50	Udeshi, Jay Bhavin	QUV-CH03	No Signature is Necessary	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/23/22 20:50	Udeshi, Jay Bhavin		QUV-CH03	Order Is Entered
2	10/23/22 20:50			QUV-CH03	Status changed:
					New: Completed
					OLD: In Process
Bedside Testing	221024-081051359	Completed	10/24/22 08:01	Goshhasbi, Mana, MD	Zermeno, Laura M, RN
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
10/24/22 08:10	Zermeno, Laura M, RN	QUV-CH03	No Signature Is Necessary	NA
10/24/22 08:10	Zermeno, Laura M, RN	QUV-CH03	Order Is Entered	NA
10/24/22 08:11		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Stock 221024-081647545 Transmitted 10/24/22 08:16  
 Message to Dietary  NOW  Goshhasbi, Mana, MD Zermeno, Laura M, RN  
 Order Source: Nursing Orders

Date & Time	User	Device	Event	Acknowledged
10/24/22 08:16	Zermeno, Laura M, RN	Desktop	No Signature Is Necessary	Y
10/24/22 08:16	Zermeno, Laura M, RN	Desktop	Order Is Entered	Y
10/24/22 08:16		QUV-BG19	Queued to destination:	NA
			New: QDIRTP1 #3452022	
			OLD:	
10/24/22 08:16		QUV-BG19	Queued to destination:	NA
			New: QDIRTP1 #3452023	
			OLD:	
10/24/22 08:16		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
10/24/22 08:25	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	8	11/09/22 22:57	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer
	9	11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer
	10	11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged
	Bedside Testing 221024-114037114		Completed	10/24/22 11:32	Batou, Augen, DO
	Glucose (Bedside)			Routine	Zermeno, Laura M, RN
	Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
10/24/22 11:40	Zermeno, Laura M, RN	QUV-CM03	No Signature is Necessary	NA
10/24/22 11:40	Zermeno, Laura M, RN	QUV-CM03	Order is Entered	NA
10/24/22 11:40	Zermeno, Laura M, RN	QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Date & Time	User	Device	Event	Acknowledged
10/24/22 17:00	Zermeno, Laura M, RN	QUV-CM03	No Signature is Necessary	NA
10/24/22 17:00	Zermeno, Laura M, RN	QUV-CM03	Order is Entered	NA
10/24/22 17:01	Zermeno, Laura M, RN	QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Date & Time	User	Device	Event	Acknowledged
10/24/22 17:00	Zermeno, Laura M, RN	QUV-CM03	No Signature is Necessary	NA
10/24/22 17:00	Zermeno, Laura M, RN	QUV-CM03	Order is Entered	NA
10/24/22 17:01	Zermeno, Laura M, RN	QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Special Chem 221024-172906906 Completed 10/25/22 04:56 Batou, Augen, DO Batou, Augen, DO  
 Hemoglobin A1C AM Order Source: Provider

Date & Time	User	Device	Event	Acknowledged
10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
10/25/22 00:05		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	10/27/22 04:44			QUV-CH03	Start Time edited: New: 04:16 Old: 04:10
	10/27/22 05:28			QUV-CH03	Status changed: New: Completed Old: In Process

Chemistry 221024-172945318 Cancelled 10/28/22 05:00 Batou, Augen, DO  
 Basic Metabolic Panel AM  
 Stop Reason: REDUNDANT ORDER FOR BMP

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order Is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/28/22 00:03		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 10/28/22 00:09		QUV-CH03	Status changed: New: Cancelled Old: Transmitted	Y
5 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA

Chemistry 221024-172945334 Completed 10/26/22 05:18 Batou, Augen, DO  
 Magnesium AM  
 Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order Is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/26/22 00:04		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 10/26/22 00:11		QUV-CH03	Status changed: New: Logged	NA

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Patient Order Summary

Page: 51 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	10/26/22 01:28				
		QUV-CH03			
		Old: Transmitted			
		Status changed:			
		New: In Process			
6	10/26/22 05:18				
		Mijares, Veronica R			
		Phone			
		Specimen Collected: 1026:C00258R			
		Old: Logged			
		Order is collected			
		Start Time edited:			
		New: 05:18			
		Old: 05:13			
		Status changed:			
		New: Completed			
		Old: In Process			
9	10/26/22 07:11				
		QUV-CH03			
		Status changed:			
		New: Completed			
		Old: In Process			

Chemistry 221024-1729453341 Completed 10/27/22 04:16

Batou, Augen, DO

Batou, Augen, DO

Magnesium

AM

Order Source: Provider

Stop Reason: Completed by LIS

Specimen	Date & Time	User	Device	Event	Acknowledged
				Has been collected	
1	10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2	10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3	10/27/22 00:05		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	10/27/22 00:11		QUV-CH03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	10/27/22 00:57		QUV-CH03	Status changed:	NA
				New: In Process	
				Old: Logged	
6	10/27/22 04:16	Allen, Lisa	Phone	Specimen Collected: 1027:C00236R	NA
7	10/27/22 04:16	Allen, Lisa	Phone	Order is collected	NA
8	10/27/22 04:44		QUV-CH03	Start Time edited:	NA
				New: 04:16	
				Old: 04:10	
9	10/27/22 05:28		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category**      **Order**      **Status**      **Start**      **Ord Provider**      **Entered By**

**New:** Completed  
**Old:** In Process

Chemistry      221024-172945349      Cancelled      10/28/22 05:00      Batou, Augen, DO      Batou, Augen, DO  
**Magnesium**      **Order Source:** Provider

**Stop Reason:** Cancelled by Lis

**Specimen**      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order Is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/28/22 00:03		QUV-BG19	Status changed: <b>New:</b> Transmitted <b>Old:</b> Verified	NA
4 10/28/22 00:09		QUV-CM03	status changed: <b>New:</b> Logged	NA
5 10/28/22 00:17		QUV-CM03	Status changed: <b>New:</b> In Process <b>Old:</b> Transmitted	NA
6 10/28/22 00:33	Contreras, Ashley J	QUV-CM03	Status changed: <b>New:</b> Cancelled <b>Old:</b> Logged	Y
7 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA

Chemistry      221024-1729453491      Completed      10/29/22 06:05      Batou, Augen, DO      Batou, Augen, DO  
**Magnesium**      **Order Source:** Provider  
**Stop Reason:** Completed by Lis

**Specimen**      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order Is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/29/22 00:03		QUV-BG19	Status changed: <b>New:</b> Transmitted <b>Old:</b> Verified	NA

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Patient Order Summary

Page: 53 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/29/22 00:09	QUV-CM03		Status changed: New: Logged Old: Transmitted	NA
5	10/29/22 01:29	QUV-CM03		Status changed: New: In Process Old: Logged	NA
6	10/29/22 07:07	QUV-CM03		Start time edited: New: 06:05 Old: 05:00	NA
7	10/29/22 07:37	QUV-CM03		Status changed: New: Completed Old: In Process	NA

Chemistry 221024-1729453651 Completed 10/25/22 04:56 Batou, Augen, DO Batou, Augen, DO  
 PHOS [Phosphorus] AM Order Source: Provider

Stop Reason: Completed by LIS

Specimen	Date & Time	User	Device	Event	Acknowledged
				Has been collected	
1	10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2	10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3	10/25/22 00:05		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4	10/25/22 00:13		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5	10/25/22 01:03		QUV-CM03	Status changed: New: In Process Old: Logged	NA
6	10/25/22 04:56	Mijares, Veronica R	Phone	Specimen Collected: 1025;C00315R	NA
7	10/25/22 04:56	Mijares, Veronica R	Phone	Order is collected	NA
8	10/25/22 05:40		QUV-CM03	Start time edited: New: 04:56 Old: 04:55	NA
9	10/25/22 06:57		QUV-CM03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221024-172945381	Cancelled	10/28/22 05:00	Batou, Augen, DO	
	PHOS [Phosphorus]			AM	
	Stop Reason: Cancelled by Lis			Order Source: Provider	

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order Is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/28/22 00:03		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 10/28/22 00:09		QUV-CM03	Status changed: New: Logged	NA
5 10/28/22 00:17		QUV-CM03	Status changed: New: In Process Old: Transmitted	NA
6 10/28/22 00:33	Contreras, Ashley J	QUV-CM03	Status changed: New: Logged Old: In Process	Y
7 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA

Hematology 221024-172945271 Completed 10/25/22 04:56 Batou, Augen, DO Batou, Augen, DO  
 Complete Blood Count/Auto diff AM Order Source: Provider  
 Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order Is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/25/22 00:05		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA

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Patient Order Summary

Page: 55 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/25/22 00:13	QUV-CM03		Status changed:	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	10/25/22 01:03	QUV-CM03		Status changed:	NA
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	10/25/22 04:56	Mijares, Veronica R		Specimen Collected: 1025:H00233R	NA
				Order is collected	NA
7	10/25/22 04:56	Mijares, Veronica R		Start time edited:	NA
				<b>New:</b> 04:56	
				<b>Old:</b> 04:55	
9	10/25/22 08:30	QUV-CM03		Status changed:	NA
				<b>New:</b> Completed	
				<b>Old:</b> In Process	

Hematology 221024-1729452711 Completed 10/26/22 05:18 Batou, Augen, DO Batou, Augen, DO  
**Complete Blood Count/Auto diff** AM **Order source:** Provider  
**Stop Reason:** Completed by LIS

Specimen	Date & Time	User	Device	Event	Acknowledged
				Has been collected	
1	10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2	10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3	10/26/22 00:04	QUV-BG19	QUV-BG19	Status changed:	NA
				<b>New:</b> Transmitted	
				<b>Old:</b> Verified	
4	10/26/22 00:11	QUV-CM03	QUV-CM03	Status changed:	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	10/26/22 01:28	QUV-CM03	QUV-CM03	Status changed:	NA
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	10/26/22 05:18	Mijares, Veronica R	Phone	Specimen Collected: 1026:H00186R	NA
7	10/26/22 05:18	Mijares, Veronica R	Phone	Order is collected	NA
8	10/26/22 05:52	QUV-CM03	QUV-CM03	Start time edited:	NA
				<b>New:</b> 05:18	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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9	10/26/22 07:33			QUV-CH03	Old: 05:13 Status changed:
					New: Completed

					Old: In Process
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Hematology	221024-1729452712	Completed	10/27/22 04:16	Batou, Augen, DO	Batou, Augen, DO
<b>Complete Blood Count/Auto diff</b>					
Order Source: Provider					

Stop Reason: Completed by LIS

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/27/22 00:05		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/27/22 00:11		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/27/22 00:57		QUV-CH03	Status changed:	NA
			New: In Process	
			Old: Logged	
6 10/27/22 04:16	Allen, Lisa	Phone	Specimen Collected: 1027:H00194R	NA
7 10/27/22 04:16	Allen, Lisa	Phone	Order is collected	NA
8 10/27/22 04:44		QUV-CH03	Start time edited:	NA
			New: 04:16	
			Old: 04:10	
9 10/27/22 05:40		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	
10 10/27/22 05:41	Pfancutt, Radford Raymond	QUV-CH03	Status changed:	NA
			New: In Process	
			Old: Completed	
11 10/27/22 07:03		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** Order **Status** Start **Ord Provider** Entered By  
 Hematology 221024-1729452871 Completed 10/28/22 05:16 Batou, Augen, DO Batou, Augen, DO  
**Complete Blood Count/Auto diff** **Order Source:** Provider

**Stop Reason:** Completed by LIS

**Specimen** Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/28/22 00:03		QUV-BG19	Status changed: New: Transmitted	NA
			OLD: Verified	
4 10/28/22 00:09		QUV-CH03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
5 10/28/22 00:17		QUV-CH03	Status changed:	NA
			New: In Process	
			OLD: Logged	
6 10/28/22 05:17	Contreras, Ashley J	Phone	Specimen Collected: 1028:H00155R	NA
7 10/28/22 05:17	Contreras, Ashley J	Phone	Order is collected	NA
8 10/28/22 07:38		QUV-CH03	Status changed: New: Completed	NA
			OLD: In Process	

Hematology 221024-1729452871 Completed 10/29/22 06:05 Batou, Augen, DO Batou, Augen, DO  
**Complete Blood Count/Auto diff** **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/29/22 00:03		QUV-BG19	Status changed: New: Transmitted	NA
			OLD: Verified	
4 10/29/22 00:09		QUV-CH03	Status changed:	NA

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	10/29/22 01:29			QUV-CH03	New: Logged Old: Transmitted Status changed: New: In Process Old: Logged
6	10/29/22 07:07			QUV-CH03	New: Logged Old: Transmitted Status changed: New: In Process Old: Logged Start Time edited: New: 06:05 Old: 05:00
7	10/29/22 07:52			QUV-CH03	New: Completed Old: In Process

Chemistry      221024-172945303      Completed      10/25/22 04:56      Batou, Augen, DO      Batou, Augen, DO  
**Basic Metabolic Panel**      AM      Order Source: Provider  
 Stop Reason: Completed by LIS

Specimen	Date & Time	User	Device	Event	Acknowledged
1	10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and signed	Y
2	10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3	10/25/22 00:05		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4	10/25/22 00:13		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA
5	10/25/22 01:03		QUV-CH03	Status changed: New: In Process Old: Logged	NA
6	10/25/22 04:56	Mijares, Veronica R	Phone	Specimen Collected: 1025:000315R	NA
7	10/25/22 04:56	Mijares, Veronica R	Phone	Order is collected	NA
8	10/25/22 05:40		QUV-CH03	Start Time edited: New: 04:56 Old: 04:55	NA
9	10/25/22 06:57		QUV-CH03	Status changed: New: Completed	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Chemistry 221024-1729453031 Completed 10/26/22 05:18 Batou, Augen, DO Batou, Augen, DO

Basic Metabolic Panel

AM

Order Source: Provider

Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3 10/26/22 00:04		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
4 10/26/22 00:11		QUV-CH03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
5 10/26/22 01:28		QUV-CH03	Status changed:	NA
			New: In Process	
			OLD: Logged	
6 10/26/22 05:18	Mijares, Veronica R	Phone	Specimen Collected: 1026;C00258R	NA
7 10/26/22 05:18	Mijares, Veronica R	Phone	Order is collected	NA
8 10/26/22 05:52		QUV-CH03	Start Time edited:	NA
			New: 05:18	
			OLD: 05:13	
9 10/26/22 07:11		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Chemistry 221024-172945318 Completed 10/29/22 06:05 Batou, Augen, DO Batou, Augen, DO

Basic Metabolic Panel

AM

Order Source: Provider

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
2 10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	10/29/22 00:03			QUV-BG19	NA
				Status changed:	
				New: Transmitted	
				Old: Verified	
4	10/29/22 00:09			QUV-CM03	NA
				Status changed:	
				New: Logged	
				Old: Transmitted	
5	10/29/22 01:29			QUV-CM03	NA
				Status changed:	
				New: In Process	
				Old: Logged	
6	10/29/22 07:07			QUV-CM03	NA
				Start Time edited:	
				New: 06:05	
				Old: 05:00	
7	10/29/22 07:37			QUV-CM03	NA
				Status changed:	
				New: Completed	
				Old: In Process	
Chemistry	221024-172945334	Completed	10/25/22 04:56	Batou, Augen, DO	Batou, Augen, DO
Magnesium				AM	Order Source: Provider
Stop Reason: Completed by Lis					
Specimen		Has been collected			
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and signed	Y
2	10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
3	10/25/22 00:05		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	10/25/22 00:13		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	10/25/22 01:03		QUV-CM03	Status changed:	NA
				New: In Process	
				Old: Logged	
6	10/25/22 04:56	Mijares, Veronica R	Phone	Specimen Collected: 1025:000315R	NA
7	10/25/22 04:56	Mijares, Veronica R	Phone	Order is collected	NA
8	10/25/22 05:40		QUV-CM03	Start Time edited:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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9	10/25/22 06:57			QUV-CM03	
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New: 04:56  
Old: 04:55  
Status changed:  
New: Completed  
Old: In Process

Chemistry	221024-172945365	Completed	10/26/22 05:18	Batou, Augen, DO	Batou, Augen, DO
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Order Source: Provider

PHOS [Phosphorus]  
Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
10/24/22 17:40	Zeremeno, Laura M, RN	Desktop	Order acknowledged	NA
10/26/22 00:04		QUV-BG19	Status changed: New: Transmitted	NA
			Old: Verified	
10/26/22 00:11		QUV-CM03	Status changed: New: Logged	NA
			Old: Transmitted	
10/26/22 01:28		QUV-CM03	Status changed: New: In Process	NA
			Old: Logged	
10/26/22 05:18	Mijares, Veronica R	Phone	Specimen Collected: 1026:C00258R	NA
10/26/22 05:18	Mijares, Veronica R	Phone	Order is collected	NA
10/26/22 05:52		QUV-CM03	Start Time edited: New: 05:18	NA
			Old: 05:13	
10/26/22 07:11		QUV-CM03	Status changed: New: Completed	NA
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Chemistry

221024-172945381 Completed 10/27/22 04:16

Batou, Augen, DO

Batou, Augen, DO

PHOS [Phosphorus]

AM

Order Source: Provider

Stop Reason: Completed by Lis

Specimen

Has been collected

Date & Time

User

Device

Event

Acknowledged

1 10/24/22 17:29 Batou, Augen, DO Q12511 Order is Entered and Signed Y

2 10/24/22 17:40 Zeremeno, Laura M, RN Desktop Order acknowledged NA

3 10/27/22 00:05 QUV-BG19 QUV-BG19 Status changed: NA

New: Transmitted

Old: Verified

Status changed: NA

New: Logged

Old: Transmitted

Status changed: NA

New: In Process

Old: Logged

Specimen Collected: 1027:C00236R NA

Order is collected NA

Start Time edited: NA

New: 04:16

Old: 04:10

Status changed: NA

New: Completed

Old: In Process

Chemistry

221024-172945381 Completed 10/29/22 06:05

Batou, Augen, DO

Batou, Augen, DO

PHOS [Phosphorus]

AM

Order Source: Provider

Stop Reason: Completed by Lis

Specimen

Send someone from the department to collect

Date & Time

User

Device

Event

Acknowledged

1 10/24/22 17:29 Batou, Augen, DO Q12511 Order is Entered and Signed Y

2 10/24/22 17:40 Zeremeno, Laura M, RN Desktop Order acknowledged NA

3 10/29/22 00:03 QUV-BG19 QUV-BG19 Status changed: NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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4	10/29/22 00:09	QUV-CH03	QUV-CH03	Batou, Augen, DO	AM
5	10/29/22 01:29	QUV-CH03	QUV-CH03	Batou, Augen, DO	AM
6	10/29/22 07:07	QUV-CH03	QUV-CH03	Batou, Augen, DO	AM
7	10/29/22 07:37	QUV-CH03	QUV-CH03	Batou, Augen, DO	AM

Coagulation 221024-1729453961 Completed 10/25/22 04:56

Batou, Augen, DO

Order source: Provider

Prothrombin Time INR  
Stop Reason: Completed by LIS

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
10/24/22 17:29	Batou, Augen, DO	Q12511	Order is Entered and Signed	Y
10/24/22 17:40	Zermeno, Laura M, RN	Desktop	Order acknowledged	NA
10/25/22 00:05		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
10/25/22 00:13		QUV-CH03	Status changed: New: Logged	NA
10/25/22 01:03		QUV-CH03	Status changed: New: In Process Old: Transmitted	NA
10/25/22 04:56	Mijares, Veronica R	Phone	Specimen Collected: 1025;CG00022R	NA
10/25/22 04:56	Mijares, Veronica R	Phone	Order is collected	NA
10/25/22 05:40		QUV-CH03	Start time edited: New: 04:56	NA

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Patient Order Summary

Page: 64 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

9 10/25/22 06:33 QUV-CH03 Status changed: NA

Old: 04:55

New: Completed

Old: In Process

Bedside Testing 221024-204532968 Completed 10/24/22 20:22 Batou, Augen, DO Muh, Linda

Glucose (Bedside) Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time User Device Event Acknowledged  
1 10/24/22 20:45 Muh, Linda QUV-CH03 No Signature is Necessary NA  
1 10/24/22 20:45 Muh, Linda QUV-CH03 Order is Entered NA  
2 10/24/22 20:46 QUV-CH03 Status changed: NA  
New: Completed  
Old: In Process

Bedside Testing 221025-075541202 Completed 10/25/22 07:43 Batou, Augen, DO Sandoval Lara, Alondra Guadalupe

Glucose (Bedside) Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time User Device Event Acknowledged  
1 10/25/22 07:55 Sandoval Lara, Alondra QUV-CH03 No Signature is Necessary NA  
Guadalupe  
1 10/25/22 07:55 Sandoval Lara, Alondra QUV-CH03 Order is Entered NA  
Guadalupe  
2 10/25/22 07:55 QUV-CH03 Status changed: NA  
New: Completed  
Old: In Process

Dietary 221025-094742107 Completed 10/26/22 00:01 Gibani, Siraj M, MD Gibani, Siraj M, MD

NPO

Stop Reason: Stop date/time met

Date & Time User Device Event Acknowledged  
1 10/25/22 09:47 Gibani, Siraj M, MD INT-GIBANI Order is Entered and Signed Y  
2 10/25/22 09:47 QUV-BG19 Queued to destination: NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				<b>New:</b> QDIFTP1 #3455361	
				<b>OLD:</b>	
				Sent to Other Vendor:	
				<b>New:</b> OM Diet Orders to Computation	
				<b>OLD:</b>	
				Status changed:	
				<b>New:</b> Transmitted	
				<b>OLD:</b> Verified	
				Order acknowledged	
				Diet Stop Dt/Time added:	
				<b>New:</b> 10/28/22 16:59	
				<b>OLD:</b>	
				Queued to destination:	
				<b>New:</b> QDIFTP1	
				<b>OLD:</b>	
				Order acknowledged	
				New Order Created. Order is Completed via	
				Auto Complete.	
				Status changed:	
				<b>New:</b> Completed	
				<b>OLD:</b> Transmitted	
				Order acknowledged	
				Order is Signed by Ratou, Augen, DO	
				<b>New:</b> Completed	
				<b>OLD:</b> In Process	

Bedside Testing 221025-123815598 **Completed** 10/25/22 12:32 **Bedside** Ratou, Augen, DO **Order Source:** Koyanagi, Blair  
**Glucose (Bedside)** Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 12:38	Koyanagi, Blair	QUV-CM03	No Signature is Necessary	NA
1 10/25/22 12:38	Koyanagi, Blair	QUV-CM03	Order is Entered	NA
2 10/25/22 12:38		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>OLD:</b> In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221025-150704902	Completed	10/25/22 15:10	Batou, Augen, DO	Batou, Augen, DO
	Claritin-D 24 Hour				Order Source: Provider

Stop Reason: Discontinue

**Medication**  
 Loratadine/F-Ephed 10/240 ER 1 TAB Per  
 [Claritin-D 24 Hour]

**Route**      **Frequency**      **Sched**      **PRN Reason**  
 PO            Q24H            SCH

**Stop Date/Time:**

**Discontinued:** 10/27/22 10:19

**Label Comments:** Do not crush tablet.

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 15:07	Batou, Augen, DO	QNSUK104	Order is Entered and Signed	Y
2 10/25/22 15:07		QUV-BG19	Status changed: New: Transmitted	NA
3 10/25/22 15:07		QUV-CM03	Old: Verified New: Verified Order Type edited: New: MED Old:	Y
4 10/25/22 15:07		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/25/22 15:16	Yang, David, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
6 10/25/22 16:47	Pilch, Bekezela	Other	Order acknowledged	NA
7 10/27/22 08:04	Scheer, Anita K, PharmD	QUV-CM03	Order is held: New: 10/27/22 08:04 Old:	Y
8 10/27/22 08:34	Hernandez, Lena	Desktop	Order acknowledged	NA
9 10/27/22 10:19	Batou, Augen, DO	QDLK101	Stop Request	Y
10 10/27/22 10:19	Batou, Augen, DO	QUV-CM03	Status changed:	Y

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Clinical Indication



**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

11	10/27/22 10:32	Hernandez, Lena	Desktop	Ye, Donald	NA
Routine Care 221025-170433155 Completed 10/25/22 17:03 Consent, Obtain For .NOW Stop Reason: Discharged <b>Order Source:</b> Provider					

**Surgical/Procedure Description:** Right, possible bilateral, frontal endoscopic transventricular resection of colloid cyst, possible placement of external ventricular drain

**Obtain Consent for** Surgical Consent  
**Intervention Text**

	Date & Time	User	Device	Event	Acknowledged
1	10/25/22 17:04	Ye, Donald	Desktop	Order is Entered and signed	Y
1	10/25/22 17:04	Ye, Donald	Desktop	Reflex Set: Consent generated	Y
1	10/25/22 17:04	Ye, Donald	Desktop	Reflex Set: Pre Op Checklist generated	Y
2	10/25/22 17:04		QUV-BG19	Status changed:	NA
<b>New:</b> In Process					
<b>Old:</b> Verified					
3	10/25/22 19:42	Mondares, Tyrrell Domm	QNSUK104	Order acknowledged	NA
4	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
6	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
7	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
8	11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
9	12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
<b>New:</b> Completed					
<b>Old:</b> In Process					



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
61/F	221025-170433171	Completed	10/25/22 17:04	Ye, Donald	Ye, Donald

Pre-operative Checklist  
 Stop Reason: Completed by Pcs

Intervention Text

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 17:04	Ye, Donald	Desktop	Order is Entered and Signed	Y
1 10/25/22 17:04	Ye, Donald	Desktop	Reflex Order generated from Consent, Obtain For 221025-170433155	Y
2 10/25/22 17:04		QUV-BG19	Status changed:	NA

3 10/25/22 19:42	Mondares, Jyrrell Domm	QNSUK104	Order acknowledged	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y

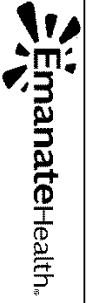
7 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
8 11/10/22 03:11	Apa, Mary Jurem	Desktop	Order acknowledged	NA
9 11/23/22 08:20	Rivera, Heidi	Desktop	Status changed:	NA

Route Care 221025-170433171 Completed 10/25/22 17:03 Ye, Donald  
 Surgical/Procedure Description .NOW  
 Stop Reason: Discharged Order Source: Provider

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 17:04	Ye, Donald	Desktop	Order is Entered and Signed	Y
1 10/25/22 17:04	Ye, Donald	Desktop	Reflex Order generated from Consent, Obtain For 221025-170433155	Y
2 10/25/22 17:04		QUV-BG19	Status changed:	NA

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Patient Order Summary

Page: 69 of 550  
Date: 12/07/22 02:56  
User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					Old: Verified
3	10/25/22 19:42	Mondares, Jyrrell Domm		QNSUK104	Order acknowledged
4	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Order is set to continue upon transfer
5	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD
6	11/09/22 22:57	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Order is continued upon transfer
7	11/09/22 22:57	Apa, Mary Jurem		QPACUK101	Process Transfer
8	11/10/22 03:11	Apa, Mary Jurem		Desktop	Order acknowledged
9	12/02/22 10:08	Ramos, Jessica		Desktop	Status changed:
					New: Completed
					Old: In Process

Blood Bank      221025-174727419      Completed      10/25/22 18:26      Olsson, Ingrid, PA-C      Olsson, Ingrid, PA-C

Type and Screen      Stop Reason: Completed by LIS      Routine      Order Source: Provider

Specimen	Date & Time	User	Device	Event	Acknowledged
1	10/25/22 17:47	Olsson, Ingrid, PA-C	QICUK102	Order is Entered and Signed	Y
2	10/25/22 17:47		QUV-BG19	Queued to destination:	NA
				New: QLABBBP6 #3456922	
				Old:	
3	10/25/22 17:47		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	10/25/22 17:47		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	10/25/22 18:26	Larosa, Valerie	Phone	Specimen Collected: 1025:BB00065R	NA
6	10/25/22 18:26	Larosa, Valerie	Phone	Order is collected	NA
7	10/25/22 18:59		QUV-CM03	Status changed:	NA
				New: In Process	
				Old: Logged	
8	10/25/22 19:42	Mondares, Jyrrell Domm	QNSUK104	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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9	10/25/22 19:44			QUV-CH03	Status changed: New: Completed Old: In Process	NA
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X-Ray	221025-174727419	Resulted	10/25/22 17:47	Olsson, Ingrid, PA-C	Olsson, Ingrid, PA-C	NA
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Chest [XR chest IV] Routine **Order Source:** Provider

**Reason for Exam** Other (please comment)  
**Additional Notes/Special Instructions** preop

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 17:47	Olsson, Ingrid, PA-C	QICURK102	Order is Entered and Signed	Y
2 10/25/22 17:47		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/25/22 17:47		QUV-CH03	Status changed:	NA
4 10/25/22 18:37	Hernandez, Magdali	QUV-CH03	New: Taken Status changed: Old: Logged	NA
5 10/25/22 19:42	Mondares, Tyrrell Domm	QNSURK104	Order acknowledged	NA
6 10/26/22 01:03		QUV-CH03	Status changed: New: Resulted Old: Taken	NA

Urinalysis 221025-1747274191 Completed 10/26/22 07:30 Olsson, Ingrid, PA-C  
**Routine Urinalysis** Routine **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 17:47	Olsson, Ingrid, PA-C	QICURK102	Order is Entered and Signed	Y
2 10/25/22 19:42	Mondares, Tyrrell Domm	QNSURK104	Order acknowledged	NA
3 10/26/22 09:42	Karki Thapa, Samikshya	Desktop	Order is collected	NA
4 10/26/22 09:42	Karki Thapa, Samikshya	Desktop	Start Date edited:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				<b>New:</b> Wed Oct 26 <b>Old:</b> Tue Oct 25	
4	10/26/22 09:42	Karki Thapa, Samikshya	Desktop	<b>New:</b> Start time edited: <b>Old:</b> 17:46	NA
4	10/26/22 09:42	Karki Thapa, Samikshya	Desktop	<b>New:</b> Query Specimen edited: <b>Old:</b> Has been collected	NA
5	10/26/22 09:42	Karki Thapa, Samikshya	Desktop	<b>New:</b> Nurse/Care Provider to collect <b>Old:</b> Status changed: <b>New:</b> Verified <b>Old:</b> Uncollected	NA
6	10/26/22 09:42	Karki Thapa, Samikshya	Desktop	<b>New:</b> Status changed: <b>Old:</b> Transmitted	NA
7	10/26/22 09:42		QUV-CM03	<b>New:</b> status changed: <b>Old:</b> Verified	NA
8	10/26/22 10:16		QUV-CM03	<b>New:</b> Logged <b>Old:</b> Transmitted	NA
9	10/26/22 10:16		QUV-CM03	<b>New:</b> Start time edited: <b>Old:</b> 07:30	NA
10	10/26/22 10:44		QUV-CM03	<b>New:</b> Status changed: <b>Old:</b> Logged	NA
<b>Bedside Testing 221025-180025243 Completed 10/25/22 17:51</b> Batou, Augen, DO Guerrero, Lisette					
<b>Glucose (Bedside)</b> Order Source: Routine					
<b>Stop Reason:</b> Completed by Lis					
Date & Time	User	Device	Event	Acknowledged	
1 10/25/22 18:00	Guerrero, Lisette	QUV-CM03	No Signature is Necessary	NA	
1 10/25/22 18:00	Guerrero, Lisette	QUV-CM03	Order is Entered	NA	
2 10/25/22 18:00		QUV-CM03	Status changed: <b>New:</b> Completed	NA	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Bedside Testing 221025-215527605 Completed 10/25/22 20:44 Batou, Augen, DO Entered By: Mondares, Yyrrell Domm

Glucose (Bedside) Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/25/22 21:55	Mondares, Yyrrell Domm	QUV-CH03	No Signature is Necessary	NA
1 10/25/22 21:55	Mondares, Yyrrell Domm	QUV-CH03	Order is Entered	NA
2 10/25/22 21:55		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Routine Microbi 221026-075842088 Completed 10/26/22 08:10 Ye, Donald

MRSA Culture Stat Order Source: Standard Procedure Orders

Stop Reason: Completed by Lis

MTC Source	Specimen	Date & Time	User	Device	Event	Acknowledged
			Mares			
			Has been collected			
1		10/26/22 07:58	Manalo, Julius M	Desktop	No Signature is Necessary	Y
1		10/26/22 07:58	Manalo, Julius M	Desktop	Order is Entered	Y
1		10/26/22 07:58	Manalo, Julius M	Desktop	Reflex Set: MRSA CONSULT generated	Y
2		10/26/22 08:08	Karki Thapa, Samikshya	Desktop	Order acknowledged	NA
3		10/26/22 08:50	Karki Thapa, Samikshya	Desktop	Order is collected	NA
4		10/26/22 08:50	Karki Thapa, Samikshya	Desktop	Query Specimen edited:	NA
					New: Has been collected	
					Old: Nurse/Care Provider to collect	
5		10/26/22 08:50	Karki Thapa, Samikshya	Desktop	Status changed:	NA
					New: Verified	
					Old: Uncollected	
6		10/26/22 08:50	Karki Thapa, Samikshya	Desktop	Status changed:	NA
					New: Transmitted	
					Old: Verified	
7		10/26/22 08:50		QUV-CH03	Status changed:	NA
					New: Logged	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
8	10/26/22 09:26			QUV-CH03 Old: Transmitted Start Time edited: New: 08:10 Old: 07:58	NA
9	10/26/22 09:26			QUV-CH03 Status changed: New: In Process Old: Logged	NA
10	10/28/22 09:25			QUV-CH03 Status changed: New: Completed Old: In Process	NA

Medications 221026-0758420881 Completed 10/26/22 08:00 Yes, Donald

Manalo, Julius M

Order Source: Standard Procedure Orders

Stop Reason: Other

Medication MRSA - Dosed by PHA [MRSA  
 Decolonization Per Pharmacy]  
 Dose 1 EACH  
 Per

Route Frequency Sched PRN Reason  
 MISCELLANE PROTOCOL SCH  
 Stop Date/Time:  
 Discontinued: 10/28/22 13:33

Days Hours Total Doses

Clinical Indication

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 07:58	Manalo, Julius M	Desktop	No Signature is Necessary	Y
1 10/26/22 07:58	Manalo, Julius M	Desktop	Order is Entered	Y
1 10/26/22 07:58	Manalo, Julius M	Desktop	Reflex Order generated from MRSA Culture	Y
2 10/26/22 07:58		QUV-BG19	221026-075842088 Status changed: New: Transmitted Old: Verified	NA
3 10/26/22 07:59		QUV-CH03	Order Type edited: New: ZMISC Old:	Y
4 10/26/22 07:59		QUV-CH03	Status changed: Old:	NA

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**Patient Order Summary**

QH0054940416 Lyons, Kathleen A      **Location:** Q 1 Intensive Care Unit      **Medical Record Number:** MR01483046  
 61/F      **Attending:** Lau, Tsang, MD      **Account Number:** QH0054940416  
**Reason:** Hydrocephalus      **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	10/26/22 08:01	Scheer, Anita K, PharmD	QUV-CM03		
		<b>New:</b> Logged			
		<b>Old:</b> Transmitted			
		<b>Status changed:</b>			
		<b>New:</b> Pha Verified			
		<b>Old:</b> Logged			
6	10/26/22 08:08	Karki Thapa, Samikshya	Desktop		
		<b>New:</b> Pha Verified			
		<b>Old:</b> Logged			
		<b>Status changed:</b>			
		<b>New:</b> Completed			
		<b>Old:</b> Pha Verified			
7	10/28/22 13:34	True, Genevieve M.S., PharmD	Desktop		
		<b>New:</b> Completed			
		<b>Old:</b> Pha Verified			
8	10/28/22 13:34	True, Genevieve M.S., PharmD	QUV-CM03		
		<b>New:</b> Completed			
		<b>Old:</b> Pha Verified			
9	10/28/22 14:13	Hong, Grace	Other		
		<b>New:</b> Completed			
		<b>Old:</b> Pha Verified			
10	10/28/22 18:36	Ye, Donald	QUV-BG19		
		<b>New:</b> Completed			
		<b>Old:</b> Pha Verified			

Bedside Testing 221026-080056419      **Completed**      10/26/22 07:53      **Order Source:** Karki Thapa, Samikshya  
**Glucose (Bedside)**      **Route:** Routine

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/26/22 11:15	Karki Thapa, Samikshya	QUV-CM03	No Signature is Necessary	NA
10/26/22 11:15	Karki Thapa, Samikshya	QUV-CM03	Order is Entered	NA
10/26/22 11:15	Karki Thapa, Samikshya	QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221026-143028854	Completed	10/26/22 14:29	Chao, Fu, MD	Chao, Fu, MD
Decadron					Order Source: Provider

Stop Reason: Reached Stop Date

**Medication**  
 Dexamethasone Sod Phos 8 MG Per  
 [Decadron]

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
IV-Push	ONCE	PRN	Nausea/Vomiting while in PACU			1	
<b>Stop Date/Time:</b> 10/26/22 20:30							
<b>Discontinued:</b> 10/26/22 20:30							

**Label Comments:** \*Give slow IVP over a minimum of 1 minute\*  
 \*\* For use in PACU \*\*

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 14:30	Chao, Fu, MD	Desktop	Order Is Entered and Signed	Y
2 10/26/22 14:30		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 10/26/22 14:30		QUV-CH03	Order Type edited:	Y
			<b>New:</b> MED	
			<b>Old:</b>	
4 10/26/22 14:30		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 10/26/22 14:33	Yang, David, PharmD	QUV-CH03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
6 10/26/22 15:26	Karki Thapa, Samikshya	Desktop	Order acknowledged	NA
7 10/26/22 20:30		QUV-CH03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
8 10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Medications 221026-1430288541 Completed 10/26/22 14:29 Chao, Fu, MD Chao, Fu, MD  
 Dilaudid Order Source: Provider

Stop Reason: Reached Stop Date

Medication HYDRORMORPHONE [Dilaudid] Dose 0.5 MG Per  
 Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 IV-Push Q15M PRN Pain while in PACU 4  
 Stop Date/Time: 10/26/22 20:30  
 Discontinued: 10/26/22 20:30

Label Comments: \*\* For use in PACU \*\*

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 14:30	Chao, Fu, MD	Desktop	Order is Entered and signed	Y
2 10/26/22 14:30		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/26/22 14:30		QUV-CM03	Order Type edited: New: MED Old:	Y
4 10/26/22 14:30		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/26/22 14:33	Yang, David, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
6 10/26/22 15:26	Karki Thapa, Samikshya	Desktop	Order acknowledged	NA
7 10/26/22 20:30		QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
8 10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

10/26/22 14:29

Chao, Fu, MD

Entered By

Respiratory The 221026-143028885

Completed

Chao, Fu, MD

Chao, Fu, MD

Oxygen Administration

PROTOCOL

Order Source: Provider

Stop Reason: Discharged

Saturation > Or = To

93

Respiratory Additional Instructions: Oxygen 2-8L via NC or Mask PRN to keep saturation >92%.

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 14:30	Chao, Fu, MD	Desktop	Order Is Entered and Signed	Y
2 10/26/22 14:30		QUV-BG19	Queued to destination: New: Q11310 #3459413 Old:	NA
3 10/26/22 14:30		QUV-BG19	Status changed: New: In Process Old: Verified	NA
4 10/26/22 15:26	Karki Thapa, Samikshya	Desktop	Order acknowledged	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUKI01	Manage Transfer - Order is set to continue upon transfer	NA
6 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUKI01	Manage Transfer - Transfer Provider added:	NA
7 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUKI01	Maglunog, Alexander, MD Manage Transfer - Order is continued upon transfer	Y
8 11/09/22 22:57	Apa, Mary Jurem	QPACUKI01	Process Transfer	NA
9 11/10/22 03:11	Apa, Mary Jurem	Desktop	Order acknowledged	NA
10 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed: New: Completed Old: In Process	NA

Routine Care 221026-143028838

Completed

10/26/22 14:29

Chao, Fu, MD

Communication order

ONCE

Order Source: Provider

Stop Reason: Discharged

Intervention Text DC FROM PACU AND DC ANESTHESIOLOGIST PACU ORDERS WHEN CRITERIA MET

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 14:30	Chao, Fu, MD	Desktop	Order Is Entered and Signed	Y

Continued on Next Page



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/26/22 14:30		QUV-BGI9	Status changed: New: In Process Old: Verified	NA
3	10/26/22 15:26		Desktop	Order acknowledged	NA
4	11/09/22 12:08		QPAUCUK101	Manage Transfer - Order is set to continue upon transfer	NA
5	11/09/22 12:08		QPAUCUK101	Manage Transfer - Transfer Provider added:	NA
6	11/09/22 22:57		QPAUCUK101	Maglunog, Alexander, MD Manage Transfer - Order is continued upon transfer	Y
7	11/09/22 22:57		QPAUCUK101	Process Transfer	NA
8	11/10/22 03:09		Desktop	Order acknowledged	NA
9	12/02/22 10:08		Desktop	Status changed: New: Completed Old: In Process	NA

Medications 221026-143028854 Completed 10/26/22 14:29 | Chao, Fu, MD  
**Acetaminophen** Order Source: Provider  
 Stop Reason: Reached Stop Date

**Medication** Acetaminophen (10 Mg/ML) **Dose** 1,000 MG in 100 ML **Per**  
 [Ofirmev]

**QS Drug** **QS Volume** **Total Volume**  
 100 ML

**Route** IVEB **Frequency** NOW **Sched** ONE **PRN Reason** **Days Hours Total Vol to Infuse** **Clinical Indication**  
**Rate:** 400 MLS/HR  
**Stop Date/Time:** 10/26/22 14:43  
**Discontinued:** 10/26/22 14:43

**Label Comments:** Use 1st for pain level >4 x 1 dose  
 \*\* For use in PACU \*\*

Date & Time	User	Device	Event	Acknowledged
10/26/22 14:30	Chao, Fu, MD	Desktop	Order is Entered and Signed	Y

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Patient Order Summary

Page: 79 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/26/22 14:30			QUV-BG19	NA
				Status changed:	
				New: Transmitted	
				Old: Verified	
3	10/26/22 14:30			QUV-CH03	NA
				Status changed:	
				New: Logged	
				Old: Transmitted	
4	10/26/22 14:33			Yang, David, PharmD	NA
				Status changed:	
				New: Pha Verified	
				Old: Logged	
5	10/26/22 14:43			QUV-CH03	Y
				Status changed:	
				New: Completed	
				Old: Pha Verified	
6	10/26/22 15:26			Karki Thapa, Samikshya	NA
				Desktop	
				Order acknowledged	
Medications	221026-143028869	Completed	10/26/22 14:29	Chao, Fu, MD	Chao, Fu, MD
Morphine					Order source: Provider
<b>Stop Reason:</b> Reached Stop Date					
<b>Medication</b>		<b>Dose</b>		<b>Per</b>	
Morphine		2 MG			
<b>Route</b>	<b>Frequency</b>	<b>Sched</b>	<b>PRN Reason</b>	<b>Days</b>	<b>Hours</b>
IV-Push	Q15M	PRN	Pain while in PACU	5	
<b>Stop Date/Time:</b> 10/26/22 20:30					
<b>Discontinued:</b> 10/26/22 20:30					
<b>Label Comments:</b> ** For use in PACU **					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/26/22 14:30	Chao, Fu, MD	Desktop	Order is Entered and Signed	Y
2	10/26/22 14:30		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
3	10/26/22 14:30		QUV-CH03	Order Type edited:	Y
				New: MED	
				Old: Status changed:	
4	10/26/22 14:30		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	
	5	10/26/22 14:33	Yang, David, PharmD	QUV-CM03	New: Logged Old: Transmitted Status changed: New: Pha Verified Old: Logged	NA
	6	10/26/22 15:26	Karki Thapa, Samikshya	Desktop	Order acknowledged Status changed: New: Completed Old: Pha Verified	Y
	7	10/26/22 20:30		QUV-CM03	Order acknowledged	NA
	8	10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA

Medications 1 221026-1430288691 Completed 10/26/22 14:29

Chao, Fu, MD

Order Source: Provider

Stop Reason: Reached Stop Date

Zofran

Medication Ondansetron [Zofran]

Dose 4 MG

Par

Days Hours Total Doses 1

Clinical Indication

Route Frequency Sched PRN Reason  
 IV-Push ONCE PRN Nausea/Vomiting while in PACU  
 Stop Date/Time: 10/26/22 20:30  
 Discontinued: 10/26/22 20:30

Label Comments: \*\* For use in PACU \*\*

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 14:30	Chao, Fu, MD	Desktop	Order is Entered and Signed	Y
2 10/26/22 14:30		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/26/22 14:30		QUV-CM03	Order Type edited: New: MED Old:	Y
4 10/26/22 14:30		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/26/22 14:33	Yang, David, PharmD	QUV-CM03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Medications 221026-174346546 Completed 10/26/22 17:42

Ye, Donald

Palma, Ricardo, RN

Thrombinar

Order Source: Sur Orders (Sig Required)

Stop Reason: Reached Stop Date

Medication

Thrombin (Bovine) [Thrombinar]

Dose 5,000 UNIT

Per

Route Frequency

Sched PRN Reason

Days Hours Total Doses

Clinical Indication

IRRIGATION ONCE

ONE

Stop Date/Time: 10/26/22 17:43

Discontinued: 10/26/22 17:43

Label Comments: given intraop by surgeon

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 17:43	Palma, Ricardo, RN	Q11629	Signature is Necessary	Y
1 10/26/22 17:43	Palma, Ricardo, RN	Q11629	Order is Entered	Y
2 10/26/22 17:43	Palma, Ricardo, RN	Q11629	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/26/22 17:43	Palma, Ricardo, RN	Q11629	Order Type edited:	Y
			New: MED	
			Old:	
4 10/26/22 17:43	Palma, Ricardo, RN	Q11629	Status changed:	NA
			New: Logged	
			Old: Transmitted	
			Order acknowledged	
5 10/26/22 17:44	Palma, Ricardo, RN	Q11629	Label Comments edited:	NA
6 10/26/22 17:56	Enverga, Ivy Kristina, PharmD	QUV-CH03	Status changed:	Y
			New: given intraop by surgeon	
			Old: given intraop by surgeon	
7 10/26/22 17:56	Enverga, Ivy Kristina, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
8 10/26/22 17:57		QUV-CH03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
10	10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA
Pathology	221026-193330806	Completed	10/26/22 19:33	Ye, Donald	Rivera, Heidi
Surgical					
Stop Reason:	Completed by Lis				
Department	Q8				
Surgeon:	Ye, Donald				
Pre-op diagnosis	Hydrocephalus				
Procedure:	Endoscopic Intraventricular Resection of Colloid Cyst				
Procedure Location	Surgery				
Surgical Specimen?	Yes				
Surgical Specimen (list all collected):	1) Third ventricular tumor				
Breast Tissue?	No				

Order Source: Sur Orders (Sig Required)

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 19:33	Rivera, Heidi	Q11629	Signature is Necessary	Y
1 10/26/22 19:33	Rivera, Heidi	Q11629	Order is Entered	Y
2 10/26/22 19:33		QUV-BG19	Queued to destination: New: QSURGP1 #3460290 Old:	NA
3 10/26/22 19:33		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 10/26/22 19:33		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA
5 10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
6 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA
7 10/27/22 12:41		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

8	10/31/22 14:04			QUV-CM03	NA
---	----------------	--	--	----------	----

New: In Process  
 Old: Logged  
 Status changed:  
 New: Completed  
 Old: In Process

CT Scan 221026-195135904 Resulted 10/26/22 19:51

Ye, Donald

Rivera, Heidi

Order Source: Sur Orders (Sig Required)

CT head/brain wo con

Mode Of Transportation Hospital Bed  
 Physician Instructions stat after surgery  
 Reason For Exam POST OP

Mode of Transport Hospital Bed

	Date & Time	User	Device	Event	Acknowledged
1	10/26/22 19:51	Rivera, Heidi	Q11629	Signature is Necessary	Y
1	10/26/22 19:51	Rivera, Heidi	Q11629	Order is Entered	Y
2	10/26/22 19:51		QUV-BG19	Status changed: New: Transmitted	NA
3	10/26/22 19:51		QUV-CM03	Old: Verified Query Mode Of Transportation edited: New: Hospital Bed Old:	NA
4	10/26/22 19:51		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5	10/26/22 20:12	Ceballos, Martin R	QUV-CM03	Status changed: New: Taken Old: Logged	NA
6	10/26/22 20:38		QUV-CM03	Status changed: New: Resulted Old: Taken	NA
7	10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
8	10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA









Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Titration Increment	5 mcg/kg/min				
Time Frame for Dose Change	Every 5 mins				
Maximum Dose	80 mcg/kg/min				
Frequency of Monitoring	q15min till adequate sedation then q2hr				
Meaning Criteria	5 mcg/kg/min every 5 mins				

Label Comments: RASS 0 -> -2

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
2 10/26/22 20:53		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/26/22 20:53		QUV-CM03	Duration edited:	Y
			New: 30 HR 19 MIN	
			Old: 0 SEC	
4 10/26/22 20:53		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
6 10/26/22 21:13	Arnold, Clinton Landon	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
7 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA
8 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
9 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added: Maglumog, Alexander, MD	NA
10 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	Y
11 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
12 11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged	NA
13 11/21/22 12:38	Lau, Tsang, MD	QDOUNK104	Stop Request	Y
14 11/21/22 12:38	Lau, Tsang, MD	QUV-CM03	Status changed:	Y
			New: Completed	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
15	11/21/22 12:40	Vandemark, Joann M	Desktop	Ye, Donald	Old: Pha Verified Order acknowledged
Blood Gas	221026-205314817	Completed	10/26/22 21:15	Ye, Donald	Dominguez, Xavier Ramiro
RCD ABG w/ All				Routine	Order Source: Telephone Orders- Read Back
<b>Stop Reason:</b> Completed by Lis					

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
2 10/26/22 20:53		QUV-BG19	Queued to destination:	NA
			<b>New:</b> Q11310 #3460429	
			<b>Old:</b>	
3 10/26/22 20:53		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 10/26/22 20:53		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
6 10/26/22 21:19		QUV-CM03	Start Time edited:	NA
			<b>New:</b> 21:15	
			<b>Old:</b> 21:20	
7 10/26/22 21:19		QUV-CM03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
8 10/26/22 21:21		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	
9 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is signed by Ye, Donald	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
X-Ray	221026-205314801	Resulted	10/26/22 21:20	Ye, Donald	Dominguez, Xavier Ramiro
<b>CKR1VP [XR chest IV portable]</b>					
				Routine	Order Source: Telephone Orders- Read Back

Mode Of Transportation Hospital Bed

Reason for Exam

Other (Please comment)

Mode of Transport

Hospital Bed

Additional Notes/Special Instructions POST SX INTUBATION

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
2 10/26/22 20:53		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>OLD:</b> Verified	
3 10/26/22 20:53		QUV-CH03	Query Mode Of Transportation edited:	NA
			<b>New:</b> Hospital Bed	
			<b>OLD:</b>	
4 10/26/22 20:53		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>OLD:</b> Transmitted	
5 10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
6 10/26/22 21:30	Tagawa, Stephen	QUV-CH03	Status changed:	NA
			<b>New:</b> Taken	
			<b>OLD:</b> Logged	
7 10/26/22 21:34		QUV-CH03	Status changed:	NA
			<b>New:</b> Resulted	
			<b>OLD:</b> Taken	
8 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA

Routine Care 221026-205314785 Completed 10/27/22 08:00 Ye, Donald Dominguez, Xavier Ramiro

EVD [External Ventricular Drain / ICP]

Q1HR

Order Source: Telephone Orders- Read Back

Stop Reason: Completed by Pcs

Desired Height Level (cmH2O) 0

Continuous Drainage Or Clamped Continuous

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
CSF & ICP Monitor Frequency	Every 1 hour				
Head of Bed Elevation	30 Degrees				
Intervention Text	LEVEL NO TRAGUS				
Date & Time	User	Device	Event	Acknowledged	
10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y	
10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y	
10/26/22 20:53		QUV-BG19	Status changed:	NA	
			New: In Process		
			Old: Verified		
10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA	
10/26/22 21:25	Dominguez, Xavier Ramiro	Desktop	Freq added:	Y	
			New: QSHIFP		
			Old:		
10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA	
10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA	
10/27/22 09:51	Hernandez, Lena	Desktop	Freq added:	Y	
			New: Q1H		
			Old:		
10/27/22 09:55	Hernandez, Lena	Desktop	Start Date edited:	Y	
			New: Thu Oct 27		
			Old: Wed Oct 26		
10/27/22 09:55	Hernandez, Lena	Desktop	start Time edited:	Y	
			New: 08:00		
			Old: 20:49		
10/27/22 09:55	Hernandez, Lena	Desktop	Freq added:	Y	
			New: Q1HR		
			Old:		
10/27/22 09:55	Hernandez, Lena	Desktop	Freq removed:	Y	
			New: NOW		
			Old:		
10/27/22 09:55	Hernandez, Lena	Desktop	Freq removed:	Y	
			New: QSHIFP		
			Old:		
10/27/22 10:00	Hernandez, Lena	Desktop	Freq removed:	Y	
			New: Q1H		

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					Old:
10	10/27/22 10:32	Hernandez, Lena	Desktop		Order acknowledged
11	10/27/22 14:40	Ye, Donald	QUV-BG19		Order is Signed by Ye, Donald
12	11/05/22 12:07	Malaca, Jessalite	Desktop		Status changed:
					New: Completed
					Old: In Process

CT Scan 221026-205314801 Resulted 10/27/22 06:00 Ye, Donald Dominguez, Xavier Ramiro  
 CT head/brain wo con Urgent Order Source: Telephone Orders- Read Back

Mode Of Transportation Hospital Bed  
 Reason For Exam POST SURGERY

Mode of Transport	Date & Time	User	Device	Event	Acknowledged
	10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y
	10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
	10/26/22 20:53		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
	10/26/22 20:53		QUV-CM03	Query Mode Of Transportation edited:	NA
				New: Hospital Bed	
				Old:	
	10/26/22 20:53		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
	10/26/22 20:54	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
	10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA
	10/27/22 06:14	Leal, Richard D	QUV-CM03	Status changed:	NA
				New: Taken	
				Old: Logged	
	10/27/22 11:22		QUV-CM03	Status changed:	NA
				New: Resulted	
				Old: Taken	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Miscellaneous	O 221026-205354335	Verified	10/26/22 20:53	Batou, Augen, DO	Dominguez, Xavier Ramiro
Pharmacy Missing Med Slip				SWA	Order Source: Nursing Orders

Requesting Person: DOMIXAV  
 Extension: 29081  
 Please send the following medication(s): CARDENE

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	No Signature Is Necessary	Y
1 10/26/22 20:53	Dominguez, Xavier Ramiro	Desktop	Order Is Entered	Y
2 10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
Bedside Testing 221026-210557707 Completed 10/26/22 20:59				
Glucose (Bedside)   Routine				
Batou, Augen, DO				
Order Source: Dominguez, Xavier Ramiro				
Stop Reason: Completed by LIS				

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 21:05	Dominguez, Xavier Ramiro	QUV-CH03	No Signature Is Necessary	NA
1 10/26/22 21:05	Dominguez, Xavier Ramiro	QUV-CH03	Order Is Entered	NA
2 10/26/22 21:06		QUV-CH03	Status changed:	NA
New: Completed				
Old: In Process				

Routine Care 221026-212821707 Completed 10/26/22 21:28 Ye, Donald Mak, Helen  
 Clinical Parameters: . ONGOING Order Source: Verbal Orders- Read Back  
 Stop Reason: Discharged

Intervention Text KEEP SBP <140

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 21:28	Mak, Helen	Desktop	Signature Is Necessary	Y
1 10/26/22 21:28	Mak, Helen	Desktop	Order Is Entered	Y
2 10/26/22 21:28		QUV-BG19	Status changed:	NA
New: In Process				
Old: Verified				
3 10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/26/22 23:09	Ye, Donald		QUV-BG19	Order is Signed by Ye, Donald
5	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Order is set to continue upon transfer
6	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD
7	11/09/22 22:57	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Order is continued upon transfer
8	11/09/22 22:57	Apa, Mary Jurem		QPACUK101	Process Transfer
9	11/10/22 03:09	Apa, Mary Jurem		Desktop	Order acknowledged
10	12/02/22 10:08	Ramos, Jessica		Desktop	Status changed: New: Completed Old: In Process
Consultations 221026-215115227 Verified 10/26/22 21:49 Ye, Donald Dominguez, Xavier Ramiro Consult to Pulmonology Routine					
<b>Consulting Provider</b> Abidali, Moustapha, DO					
<b>Reason for consultation</b> ICU CARE MANAGEMENT					
Date & Time	User	Device	Event	Acknowledged	
1 10/26/22 21:51	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y	
1 10/26/22 21:51	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y	
2 10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA	
3 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA	
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA	
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA	
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y	
7 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA	
8 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA	

Order Source: Telephone Orders - Read Back



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Routine Care	221026-215318131	Completed	11/17/22 07:00	Ye, Donald	Mak, Helen
Foley [Urinary Catheter, Place & Manage]					
				Q1MX1, QSHIFW	Order Source: Verbal Orders- Read Back

Stop Reason: Discharged

Reason for Indwelling Urinary Catheter Acute Urinary Retention

Catheter Type/Location Urethral Catheter  
Remove/Replace Outside Hosp Urine Cath & UA Per Protocol Yes

Date & Time	User	Device	Event	Acknowledged
10/26/22 21:53	Mak, Helen	Desktop	Signature is Necessary	Y
10/26/22 21:53	Mak, Helen	Desktop	Order is Entered	Y
10/26/22 21:53	Mak, Helen	Desktop	Reflex Set: Urinary Cath with UA & UC generated	Y
10/26/22 21:53		QUV-BG19	Status changed:	NA
<b>New:</b> In Process				
<b>Old:</b> Verified				
10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Process Transfer	NA
11/10/22 03:11	Apa, Mary Jurem	Desktop	Order acknowledged	NA
11/17/22 11:38	Vandemark, Joann M	Desktop	Start Date edited:	Y
<b>New:</b> Thu Nov 17				
<b>Old:</b> Wed Oct 26				
11/17/22 11:38	Vandemark, Joann M	Desktop	Start Time edited:	Y
<b>New:</b> 07:00				
<b>Old:</b> 21:51				
11/17/22 11:38	Vandemark, Joann M	Desktop	Freq added:	Y
<b>New:</b> Q1MX1, QSHIFW				

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
6	11/02/22 08:33	Lau, Tsang, MD			
Restraint	221026-215318131	Completed	10/26/22 21:52	Ye, Donald	Mak, Helen
Restraint Non-Violent				Routine	
Stop Reason:					Order Source: Verbal Orders- Read Back

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 21:53	Mak, Helen	Desktop	Signature is Necessary	Y
1 10/26/22 21:53	Mak, Helen	Desktop	Order is Entered	Y
1 10/26/22 21:53	Mak, Helen	Desktop	Reflex Set: Restraint Non-Violent generated	Y
2 10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
3 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA
4 10/27/22 16:30	Tong, Malina I	Desktop	New Order Created. Order is Completed via Auto Complete.	NA
5 10/27/22 16:30	Tong, Malina I	Desktop	Copied to Restraint Non-Violent 221027-163000770	Y
6 10/27/22 16:30	Tong, Malina I	Desktop	Status changed: New: Completed	NA
7 10/27/22 16:47	Hernandez, Lena	Desktop	Old: Verified Order acknowledged	NA

Restraint Type    Wrist, Left  
                           Wrist, Right

Restraint Mental Status    Confusion  
                                   Forgetful

: Yes  
 : Yes  
 : No



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category      Order      Status      Start      Ord Provider      Entered By  
 Miscellaneous O 221026-220259314      Transmitted      10/26/22 22:02      Batou, Augen, DO      Dominguez, Xavier Ramiro  
 Pharmacy Missing Med Slip      NOW      Order Source: Nursing Orders

Requesting Person      DOMIXAV  
 Extension      29081  
 Please send the following medication(s)      CARDENE

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:02	Dominguez, Xavier Ramiro	Desktop	No Signature is Necessary	Y
1 10/26/22 22:02	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
1 10/26/22 22:02	Dominguez, Xavier Ramiro	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/26/22 22:03		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3460554	
			Old:	
3 10/26/22 22:03		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA

Medications      221026-220538038      Completed      10/26/22 22:15      Onyekwuluje, Anne N, MD      Dominguez, Xavier Ramiro  
 Route Change - PO to NG-Tube - Per Pharmacy      Order Source: Nursing Orders  
 Stop Reason: DISC

Medication      PO to NG-Tube - Rx Consult      Dose      1 EACH      Per  
 [Route Change - PO to NG-Tube - Per Pharmacy]

Route      Frequency      Sched      PRN Reason      Days Hours      Total Doses      Clinical Indication  
 MISCELLANEOUS PROTOCOL      SCH

Stop Date/Time:      Discontinued: 11/21/22 12:37

Date & Time      User      Device      Event      Acknowledged  
 1 10/26/22 22:05      Dominguez, Xavier Ramiro      Desktop      No Signature is Necessary      Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/26/22 22:05	Dominguez, Xavier Ramiro		Desktop	Order Is Entered
2	10/26/22 22:05			QUV-BG19	Status changed: New: Transmitted
3	10/26/22 22:05			QUV-CM03	Old: Verified Order Type edited: New: ZMISC
4	10/26/22 22:05			QUV-CM03	Old: Status changed: New: Logged
5	10/26/22 22:14	Arnold, Clinton Landon		QUV-CM03	Old: Transmitted Status changed: New: Pha Verified
6	10/26/22 22:44	Dominguez, Xavier Ramiro		Desktop	Old: Logged Order acknowledged
7	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Order is set to continue upon transfer
8	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Transfer Provider added:
9	11/09/22 22:57	Maglunog, Alexander A, MD		QPACUK101	Manage Transfer - Order is continued upon transfer
10	11/09/22 22:57	Apa, Mary Jurem		QPACUK101	Process Transfer
11	11/10/22 03:09	Apa, Mary Jurem		Desktop	Order acknowledged
12	11/21/22 12:38	Lau, Tsang, MD		QDOK104	Stop Request
13	11/21/22 12:38	Lau, Tsang, MD		QUV-CM03	Status changed: New: Completed
14	11/21/22 12:40	Vandemark, Joann M		Desktop	Old: Pha Verified Order acknowledged

Medications 221026-220533669 Completed 10/26/22 22:15

Ye, Donald

Mak, Helen

Route Change - PO to NG-Tube - Per Pharmacy

Order Source: Verbal Orders- Read Back

Stop Reason: DUPLICATE

Medication PO to NG-Tube - Rx Consult  
Dose 1 EACH  
Per Pharmacy [Route Change - PO to NG-Tube - Per Pharmacy]

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	Clinical Indication
Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	
MISCELLANEOUS PROTOCOL		SCH				
Stop Date/Time:						
Discontinued: 10/26/22 22:15						

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:05	Mak, Helen	Desktop	Signature is Necessary	Y
1 10/26/22 22:05	Mak, Helen	Desktop	Order is Entered	Y
2 10/26/22 22:05		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/26/22 22:05		QUV-CH03	Order Type edited:	Y
			New: ZMISC	
			Old:	
4 10/26/22 22:05		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/26/22 22:13		QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
6 10/26/22 22:13	Arnold, Clinton Landon	QUV-CH03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	
7 10/26/22 22:44	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
8 10/26/22 23:09	Ye, Donald	QUV-BG19	Order is Signed by Ye, Donald	NA

Medications 221026-220958337 Completed 10/26/22 22:09 Ye, Donald Arnold, Clinton Landon

Order Source: Telephone Orders - Read Back

Medication	Dose	Per	QS Drug	QS Volume	Fixed Total Volume
Nicardipine [Cardene]	50 MG				
0.9% Sodium Chloride 500 ML	Vol Per Bag: 480 ML				
[Sodium Chloride 0.9% 500 ML]					
QS Drug			QS Volume	500 ML	Fixed Total Volume

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	Clinical Indication
Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Clinical Indication
IV	TITRATE	PRN	Hypertension			
Rate: 5 MG/HR						
Stop Date/Time:						
Discontinued: 11/21/22 12:37						
Goal of Therapy (Parameters) SBP < 140						
Initial Dose 5 mg/hr						
Titration Increment 2.5 mg/hr						
Time Frame for Dose Change Every 15 mins						
Maximum Dose 15 mg/hr						
Frequency of Monitoring VS every 15 mins						
Meaning Criteria 2.5 mg/hr every 15 mins						
Protocol Changes SBP <140						
Label Comments: Conc. = 0.1 mg/ml						
Protect from light						
Date & Time	User	Device	Event	Acknowledged		
1 10/26/22 22:09	Arnold,Clinton Landon	QUV-CH03	No Signature is Necessary	Y		
1 10/26/22 22:09	Arnold,Clinton Landon	QUV-CH03	Order is Entered in Pharmacy	Y		
2 10/26/22 22:44	Dominguez,Xavier Ramiro	Desktop	Order acknowledged	NA		
3 10/26/22 23:09	Ye,Donald	QUV-BG19	Order is Signed by Ye,Donald	NA		
4 11/09/22 12:08	Maglunog,Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA		
5 11/09/22 12:08	Maglunog,Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA		
6 11/09/22 22:57	Maglunog,Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y		
7 11/09/22 22:57	Apa,Mary Juren	QPACUK101	Process Transfer	NA		
8 11/10/22 03:08	Apa,Mary Juren	Desktop	Order acknowledged	NA		
9 11/21/22 12:38	Lau,Tsang, MD	QDOUK104	Stop Request	Y		
10 11/21/22 12:38	Lau,Tsang, MD	QUV-CH03	Status changed:	Y		

New: Completed

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	
11	11/21/22 12:40	Vandemark, Joann M	10/26/22 20:22	Chao, Fu, MD	Pha Verified	
Medications	221026-222559816	Once	10/26/22 20:22	Chao, Fu, MD	Order acknowledged	
Sublimaze					Wright, Jennifer M, PhaTech	
Medication		Dose				
Fentanyl [Sublimaze]		200 MCG				
Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
.ROUTE	.STK-MED	ONE				
Stop Date/Time:	10/26/22 20:23					
Discontinued:	10/26/22 20:23					
Date & Time	User	Device	Event	Acknowledged		
1 10/26/22 22:25	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA		
1 10/26/22 22:25	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA		
2 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA		
			New: Completed			
			Old: Pha Verified			
Medications	221026-222601082	Once	10/26/22 20:22	Chao, Fu, MD	Wright, Jennifer M, PhaTech	
Quelicin					Order Source:	
Medication		Dose				
Succinylcholine [Quelicin]		200 MG				
Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
.ROUTE	.STK-MED	ONE				
Stop Date/Time:	10/26/22 20:23					
Discontinued:	10/26/22 20:23					
Date & Time	User	Device	Event	Acknowledged		
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA		
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA		
2 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA		

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start

Ord Provider

Entered By

New: Completed

Old: Pha Verified

Medications 221026-222604660 Once 10/26/22 20:22

Chao, Fu, MD

Wright, Jennifer M, PhaTech

Trandate

Order Source:

Medication  
labetalol [Trandate]

Dose  
100 MG

Per

Route Frequency Sched PRN Reason

.ROUTE .STK-MED ONE

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Days Hours Total Doses

Clinical Indication

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA
2 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA

New: Completed

Old: Pha Verified

Medications 221026-222605473 Once 10/26/22 20:22

Chao, Fu, MD

Wright, Jennifer M, PhaTech

Robinnul

Order Source:

Medication  
Glycopyrrolate [Robinnul]

Dose  
0.4 MG

Per

Route Frequency Sched PRN Reason

.ROUTE .STK-MED ONE

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Days Hours Total Doses

Clinical Indication

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA
2 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start

Ord Provider

Entered By

New: Completed

Old: Pha Verified

Medications 221026-222559098 Once 10/26/22 20:22

Chao, Fu, MD

Wright, Jennifer M, PhaTech

Diprivan

Order Source:

Medication propofol [Diprivan]

Dose 200 MG

Per

Route Frequency Sched PRN Reason

.ROUTE .STK-MED ONE

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Days Hours Total Doses

Clinical Indication

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:25	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:25	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA
2 10/26/22 22:25	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA

New: Completed

Old: Pha Verified

Medications 221026-222601754 Once 10/26/22 20:22

Chao, Fu, MD

Wright, Jennifer M, PhaTech

Zemuron

Order Source:

Medication Rocuronium Bromide [Zemuron]

Dose 50 MG

Per

Route Frequency Sched PRN Reason

.ROUTE .STK-MED ONE

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Days Hours Total Doses

Clinical Indication

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA
2 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA

Status changed:

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start

Ord Provider

Entered By

New: Completed  
Old: Pha Verified

Medications 221026-222602473 Once 10/26/22 20:22

Chao, Fu, MD

Wright, Jennifer M, PhaTech

Ancef

Order Source:

Medication  
cefazolin [Ancef]

Dose  
2 GM

Per

Days Hours Total Doses

Clinical Indication

Route Frequency  
.ROUTE .STR-MED

Sched PRN Reason  
ONE

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA
2 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Status changed:	NA

New: Completed

Old: Pha Verified

Medications 221026-222603191 Once 10/26/22 20:22

Chao, Fu, MD

Wright, Jennifer M, PhaTech

Decadron

Order Source:

Medication  
Dexamethasone Sod Phos  
[Decadron]

Dose  
10 MG

Per

Days Hours Total Doses

Clinical Indication

Route Frequency  
.ROUTE .STR-MED

Sched PRN Reason  
ONE

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhaTech	QUV-CH03	Order is Entered in Pharmacy	NA

Continued on Next Page



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	Chao, Fu, MD	Wright, Jennifer M, PhATech

Status changed:

New: Completed

Old: Pha Verified

Medications	221026-222603926	Once	10/26/22 20:22	Chao, Fu, MD	Wright, Jennifer M, PhATech
Zofran					

Order Source:

Medication Ondansetron [Zofran]

Dose 4 MG

Per

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
.ROUTE	.SPK-MED	ONE				

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	Order is Entered in Pharmacy	NA
2 10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: Pha Verified	

Old: Pha Verified

Medications	221026-222603923	Once	10/26/22 20:22	Chao, Fu, MD	Wright, Jennifer M, PhATech
Bloxxiverz					

Order Source:

Medication Neostigmine [Bloxxiverz]

Dose 5 MG

Per

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
.ROUTE	.SPK-MED	ONE				

Stop Date/Time: 10/26/22 20:23

Discontinued: 10/26/22 20:23

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	No Signature is Necessary	NA
1 10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	Order is Entered in Pharmacy	NA

Continued on Next Page



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/26/22 22:26	Wright, Jennifer M, PhATech	QUV-CH03	Status changed: New: Completed Old: Pha Verified	NA
<b>Bedside Testing 221026-233032508 Completed 10/26/22 23:20</b> <b>Order Source:</b> Dominguez, Xavier Ramiro <b>Glucose (Bedside)</b> <b>Order Source:</b> Dominguez, Xavier Ramiro <b>Stop Reason:</b> Completed by Lis <b>Route:</b> Routine					

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 23:30	Dominguez, Xavier Ramiro	QUV-CH03	No Signature Is Necessary	NA
1 10/26/22 23:30	Dominguez, Xavier Ramiro	QUV-CH03	Order Is Entered	NA
2 10/26/22 23:30		QUV-CH03	Status changed: New: Completed Old: In Process	NA

Medications 221026-234055246 Completed 10/26/22 23:37 **Order Source:** Telephone Orders- Read Back  
**Trandate** **Stop Reason:** Reached Renew Stop Date **Per:** Yes, Donald

Medication	Dose	Par	Days	Hours	Total Doses	Clinical Indication
labetalol [Trandate]	10 MG					
<b>Route</b>	<b>Frequency</b>	<b>Sched</b>	<b>PRN Reason</b>	<b>Days</b>	<b>Hours</b>	<b>Total Doses</b>
IV-Push	Q4H	PRN	Hypertension			
<b>Stop Date/Time:</b>						
<b>Discontinued:</b> 11/26/22 23:36						
<b>Label Comments:</b> SBP >140						

Date & Time	User	Device	Event	Acknowledged
1 10/26/22 23:40	Dominguez, Xavier Ramiro	Desktop	Signature Is Necessary	Y
1 10/26/22 23:40	Dominguez, Xavier Ramiro	Desktop	Order Is Entered	Y
2 10/26/22 23:40		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/26/22 23:41		QUV-CH03	Order Type edited: New: MEDSYR	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>Old:</b>
4	10/26/22 23:41			QUV-CM03	Status changed: <b>New:</b> Logged
					<b>Old:</b> Transmitted
5	10/27/22 00:20			QUV-CM03	Label Comments edited: <b>New:</b> SBP >140 <b>Old:</b> SBP >140
6	10/27/22 00:20			QUV-CM03	Status changed: <b>New:</b> Pha Verified <b>Old:</b> Logged
7	10/27/22 00:57			Desktop	Order acknowledged
8	10/27/22 01:26			Desktop	Order acknowledged
9	10/27/22 09:09			QUV-BG19	Order is Signed by Ye, Donald
10	11/09/22 12:08			QPACUK101	Manage Transfer - Order is set to continue upon transfer
11	11/09/22 12:08			QPACUK101	Manage Transfer - Transfer Provider added:
12	11/09/22 22:57			QPACUK101	Manage Transfer - Order is continued upon transfer
13	11/09/22 22:57			QPACUK101	Process Transfer
14	11/10/22 03:08			Desktop	Order acknowledged
15	11/26/22 23:36			QUV-CM03	Status changed: <b>New:</b> Completed <b>Old:</b> Pha Verified
16	11/27/22 08:41			Phone	Order acknowledged
<b>Manual Differential</b>					
Hematology 221021-054100472 Completed 10/27/22 04:16 Batou, Augen, DO Batou, Augen, DO					
<b>Stop Reason:</b> Completed by Lts <b>Order Source:</b> Provider					
					<b>Event</b>
1	10/27/22 05:41			QUV-CM03	Order is Entered and Signed
2	10/27/22 07:03			QUV-CM03	Status changed: <b>New:</b> Completed <b>Old:</b> In Process
					<b>Acknowledged</b>
					NA
					NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Medications 221027-021331502 Completed 10/27/22 05:00 Onyekwulije, Anne N, MD Dominguez, Xavier Ramiro  
 Nimotop  
 Stop Reason: Order edited - Discontinuing original order Order Source: Telephone Orders - Read Back

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
nimodipine [Nimotop]	60 MG		NG-TUBE	Q4HR	SCH				
Stop Date/Time: 10/27/22 05:00 Discontinued: 10/27/22 05:00									

Dose Instruction: FOR OGT  
 FIRST DOSE NOW  
 \*Refrigerate\*  
 Medication MUST be given 30 mins before or 30 mins after scheduled dose

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 02:13	Dominguez, Xavier Ramiro	Desktop	Signature is Necessary	Y
1 10/27/22 02:13	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
2 10/27/22 02:13	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
3 10/27/22 02:13		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
4 10/27/22 02:13		QUV-CM03	Order Type edited:	Y
			New: OS	
			OLD:	
5 10/27/22 02:13		QUV-CM03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
6 10/27/22 02:14	Bearden, Robert, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			OLD: Logged	
7 10/27/22 02:18	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
8 10/27/22 02:43	MaK, Helen	Desktop	Stop Request	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	10/27/22 02:43	Mak, Helen	Desktop	Copied to Nimotop 221027-024337432	Y
10	10/27/22 02:43	Mak, Helen	QUV-CH03	Status changed: New: Completed	Y
11	10/27/22 02:45	Dominguez, Xavier Ramiro	Desktop	OLD: Pha Verified Order acknowledged	NA
12	10/27/22 04:21	Onyekwulufe, Anne N, MD	QUV-BG19	Order is signed by Onyekwulufe, Anne N, MD	NA

Miscellaneous O 221027-021436786 Transmitted 10/27/22 02:14 **Order Source:** Nursing Orders

Pharmacy Missing Med Slip

**Requesting Person** DOMIXAV  
**Extension** 29081  
**Please send the following medication(s)** CARDENE

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 02:14	Dominguez, Xavier Ramiro	Desktop	No Signature is Necessary	Y
1 10/27/22 02:14	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
1 10/27/22 02:14	Dominguez, Xavier Ramiro	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 02:14		QUV-BG19	Queued to destination: New: QPHARMP2 #3460856	NA
3 10/27/22 02:14		QUV-BG19	OLD: Status changed: New: Transmitted	NA
4 10/27/22 02:18	Dominguez, Xavier Ramiro	Desktop	OLD: Verified Order acknowledged	NA

Miscellaneous O 221027-024422797 Transmitted 10/27/22 02:43 **Order Source:** Nursing Orders

Pharmacy Missing Med Slip

**Requesting Person** MAKHEL  
**Extension** 29080  
**Please send the following medication(s)** NIMOTOP FOR 0300

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 02:44	Mak, Helen	Desktop	No Signature is Necessary	Y
1 10/27/22 02:44	Mak, Helen	Desktop	Order is Entered	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/27/22 02:44	Mak, Helen	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2	10/27/22 02:44		QUV-BG19	Queued to destination: New: QPHARMP2 #3460875 Old:	NA
3	10/27/22 02:44		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4	10/27/22 02:45	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
Medications 221027-024337432 Completed 10/27/22 03:00 Onyekwulije, Anne N, MD Mak, Helen <b>Nimotop</b> Stop Reason: DC'd by ZPHA, RUB      Order Source: Telephone Orders - Read Back					
<b>Medication</b> nimodipine [Nimotop] <b>Dose</b> 60 MG <b>Per</b>					
<b>Route</b> NG-TUBE <b>Frequency</b> Q4HR <b>Sched</b> SCH <b>PRN Reason</b>					
<b>Stop Date/Time:</b> <b>Discontinued:</b> 10/27/22 03:37					
<b>Dose Instruction:</b> FOR OGT FIRST DOSE NOW *Refrigerate*					
<b>Label Comments:</b> Medication MUST be given 30 mins before or 30 mins after scheduled dose					
Date & Time	User	Device	Event	Acknowledged	
1 10/27/22 02:43	Mak, Helen	Desktop	Order created because of edit(s)	Y	
1 10/27/22 02:43	Mak, Helen	Desktop	Copied from Nimotop 221027-021331502	Y	
2 10/27/22 02:43	Mak, Helen	Desktop	Signature is Necessary	Y	
3 10/27/22 02:43		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA	
4 10/27/22 02:43		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	10/27/22 02:45	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
6	10/27/22 03:10	Bearden, Robert, PharmD	QUV-CH03	Status changed: New: Pha Verified	NA
7	10/27/22 03:37	Bearden, Robert, PharmD	QUV-CH03	Old: Logged Copied to Nimotop 221027-033723574 Status changed: New: Completed	Y
8	10/27/22 03:37	Bearden, Robert, PharmD	QUV-CH03	Old: Pha Verified New: Completed	Y
9	10/27/22 04:21	Onyekwulije, Anne N, MD	QUV-BG19	Order is Signed by Onyekwulije, Anne N, MD	NA
10	10/27/22 05:04	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA

Medications 221027-033723574 Completed 10/27/22 07:00

Nimotop Onyekwulije, Anne N, MD

Order Source: Telephone Orders- Read Back

Stop Reason: Order edited - Discontinuing original order

Medication nimodipine [Nimotop] Dose 60 MG Par

Route NG-TUBE Frequency Q4HR Sched SCH PRN Reason Days Hours Total Doses Clinical Indication

Stop Date/Time: Discontinued: 10/27/22 07:00

Dose Instruction: FOR OGT

FIRST DOSE NOW

Label Comments: \*Refrigerate\*

Medication MUST be given 30 mins before or 30 mins after scheduled dose

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 03:37	Bearden, Robert, PharmD	QUV-CH03	Signature is Necessary	Y
1 10/27/22 03:37	Bearden, Robert, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
2 10/27/22 04:21	Onyekwulije, Anne N, MD	QUV-BG19	Order is Signed by Onyekwulije, Anne N, MD	NA
3 10/27/22 05:04	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA
4 10/27/22 05:11	Mak, Helen	Desktop	Stop Request	Y
5 10/27/22 05:11	Mak, Helen	Desktop	Copied to Nimotop 221027-051143326	Y
6 10/27/22 05:11	Mak, Helen	QUV-CH03	Status changed:	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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7	10/27/22 05:12	Completed	10/27/22 04:58	Onyekwulije, Anne N, MD	NA
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Medications 221027-045905913 Completed 10/27/22 04:58 Desktop Onyekwulije, Anne N, MD

**Vasotec** Stop Reason: Reached Renew Stop Date **Order Source:** Provider

Medication	Dose	Per
Enalapril [Vasotec]	1.25 MG	

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
-------	-----------	-------	------------	------------	-------------	---------------------

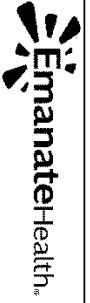
IV-Push Q6H PRN Hypertension Sbp > 150 Mmhg

Stop Date/Time:

Discontinued: 11/27/22 04:57

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 04:59	Onyekwulije, Anne N, MD	Q12511	Order Is Entered and Signed	Y
2 10/27/22 04:59		QUV-BG19	Status changed: New: Transmitted	NA
3 10/27/22 04:59		QUV-CM03	Old: Verified Order Type edited: New: MED	Y
4 10/27/22 04:59		QUV-CM03	Old: Status changed:	NA
5 10/27/22 05:01	Bearden, Robert, PharmD	QUV-CM03	New: Logged Old: Transmitted Status changed:	NA
6 10/27/22 05:04	Dominguez, Xavier Ramiro	Desktop	New: Pha Verified Old: Logged Order acknowledged	NA
7 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Order acknowledged Manage Transfer - Order is set to continue upon transfer	NA
8 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
9 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	10	11/09/22 22:57		APA, Mary Jurem	transfer
	11	11/10/22 03:09		APA, Mary Jurem	Process Transfer
	12	11/27/22 04:57		QUV-CM03	Order acknowledged
	13	11/27/22 08:41		Hernandez, Lena	Status changed:
				Phone	New: Completed
				Onyekwulije, Anne N, MD	Old: Pha Verified
				Completed	Order acknowledged
				10/27/22 04:58	
				Onyekwulije, Anne N, MD	
				Order Source: Provider	

Stop Reason: Reached Stop Date

Medication Enalapril [Vasotec] Dose 2.5 MG Per

Route IV-Push Frequency NOW Sched ONE PRN Reason Days Hours Total Doses Clinical Indication  
 Stop Date/Time: 10/27/22 04:59  
 Discontinued: 10/27/22 04:59

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 04:59	Onyekwulije, Anne N, MD	Q12511	Order Is Entered and Signed	Y
2 10/27/22 04:59		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/27/22 04:59		QUV-CM03	Order Type edited:	Y
			New: MED	
			Old:	
			Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/27/22 05:01	Bearden, Robert, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
6 10/27/22 05:01		QUV-CM03	Status changed:	Y
			New: Completed	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
7	10/27/22 05:04	Dominguez, Xavier Ramiro	Desktop	Pha Verified	MA
Medications	221027-051143326	Completed	10/27/22 07:00	Batou, Augen, DO	Order acknowledged
Nimotop					Mak, Helen
					Order Source: Scheduling Orders
Stop Reason:	Discontinue				
Medication		Dose		Per	
nimodipine [Nimotop]		60 MG			
Route	Frequency	Sched	PRN Reason	Days	Hours
NG-TUBE	Q4H	SCH			
Stop Date/Time:	Discontinued: 10/28/22 20:22				
Dose Instruction:	FOR OGT				
	FIRST DOSE NOW				
Label Comments:	*Refrigerate*				
	Medication MUST be given 30 mins before or 30 mins after scheduled dose				
Date & Time	User	Device	Event	Acknowledged	
1 10/27/22 05:10	Mak, Helen	Desktop	Order created because of edit(s)	Y	
1 10/27/22 05:10	Mak, Helen	Desktop	Copied from Nimotop 221027-033723574	Y	
2 10/27/22 05:11	Mak, Helen	Desktop	No Signature is Necessary	Y	
3 10/27/22 05:11	Mak, Helen	Desktop	First Dose:	NA	
			New: Order dose for 10/27/22 07:00, then continue schedule		
			Old:		
4 10/27/22 05:11		QUV-BG19	Status changed:	NA	
			New: Transmitted		
			Old: Verified		
5 10/27/22 05:11		QUV-CM03	Status changed:	NA	
			New: Logged		
			Old: Transmitted		
6 10/27/22 05:12	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA	
7 10/27/22 05:14	Bearden, Robert, PharmD	QUV-CM03	Status changed:	NA	
			New: Pha Verified		

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>Old:</b> Logged
8	10/28/22 20:23	Lopez, Monica	Desktop		Stop Request
9	10/28/22 20:24	Lopez, Monica	QUV-CH03		Status changed: <b>New:</b> Completed
10	10/28/22 20:24	Lopez, Monica	Desktop		<b>Old:</b> Pha Verified
11	10/29/22 13:21	Gibani, Siraaj M, MD	QUV-BG19		Order acknowledged Order is Signed by Gibani, Siraaj M, MD
					<b>Old:</b> In Process
					<b>Order Source:</b> Dominguez, Xavier Ramiro
					<b>Order Source:</b> Routine
					<b>Stop Reason:</b> Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 06:25	Dominguez, Xavier Ramiro	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 06:25	Dominguez, Xavier Ramiro	QUV-CH03	Order is Entered	NA
2 10/27/22 06:26		QUV-CH03	Status changed: <b>New:</b> Completed	NA
			<b>Old:</b> In Process	

Miscellaneous O 221027-062938107 Transmitted 10/27/22 06:29 **Order Source:** Nursing Orders  
 Pharmacy Missing Med Slip **Now** Oryekwulije, Anne N, MD

**Requesting Person** DOMIXAV  
**Extension** 29081  
**Please send the following medication(s)** CARBENE

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 06:29	Dominguez, Xavier Ramiro	Desktop	No Signature is Necessary	Y
1 10/27/22 06:29	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
1 10/27/22 06:29	Dominguez, Xavier Ramiro	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 06:29		QUV-BG19	Queued to destination: <b>New:</b> QPHARMP2 #3461096	NA
			<b>Old:</b>	
3 10/27/22 06:29		QUV-BG19	Status changed: <b>New:</b> Transmitted	NA
			<b>Old:</b> Verified	

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By
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4	10/27/22 06:32	Dominquez, Xavier Ramiro	10/27/22 07:04	Desktop	Batou, Augen, DO	Dominquez, Xavier Ramiro
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**Pharmacy Missing Med Slip**

NOW

Order Source: Nursing Orders

**Requesting Person**

DOMIXAV

**Extension**

29081

Please send the following medication(s) NIMOTOP

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 07:04	Dominguez, Xavier Ramiro	Desktop	No Signature is Necessary	Y
1 10/27/22 07:04	Dominguez, Xavier Ramiro	Desktop	Order is Entered	Y
1 10/27/22 07:04	Dominguez, Xavier Ramiro	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 07:04		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3461145	
			Old:	
3 10/27/22 07:04		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/27/22 07:04	Dominguez, Xavier Ramiro	Desktop	Order acknowledged	NA

Miscellaneous O 221027-073558172

Transmitted 10/27/22 07:35

Batou, Augen, DO

Hernandez, Lena

**Pharmacy Missing Med Slip**

NOW

Order Source: Nursing Orders

**Requesting Person**

HERNLEN

**Extension**

29084

Please send the following medication(s) please send 0700 nimotop dose thank you

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 07:35	Hernandez, Lena	Desktop	No Signature is Necessary	Y
1 10/27/22 07:35	Hernandez, Lena	Desktop	Order is Entered	Y
1 10/27/22 07:35	Hernandez, Lena	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 07:36		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3461195	
			Old:	
3 10/27/22 07:36		QUV-BG19	Status changed:	NA

Continued on Next Page





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/27/22 07:46	Hernandez, Lena	Desktop	Batou, Augen, DO	Hernandez, Lena

Medications 221027-075217617 Cancelled 10/27/22 08:00      Batou, Augen, DO      Hernandez, Lena  
 Order acknowledged      Order Source: Protocol Orders (Sig Required)

Route Change - PO to NG-Tube - Per Pharmacy      Stop Reason: DUPLICATE

Medication	Dose	Per
PO to NG-Tube - Rx Consult	1 EACH	
[Route Change - PO to NG-Tube - Per Pharmacy]		

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
MISCELLANEOUS PROTOCOL      SCH							
Stop Date/Time:							

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 07:52	Hernandez, Lena	Desktop	Signature is Necessary	Y
1 10/27/22 07:52	Hernandez, Lena	Desktop	Order is Entered	Y
2 10/27/22 07:52		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/27/22 07:52		QUV-CM03	Order Type edited:	Y
			New: ZMISC	
			Old:	
4 10/27/22 07:52		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/27/22 08:14	Batou, Augen, DO	QUV-BG19	Order is Signed by Batou, Augen, DO	NA
6 10/27/22 08:34	Hernandez, Lena	Desktop	Order acknowledged	NA
7 10/27/22 08:36	Scheer, Anita K, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
8 10/27/22 09:02	Lieu, Anne, PharmD	QUV-CM03	Status changed:	Y
			New: Cancelled	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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9	10/27/22 09:47	Hernandez, Lena	Desktop	Old: Pha Verified Order acknowledged	Scheer, Anita K, PharmD
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Medications 221027-080344312 Completed 10/27/22 08:03 Dajkovich, George, NP **Order Source:** Provider

**Catapres**  
 Stop Reason: Completed by Pha

Medication	Dose	Per	Clinical Indication
clonidine [catapres]	0.1 MG		

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses
NG-TUBE	Q6H	PRN	sbp > 160			

**Stop Date/Time:**  
 Discontinued: 11/21/22 12:43

**Label Comments:** LA/SA warning: this order is for clonidine(catapres)

Date & Time	User	Device	Event	Acknowledged
10/27/22 08:03	Scheer, Anita K, PharmD	QUV-CH03	No Signature is Necessary	Y
10/27/22 08:03	Scheer, Anita K, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
10/27/22 08:34	Hernandez, Lena	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Process Transfer	NA
11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged	NA
11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Copied to Catapres 221121-124305908	Y
11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221027-080456716	Completed	10/27/22 08:04	Dajkovich, George, NP	Scheer, Anita K, PharmD
	Prinivil				Order Source: Provider
	Stop Reason: Discontinue				

Medication Lisinopril [Prinivil]

Route NG-TUBE Frequency DAILY Dose 40 MG

Sched PRN Reason Per

Stop Date/Time: Discontinued: 11/07/22 08:41

Days Hours Total Doses

Clinical Indication

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CM03	No Signature is Necessary	Y
2 10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CM03	Order is Entered in Pharmacy	Y
3 11/07/22 08:41	Hernandez, Lena	Desktop	Order acknowledged	NA
4 11/07/22 08:42	Batou, Augen, DO	QDLK101	Stop Request	Y
	Batou, Augen, DO	QUV-CM03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	
5 11/07/22 09:59	Ramos, Jessica	Desktop	Order acknowledged	NA

Medications 221027-080513950 Completed 10/27/22 08:05 Dajkovich, George, NP Scheer, Anita K, PharmD  
 Stop Reason: Completed by Pha Order Source: Provider

Medication Levofloxacin [Synthroid]

Route NG-TUBE Frequency DAILY AC Dose 112 MCG

Sched PRN Reason Per

Stop Date/Time: Discontinued: 11/21/22 12:43

Days Hours Total Doses

Clinical Indication

Date & Time User Device Event Acknowledged  
 Continued on Next Page



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	No Signature is Necessary	Y
1	10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
2	10/27/22 08:34	Hernandez, Lena	Desktop	Order acknowledged	NA
3	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
4	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
5	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
6	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
7	11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
8	11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Copied to Synthroid 221121-124315190	Y
9	11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Status changed:	Y
				New: Completed	
				Old: Pha Verified	
10	11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA
<b>Medications</b> 221027-080542792 Completed 10/27/22 08:05 Oyekwulufe, Anne N, MD Scheer, Anita K, PharmD <b>Glucose 15</b> Order Source: Provider					
<b>Stop Reason:</b> DC'd by Discharge					
<b>Medication</b>		<b>Dose</b>	<b>Per</b>	<b>Days Hours</b>	<b>Total Doses</b>
Dextrose Gel 40% [Glucose 15]		1 EACH			
<b>Route</b>	<b>Frequency</b>	<b>Sched</b>	<b>PRN Reason</b>	<b>Days Hours</b>	<b>Total Doses</b>
MUCOUS MEM PROTOCOL		PRN	Hypoglycemia		
<b>Stop Date/Time:</b> 12/02/22 10:08 <b>Discontinued:</b> 12/02/22 10:08					
<b>Label Comments:</b> 93.75 ml tube of Glucose 15 delivers 15 gms of glucose. Give if BS < 70 with or without symptoms of hypoglycemia.					
<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>	
10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	No Signature is Necessary	Y	
10/27/22 08:05	Scheer, Anita K, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y	
10/27/22 08:34	Hernandez, Lena	Desktop	Order acknowledged	NA	
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue	NA	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	upon transfer	NA
		Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Transfer Provider added:	NA
5	11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is continued upon transfer	Y
6	11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
7	11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged	NA
8	11/16/22 08:23	Huyuh, Hanh H, PharmD	Desktop	Order is renewed	NA
9	11/16/22 21:19	Onyekwulije, Anne N, MD	QUV-BG19	Order is Signed by Onyekwulije, Anne N, MD	NA
10	12/02/22 10:08		QUV-CH03	Status changed:	N
				<b>New:</b> Completed	
				<b>Old:</b> Pha Verified	

Consultations 221027-094106928 Verified 10/27/22 09:41 Batou, Augen, DO Batou, Augen, DO  
 Consult to Physician Routine Order Source: Provider

Consulting Provider Amani-Yazdi, Rambod, MD

Reason for consultation a/w hyperglycemia

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 09:41	Batou, Augen, DO	QDAK101	Order is Entered and Signed	Y
2 10/27/22 09:47	Hernandez, Lena	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Transfer Provider added:	NA
5 11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is continued upon transfer	Y
6 11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
7 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221027-094125280	Completed	10/27/22 09:41	Batou, Augen, DO	Batou, Augen, DO
Novolin Regular					Order Source: Provider

Stop Reason: Reached Stop Date

**Medication**  
 Insulin \*Regular\* [Novolin Regular] 5 UNIT Per

**Route**      **Frequency**      **Sched**      **PRN Reason**  
 IV-Push      NOW      ONE

**Stop Date/Time:** 10/27/22 09:42  
**Discontinued:** 10/27/22 09:42

Days Hours Total Doses

Clinical Indication

Label Comments: LA/SA warning: order is for Novolin

CAUTION: HIGH RISK/HIGH ALERT MEDICATION  
 REQUIRES 2 SIGNATURES FOR DOCUMENTATION

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 09:41	Batou, Augen, DO	QDDK101	Order is Entered and Signed	Y
2 10/27/22 09:41		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/27/22 09:41		QUV-CM03	Order Type edited: New: MED Old:	Y
4 10/27/22 09:41		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 10/27/22 09:42	Scheer, Anita K, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
6 10/27/22 09:43		QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
7 10/27/22 09:47	Hernandez, Lena	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Routine Care 221027-094248739 Completed 10/27/22 09:42

Batou, Augen, DO

Batou, Augen, DO

Sequential Compression Device

CONF

Order Source: Provider

Stop Reason: Completed by Pcs

Intervention Text

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 09:42	Batou, Augen, DO	QDDK101	Order is Entered and Signed	Y
2 10/27/22 09:43		QUV-BG19	Status changed: New: In Process Old: Verified	NA
3 10/27/22 09:47	Hernandez, Lena	Desktop	Order acknowledged	NA
4 10/27/22 13:01	Hernandez, Lena	Desktop	Status changed: New: Completed Old: In Process	NA

Medications 221027-094302542 Completed 10/27/22 20:00

Batou, Augen, DO

Batou, Augen, DO

Perider Oral Rinse

Stop Reason: Reached Renew Stop Date

Order Source: Provider

Medication Chlorhexidine 0.12% [Perider Oral Rinse] Dose 15 ML Per

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
MUCOUS MEM BID@0800,2000		SCH				
Stop Date/Time: Discontinued: 11/27/22 19:59						

Dose Instruction: Swab oral cavity at 0800 and 2000 as part of ventilator care protocol. Protocol continues until patient off ventilator.

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 09:43	Batou, Augen, DO	QDDK101	Order is Entered and Signed	Y
2 10/27/22 09:43		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	10/27/22 09:43			QUV-CM03	Order Type edited: New: MED Old:
4	10/27/22 09:43			QUV-CM03	Status changed: New: Logged Old: Transmitted
5	10/27/22 09:47			Desktop	Order acknowledged New: Logged Old: Transmitted
6	10/27/22 09:53			Gebur, Ilene Kris, PharmD	Status changed: New: Pha Verified Old: Logged
7	11/09/22 12:08			Maglunog, Alexander A, MD	Manage Transfer - Order is set to continue upon transfer
8	11/09/22 12:08			Maglunog, Alexander A, MD	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD
9	11/09/22 22:57			Maglunog, Alexander A, MD	Manage Transfer - Order is continued upon transfer
10	11/09/22 22:57			Apa, Mary Jurem	Process Transfer
11	11/10/22 03:09			Apa, Mary Jurem	Order acknowledged
12	11/27/22 19:59			QUV-CM03	Status changed: New: Completed Old: Pha Verified
13	11/27/22 20:30			Benson, Jessica A	Order acknowledged

Medications 221027-094331226 Completed 10/27/22 10:00 Batou, Augen, DO Batou, Augen, DO  
 Order Source: Provider

Stop Reason: Order Change  
 Medication Famotidine [Pepcid] Dose 20 MG Per  
 Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 IV-Push BID SCH

Stop Date/Time:  
 Discontinued: 11/06/22 15:40

Label Comments: Dilute with 10 ml Saline  
 Give IV over at least 2 minutes

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

REFRIGERATE

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 09:43	Batou, Augen, DO	QDUK101	Order is Entered and Signed	Y
2 10/27/22 09:43		QUV-BG19	Status changed: New: Transmitted	NA
3 10/27/22 09:43		QUV-CM03	Old: Verified Order Type edited:	Y
4 10/27/22 09:43		QUV-CM03	New: MED Old: Status changed:	NA
5 10/27/22 09:47	Hernandez, Lena	Desktop	New: Logged Old: Transmitted	NA
6 10/27/22 09:53	Gebur, Ilene Kris, PharmD	QUV-CM03	Order acknowledged Status changed: New: Pha Verified	NA
7 11/06/22 15:40	Evergs, Ivy Kristina, PharmD	Desktop	Old: Logged Stop Request	Y
8 11/06/22 15:41	Evergs, Ivy Kristina, PharmD	QUV-CM03	Status changed: New: Completed	Y
9 11/06/22 15:46	Malaca, Jessalje	Desktop	Old: Pha Verified Order acknowledged	NA
10 11/07/22 07:36	Batou, Augen, DO	QUV-BG19	Order is Signed by Batou, Augen, DO	NA

Miscellaneous O 221027-102954751 Transmitted 10/27/22 10:29 Batou, Augen, DO Hernandez, Lena

Pharmacy Missing Med Slip NOW Order Source: Nursing Orders

Requesting Person HERNLEN

Extension 29084

Please send the following medication(s) PLEASE SEND CARDENE THANK YOU

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 10:29	Hernandez, Lena	Desktop	No Signature is Necessary	Y
1 10/27/22 10:29	Hernandez, Lena	Desktop	Order is Entered	Y
1 10/27/22 10:29	Hernandez, Lena	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 10:30		QUV-BG19	Queued to destination:	NA

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Patient Order Summary

Page: 127 of 500

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Medications 221027-110525617 Completed 10/27/22 11:04

Amani-Yazdi, Rambod, MD

Amani-Yazdi, Rambod, MD

Insulin Drip Regular - Adult (Non Glucosecare)

Order Source: Provider

Stop Reason: Discontinue

Medication

Insulin \*Regular\* [Novolin Regular]

Dose 100 UNIT

Per

0.9% Sodium Chloride 100 ML

Vol Per Bag: 99 ML

[Sodium Chloride 0.9% 100 ML]

QS Drug QS Volume

Total Volume 100 ML

Route IV

Frequency TIRRATE

Sched PRN

PRN Hyperglycemia

Days Hours Total Vol to Infuse

Clinical Indication

Rate: As Directed UNIT/HR

Stop Date/Time:

Discontinued: 10/29/22 11:42

Condition < 70

Dose/Route No Insulin

Instruction

70 - 120

No Insulin

Give 1/2 amp of D50W IVP and Call Dr. Amani

121 - 150

Stop Insulin Drip

151 - 200

1 UNIT/HR = 1ML/HR

201 - 250

3 UNIT/HR = 3ML/HR

251 - 300

4 UNIT/HR = 4ML/HR

301 - 350

5 UNIT/HR = 5ML/HR

351 - 400

6 UNIT/HR = 6ML/HR

OVER 400

7 UNIT/HR = 7ML/HR

9 UNIT/HR = 9ML/HR

Protocol text:

HOLD IF THE SERUM K IS 3.1 OR LESS.

Label Comments: INSULIN CONC = 1 unit/ml

Dispense in \*VISIV\* bag.

Please send missing med slip for each dose

\*Double check required\*

(1)

(2)

CAUTION: HIGH RISK/HIGH ALERT MEDICATION

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By	Acknowledged
REQUIRES 2 SIGNATURES FOR DOCUMENTATION							
1	10/27/22 11:05	Amani-Yazdi, Rambod, MD	QICUK102	QICUK102	Event Order is Entered and Signed		Y
2	10/27/22 11:05	Amani-Yazdi, Rambod, MD	QUV-BG19	QUV-BG19	Status changed: New: Transmitted Old: Verified		NA
3	10/27/22 11:05	Amani-Yazdi, Rambod, MD	QUV-CM03	QUV-CM03	Status changed: New: Logged Old: Transmitted		NA
4	10/27/22 11:06	Scheer, Anita K, PharmD	QUV-CM03	QUV-CM03	Status changed: New: Pha Verified Old: Logged		NA
5	10/27/22 11:21	Amani-Yazdi, Rambod, MD	QICUK102	QICUK102	Dose/Route edited: New: 9 UNIT/HR = 9ML/HR Old: 7 UNIT/HR = 7ML/HR		Y
6	10/27/22 12:32	Hernandez, Lena	Desktop	Desktop	Order acknowledged: Dose/Route edited: New: 3 UNIT/HR = 3ML/HR Old: 2 UNIT/HR = 2ML/HR		NA
7	10/27/22 19:50	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Dose/Route edited: New: 4 UNIT/HR = 4ML/HR Old: 3 UNIT/HR = 3ML/HR		Y
7	10/27/22 19:50	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Dose/Route edited: New: 5 UNIT/HR = 5ML/HR Old: 4 UNIT/HR = 4ML/HR		Y
7	10/27/22 19:50	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Dose/Route edited: New: 6 UNIT/HR = 6ML/HR Old: 5 UNIT/HR = 5ML/HR		Y
7	10/27/22 19:50	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Dose/Route edited: New: 7 UNIT/HR = 7ML/HR Old: 6 UNIT/HR = 6ML/HR		Y
8	10/27/22 20:12	Benson, Jessica A	Desktop	Desktop	Order acknowledged		NA
9	10/29/22 11:44	Geula, Arsalan, MD	Desktop	Desktop	Stop Request		Y
10	10/29/22 11:47	Geula, Arsalan, MD	QUV-CM03	QUV-CM03	Status changed: New: Completed		Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
    Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

11	10/29/22 12:06	Hernandez, Lena	10/28/22 05:00	Amani-Yazdi, Rambod, MD	Pha Verified
					Order acknowledged

Chemistry      221027-110525649      Cancelled      10/28/22 05:00      AM      Amani-Yazdi, Rambod, MD      Order Source: Provider

Phosphorus      Stop Reason: DISC

Specimen      Send someone from the department to collect      **Acknowledged**

Date & Time	User	Device	Event	Acknowledged
1      10/27/22 11:05	Amani-Yazdi, Rambod, MD	QICUK102	Order Is Entered and Signed	Y
2      10/27/22 11:08	Amani-Yazdi, Rambod, MD	QICUK102	Order cancelled	Y
3      10/27/22 11:08	Amani-Yazdi, Rambod, MD	QICUK102	Status changed:	Y
			New: Cancelled	
			Old: Verified	
4      10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA

Chemistry      221027-110759824      Cancelled      10/28/22 05:00      AM      Amani-Yazdi, Rambod, MD      Order Source: Provider

Magnesium      Stop Reason: DISC

Specimen      Send someone from the department to collect      **Acknowledged**

Date & Time	User	Device	Event	Acknowledged
1      10/27/22 11:08	Amani-Yazdi, Rambod, MD	QICUK102	Order Is Entered and Signed	Y
2      10/27/22 11:08	Amani-Yazdi, Rambod, MD	QICUK102	Order cancelled	Y
3      10/27/22 11:08	Amani-Yazdi, Rambod, MD	QICUK102	Status changed:	Y
			New: Cancelled	
			Old: Verified	
4      10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA

Chemistry      221027-112032140      Completed      10/27/22 18:04      Routine      Amani-Yazdi, Rambod, MD      Order Source: Provider

Basic Metabolic Panel      Stop Reason: Completed by Lis

Specimen      Has been collected      **Acknowledged**

Date & Time	User	Device	Event	Acknowledged
1      10/27/22 11:20	Amani-Yazdi, Rambod, MD	QICUK102	Order Is Entered and Signed	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/27/22 11:20				
		QUV-BG19			
		Status changed:			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
3	10/27/22 11:20				
		QUV-CM03			
		Status changed:			
		<b>New:</b> Logged			
		<b>Old:</b> Transmitted			
4	10/27/22 12:40				
		Hernandez, Lena			
		Desktop			
		Order acknowledged			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
5	10/27/22 17:05				
		Cervantes, Melissa			
		Phone			
		Specimen Collected: 1027:C00499R			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
6	10/27/22 17:05				
		Cervantes, Melissa			
		Phone			
		Specimen Collected: 1027:C00499R			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
7	10/27/22 17:51				
		Hartman, Mattea			
		Phone			
		Specimen Collected: 1027:C00499R			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
8	10/27/22 17:52				
		Hartman, Mattea			
		Phone			
		Specimen Collected: 1027:C00499R			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
9	10/27/22 18:04				
		Cox, Cori			
		Phone			
		Specimen Collected: 1027:C00499R			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
10	10/27/22 18:04				
		Cox, Cori			
		Phone			
		Order is collected			
		<b>New:</b> Logged			
		<b>Old:</b> Transmitted			
11	10/27/22 18:07				
		Cox, Cori			
		Phone			
		Order is collected			
		<b>New:</b> Logged			
		<b>Old:</b> Transmitted			
12	10/27/22 18:07				
		QUV-CM03			
		Status changed:			
		<b>New:</b> In Process			
		<b>Old:</b> Logged			
13	10/27/22 18:46				
		QUV-CM03			
		Status changed:			
		<b>New:</b> Completed			
		<b>Old:</b> In Process			
Chemistry	221027-112032156	Completed	10/27/22 18:04	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
Phosphorus					
		Completed			
		Order Source: Provider			
		Routine			
		Stop Reason: Completed by Lis			
		Specimen			
		Has been collected			
		Date & Time			
		User			
		Device			
		Event			
		Acknowledged			
1	10/27/22 11:20				
		Amani-Yazdi, Rambod, MD			
		QICUK102			
		Order is Entered and Signed			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
2	10/27/22 11:20				
		QUV-BG19			
		Status changed:			
		<b>New:</b> Transmitted			
		<b>Old:</b> Verified			
3	10/27/22 11:20				
		QUV-CM03			
		Status changed:			
		<b>New:</b> Logged			
		<b>Old:</b> Transmitted			

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA
5	10/27/22 17:05	Cervantes, Melissa	Phone	Specimen Collected: 1027:C00499R	NA
6	10/27/22 17:05	Cervantes, Melissa	Phone	Specimen Collected: 1027:C00499R	NA
7	10/27/22 17:51	Hartman, Mattea	Phone	Specimen Collected: 1027:C00499R	NA
8	10/27/22 17:52	Hartman, Mattea	Phone	Specimen Collected: 1027:C00499R	NA
9	10/27/22 18:04	Cox, Cori	Phone	Specimen Collected: 1027:C00499R	NA
10	10/27/22 18:04	Cox, Cori	Phone	Order is collected	NA
11	10/27/22 18:07		QUV-CM03	Start Time edited:	NA
				New: 18:04	
				Old: 17:58	
12	10/27/22 18:07		QUV-CM03	Status changed:	NA
				New: In Process	
				Old: Logged	
13	10/27/22 18:46		QUV-CM03	Status changed:	NA
				New: Completed	
				Old: In Process	
Chemistry	221027-112615227	Completed	10/28/22 05:17	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
				AM	Order Source: Provider
					Stop Reason: Completed by Lis
					Specimen Has been collected
					Event
1	10/27/22 11:26	Amani-Yazdi, Rambod, MD	QICUK102	Order is Entered and Signed	Y
2	10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA
3	10/28/22 00:04		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	10/28/22 00:11		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	10/28/22 00:17		QUV-CM03	Status changed:	NA
				New: In Process	
				Old: Logged	
6	10/28/22 05:17	Contreras, Ashley J	Phone	Specimen Collected: 1028:C00255R	NA
7	10/28/22 05:17	Contreras, Ashley J	Phone	Order is collected	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	
	8	10/28/22 05:29	Mijares, Veronica R	QUV-CH03	Start Time edited: New: 05:17 Old: 05:16	NA
	9	10/28/22 06:20	Mijares, Veronica R	QUV-CH03	Status changed: New: Completed Old: In Process	NA

Stock 221027-124006599 Transmitted 10/27/22 12:33 Batou, Augen, DO Hernandez, Lena  
 Message to Admitting Routine Order Source: Nursing Orders

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 12:40	Hernandez, Lena	Desktop	No Signature is Necessary	Y
1 10/27/22 12:40	Hernandez, Lena	Desktop	Order is Entered	Y
2 10/27/22 12:40	Hernandez, Lena	Desktop	Queued to destination: New: Q1B015 Old:	NA
3 10/27/22 12:40		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 10/27/22 12:40	Hernandez, Lena	Desktop	Order acknowledged	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
6 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
7 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
8 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
9 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA

Bedside Testing 221027-124027521 Completed 10/27/22 12:21 Batou, Augen, DO Hernandez, Lena  
 Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 12:40	Hernandez, Lena	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 12:40	Hernandez, Lena	QUV-CH03	Order is Entered	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/27/22 12:40			QUV-CH03	NA
Bedside Testing 221027-141527894 Completed 10/27/22 13:16 Batou, Augen, DO Hernandez, Lena Glucose (Bedside) Routine Stop Reason: Completed by Lis Order Source:					

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 14:15	Hernandez, Lena	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 14:15	Hernandez, Lena	QUV-CH03	Order is Entered	NA
2 10/27/22 14:15		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Miscellaneous O 221027-150504949 Transmitted 10/27/22 15:03 Batou, Augen, DO Hernandez, Lena  
 Pharmacy Missing Med Slip NOW Order Source: Nursing Orders

Requesting Person: Lena  
 Extension: 29084  
 Please send the following medication(s) please send cardene ivpb thank you

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 15:05	Hernandez, Lena	Desktop	No Signature is Necessary	Y
1 10/27/22 15:05	Hernandez, Lena	Desktop	Order is Entered	Y
1 10/27/22 15:05	Hernandez, Lena	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 15:05		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3462964	
			Old:	
3 10/27/22 15:05		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/27/22 15:30	Hernandez, Lena	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221027-151529914	Completed	10/27/22 14:08	Batou, Augen, DO	Hernandez, Lena
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					
<b>Order Source:</b>					

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 15:15	Hernandez, Lena	QUV-CM03	No Signature Is Necessary	NA
1 10/27/22 15:15	Hernandez, Lena	QUV-CM03	Order is Entered	NA
2 10/27/22 15:15		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Bedside Testing 221027-152038092 **Completed** 10/27/22 15:09 **Order Source:** Hernandez, Lena  
**Glucose (Bedside)** **Order Source:** Routine  
 Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 15:20	Hernandez, Lena	QUV-CM03	No Signature Is Necessary	NA
1 10/27/22 15:20	Hernandez, Lena	QUV-CM03	Order is Entered	NA
2 10/27/22 15:21		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Stock 221027-160211539 **Transmitted** 10/27/22 16:01 **Order Source:** Travnitz, Christina Marie  
 Message to Admitting **Order Source:** Routine  
 Routine

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 16:02	Travnitz, Christina Marie	Desktop	No Signature Is Necessary	Y
1 10/27/22 16:02	Travnitz, Christina Marie	Desktop	Order is Entered	Y
2 10/27/22 16:02	Travnitz, Christina Marie	Desktop	Queued to destination:	NA
			<b>New:</b> Q11E015	
			<b>Old:</b>	
3 10/27/22 16:02		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 10/27/22 16:47	Hernandez, Lena	Desktop	Order acknowledged	NA

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Maglunog, Alexander A, MD	NA
6	11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Maglunog, Alexander, MD	NA
7	11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Maglunog, Alexander, MD	Y
8	11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
9	11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA

Bedside Testing 221027-161526364 Completed 10/27/22 16:07 Batou, Augen, DO Hernandez, Lena

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 16:15	Hernandez, Lena	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 16:15	Hernandez, Lena	QUV-CH03	Order is Entered	NA
2 10/27/22 16:15		QUV-CH03	Status changed:	NA

New: Completed  
 Old: In Process

Restraint 221027-163000770 Completed 10/27/22 16:29 Batou, Augen, DO Tong, Malina I

Restraint Non-Violent

Routine

Order Source: Written Orders

Stop Reason:

Restraint Type Wrist, Left  
 Wrist, Right  
 Restraint Mental Status Confusion  
 Forgetful

- : Yes
- : Yes
- : No

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/27/22 17:47				
3	10/27/22 17:47				
4	10/27/22 17:48				
Miscellaneous O 221027-174814260 Transmitted 10/27/22 17:47 Hernandez, Lena					
Pharmacy Missing Med Slip NOW Order Source: Nursing Orders					

Requesting Person: HEHNLEN 29084  
 Extension: PLEASE SEND CARDENE IVPB  
 Please send the following medication(s) THANK YOU

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 17:48	Hernandez, Lena	Desktop	No Signature is Necessary	Y
1 10/27/22 17:48	Hernandez, Lena	Desktop	Order is Entered	Y
1 10/27/22 17:48	Hernandez, Lena	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/27/22 17:48		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3463682	
			OLD:	
3 10/27/22 17:48		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
4 10/27/22 17:48	Hernandez, Lena	Desktop	Order acknowledged	NA

Bedside Testing 221027-181531347 Completed 10/27/22 18:07 Batou, Augen, DO Hernandez, Lena  
 Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 18:15	Hernandez, Lena	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 18:15	Hernandez, Lena	QUV-CH03	Order is Entered	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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2	10/27/22 18:15			QUV-CH03	NA
---	----------------	--	--	----------	----

Status changed:  
 New: Completed  
 Old: In Process

Bedside Testing 221027-190028047	Completed	10/27/22 18:50	Batou, Augen, DO	Hernandez, Lena
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Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/27/22 19:00	Hernandez, Lena	QUV-CH03	No Signature Is Necessary	NA
10/27/22 19:00	Hernandez, Lena	QUV-CH03	Order Is Entered	NA
10/27/22 19:00		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Chemistry 221027-1951458061 Completed 10/27/22 22:00 Amani-Yazdi, Rambod, MD

Basic Metabolic Panel

Q4HR

Order Source: Provider

Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order Is Entered and Signed	Y
10/27/22 19:51		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
10/27/22 19:52		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
10/27/22 22:07	Marquez, Rosalie	Phone	Specimen Collected: 1027:000685R	NA
10/27/22 22:07	Marquez, Rosalie	Phone	Order Is Collected	NA
10/27/22 22:07		QUV-CH03	Start Time edited:	NA
			New: 21:00	
			Old: 21:44	
10/27/22 22:09		QUV-CH03	Start Time edited:	NA
			New: 22:00	
			Old: 21:00	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
8	10/27/22 22:09			QUV-CM03	NA
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
9	10/27/22 23:04			QUV-CM03	NA
				<b>Status changed:</b>	
				<b>New:</b> Completed	
				<b>Old:</b> In Process	
10	10/28/22 07:39			Other	NA
				<b>Order acknowledged</b>	
Chemistry	221027-1951458062	Completed	10/28/22 01:17	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
				Q4HR	Order Source: Provider
<b>Basic Metabolic Panel</b>					
<b>Stop Reason: Completed by Lis</b>					
<b>Specimen</b>					
Has been collected					
Date & Time	User	Device	Event	Acknowledged	
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order is Entered and signed	Y	
2 10/28/22 00:02		QUV-BG19	Status changed:	NA	
			<b>New:</b> Transmitted		
			<b>Old:</b> Verified		
3 10/28/22 00:07		QUV-CM03	Status changed:	NA	
			<b>New:</b> Logged		
			<b>Old:</b> Transmitted		
4 10/28/22 01:17	Marquez, Rosalie	Phone	Specimen Collected: 1028+C00157R	NA	
5 10/28/22 01:17	Marquez, Rosalie	Phone	Order is collected	NA	
6 10/28/22 01:21		QUV-CM03	Start Time edited:	NA	
			<b>New:</b> 01:17		
			<b>Old:</b> 01:16		
7 10/28/22 01:21		QUV-CM03	Status changed:	NA	
			<b>New:</b> In Process		
			<b>Old:</b> Logged		
8 10/28/22 01:52		QUV-CM03	Status changed:	NA	
			<b>New:</b> Completed		
			<b>Old:</b> In Process		
9 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Chemistry

221027-195145822

Cancelled

10/28/22 05:00

Amani-Yazdi, Rambod, MD

Amani-Yazdi, Rambod, MD

Basic Metabolic Panel

Q4HR

Order Source: Provider

Stop Reason: Specimen id number cancelled to consolidate orders

Specimen

Send someone from the department to collect

Date & Time

User

Device

Event

Acknowledged

1 10/27/22 19:51

Amani-Yazdi, Rambod, MD

Desktop

Order is Entered and Signed  
Status changed:

Y

2 10/28/22 00:03

QUV-BG19

New: Transmitted

NA

3 10/28/22 00:07

QUV-CM03

Status changed:

NA

4 10/28/22 00:16

QUV-CM03

Status changed:

NA

5 10/28/22 00:33

Contreras, Ashley J

QUV-CM03

Status changed:

Y

6 10/28/22 07:39

Hong, Grace

Other

Order acknowledged

NA

Chemistry

221027-195145837

Cancelled

10/28/22 17:00

Amani-Yazdi, Rambod, MD

Amani-Yazdi, Rambod, MD

Basic Metabolic Panel

Q4HR

Order Source: Provider

Stop Reason: Discontinue

Specimen

Send someone from the department to collect

Date & Time

User

Device

Event

Acknowledged

1 10/27/22 19:51

Amani-Yazdi, Rambod, MD

Desktop

Order is Entered and Signed  
Status changed:

Y

2 10/28/22 00:03

QUV-BG19

New: Transmitted

NA

3 10/28/22 00:07

QUV-CM03

Status changed:

NA

4 10/28/22 00:14

QUV-CM03

Status changed:

NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					New: In Process
					Old: Logged
5	10/28/22 07:39	Hong, Grace		Other	Order acknowledged
6	10/28/22 10:38	Hong, Grace		Other	Stop Request
7	10/28/22 10:39	Hong, Grace		Other	Order acknowledged
8	10/28/22 10:40	Hong, Grace		QUV-CH03	Status changed:
					New: Cancelled
					Old: In Process
9	10/28/22 10:44	Hong, Grace		Other	Order acknowledged
10	10/28/22 12:48	Amani-Yazdi, Rambod, MD		QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD
					New: Cancelled
					Old: Verified

Chemistry 221027-1951458371 Cancelled 10/29/22 01:00 Amani-Yazdi, Rambod, MD  
 Basic Metabolic Panel Q4HR Order Source: Provider

Stop Reason: Discontinue

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order is Entered and Signed	Y
2 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA
3 10/28/22 10:38	Hong, Grace	Other	Order cancelled	Y
4 10/28/22 10:38	Hong, Grace	Other	Status changed:	Y
			New: Cancelled	
			Old: Verified	
5 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA
6 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA

Chemistry 221027-1951458372 Cancelled 10/29/22 05:00 Amani-Yazdi, Rambod, MD  
 Basic Metabolic Panel Q4HR Order Source: Provider

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order is Entered and Signed	Y
2 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA
3 10/28/22 10:38	Hong, Grace	Other	Order cancelled	Y
4 10/28/22 10:38	Hong, Grace	Other	Status changed:	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221027-195145868	Cancelled	10/29/22 21:00	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
Basic Metabolic Panel				Q4HR	Order Source: Provider

Stop Reason: Discontinue

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order is Entered and Signed	Y
2 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA
3 10/28/22 10:38	Hong, Grace	Other	Order cancelled	Y
4 10/28/22 10:38	Hong, Grace	Other	Status changed:	Y
			<b>New:</b> Cancelled	
			<b>Old:</b> Verified	
5 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA
6 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA

Chemistry 221027-195145822 Completed 10/28/22 09:09 Amani-Yazdi, Rambod, MD  
 Basic Metabolic Panel Q4HR  
 Order Source: Provider

Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order is Entered and Signed	Y
2 10/28/22 00:03		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 10/28/22 00:07		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
4 10/28/22 00:14		QUV-CH03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
5 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA
6 10/28/22 09:09	Nguyen, Phuong	Phone	Specimen Collected: 1028:C00159R	NA
7 10/28/22 09:09	Nguyen, Phuong	Phone	Order is collected	NA
8 10/28/22 10:04		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221027-1951458221	Cancelled	10/28/22 13:00	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
Basic Metabolic Panel					
Stop Reason: Discontinue					

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged	
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order Is Entered and Signed	Y	
2 10/28/22 00:03		QUV-BG19	Status changed:	NA	
			New: Transmitted		
			Old: Verified		
3 10/28/22 00:07		QUV-CM03	Status changed:	NA	
			New: Logged		
			Old: Transmitted		
4 10/28/22 00:14		QUV-CM03	Status changed:	NA	
			New: In Process		
			Old: Logged		
5 10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA	
6 10/28/22 10:38	Hong, Grace	Other	Stop Request	Y	
7 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA	
8 10/28/22 10:40	Hong, Grace	QUV-CM03	Status changed:	Y	
			New: Cancelled		
			Old: In Process		
9 10/28/22 10:44	Hong, Grace	Other	Order acknowledged	NA	
10 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BG19	Order Is Signed by Amani-Yazdi, Rambod, MD	NA	
Chemistry	221027-195145837	Cancelled	10/28/22 21:00	Amani-Yazdi, Rambod, MD	
Basic Metabolic Panel					
Stop Reason: Discontinue					

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 19:51	Amani-Yazdi, Rambod, MD	Desktop	Order Is Entered and Signed	Y
2 10/28/22 00:03		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>New:</b> Transmitted <b>Old:</b> Verified
	3	10/28/22 00:07		QUV-CM03	<b>Status changed:</b> <b>New:</b> Logged <b>Old:</b> Transmitted
	4	10/28/22 00:14		QUV-CM03	<b>Status changed:</b> <b>New:</b> In Process <b>Old:</b> Logged
	5	10/28/22 07:39		Other	<b>Order acknowledged</b>
	6	10/28/22 10:38		Other	<b>Stop Request</b>
	7	10/28/22 10:39		QUV-CM03	<b>Status changed:</b> <b>New:</b> Cancelled <b>Old:</b> In Process
	8	10/28/22 10:39		Other	<b>Order acknowledged</b>
	9	10/28/22 12:48		Amani-Yazdi, Rambod, MD	<b>Order is Signed by Amani-Yazdi, Rambod, MD</b>
Chemistry	221027-195145853	Cancelled	10/29/22 17:00	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
<b>Basic Metabolic Panel</b>					
<b>Stop Reason:</b> Discontinue					
<b>Specimen</b> Send someone from the department to collect					
					<b>New:</b> Cancelled <b>Old:</b> Verified
	1	10/27/22 19:51		Amani-Yazdi, Rambod, MD	<b>Order is Entered and Signed</b>
	2	10/28/22 07:39		Other	<b>Order acknowledged</b>
	3	10/28/22 10:38		Other	<b>Order cancelled</b>
	4	10/28/22 10:38		Other	<b>Status changed:</b> <b>New:</b> Cancelled <b>Old:</b> Verified
	5	10/28/22 10:39		Other	<b>Order acknowledged</b>
	6	10/28/22 12:48		Amani-Yazdi, Rambod, MD	<b>Order is Signed by Amani-Yazdi, Rambod, MD</b>
Bedside Testing	221027-201554543	Completed	10/27/22 20:08	Batou, Augen, DO	Benson, Jessica A
<b>Glucose (Bedside)</b>					
<b>Stop Reason:</b> Completed by Lis					
					<b>New:</b> Cancelled <b>Old:</b> Verified
					<b>Order Source:</b> Routine
					<b>Order Source:</b> Routine
					<b>Order Source:</b> Routine

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Acknowledged



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/27/22 20:15	Benson, Jessica A		QUV-CH03	NA
1	10/27/22 20:15	Benson, Jessica A		QUV-CH03	NA
2	10/27/22 20:16			QUV-CH03	NA

New: Completed  
Old: In Process

Respiratory The 221027-210449210 Completed 10/27/22 21:02

Abidali, Moustapha, DO

Sankitts, Karla G

Ventilator settings

NOW

Order Source: Nursing Orders

Stop Reason: Discharged

Ventilator Support Mode	VC (Assist Control)	Event	Acknowledged
Resp. Rate Setting	16	No Signature is Necessary	Y
VT Set	400	Order is Entered	Y
FiO2	30	Queued to destination:	NA
Saturation > Or = To	93	New: Q11310 #3464247	
PEEP	5	Old:	

Date & Time	User	Device	Event	Acknowledged
10/27/22 21:04	Sankitts, Karla G	Desktop	No Signature is Necessary	Y
10/27/22 21:04	Sankitts, Karla G	Desktop	Order is Entered	Y
10/27/22 21:04		QUV-BG19	Queued to destination:	NA
			New: Q11310 #3464247	
			Old:	
10/27/22 21:04		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	

10/27/22 23:25	Benson, Jessica A	Desktop	Order acknowledged	NA
10/31/22 15:04	Earwood, Tammy	Desktop	Query VT Set edited:	Y
			New: 400	
			Old: 500	

10/31/22 15:10	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
11/01/22 17:15	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Transfer Provider added:	NA
			Maglunog, Alexander, MD	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
10	11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is continued upon transfer	Y
11	11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
12	11/10/22 03:08	Apa, Mary Jurem	Desktop	Order acknowledged	NA
13	12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA

Bedside Testing 221027-211020080 Completed 10/27/22 21:01 **Old:** In Process **New:** Completed  
 Batou, Augen, DO Benson, Jessica A  
**Glucose (Bedside)** Routine **Order Source:**

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 21:10	Benson, Jessica A	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 21:10	Benson, Jessica A	QUV-CH03	Order is Entered	NA
2 10/27/22 21:10		QUV-CH03	Status changed:	NA

Bedside Testing 221027-221040897 Completed 10/27/22 22:03 **Old:** In Process **New:** Completed  
 Batou, Augen, DO Benson, Jessica A  
**Glucose (Bedside)** Routine **Order Source:**

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 22:10	Benson, Jessica A	QUV-CH03	No Signature is Necessary	NA
1 10/27/22 22:10	Benson, Jessica A	QUV-CH03	Order is Entered	NA
2 10/27/22 22:10		QUV-CH03	Status changed:	NA

Bedside Testing 221027-231557667 Completed 10/27/22 23:08 **Old:** In Process **New:** Completed  
 Batou, Augen, DO Benson, Jessica A  
**Glucose (Bedside)** Routine **Order Source:**

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 23:15	Benson, Jessica A	QUV-CH03	No Signature is Necessary	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/27/22 23:15	Benson, Jessica A	QUV-CH03	Order Is Entered	NA
2	10/27/22 23:16		QUV-CH03	Status changed:	NA
				New: Completed	
				Old: In Process	

Medications 221027-232117248 Completed 10/27/22 23:16 Amanal-Yardi, Rambod, MD Benson, Jessica A  
 Calcium Gluconate 10% Order Source: Telephone Orders- Read Back

Stop Reason: Reached Stop Date

**Medication**  
 Calcium Gluc 1000 Mg In Ns Dose 1,000 MG In 100 ML Per  
 [Calcium Gluconate 10%]  
 QS Drug QS Volume Total Volume 100 ML

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Vol to Infuse	Clinical Indication
IVPB	ONCE	ONE					
Rate: 100 MLS/HR							
Stop Date/Time: 10/28/22 00:15							
Discontinued: 10/28/22 00:15							

Label Comments: Label matches overwrap. RPh \_\_\_\_\_

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 23:21	Benson, Jessica A	Desktop	Signature is Necessary	Y
1 10/27/22 23:21	Benson, Jessica A	Desktop	Order is Entered	Y
2 10/27/22 23:21		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/27/22 23:21		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
4 10/27/22 23:23	Phong, Suzanne, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
5 10/27/22 23:25	Benson, Jessica A	Desktop	Order acknowledged	NA
6 10/28/22 00:15		QUV-CH03	Status changed:	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

7	10/28/22 00:37	Benson, Jessica A	Desktop		
8	10/28/22 07:41	Amani-Yazdi, Rambod, MD	QUV-BG19	Amani-Yazdi, Rambod, MD	Benson, Jessica A

Medications 221027-232117263 Completed 10/27/22 23:30

Potassium Chloride Rider

Order Source: Telephone Orders- Read Back

Stop Reason: Reached Stop Date

Medication Potassium Cl 20 Meq In 100 ML Dose 20 MEQ in 100 ML Per

[Kcl 20 Meq In 100 ML Water]

qs Drug qs Volume Total Volume 100 ML

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Vol to Infuse	Bags	Clinical Indication
IVPB	Q2H	SCH					2	
Rate: 10 MEQ/HR								
Stop Date/Time: 10/28/22 03:29								
Discontinued: 10/28/22 03:29								

Label Comments: Infuse 2 x 20 mEq Pre-mix bags for a total of dose of 40 mEq

Label matches overwrap \_\_\_\_\_ RPh

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 23:21	Benson, Jessica A	Desktop	Signature is Necessary	Y
1 10/27/22 23:21	Benson, Jessica A	Desktop	Order is Entered	Y
2 10/27/22 23:21		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/27/22 23:21		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
4 10/27/22 23:23	Phong, Suzanne, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
5 10/27/22 23:25	Benson, Jessica A	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
6	10/28/22 03:29			QUV-CH03	
					Status changed:
					<b>New:</b> Completed
					<b>OLD:</b> Pha Verified
7	10/28/22 05:23	Benson, Jessica A		Desktop	Order acknowledged
				QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD
					NA
8	10/28/22 07:41	Amani-Yazdi, Rambod, MD		QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD
					NA

Routine Care 221027-232343167 Completed 10/27/22 23:21 Amani-Yazdi, Rambod, MD Benson, Jessica A

Other Nursing Interventions

ONCE

Order Source: Telephone Orders- Read Back

Stop Reason: Discharged

Intervention Text Hold Insulin drip if potassium is less than 3.0

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 23:23	Benson, Jessica A	Desktop	Signature is Necessary	Y
1 10/27/22 23:23	Benson, Jessica A	Desktop	Order is Entered	Y
2 10/27/22 23:23		QUV-BG19	Status changed:	NA
			<b>New:</b> In Process	
			<b>OLD:</b> Verified	
3 10/27/22 23:25	Benson, Jessica A	Desktop	Order acknowledged	NA
4 10/28/22 07:41	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA
5 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
6 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
7 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA
8 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
			<b>New:</b> Completed	
			<b>OLD:</b> In Process	

Routine Care 221027-232815985 Completed 10/27/22 23:26 Amani-Yazdi, Rambod, MD Benson, Jessica A

Other Nursing Interventions

ONCE

Order Source: Telephone Orders- Read Back

Stop Reason: Discharged

Intervention Text Draw a CMP after calcium gluconate and k rider IVPB have been given.

Date & Time	User	Device	Event	Acknowledged
1 10/27/22 23:28	Benson, Jessica A	Desktop	Signature is Necessary	Y
1 10/27/22 23:28	Benson, Jessica A	Desktop	Order is Entered	Y
2 10/27/22 23:28		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

**QH0054940416 Lyons, Kathleen A** Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>New: In Process</b>
					<b>OLD: Verified</b>
3	10/28/22 06:44	Benson, Jessica A	Desktop		Order acknowledged
4	10/28/22 07:41	Amani-Yazdi, Rambod, MD	QUV-BG19		Order is Signed by Amani-Yazdi, Rambod, MD
5	11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101		Manage Transfer - Order is continued upon transfer
6	11/09/22 22:57	Apa, Mary Jurem	QPACURK101		Process Transfer
7	11/10/22 03:11	Apa, Mary Jurem	Desktop		Order acknowledged
8	12/02/22 10:08	Ramos, Jessica	Desktop		Status changed:
					<b>New: Completed</b>
					<b>OLD: In Process</b>

Chemistry 221028-003230927 Completed 10/28/22 05:17 Amani-Yazdi, Rambod, MD Order Source: Provider  
**Magnesium** Routine  
 Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 00:32	Contreras, Ashley J	QUV-CM03	Order is Entered and Signed	Y
2 10/28/22 05:17	Contreras, Ashley J	Phone	Specimen Collected: 1028:C00255R	NA
3 10/28/22 05:17	Contreras, Ashley J	Phone	Order is collected	NA
4 10/28/22 05:29	Mijares, Veronica R	QUV-CM03	Start Time edited:	NA
			<b>New: 05:17</b>	
			<b>OLD: 05:16</b>	
5 10/28/22 06:20	Mijares, Veronica R	QUV-CM03	Status changed:	NA
			<b>New: Completed</b>	
			<b>OLD: In Process</b>	
6 10/28/22 06:44	Benson, Jessica A	Desktop	Order acknowledged	NA

Chemistry 221028-044505367 Completed 10/28/22 05:17 Amani-Yazdi, Rambod, MD Order Source: Provider  
**Comprehensive Metabolic Panel** Routine  
 Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 04:45	Mijares, Veronica R	QUV-CM03	Order is Entered and Signed	Y
2 10/28/22 05:17	Contreras, Ashley J	Phone	Specimen Collected: 1028:C00255R	NA
3 10/28/22 05:17	Contreras, Ashley J	Phone	Order is collected	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/28/22 05:29	Mijares, Veronica R	QUV-CH03	Start Time edited: New: 05:17 Old: 05:16	NA
5	10/28/22 06:20	Mijares, Veronica R	QUV-CH03	Status changed: New: Completed Old: In Process	NA
6	10/28/22 06:44	Benson, Jessica A	Desktop	Order acknowledged	NA
Chemistry 221028-003230927 Cancelled 10/28/22 05:17 Amani-Yazdi, Rambod, MD Amani-Yazdi, Rambod, MD					
<b>Basic Metabolic Panel</b>					
Stop Reason: CMP WAS ORDERED SAME TIME					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/28/22 00:32	Contreras, Ashley J	QUV-CH03	Order Is Entered and Signed	Y
2	10/28/22 04:45	Mijares, Veronica R	QUV-CH03	Status changed: New: Cancelled Old: In Process	Y
3	10/28/22 05:17	Contreras, Ashley J	Phone	Specimen Collected: 1028:C00255R	NA
4	10/28/22 05:17	Contreras, Ashley J	Phone	Order is collected	NA
5	10/28/22 05:29	Mijares, Veronica R	QUV-CH03	Start Time edited: New: 05:17 Old: 05:16	NA
6	10/28/22 06:44	Benson, Jessica A	Desktop	Order acknowledged	NA
Chemistry 221028-0032309271 Completed 10/28/22 05:17 Amani-Yazdi, Rambod, MD Amani-Yazdi, Rambod, MD					
<b>Phosphorus</b>					
Stop Reason: Completed by Lis					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/28/22 00:32	Contreras, Ashley J	QUV-CH03	Order Is Entered and Signed	Y
2	10/28/22 05:17	Contreras, Ashley J	Phone	Specimen Collected: 1028:C00255R	NA
3	10/28/22 05:17	Contreras, Ashley J	Phone	Order is collected	NA
4	10/28/22 05:29	Mijares, Veronica R	QUV-CH03	Start Time edited: New: 05:17 Old: 05:16	NA
5	10/28/22 06:20	Mijares, Veronica R	QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	6	Completed	10/28/22 00:10	Batou, Angen, DO	Benson, Jessica A
			Other	Routine	
				Batou, Angen, DO	Benson, Jessica A
				Routine	

Glucose (Bedside)  
 Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/28/22 00:20	Benson, Jessica A	QUV-CHM03	No Signature is Necessary	NA
10/28/22 00:20	Benson, Jessica A	QUV-CHM03	Order is Entered	NA
10/28/22 00:21		QUV-CHM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Miscellaneous O 221028-003504792 Transmitted 10/28/22 00:34 Onyekwulije, Anne N, MD Benson, Jessica A  
 Pharmacy Missing Med Slip NOW Order Source: Nursing Orders

Requesting Person BENSJES  
 Extension 29084  
 Please send the following medication(s) nicardipine drip

Date & Time	User	Device	Event	Acknowledged
10/28/22 00:34	Benson, Jessica A	Desktop	No Signature is Necessary	Y
10/28/22 00:34	Benson, Jessica A	Desktop	Order is Entered	Y
10/28/22 00:34	Benson, Jessica A	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
10/28/22 00:34		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3464723	
			Old:	
10/28/22 00:34		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
10/28/22 07:39	Hong, Grace	Other	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221028-011554927 Completed 10/28/22 01:09

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/28/22 01:15

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 10/28/22 01:15

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 10/28/22 01:16

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221028-023546832 Completed 10/28/22 02:27

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/28/22 02:35

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 10/28/22 02:35

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 10/28/22 02:36

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221028-031524191 Completed 10/28/22 03:06

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/28/22 03:15

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 10/28/22 03:15

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 10/28/22 03:16

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Chemistry 221028-040003103 Cancelled 10/28/22 04:30 Amani-Yazdi, Rambod, MD Benson, Jessica A  
 CMP [Comprehensive Metabolic Panel] Routine Order Source: Telephone Orders - Read Back

Stop Reason: REFERR TO ;C255 FOR RESULTS,,,VRM,,,0446..10/28/22

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 04:00	Benson, Jessica A	Desktop	Signature is Necessary	Y
1 10/28/22 04:00	Benson, Jessica A	Desktop	Order is Entered	Y
2 10/28/22 04:00		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/28/22 04:00		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
4 10/28/22 04:46	Mijares, Veronica R	QUV-CH03	Status changed:	Y
			New: Cancelled	
			Old: Logged	
5 10/28/22 06:44	Benson, Jessica A	Desktop	Order acknowledged	NA
6 10/28/22 07:41	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA

Bedside Testing 221028-041049109 Completed 10/28/22 04:04  
 Glucose (Bedside) Routine

Stop Reason: Completed by LIS

Batou, Augen, DO Benson, Jessica A  
 Order Source:

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 04:10	Benson, Jessica A	QUV-CH03	No Signature is Necessary	NA
1 10/28/22 04:10	Benson, Jessica A	QUV-CH03	Order is Entered	NA
2 10/28/22 04:11		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221028-051529848 Completed 10/28/22 05:04

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/28/22 05:15

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 10/28/22 05:15

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 10/28/22 05:15

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221028-062036593 Completed 10/28/22 06:09

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/28/22 06:20

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 10/28/22 06:20

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 10/28/22 06:20

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221028-073029722 Completed 10/28/22 07:21

Batou, Augen, DO

Hong, Grace

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/28/22 07:30

Hong, Grace

QUV-CH03

No Signature is Necessary

NA

1 10/28/22 07:30

Hong, Grace

QUV-CH03

Order is Entered

NA

2 10/28/22 07:30

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221028-082043373	Completed	10/28/22 08:12	Batou, Augen, DO	Hong, Grace

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 08:20	Hong, Grace	QUV-CM03	No Signature is Necessary	NA
1 10/28/22 08:20	Hong, Grace	QUV-CM03	Order is Entered	NA
2 10/28/22 08:21		QUV-CM03	Status changed:	NA

New: Completed

Old: In Process

Bedside Testing	221028-091540829	Completed	10/28/22 09:07	Batou, Augen, DO	Hong, Grace
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Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 09:15	Hong, Grace	QUV-CM03	No Signature is Necessary	NA
1 10/28/22 09:15	Hong, Grace	QUV-CM03	Order is Entered	NA
2 10/28/22 09:16		QUV-CM03	Status changed:	NA

New: Completed

Old: In Process

Routine Care	221028-093515006	Completed	10/28/22 09:34	Batou, Augen, DO	Batou, Augen, DO
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ONCE

Order Source: Provider

Stop Reason: Discharged

Intervention Text start tube feeds per dietary recommendations

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 09:35	Batou, Augen, DO	QDUK101	Order is Entered and Signed	Y
2 10/28/22 09:35		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 10/28/22 09:42	Hong, Grace	Other	Order acknowledged	NA
4 11/09/22 22:57	Maglumog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
6	11/10/22 03:11	Apa, Mary Jurem	Desktop	Order acknowledged	NA
7	12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
				<b>New:</b> Completed	
				<b>Old:</b> In Process	

Departmental Co 221028-093515021 **Transmitted** 10/28/22 09:35 **Batou, Augen, DO** **Batou, Augen, DO**  
**Consult to Dietitian** | Routine **Order Source:** Provider

**Dietary Consult** Tube Feeding

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 09:35	Batou, Augen, DO	QDIK101	Order is Entered and signed	Y
2 10/28/22 09:35		QUV-BG19	Queued to destination:	NA
			<b>New:</b> QFNSP1 #3465401	
			<b>Old:</b>	
3 10/28/22 09:35		QUV-BG19	Queued to destination:	NA
			<b>New:</b> QFNSEP3 #3465402	
			<b>Old:</b>	
4 10/28/22 09:35		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
5 10/28/22 09:42	Hong, Grace	Other	Order acknowledged	NA
6 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is set to continue upon transfer	NA
7 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Transfer Provider added:	NA
8 11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is continued upon transfer	Y
9 11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
10 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221028-100541780	Completed	10/28/22 09:55	Batou, Augen, DO	Hong, Grace
<b>Glucose (Bedside)</b>					
<b>Stop Reason:</b> Completed by LIS					
<b>Order Source:</b> Routine					

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 10:05	Hong, Grace	QUV-CM03	No Signature is Necessary	NA
1 10/28/22 10:05	Hong, Grace	QUV-CM03	Order is Entered	NA
2 10/28/22 10:05		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	Y
			<b>Old:</b> In Process	

Routine Care 221028-103313864 Canceled 11/05/22 10:00 Amani-Yazdi, Rambod, MD **Order Source:** Provider  
**Glucose Check (Bedside)** Q4HR

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 10:33	Amani-Yazdi, Rambod, MD	QICUK101	Order is Entered and Signed	Y
2 10/28/22 10:33		QUV-BG19	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Verified	
3 10/28/22 10:34	Hong, Grace	Other	Order acknowledged	NA
4 10/29/22 12:44	Hernandez, Lena	Desktop	Freq added:	Y
			<b>New:</b> Q4HR	
			<b>Old:</b>	
5 10/29/22 12:48	Hernandez, Lena	Desktop	Order acknowledged	NA
6 10/30/22 10:16	Geula, Arsalan, MD	QUV-BG19	Order is Signed by Geula, Arsalan, MD	NA
7 11/05/22 08:06	Malaca, Jessalije	Desktop	Start Date edited:	Y
			<b>New:</b> Sat Nov 5	
			<b>Old:</b> Fri Oct 28	
7 11/05/22 08:06	Malaca, Jessalije	Desktop	Start Time edited:	Y
			<b>New:</b> 10:00	
			<b>Old:</b> 10:33	
7 11/05/22 08:06	Malaca, Jessalije	Desktop	Freq added:	Y
			<b>New:</b> Q4HR	
			<b>Old:</b>	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
7	11/05/22 08:06	Malaca, Jessalite	Desktop	Freq removed: New: Q2HR Old: Freq removed: New: Q4HR Old:	Y
7	11/05/22 08:06	Malaca, Jessalite	Desktop	Order is Signed by Amani-Yazdi, Rambod, MD Status changed: New: Cancelled Old: In Process	Y
8	11/05/22 08:07	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA
9	11/05/22 08:08	Malaca, Jessalite	Desktop	Order is Signed by Amani-Yazdi, Rambod, MD	NA
10	11/05/22 08:20	Malaca, Jessalite	Desktop	Order is Signed by Amani-Yazdi, Rambod, MD	NA
11	11/05/22 08:36	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA

Chemistry 221028-103943710 Cancelled 10/28/22 17:00 Amani-Yazdi, Rambod, MD Q8H  
**Basic Metabolic Panel** | Q8H  
**Order Source:** Verbal Orders- Read Back

Stop Reason: REDUNDANT ORDER FOR BMP

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 10:37	Hong, Grace	Other	Signature is Necessary	Y
1 10/28/22 10:37	Hong, Grace	Other	Order is Entered	Y
2 10/28/22 10:38		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 10/28/22 10:38		QUV-CM03	Status changed: New: Cancelled Old: Transmitted	Y
4 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA
5 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA

Chemistry 221028-103943726 Completed 10/29/22 01:24

Amani-Yazdi, Rambod, MD Q8H

Order Source: Verbal Orders- Read Back

Stop Reason: Completed by LIS

Specimen	Date & Time	User	Device	Event	Acknowledged
				Has been collected	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/28/22 10:37	Hong, Grace			
1	10/28/22 10:37	Hong, Grace			
2	10/28/22 10:39	Hong, Grace			
3	10/28/22 12:48	Amani-Yazdi, Rambod, MD			
4	10/29/22 00:04				
5	10/29/22 00:10				
6	10/29/22 01:24	Tagorda, Buenafe P			
7	10/29/22 01:24	Tagorda, Buenafe P			
8	10/29/22 01:33				
9	10/29/22 01:33				
10	10/29/22 01:55				

**Signature is Necessary**  
**Order is Entered**  
**Order acknowledged**  
**Order is Signed by Amani-Yazdi, Rambod, MD**  
**Status changed:**  
**New: Transmitted**  
**Old: Verified**  
**Status changed:**  
**New: Logged**  
**Old: Transmitted**  
**Specimen Collected: 1029;C00242R**  
**Order is collected**  
**Start Time edited:**  
**New: 01:24**  
**Old: 01:23**  
**Status changed:**  
**New: In Process**  
**Old: Logged**  
**Status changed:**  
**New: Completed**  
**Old: In Process**

**Chemistry** 221028-1039437261 **Completed** 10/29/22 10:51 **Amani-Yazdi, Rambod, MD** **Hong, Grace**  
**Basic Metabolic Panel** **Q9H** **Order source:** Verbal Orders- Read Back  
**Stop Reason:** Completed by LIS

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 10:37	Hong, Grace	Other	Signature is Necessary	Y
1 10/28/22 10:37	Hong, Grace	Other	Order is Entered	Y
2 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA
3 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA
4 10/29/22 00:04		QUV-BG19	Status changed:	NA
			<b>New: Transmitted</b>	
			<b>Old: Verified</b>	
5 10/29/22 00:10		QUV-CM03	Status changed:	NA

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	6	10/29/22 00:25		QUV-CM03	
				<b>New:</b> Logged <b>Old:</b> Transmitted Status changed:	NA
				<b>New:</b> In Process <b>Old:</b> Logged	
				Start Time edited: <b>New:</b> 10:51 <b>Old:</b> 09:00	NA
Basic Metabolic Panel	7	10/29/22 11:11		QUV-CM03	
				<b>New:</b> Completed <b>Old:</b> In Process	NA
	8	10/29/22 11:37		QUV-CM03	
				<b>New:</b> Completed <b>Old:</b> In Process	NA

221028-103943741 Completed 10/30/22 01:23      Amani-Yazdi, Rambod, MD      Hong, Grace      Order Source: Verbal Orders- Read Back

Stop Reason: Completed by Lis

Specimen      Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 10:37	Hong, Grace	Other	Signature is Necessary	Y
1 10/28/22 10:37	Hong, Grace	Other	Order is Entered	Y
2 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA
3 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BGI9	Order is Signed by Amani-Yazdi, Rambod, MD	NA
4 10/30/22 00:03		QUV-BGI9	Status changed: <b>New:</b> Transmitted <b>Old:</b> Verified	NA
5 10/30/22 00:09		QUV-CM03	Status changed: <b>New:</b> Logged <b>Old:</b> Transmitted	NA
6 10/30/22 01:24	Contreras, Ashley J	Phone	Specimen Collected: 1030:000205R	NA
7 10/30/22 01:24	Contreras, Ashley J	Phone	Order is collected	NA
8 10/30/22 01:29		QUV-CM03	Start Time edited: <b>New:</b> 01:23 <b>Old:</b> 00:16	NA
9 10/30/22 01:29		QUV-CM03	Status changed: <b>New:</b> In Process <b>Old:</b> Logged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
10	10/30/22 02:21			QUV-CH03	NA

Chemistry 221028-103943726 Completed 10/29/22 17:10 Amani-Yazdi, Rambod, MD Hong, Grace  
 Basic Metabolic Panel Q8H  
 Stop Reason: Completed by Lis  
 Order Source: Verbal Orders- Read Back

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 10:37	Hong, Grace	Other	Signature is Necessary	Y
1 10/28/22 10:37	Hong, Grace	Other	Order is Entered	Y
2 10/28/22 10:39	Hong, Grace	Other	Order acknowledged	NA
3 10/28/22 12:48	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is signed by Amani-Yazdi, Rambod, MD	NA
4 10/29/22 00:04		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
5 10/29/22 00:10		QUV-CH03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
6 10/29/22 00:25		QUV-CH03	Status changed:	NA
			New: In Process	
			OLD: Logged	
7 10/29/22 17:07	Cox, Cori	Phone	Specimen Collected: 1029:C00244R	NA
8 10/29/22 17:07	Cox, Cori	Phone	Order is collected	NA
9 10/29/22 17:20		QUV-CH03	Start time edited:	NA
			New: 17:10	
			OLD: 16:54	
10 10/29/22 17:54		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Interventional 221028-110417690 Completed 10/28/22 11:02 Batou, Augen, DO Hong, Grace  
**IR guided picc insert RN >5 Yr** Routine **Order Source:** Verbal Orders- Read Back

**Stop Reason:** Completed by Its

**Reason For Exam** multiple draws and medications

**Reason for Exam** multiple draws and medications  
**NPO since** 10/26

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 11:02	Hong, Grace	Other	Signature is Necessary	Y
1 10/28/22 11:02	Hong, Grace	Other	Order is Entered	Y
2 10/28/22 11:02		QUV-BG19	Status changed: New: Transmitted	NA
			Old: Verified	
3 10/28/22 11:02	Hong, Grace	Other	Order acknowledged	NA
4 10/28/22 11:10		QUV-CM03	Query Reason For Exam edited: New: multiple draws and medications	NA
			Old:	
5 10/28/22 11:10		QUV-CM03	Status changed: New: Logged	NA
			Old: Transmitted	
6 10/28/22 11:31	Batou, Augen, DO	QUV-BG19	Order is Signed by Batou, Augen, DO	NA
7 10/28/22 17:32	Garcia, Jesse M	QUV-CM03	Status changed: New: Completed	NA
			Old: Logged	

**Restraint** 221028-110454857 **Completed** 10/28/22 11:04 **Order Source:** Written Orders  
 Restraint Non-Violent Routine **Order Source:** Written Orders

**Stop Reason:**

**Restraint Type** Wrist, Left  
 Wrist, Right

**Restraint Mental Status** Confusion  
 Forgetful

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
: Yes					
: Yes					
: No					

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 11:04	Tong, Malina I	Desktop	Order created because of Renewal	Y
2 10/28/22 11:04	Tong, Malina I	Desktop	No Signature is Necessary	Y
3 10/28/22 11:09	Hong, Grace	Other	Order acknowledged	NA
4 10/29/22 16:38	Ramos, Jessica	Desktop	New Order Created. Order is Completed via Auto Complete.	NA
5 10/29/22 16:38	Ramos, Jessica	Desktop	Copied to Restraint Non-Violent 221029-163810868	Y
6 10/29/22 16:38	Ramos, Jessica	Desktop	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> Verified	
7 10/29/22 16:42	Ramos, Jessica	Desktop	Order acknowledged	NA

Bedside Testing 221028-121547805 Completed 10/28/22 12:07 Batou, Augen, DO Hong, Grace  
**Glucose (Bedside)** Routine **Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 12:15	Hong, Grace	QUV-CH03	No Signature is Necessary	NA
1 10/28/22 12:15	Hong, Grace	QUV-CH03	Order is Entered	NA
2 10/28/22 12:15		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Bedside Testing 221028-141931660 Completed 10/28/22 14:12 Batou, Augen, DO Hong, Grace  
**Glucose (Bedside)** Routine **Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
Continued on Next Page				



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/28/22 14:19	Hong, Grace	10/28/22 14:51	Batou, Augen, DO	Hong, Grace
1	10/28/22 14:19	Hong, Grace		None	Hong, Grace
2	10/28/22 14:19				

Miscellaneous O 221028-145342705 Transmitted 10/28/22 14:51 Batou, Augen, DO Hong, Grace  
 Pharmacy Missing Med Slip | NOW | Order Source: Nursing Orders

Requesting Person HONGGRA  
 Extension 29084

Please send the following medication(s) Nimodipine STAT please. It is due at 1500

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 14:52	Hong, Grace	Other	No Signature is Necessary	Y
1 10/28/22 14:52	Hong, Grace	Other	Order is Entered	Y
1 10/28/22 14:52	Hong, Grace	Other	Reflex Set: Pharmacy Missing Med generated	Y
2 10/28/22 14:52		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #346441	
			Old:	
3 10/28/22 14:52		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/28/22 15:00	Hong, Grace	Other	Order acknowledged	NA

Bedside Testing 221028-155923889 Completed 10/28/22 15:50 Batou, Augen, DO Hong, Grace  
 Glucose (Bedside) | Routine | Order Source:  
 Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 15:59	Hong, Grace	QUV-CM03	No Signature is Necessary	NA
1 10/28/22 15:59	Hong, Grace	QUV-CM03	Order is Entered	NA
2 10/28/22 16:00		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
X-Ray	221028-162138951	Resulted	10/28/22 16:21	Batou, Augen, DO	Sandiego, Arnold S
XR chest 1 view plicc				Stat	Order Source: Standard Procedure Orders

Reason For Exam s/p PICC; RN to call when ready for pCXR

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 16:21	Sandiego, Arnold S	QICUK103	No Signature is Necessary	Y
1 10/28/22 16:21	Sandiego, Arnold S	QICUK103	Order is Entered	Y
2 10/28/22 16:21		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 10/28/22 16:21		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
4 10/28/22 16:23	Hong, Grace	other	Order acknowledged	NA
5 10/28/22 17:21	Gutierrez, Genesis Sol	QUV-CM03	Status changed:	NA
			New: Taken	
			Old: Logged	
6 10/28/22 17:58		QUV-CM03	Status changed:	NA
			New: Resulted	
			Old: Taken	

Dietary 221028-164755146 Completed 10/28/22 17:00

Batou, Augen, DO

Hong, Grace

Tube Feeding

Stop Reason: Stop date/time met

Order Source: Telephone Orders- Read Back

Formula Glucerna 1.2

Continuous Start Rate (mL/hour) 20

Continuous Goal Rate (mL/hour) 45

Supplement: Prosource (15g/pack)

Amount: 1 Packet

Frequency: DAILY

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Dietary Comment 1. Initiate TF via OGF: Glucerna 1.2 @ 20 ml/hr, increase 10 mls Q6H as tolerated until 45 ml/hr goal rate is reached  
 2. Prosource 1 packet daily

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 16:46	Hong, Grace	Other	Signature is Necessary	Y
1 10/28/22 16:46	Hong, Grace	Other	Order is Entered	Y
2 10/28/22 16:46		QUV-BG19	Queued to destination:	NA
			New: QDIETP1 #3466772	
			Old: Sent to Other Vendor:	NA
3 10/28/22 16:46		QUV-BG19	New: OM Diet Orders to Computation	
			Old: Status changed:	NA
4 10/28/22 16:46		QUV-BG19	New: Transmitted	
			Old: Verified	
5 10/28/22 16:46	Hong, Grace	Other	Order acknowledged	NA
6 10/28/22 17:33	Batou, Augen, DO	QUV-BG19	Order is Signed by Batou, Augen, DO	NA
7 10/31/22 11:11	Lau, Tsang, MD	QNSUK103	Query Dietary Comment edited:	Y
			New: 1. Initiate TF via OGF: Glucerna 1.2 @ 20 ml/hr, increase 10 mls Q6H as tolerated until 45 ml/hr goal rate is reached	
			2. Prosource 1 packet daily	
8 10/31/22 11:11	Lau, Tsang, MD	QNSUK103	Old: 1. Initiate TF via OGF: Glucerna 1.2 @ 20 ml/hr, increase 10 mls Q6H as tolerated until 45 ml/hr goal rate is reached	
			2. Prosource 1 packet daily	
			New: Queued to destination:	NA
			Old: QDIETP1	
9 10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
10 11/08/22 12:48	Maglunog, Alexander A, MD	QICUK102	Diet Stop Dt/Time added:	Y
			New: 11/09/22 00:01	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					Old:
	11	11/08/22 12:48	MagLunog, Alexander A, MD	QICUK102	Queued to destination: New: QDIETP1
					Old:
	12	11/08/22 12:52	DEVERA, JUSTIN	Desktop	Order acknowledged
	13	11/09/22 00:01		QUV-BG19	New Order Created. Order is Completed via Auto Complete.
	14	11/09/22 00:01		QUV-BG19	Status changed: New: Completed
					Old: Transmitted
	15	11/09/22 07:19	DEVERA, JUSTIN	Desktop	Order acknowledged
					Old: In Process
					Order Source: Hong, Grace
					Order Source: Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 17:54	Hong, Grace	QUV-CM03	No Signature is Necessary	NA
1 10/28/22 17:54	Hong, Grace	QUV-CM03	Order is Entered	NA
2 10/28/22 17:55		QUV-CM03	Status changed: New: Completed	NA
			Old: In Process	

Miscellaneous O 221028-200227014 Transmitted 10/28/22 20:01 Batou, Augen, DO  
 Pharmacy Missing Med Slip NOW Order Source: Nursing Orders  
 Requesting Person LOPEZNI  
 Extension 29082  
 Please send the following medication(s) PLEASE SEND INSULIN DRIP. THANK YOU.

Date & Time	User	Device	Event	Acknowledged
1 10/28/22 20:01	Lopez, Monica	Desktop	No Signature is Necessary	Y
1 10/28/22 20:01	Lopez, Monica	Desktop	Order is Entered	Y
1 10/28/22 20:01	Lopez, Monica	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 10/28/22 20:01		QUV-BG19	Queued to destination: New: QPHARMP2 #3467127	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				Old:	
	3		10/28/22 20:01	QUV-BG19	Status changed:
					New: Transmitted
					Old: Verified
	4		10/29/22 08:36	Hernandez, Lena	Order acknowledged
					Old: In Process
					Old: In Process

Date & Time	User	Device	Event	Acknowledged
10/28/22 22:10	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
10/28/22 22:10	Lopez, Monica	QUV-CH03	Order is Entered	NA
10/28/22 22:11		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Stop Reason: Completed by Lis

Order Source:

Date & Time	User	Device	Event	Acknowledged
10/28/22 22:16	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
10/28/22 22:16	Lopez, Monica	QUV-CH03	Order is Entered	NA
10/28/22 22:16		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Stop Reason: Completed by Lis

Order Source:

Date & Time	User	Device	Event	Acknowledged
10/29/22 00:35	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
10/29/22 00:35	Lopez, Monica	QUV-CH03	Order is Entered	NA
10/29/22 00:35		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221029-003531103 Completed 10/29/22 00:25

Batou, Augen, DO

Lopez, Monica

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/29/22 00:35	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
10/29/22 00:35	Lopez, Monica	QUV-CH03	Order is Entered	NA
10/29/22 00:35		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

Bedside Testing 221029-023538203	Completed	10/29/22 02:24	Batou, Augen, DO	Lopez, Monica
<b>Glucose (Bedside)</b>				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 02:35	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
1 10/29/22 02:35	Lopez, Monica	QUV-CH03	Order is Entered	NA
2 10/29/22 02:36		QUV-CH03	Status changed:	NA
New: Completed				
Old: In Process				

Bedside Testing 221029-040104288	Completed	10/29/22 03:54	Batou, Augen, DO	Lopez, Monica
<b>Glucose (Bedside)</b>				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 04:01	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
1 10/29/22 04:01	Lopez, Monica	QUV-CH03	Order is Entered	NA
2 10/29/22 04:01		QUV-CH03	Status changed:	NA
New: Completed				
Old: In Process				

Bedside Testing 221029-045537820	Completed	10/29/22 04:42	Batou, Augen, DO	Lopez, Monica
<b>Glucose (Bedside)</b>				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 04:55	Lopez, Monica	QUV-CH03	No Signature is Necessary	NA
1 10/29/22 04:55	Lopez, Monica	QUV-CH03	Order is Entered	NA
2 10/29/22 04:55		QUV-CH03	Status changed:	NA
New: Completed				
Old: In Process				



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221029-061554346 Completed 10/29/22 06:05

Batou, Augen, DO

Lopez, Monica

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/29/22 06:15

Lopez, Monica

QUV-CM03

No Signature is Necessary

NA

1 10/29/22 06:15

Lopez, Monica

QUV-CM03

Order is Entered

NA

2 10/29/22 06:16

QUV-CM03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221029-081028069 Completed 10/29/22 08:03

Batou, Augen, DO

Hernandez, Lena

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 10/29/22 08:10

Hernandez, Lena

QUV-CM03

No Signature is Necessary

NA

1 10/29/22 08:10

Hernandez, Lena

QUV-CM03

Order is Entered

NA

2 10/29/22 08:10

QUV-CM03

Status changed:

NA

New: Completed

Old: In Process

Hematology 221029-094733432 Completed 10/30/22 05:30

Batou, Augen, DO

Batou, Augen, DO

Complete Blood Count/Auto diff

AM

Order Source: Provider

Stop Reason: Completed by Lis

Specimen

Has been collected

Date & Time

User

Device

Event

Acknowledged

1 10/29/22 09:47

Batou, Augen, DO

QDUK101

Order is Entered and Signed

Y

2 10/29/22 09:57

Hernandez, Lena

Desktop

Order acknowledged

NA

3 10/30/22 00:01

QUV-BG19

Status changed:

NA

New: Transmitted

Old: Verified

4 10/30/22 00:06

QUV-CM03

Status changed:

NA

New: Logged

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	10/30/22 00:34	QUV-CH03		Old: Transmitted New: In Process	NA
6	10/30/22 01:24	Contreras, Ashley J	Phone	Old: Logged New: Specimen Collected: 1030:H00081R	NA
7	10/30/22 01:24	Contreras, Ashley J	Phone	Old: Logged New: Order is collected	NA
8	10/30/22 07:04	QUV-CH03		Old: 05:30 New: Start Time edited:	NA
9	10/30/22 07:47	QUV-CH03		Old: 00:16 New: Status changed:	NA
<b>Complete Blood Count/Auto diff</b> Hematology 221029-0947334321 Completed 10/31/22 05:25 Batou, Augen, DO Batou, Augen, DO <b>Stop Reason:</b> Completed by LIS   AM <b>Order Source:</b> Provider					
<b>Specimen</b> Send someone from the department to collect					
1	10/29/22 09:47	Batou, Augen, DO	QDUK101	Event: Order is Entered and Signed	Y
2	10/29/22 09:57	Hernandez, Lena	Desktop	Event: Order acknowledged	NA
3	10/31/22 00:01	QUV-BG19		Event: Status changed: New: Transmitted Old: Verified	NA
4	10/31/22 00:04	QUV-CH03		Event: Status changed: New: Logged Old: Transmitted	NA
5	10/31/22 00:36	QUV-CH03		Event: Status changed: New: In Process Old: Logged	NA
6	10/31/22 06:26	QUV-CH03		Event: Start Time edited: New: 05:25 Old: 05:00	NA
7	10/31/22 07:04	QUV-CH03		Event: Status changed: New: Completed Old: In Process	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** Hematology **Order** 221029-094733448 **Status** Completed **Start** 11/01/22 06:30 **Ord Provider** Batou, Augen, DO **Entered By** Batou, Augen, DO  
**Complete Blood Count/Auto diff** **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDDK101	Order is Entered and Signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 11/01/22 00:01		QUV-BG19	Status changed: New: Transmitted	NA
4 11/01/22 00:03		QUV-CM03	OLD: Verified Status changed:	NA
5 11/01/22 01:32		QUV-CM03	New: Logged OLD: Transmitted Status changed:	NA
6 11/01/22 06:45		QUV-CM03	OLD: Logged New: In Process start Time edited:	NA
7 11/01/22 07:24		QUV-CM03	OLD: 05:00 Status changed: New: Completed OLD: In Process	NA

Chemistry 221029-094733479 **Completed** 10/30/22 05:30 **Batou, Augen, DO** **Batou, Augen, DO**  
**Magnesium** **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDDK101	Order is Entered and Signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 10/30/22 00:01		QUV-BG19	Status changed: New: Transmitted OLD: Verified	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

4 10/30/22 00:06

Status

Start

QUV-CH03

Ord Provider

Entered By

NA

Status changed:

New: Logged

Old: Transmitted

Status changed:

New: In Process

Old: Logged

Specimen Collected: 1030:C00112R

Order is collected

Start Time edited:

New: 05:30

Old: 00:16

Status changed:

New: Completed

Old: In Process

Chemistry 221029-0947334791

Completed 10/31/22 05:25

Batou, Augen, DO

Batou, Augen, DO

Magnesium

AM

Order Source: Provider

Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDUK101	Order is Entered and Signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 10/31/22 00:01		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/31/22 00:04		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/31/22 00:36		QUV-CH03	Status changed:	NA
			New: In Process	
			Old: Logged	
6 10/31/22 06:26		QUV-CH03	Start Time edited:	NA
			New: 05:25	
			Old: 05:00	
7 10/31/22 06:59		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221029-094733495	Cancelled	11/01/22 05:00	Batou, Augen, DO	Batou, Augen, DO
Magnesium				AM	AM
	Stop Reason: Cancelled by Lis				Order Source: Provider

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDKI01	Order Is Entered and Signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 11/01/22 00:01		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/01/22 00:03		QUV-CH03	Status changed:	NA
			New: Logged	
5 11/01/22 01:04	Marquez, Rosalie	QUV-CH03	Status changed:	Y
			New: Cancelled	
			Old: Logged	
6 11/01/22 10:24	Donske, Ruth	Desktop	Order acknowledged	NA

Chemistry 221029-0947334951 Completed 10/30/22 05:30 Batou, Augen, DO Batou, Augen, DO  
 Comprehensive Metabolic Panel AM Order Source: Provider  
 Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDKI01	Order Is Entered and Signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 10/30/22 00:01		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/30/22 00:06		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	10/30/22 00:34	QUV-CM03		Status changed: New: In Process	NA
				OLD: Logged	
6	10/30/22 01:24	Contreras, Ashley J	Phone	Specimen Collected: 1030:C00112R	NA
7	10/30/22 01:24	Contreras, Ashley J	Phone	Order is collected	NA
8	10/30/22 07:04	QUV-CM03		Start Time edited: New: 05:30	NA
				OLD: 00:16	
9	10/30/22 07:33	QUV-CM03		Status changed: New: Completed	NA
				OLD: In Process	

Chemistry 221029-094733463 Completed 10/31/22 05:25 Batou, Augen, DO  
 Comprehensive Metabolic Panel AM  
 Stop Reason: Completed by LIS

Batou, Augen, DO Batou, Augen, DO  
 Order Source: Provider

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDK101	Order is Entered and signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 10/31/22 00:01		QUV-BG19	Status changed: New: Transmitted OLD: Verified	NA
4 10/31/22 00:04		QUV-CM03	Status changed: New: Logged OLD: Transmitted	NA
5 10/31/22 00:36		QUV-CM03	Status changed: New: In Process OLD: Logged	NA
6 10/31/22 06:26		QUV-CM03	Start Time edited: New: 05:25 OLD: 05:00	NA
7 10/31/22 06:59		QUV-CM03	Status changed: New: Completed OLD: In Process	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Chemistry

221029-0947334631

Cancelled

11/01/22 05:00

Batou, Augen, DO

Batou, Augen, DO

Comprehensive Metabolic Panel

AM

Order Source: Provider

Stop Reason: Discontinue

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 09:47	Batou, Augen, DO	QDDK101	Order is Entered and Signed	Y
2 10/29/22 09:57	Hernandez, Lena	Desktop	Order acknowledged	NA
3 10/31/22 11:14	Lau, Tsang, MD	QNSUK103	Order cancelled	Y
4 10/31/22 11:15	Lau, Tsang, MD	QNSUK103	Status changed:	Y
			New: Cancelled	
			Old: Verified	
5 10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA

Bedside Testing 221029-102055192 Completed 10/29/22 10:11

Batou, Augen, DO

Hernandez, Lena

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 10:20	Hernandez, Lena	QUV-CH03	No Signature is Necessary	NA
1 10/29/22 10:20	Hernandez, Lena	QUV-CH03	Order is Entered	NA
2 10/29/22 10:21		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Miscellaneous O 221029-105531850 Transmitted 10/29/22 10:54

Batou, Augen, DO

Hernandez, Lena

Pharmacy Missing Med Slip

NOW

Order Source: Nursing Orders

Requesting Person

HERNLEN  
29084

Extension

PLEASE SEND CARDENE

Date & Time

User

Device

Event

Acknowledged

1 10/29/22 10:55

Hernandez, Lena

Desktop

No Signature is Necessary

Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      **Attending:** Lau, Tsang, MD      **Location:** Q 1 Intensive Care Unit      **Medical Record Number:** MR01483046  
 61/F      **Reason:** Hydrocephalus      **Account Number:** QH0054940416      **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/29/22 10:55	Hernandez, Lena	Desktop	Order Is Entered	Y
1	10/29/22 10:55	Hernandez, Lena	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2	10/29/22 10:55		QUV-BG19	Queued to destination:	NA
				<b>New:</b> QPHARMP2 #3468104	
				<b>Old:</b>	
3	10/29/22 10:55		QUV-BG19	Status changed:	NA
				<b>New:</b> Transmitted	
				<b>Old:</b> Verified	
4	10/29/22 11:19	Hernandez, Lena	Desktop	Order acknowledged	NA

Medications 221029-114716460 Completed 10/29/22 12:00      Geula, Arsalan, MD      **Order Source:** Provider

**Novolin N**  
**Stop Reason:** Order edited - Discontinuing original order

Medication	Dose	Per	Days	Hours	Total Doses	Clinical Indication
Insulin NPH [NOVOLIN N]	8 UNITS					
<b>Route</b>	<b>Frequency</b>	<b>Sched</b>	<b>PRN Reason</b>	<b>Days</b>	<b>Hours</b>	<b>Total Doses</b>
SUB-Q	Q8H	SCH				
<b>Stop Date/Time:</b>						
<b>Discontinued:</b>	10/30/22 11:25					

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 11:47	Geula, Arsalan, MD	Desktop	Order Is Entered and Signed	Y
2 10/29/22 11:47		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 10/29/22 11:47		QUV-CM03	Order Type edited:	Y
			<b>New:</b> MED	
			<b>Old:</b>	
4 10/29/22 11:47		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 10/29/22 11:55	Trinh, Karen, PharmD	QUV-CM03	Start Time edited:	Y
			<b>New:</b> 12:00	
			<b>Old:</b> 11:45	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
6	10/29/22 11:55	Trinh, Karen, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
7	10/29/22 12:06	Hernandez, Lena	Desktop	Order acknowledged	NA
8	10/30/22 11:25	Geula, Arsalan, MD	Desktop	Stop Request	Y
9	10/30/22 11:25	Geula, Arsalan, MD	Desktop	Copied to NOVOLIN N 221030-112552295	Y
10	10/30/22 11:25	Geula, Arsalan, MD	QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
11	10/30/22 11:47	Hernandez, Lena	Laptop	Order acknowledged	NA

Medications 221029-114716445 Completed 10/29/22 11:45 Geula, Arsalan, MD

Order Source: Provider

Novolog Stop Reason: Discontinue

Medication Insulin Aspart [NOVOLOG] Dose 0 UNIT Par

Route Frequency Sched PRN Reason  
SUB-Q Q4H PRN Glucose Coverage  
Stop Date/Time:  
Discontinued: 11/24/22 10:19

Days Hours Total Doses

Clinical Indication

Condition	Dose/Route	Instruction
Fingertick Blood Glucose	Insulin Units	
<70	-none-	Initiate hypoglycemia protocol
70-150 mg/dl	Give no correctional insul	
151-200 mg/dl	2	units
201-280 mg/dl	4	units
281-300 mg/dl	6	units
301-380 mg/dl	8	units
381-400 mg/dl	10	units
>400 mg/dl	12	units

Protocol text:  
Call Dr. Amani if BS is <70 or >400.

Date & Time

User

Device

Event

Acknowledged

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	10/29/22 11:47	Geula, Arsalan, MD	Desktop	Order Is Entered and Signed	Y
2	10/29/22 11:47		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
3	10/29/22 11:47		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
4	10/29/22 11:54	Trinh, Karen, PharmD	QUV-CM03	Status changed:	NA
				New: Pha Verified	
				Old: Logged	
5	10/29/22 12:06	Hernandez, Lena	Desktop	Order acknowledged	NA
6	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCUK101	Dose/Route edited:	Y
				New: 3	
				Old: 2	
6	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCUK101	Dose/Route edited:	Y
				New: 6	
				Old: 4	
6	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCUK101	Dose/Route edited:	Y
				New: 8	
				Old: 6	
6	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCUK101	Dose/Route edited:	Y
				New: 10	
				Old: 8	
6	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCUK101	Dose/Route edited:	Y
				New: 12	
				Old: 10	
6	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCUK101	Dose/Route edited:	Y
				New: 14	
				Old: -NONE-	
				Instruction edited:	Y
				New: Call Dr. Amani if BS is <70 or >400.	
				Old: Call Dr. Geula if BS is <70 or >400.	
7	11/01/22 16:12	Donskey, Ruth	Desktop	Order acknowledged	NA
8	11/03/22 07:52	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited:	Y
				New: 4	
				Old: 3	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	11/03/22 08:14	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
10	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
12	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
13	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
14	11/10/22 01:52	Apa, Mary Jurem	Desktop	Order acknowledged	NA
15	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited: New: 2 Old: 4	Y
15	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited: New: 4 Old: 6	Y
15	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited: New: 6 Old: 8	Y
15	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited: New: 8 Old: 10	Y
15	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited: New: 10 Old: 12	Y
15	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Dose/Route edited: New: 12 Old: 14	Y
16	11/13/22 14:23	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
17	11/24/22 10:19	Geula, Arsalan, MD	Desktop	Stop Request	Y
18	11/24/22 10:21	Geula, Arsalan, MD	QUV-CH03	Status changed: New: Completed Old: Pha Verified	Y
19	11/24/22 11:35	Tong, Malina I	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Bedside Testing 221029-120538418 Completed 10/29/22 11:54 Batou, Augen, DO Hernandez, Lena  
**Glucose (Bedside)** Routine **Order Source:**  
**Stop Reason:** Completed by LIs

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 12:05	Hernandez, Lena	QUV-CM03	No Signature is Necessary	NA
1 10/29/22 12:05	Hernandez, Lena	QUV-CM03	Order is Entered	NA
2 10/29/22 12:05		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>OLD:</b> In Process	

CT Scan 221029-135440554 Resulted 10/31/22 08:00 Gibani, Siraj M, MD Gibani, Siraj M, MD  
 CT head/brain w/ con Routine **Order Source:** Provider

**Mode Of Transportation** Hospital Bed  
**Reason For Exam** F/u on IVH

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 13:54	Gibani, Siraj M, MD	QICUK104	Order is Entered and Signed	Y
2 10/29/22 13:54		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>OLD:</b> Verified	
3 10/29/22 13:54		QUV-CM03	Query Node Of Transportation edited:	NA
			<b>New:</b> Hospital Bed	
			<b>OLD:</b>	
4 10/29/22 13:54		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>OLD:</b> Transmitted	
5 10/29/22 14:59	Hernandez, Lena	Desktop	Order acknowledged	NA
6 10/31/22 08:45	Oda, Thomas Tsutomu	QUV-CM03	Status changed:	NA
			<b>New:</b> Taken	
			<b>OLD:</b> Logged	
7 10/31/22 09:08		QUV-CM03	Status changed:	NA
			<b>New:</b> Resulted	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing 221029-162554139	Completed	10/29/22 16:15	Patou, Augen, DO	Hernandez, Lena	
Glucose (Bedside)	Routine		Routine	Order Source:	

Old: Taken

Stop Reason:

Order Source:

Order Source:

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 16:25	Hernandez, Lena	QUV-CH03	No Signature is Necessary	NA
1 10/29/22 16:25	Hernandez, Lena	QUV-CH03	Order is Entered	NA

Restraint Non-Violent

Completed

10/29/22 16:36

Chuklansev, Gayana, NP

Order Source: Written Orders

Stop Reason:

Restraint Type    Wrist, Left  
                           Wrist, Right

Restraint Mental Status    Confusion

Forgetful

- : Yes
- : Yes
- : No

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 16:38	Ramos, Jessica	Desktop	Order created because of Renewal	Y
2 10/29/22 16:38	Ramos, Jessica	Desktop	No Signature is Necessary	Y
3 10/29/22 16:42	Ramos, Jessica	Desktop	Order acknowledged	NA
4 10/30/22 13:07	Ramos, Jessica	Desktop	New Order Created. Order is Completed via Auto Complete.	NA
5 10/30/22 13:07	Ramos, Jessica	Desktop	Copied to Restraint Non-Violent 221030-130713198	Y
6 10/30/22 13:07	Ramos, Jessica	Desktop	Status changed: New: Completed	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

7	10/30/22 13:25	Hernandez, Lena		Laptop	Old: Verified
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Bedside Testing 221029-200031758 Completed 10/29/22 19:49 Batou, Augen, DO

Glucose (Bedside) Routine

Stop Reason: Completed by Lis

Order Source: Dominquez, Xavier Ramiro

Date & Time	User	Device	Event	Acknowledged
1 10/29/22 20:00	Dominguez, Xavier Ramiro	QUV-CH03	No Signature is Necessary	NA
1 10/29/22 20:00	Dominguez, Xavier Ramiro	QUV-CH03	Order is Entered	NA
2 10/29/22 20:00		QUV-CH03	Status changed:	NA

New: Completed

Bedside Testing 221030-000029034 Completed 10/29/22 23:51 Batou, Augen, DO

Glucose (Bedside) Routine

Stop Reason: Completed by Lis

Order Source: Dominquez, Xavier Ramiro

Date & Time	User	Device	Event	Acknowledged
1 10/30/22 00:00	Dominguez, Xavier Ramiro	QUV-CH03	No Signature is Necessary	NA
1 10/30/22 00:00	Dominguez, Xavier Ramiro	QUV-CH03	Order is Entered	NA
2 10/30/22 00:00		QUV-CH03	Status changed:	NA

New: Completed

Bedside Testing 221030-035016092 Completed 10/30/22 03:41 Batou, Augen, DO

Glucose (Bedside) Routine

Stop Reason: Completed by Lis

Order Source: Dominquez, Xavier Ramiro

Date & Time	User	Device	Event	Acknowledged
1 10/30/22 03:50	Dominguez, Xavier Ramiro	QUV-CH03	No Signature is Necessary	NA
1 10/30/22 03:50	Dominguez, Xavier Ramiro	QUV-CH03	Order is Entered	NA
2 10/30/22 03:50		QUV-CH03	Status changed:	NA

New: Completed

Bedside Testing 221030-035016092 Completed 10/30/22 03:41 Batou, Augen, DO

Glucose (Bedside) Routine

Stop Reason: Completed by Lis

Order Source: Dominquez, Xavier Ramiro



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221030-083049789 Completed 10/30/22 08:21

Batou, Augen, DO

Hernandez, Lena

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time

User

Device

Event

Acknowledged

1 10/30/22 08:30 Hernandez, Lena  
1 10/30/22 08:30 Hernandez, Lena

QUV-CM03  
QUV-CM03

No Signature is Necessary  
Order is Entered  
Status changed:

NA  
NA

New: Completed

Old: In Process

Medications 221030-105920350 Completed 10/30/22 11:00

Batou, Augen, DO

Batou, Augen, DO

Magnesium Sulfate Rider

Order Source: Provider

Stop Reason: Reached Stop Date

Medication

Dose

Per

Magnesium Sulfate 1 Gm  
[Magnesium Sulfate]

1 Gm in 100 ML

QS Drug

QS Volume

Total Volume

100 ML

Route Frequency

Sched PRN Reason

Days Hours Total Vol to Infuse Bags

Clinical Indication

IVPB

Q1H

SCH

2

Rate: 100 MLS/HR

Stop Date/Time: 10/30/22 12:59

Discontinued: 10/30/22 12:59

Label Comments: Label matches overwrap. RPh \_\_\_\_\_

Date & Time

User

Device

Event

Acknowledged

1 10/30/22 10:59 Batou, Augen, DO  
2 10/30/22 10:59

QDIK101  
QUV-BG19

Order is Entered and Signed  
Status changed:

Y  
NA

New: Transmitted

Old: Verified

3 10/30/22 10:59

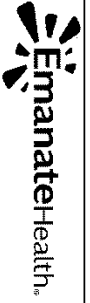
QUV-CM03

Status changed:

NA

New: Logged

Continued on Next Page



Patient Order Summary

Page: 187 of 500

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Attending: Lau, Tsang, MD

Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

Account Number: QH0054940416

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	10/30/22 11:02				
5	10/30/22 11:34				
6	10/30/22 12:59				
7	10/30/22 13:04				

4	10/30/22 11:02	Nguyen, Nichelle G, PharmD	QUV-CH03	Geula, Aarsalan, MD	Entered By
5	10/30/22 11:34	Hernandez, Lena	Laptop	Geula, Aarsalan, MD	Entered By
6	10/30/22 12:59		QUV-CH03	Geula, Aarsalan, MD	Entered By
7	10/30/22 13:04	Ramos, Jessica	Desktop	Geula, Aarsalan, MD	Entered By

Novolin N

Stop Reason: Order edited - Discontinuing original order

Order Source: Provider

Medication	Route	Frequency	Dose	Per	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Insulin NPH [Novolin N]	SUB-Q	Q8H	12 UNITS		SCH				

Stop Date/Time: 10/31/22 16:43

Date & Time	User	Device	Event	Acknowledged
1 10/30/22 11:25	Geula, Aarsalan, MD	Desktop	Order created because of edit(s)	Y
1 10/30/22 11:25	Geula, Aarsalan, MD	Desktop	Copied from Novolin N 221029-114716460	Y
2 10/30/22 11:25	Geula, Aarsalan, MD	Desktop	Order is Signed by Geula, Aarsalan, MD	Y
3 10/30/22 11:26		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/30/22 11:26		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/30/22 11:32	Knapp, Sandy A, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
6 10/30/22 11:47	Hernandez, Lena	Laptop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
7	10/31/22 16:43	Amani-Yazdi, Rambod, MD	QICUKI04	Stop Request	Y
8	10/31/22 16:43	Amani-Yazdi, Rambod, MD	QICUKI04	Copied to Novolin N 221031-16434404	Y
9	10/31/22 16:43	Amani-Yazdi, Rambod, MD	QUV-CM03	Status changed:	Y
				<b>New:</b> Completed	
				<b>Old:</b> Pha Verified	
10	10/31/22 16:52	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
Departmental Co 221030-112932959		Transmitted	10/30/22 11:27	Batou, Augen, DO	Hernandez, Lena
<b>Consult to Social Services</b>				Routine	<b>Order Source:</b> Nursing Orders
<b>Comment</b> SISTERS INFO IS ON THE PATIENT'S SUMMARY					
<b>Reason For Exam</b> PATIENT'S SISTER IS POA AND REQUESTING HELP ON DISABILITY FORMS FOR PATIENT					
<b>Comment</b> PATIENT WORKED UP UNTIL THE DAY BEFORE HOSPITAL					
Date & Time	User	Device	Event	Acknowledged	
1 10/30/22 11:29	Hernandez, Lena	Laptop	No Signature is Necessary	Y	
1 10/30/22 11:29	Hernandez, Lena	Laptop	Order is Entered	Y	
2 10/30/22 11:29		QUV-BG19	Queued to destination:	NA	
			<b>New:</b> QOMP1 #3470044		
			<b>Old:</b>		
3 10/30/22 11:29		QUV-BG19	Status changed:	NA	
			<b>New:</b> Transmitted		
			<b>Old:</b> Verified		
4 10/30/22 11:47	Hernandez, Lena	Laptop	Order acknowledged	NA	
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUKI01	Manage Transfer - Order is set to continue upon transfer	NA	
6 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUKI01	Manage Transfer - Transfer Provider added:	NA	
7 11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUKI01	Manage Transfer - Order is continued upon transfer	Y	
8 11/09/22 22:57	Apa, Mary Jurem	QPACKUKI01	Process Transfer	NA	
9 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221030-124537906	Completed	10/30/22 12:34	Batou, Augen, DO	Hernandez, Lena
Glucose (Bedside)				Routine	Order Source:
Stop Reason: Completed by LIs					

Date & Time	User	Device	Event	Acknowledged
1 10/30/22 12:45	Hernandez, Lena	QUV-CM03	No Signature is Necessary	NA
1 10/30/22 12:45	Hernandez, Lena	QUV-CM03	Order is Entered	NA
2 10/30/22 12:45		QUV-CM03	Status changed: New: Completed Old: In Process	NA

Restraint 221030-130713198 Verified 10/30/22 13:07 Batou, Augen, DO Ramos, Jessica  
 Restraint Non-Violent Routine Order Source: Written Orders

**Restraint Type** Wrist, Left  
 Wrist, Right

**Restraint Mental Status** Confusion  
 Forgetful

- : Yes
- : Yes
- : No

Date & Time	User	Device	Event	Acknowledged
1 10/30/22 13:07	Ramos, Jessica	Desktop	Order created because of Renewal	Y
2 10/30/22 13:07	Ramos, Jessica	Desktop	No Signature is Necessary	Y
3 10/30/22 13:25	Hernandez, Lena	Laptop	Order acknowledged	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon	Y

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	7		11/09/22 22:57	APA, Mary Jurem	transfer
	8		11/10/22 03:11	APA, Mary Jurem	Process Transfer

Glucose (Bedside)	Completed	Date & Time	User	Device	Event	Acknowledged
	Completed	10/30/22 16:43	Hernandez, Lena	QUV-CM03	No Signature is Necessary	NA
		10/30/22 16:50	Hernandez, Lena	QUV-CM03	Order is Entered	NA
		10/30/22 16:51		QUV-CM03	Status changed:	NA

**Stop Reason:** Completed by Lis

Bedside Testing 221030-200539297 **Completed** 10/30/22 19:57 **Order Source:** Dominguez, Xavier Ramiro

**Glucose (Bedside)** **Completed** 10/30/22 23:34 **Order Source:** Dominguez, Xavier Ramiro

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/30/22 20:05	Dominguez, Xavier Ramiro	QUV-CM03	No Signature is Necessary	NA
10/30/22 20:05	Dominguez, Xavier Ramiro	QUV-CM03	Order is Entered	NA
10/30/22 20:05		QUV-CM03	Status changed:	NA

**Stop Reason:** Completed by Lis

Bedside Testing 221030-234525911 **Completed** 10/30/22 23:34 **Order Source:** Dominguez, Xavier Ramiro

**Glucose (Bedside)** **Completed** 10/30/22 23:34 **Order Source:** Dominguez, Xavier Ramiro

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/30/22 23:44	Dominguez, Xavier Ramiro	QUV-CM03	No Signature is Necessary	NA
10/30/22 23:44	Dominguez, Xavier Ramiro	QUV-CM03	Order is Entered	NA
10/30/22 23:44		QUV-CM03	Status changed:	NA

**Stop Reason:** Completed by Lis

Bedside Testing 221030-234525911 **Completed** 10/30/22 23:34 **Order Source:** Dominguez, Xavier Ramiro

**Glucose (Bedside)** **Completed** 10/30/22 23:34 **Order Source:** Dominguez, Xavier Ramiro

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
10/30/22 23:44	Dominguez, Xavier Ramiro	QUV-CM03	No Signature is Necessary	NA
10/30/22 23:44	Dominguez, Xavier Ramiro	QUV-CM03	Order is Entered	NA
10/30/22 23:44		QUV-CM03	Status changed:	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing 221031-034402307	Completed	10/31/22 03:35	Batou, Augen, DO	Dominguez, Xavier Ramiro	
Glucose (Bedside)			Routine		

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 03:44	Dominguez, Xavier Ramiro	QUV-CM03	No Signature is Necessary	NA
1 10/31/22 03:44	Dominguez, Xavier Ramiro	QUV-CM03	Order is Entered	NA
2 10/31/22 03:44		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221031-080050979 Completed 10/31/22 07:50 Lau, Tsang, MD  
 Order Source: Ordanza, Cristina Arenas  
 Glucose (Bedside) Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 08:00	Ordanza, Cristina Arenas	QUV-CM03	No Signature is Necessary	NA
1 10/31/22 08:00	Ordanza, Cristina Arenas	QUV-CM03	Order is Entered	NA
2 10/31/22 08:01		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Routine Care 221031-111249634 Completed 10/31/22 12:00 Lau, Tsang, MD  
 Order Source: Telephone Orders- Read Back  
 Other Nursing Interventions QCHR  
 Stop Reason: Discontinue

Intervention Text Water flushes 150ml Q6H

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 11:12	Ordanza, Cristina Arenas	Desktop	Signature is Necessary	Y
1 10/31/22 11:12	Ordanza, Cristina Arenas	Desktop	Order is Entered	Y
2 10/31/22 11:12		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 10/31/22 12:01	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
4 10/31/22 15:39	Lau, Tsang, MD	QUV-BG19	Order is Signed by Lau, Tsang, MD	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	
	5	11/05/22 14:34	Malaca, Jessalie	Desktop	Stop Request	Y
	6	11/05/22 14:34	Malaca, Jessalie	Desktop	Order is Completed	NA
	7	11/05/22 14:36	Malaca, Jessalie	Desktop	Order acknowledged	NA
	8	11/06/22 08:09	Kamdar, Sana, MD	QUV-BG19	Order is Signed by Kamdar, Sana, MD	NA

Chemistry 221031-111516901 Completed 11/02/22 06:00 Lau, Tsang, MD  
 Order Source: Provider  
**BMP [Basic Metabolic Panel]**

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 11:15	Lau, Tsang, MD	QNSUK103	Order is Entered and Signed	Y
2 10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
3 11/02/22 00:03		QUV-BG19	Status changed: New: Transmitted	NA
4 11/02/22 00:10		QUV-CH03	Old: Verified Status changed: New: Logged	NA
5 11/02/22 01:02		QUV-CH03	Old: Transmitted Status changed: New: In Process	NA
6 11/02/22 06:25		QUV-CH03	Old: Logged start Time edited: New: 06:00	NA
7 11/02/22 06:57		QUV-CH03	Old: 05:00 Status changed: New: Completed	NA
			Old: In Process	

Chemistry 221031-111516901 Completed 11/01/22 06:30 Lau, Tsang, MD  
 Order Source: Provider  
**BMP [Basic Metabolic Panel]**

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 11:15	Lau, Tsang, MD	QNSUK103	Order is Entered and Signed	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
3	11/01/22 00:04		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	11/01/22 00:13		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/01/22 01:34		QUV-CM03	Status changed:	NA
				New: In Process	
				Old: Logged	
6	11/01/22 06:45		QUV-CM03	Start time edited:	NA
				New: 06:30	
				Old: 05:00	
7	11/01/22 07:27		QUV-CM03	Status changed:	NA
				New: Completed	
				Old: In Process	
Chemistry	221031-1115169011	Completed	11/03/22 05:57	Lau, Tsang, MD	Lau, Tsang, MD
<b>BMP [Basic Metabolic Panel]</b>					Order Source: Provider
<b>Stop Reason:</b> Completed by LIS					
<b>Specimen</b> Send someone from the department to collect					
Date & Time	User	Device	Event	Acknowledged	
1 10/31/22 11:15	Lau, Tsang, MD	QNSUK103	Order is Entered and Signed	Y	
2 10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA	
3 11/03/22 00:03		QUV-BG19	Status changed:	NA	
			New: Transmitted		
			Old: Verified		
4 11/03/22 00:08		QUV-CM03	Status changed:	NA	
			New: Logged		
			Old: Transmitted		
5 11/03/22 01:06		QUV-CM03	Status changed:	NA	
			New: In Process		
			Old: Logged		
6 11/03/22 06:42		QUV-CM03	Start time edited:	NA	
			New: 05:57		

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

	7	11/03/22 07:32		QUV-CH03	Old: 05:00 Status changed: New: Completed	NA
Chemistry	221031-111516917	Completed	11/04/22 05:16	Lau, Tsang, MD	Old: In Process	

BMP [Basic Metabolic Panel]

Order Source: Provider

Stop Reason: Completed by LIS

Specimen      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 11:15	Lau, Tsang, MD	QNSUK103	Order is Entered and Signed	Y
2 10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
3 11/04/22 00:03		QUV-BG19	Status changed: New: Transmitted	NA
4 11/04/22 00:08		QUV-CH03	Old: Verified Status changed: New: Logged	NA
5 11/04/22 01:18		QUV-CH03	Old: Transmitted Status changed: New: In Process	NA
6 11/04/22 07:01		QUV-CH03	Old: Logged Start Time edited: New: 05:16	NA
7 11/04/22 07:30		QUV-CH03	Old: 05:00 Status changed: New: Completed	NA

Chemistry      221031-1115169171      Completed      11/05/22 05:45      Lau, Tsang, MD

BMP [Basic Metabolic Panel]

Order Source: Provider

Stop Reason: Completed by LIS

Specimen      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 11:15	Lau, Tsang, MD	QNSUK103	Order is Entered and Signed	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	10/31/22 11:55	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
3	11/05/22 00:03		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	11/05/22 00:10		QUV-CH03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/05/22 00:52		QUV-CH03	Status changed:	NA
				New: In Process	
				Old: Logged	
6	11/05/22 06:15		QUV-CH03	Start Time edited:	NA
				New: 05:45	
				Old: 05:00	
7	11/05/22 07:00		QUV-CH03	Status changed:	NA
				New: Completed	
				Old: In Process	
Bedside Testing 221031-112540081 Completed 10/31/22 11:15 Lau, Tsang, MD Ordanza, Cristina Arenas Glucose (Bedside) Routine					
Stop Reason: Completed by Lis					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/31/22 11:25	Ordanza, Cristina Arenas	QUV-CH03	No Signature is Necessary	NA
1	10/31/22 11:25	Ordanza, Cristina Arenas	QUV-CH03	Order is Entered	NA
2	10/31/22 11:26		QUV-CH03	Status changed:	NA
				New: Completed	
				Old: In Process	
Bedside Testing 221031-162534175 Completed 10/31/22 16:17 Lau, Tsang, MD Ordanza, Cristina Arenas Glucose (Bedside) Routine					
Stop Reason: Completed by Lis					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	10/31/22 16:25	Ordanza, Cristina Arenas	QUV-CH03	No Signature is Necessary	NA
1	10/31/22 16:25	Ordanza, Cristina Arenas	QUV-CH03	Order is Entered	NA
2	10/31/22 16:26		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category      Order      Status      Start      Ord Provider      Entered By

New: Completed  
 Old: In Process

Medications 221031-164344404 Completed 10/31/22 22:00      Amani-Yazdi, Rambod, MD      Amani-Yazdi, Rambod, MD

Order Source: Provider

Novolin N      Stop Reason: Order edited - Discontinuing original order

Medication      Dose      Per  
 Insulin NPH [Novolin N]      15 UNITS

Route      Frequency      Sched      PRN Reason      Days Hours      Total Doses      Clinical Indication

SUB-Q      Q8HR      SCH

Stop Date/Time:

Discontinued: 11/01/22 16:03

Label Comments: HOLD IF THE TF WITHHELDS.

Date & Time	User	Device	Event	Acknowledged
1 10/31/22 16:43	Amani-Yazdi, Rambod, MD	QI0UK104	Order created because of edit(s)	Y
1 10/31/22 16:43	Amani-Yazdi, Rambod, MD	QI0UK104	Copied From Novolin N 221030-11252295	Y
2 10/31/22 16:43	Amani-Yazdi, Rambod, MD	QI0UK104	Order is Signed by Amani-Yazdi, Rambod, MD	Y
3 10/31/22 16:43		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 10/31/22 16:44		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 10/31/22 16:46	True, Genevieve N.S., PharmD	QUV-CM03	Start Time edited:	Y
			New: 22:00	
			Old: 16:43	
5 10/31/22 16:46	True, Genevieve N.S., PharmD	QUV-CM03	Freq edited:	Y
			New: Q8HR	
			Old: Q8H	
6 10/31/22 16:46	True, Genevieve N.S., PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
7 10/31/22 16:52	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	
	8	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCKR101	Stop Request	
	9	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCKR101	Copied to Novolin N 221101-160347893	
	10	11/01/22 16:03	Amani-Yazdi, Rambod, MD	QUV-CM03	Status changed: New: Completed Old: Pha Verified	
	11	11/02/22 08:44	Contreras, Elsa	Desktop	Order acknowledged	
	Bedside Testing 221031-213039199		Completed	10/31/22 21:17	Lau, Tsang, MD	
	Glucose (Bedside)			Routine	Thomas, Sonya	
	Stop Reason: Completed by LIS					
		<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
	1	10/31/22 21:30	Thomas, Sonya	QUV-CM03	No Signature is Necessary	NA
	1	10/31/22 21:30	Thomas, Sonya	QUV-CM03	Order is Entered	NA
	2	10/31/22 21:30		QUV-CM03	Status changed: New: Completed Old: In Process	NA
	Chemistry 221101-010343276 Completed 11/01/22 06:30 Lau, Tsang, MD					
	Magnesium Routine					
	Stop Reason: Completed by LIS					
		<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
	1	11/01/22 01:03	Marquez, Rosalie	QUV-CM03	Order is Entered and Signed	Y
	2	11/01/22 01:34		QUV-CM03	Status changed: New: In Process Old: Logged	NA
	3	11/01/22 06:45		QUV-CM03	Start Time edited: New: 06:30 Old: 05:00	NA
	4	11/01/22 07:27		QUV-CM03	Status changed: New: Completed Old: In Process	NA
	5	11/01/22 10:24	Donske, Ruth	Desktop	Order acknowledged	NA

Order Source: Provider



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221101-002538440 Completed 11/01/22 00:13

Lau, Tsang, MD

Thomas, Sonya

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/01/22 00:25

Thomas, Sonya

QUV-CH03

No Signature is Necessary

NA

1 11/01/22 00:25

Thomas, Sonya

QUV-CH03

Order is Entered

NA

2 11/01/22 00:26

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221101-041052580 Completed 11/01/22 03:55

Lau, Tsang, MD

Thomas, Sonya

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/01/22 04:10

Thomas, Sonya

QUV-CH03

No Signature is Necessary

NA

1 11/01/22 04:10

Thomas, Sonya

QUV-CH03

Order is Entered

NA

2 11/01/22 04:11

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221101-080049892 Completed 11/01/22 07:50

Lau, Tsang, MD

Donske, Ruth

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/01/22 08:00

Donske, Ruth

QUV-CH03

No Signature is Necessary

NA

1 11/01/22 08:00

Donske, Ruth

QUV-CH03

Order is Entered

NA

2 11/01/22 08:01

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category      Order      Status      Start      Ord Provider      Entered By  
 Medications      221101-104835046      Completed      11/01/22 11:00      Lau, Tsang, MD      Lau, Tsang, MD  
 Norvasc      Stop Reason: Completed by Pha      Order Source: Provider

Medication      Dose      Per  
 amlodipine [Norvasc]      5 MG  
 Route      Frequency      Sched      PRN Reason      Days Hours      Total Doses      Clinical Indication  
 NG-TUBE      DAILY      SCH  
 Stop Date/Time:  
 Discontinued: 11/21/22 12:43

Date & Time	User	Device	Event	Acknowledged
1 11/01/22 10:48	Lau, Tsang, MD	QNSUK103	Order is Entered and signed	Y
2 11/01/22 10:48	Lau, Tsang, MD	QNSUK103	First Dose:	NA
			New: Order dose for Now, then continue schedule	
			Old:	
3 11/01/22 10:48		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/01/22 10:48		QUV-CM03	Order Type edited:	Y
			New: MED	
			Old:	
5 11/01/22 10:48		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
6 11/01/22 10:50	Tran, Lan P, PharmD	QUV-CM03	Route edited:	Y
			New: NG-TUBE	
			Old: PO	
7 11/01/22 10:50	Tran, Lan P, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
8 11/01/22 12:14	Donske, Ruth	Desktop	Order acknowledged	NA
9 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
10	11/09/22 12:08	Maglunog, Alexander A, MD	QPACKU101	Maglunog, Alexander, MD	NA
11	11/09/22 22:57	Maglunog, Alexander A, MD	QPACKU101	Manage Transfer - Order is continued upon transfer	Y
12	11/09/22 22:57	Apa, Mary Jurem	QPACKU101	Process Transfer	NA
13	11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
14	11/21/22 12:43	Yang, David, PharmD	QUV-CM03	Copied to Norvasc 221121-124324768	Y
15	11/21/22 12:43	Yang, David, PharmD	QUV-CM03	Status changed:	Y
				<b>New:</b> Completed	
				<b>Old:</b> Pha Verified	
16	11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA

Bedside Testing 221101-121040350 **Completed** 11/01/22 11:58 **Lau, Tsang, MD** **Donske, Ruth**  
**Glucose (Bedside)** **Routine** **Order Source:**

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/01/22 12:10	Donske, Ruth	QUV-CM03	No Signature is Necessary	NA
1 11/01/22 12:10	Donske, Ruth	QUV-CM03	Order is Entered	NA
2 11/01/22 12:11		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Consultations 221101-130652204 **Transmitted** 11/01/22 13:04 **Cutler, Aaron, MD** **Donske, Ruth**  
**Consult to Palliative Care** **Routine** **Order Source:** Verbal Orders- Read Back

**Consulting Provider** Cutler, Aaron, MD  
**Reason for consultation** INTRACEREBRAL HEMORRHAGE

Date & Time	User	Device	Event	Acknowledged
1 11/01/22 13:06	Donske, Ruth	Desktop	Signature is Necessary	Y
1 11/01/22 13:06	Donske, Ruth	Desktop	Order is Entered	Y
2 11/01/22 13:06		QUV-BG19	Queued to destination:	NA
			<b>New:</b> IPALPI #3475385	
			<b>Old:</b>	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Medications 221101-160347893 Completed 11/01/22 22:00 Amani-Yazdi, Rambod, MD Amani-Yazdi, Rambod, MD

Novolin N  Order Source: Provider

Stop Reason: Order edited - Discontinuing original order

Medication Insulin NPH [Novolin N] Dose 20 UNITS Per

Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication

SUB-Q Q8HR SCH

Stop Date/Time: Discontinued: 11/02/22 07:30

Label Comments: HOLD IF THE TF WITHHELD.

Date & Time	User	Device	Event	Acknowledged
1 11/01/22 16:02	Amani-Yazdi, Rambod, MD	QCCURK101	Order created because of edit(s)	Y
1 11/01/22 16:02	Amani-Yazdi, Rambod, MD	QCCURK101	Copied from Novolin N 221031-164344404	Y
2 11/01/22 16:03	Amani-Yazdi, Rambod, MD	QCCURK101	Order is signed by Amani-Yazdi, Rambod, MD	Y
3 11/01/22 16:03		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/01/22 16:04		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 11/01/22 16:24	Lee, Erin	QUV-CH03	Start time edited:	Y
			New: 22:00	
			Old: 16:03	
6 11/01/22 16:24	Lee, Erin	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
7 11/01/22 20:23	Thomas, Sonya	Desktop	Order acknowledged	NA
8 11/02/22 07:30	Amani-Yazdi, Rambod, MD	Desktop	Stop Request	Y
9 11/02/22 07:30	Amani-Yazdi, Rambod, MD	Desktop	Copied to Novolin N 221102-073034065	Y
10 11/02/22 07:30	Amani-Yazdi, Rambod, MD	QUV-CH03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F  
 Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By	Acknowledged
11	11/02/22 08:44	Completed	11/01/22 16:01	Desktop	Lau, Tsang, MD	Donske, Ruth	NA
Bedside Testing 221101-161041242 Glucose (Bedside) Stop Reason: Completed by Lis							
1	11/01/22 16:10	Completed	11/01/22 20:13	QUV-CH03	Lau, Tsang, MD	Thomas, Sonya	NA
1	11/01/22 16:10	Completed	11/01/22 20:20	QUV-CH03	Lau, Tsang, MD	Thomas, Sonya	NA
2	11/01/22 16:11	Completed	11/01/22 20:20	QUV-CH03	Lau, Tsang, MD	Thomas, Sonya	NA

Date & Time	User	Device	Event	Acknowledged
11/01/22 16:10	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA
11/01/22 16:10	Donske, Ruth	QUV-CH03	Order is Entered	NA
11/01/22 16:11	Donske, Ruth	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Date & Time	User	Device	Event	Acknowledged
11/01/22 20:20	Thomas, Sonya	QUV-CH03	No Signature is Necessary	NA
11/01/22 20:20	Thomas, Sonya	QUV-CH03	Order is Entered	NA
11/01/22 20:20	Thomas, Sonya	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Miscellaneous O 221101-213229034 Transmitted 11/01/22 21:31 Lau, Tsang, MD Thomas, Sonya  
 Pharmacy Missing Med Slip NOW Order Source: Nursing Orders

Requesting Person THOMSON  
 Extension 29083  
 Please send the following medication(s) Labetalol  
 Thank you

Date & Time	User	Device	Event	Acknowledged
11/01/22 21:32	Thomas, Sonya	Desktop	No Signature is Necessary	Y
11/01/22 21:32	Thomas, Sonya	Desktop	Order is Entered	Y
11/01/22 21:32	Thomas, Sonya	Desktop	Reflex Set: Pharmacy Missing Med generated	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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2	11/01/22 21:32			QUV-BG19	Queued to destination:
					<b>New:</b> QPHARMP2 #3476658
					<b>Old:</b>

3	11/01/22 21:32			QUV-BG19	Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified

4	11/02/22 08:44			Desktop	Order acknowledged
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Bedside Testing 221102-011559396		Completed	11/02/22 01:07	Lau, Tsang, MD	Thomas, Sonya
<b>Glucose (Bedside)</b>				Routine	<b>Order Source:</b>

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 01:15	Thomas, Sonya	QUV-CH03	No Signature is Necessary	NA
1 11/02/22 01:15	Thomas, Sonya	QUV-CH03	Order is Entered	NA
2 11/02/22 01:16		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Bedside Testing 221102-042039398		Completed	11/02/22 04:11	Lau, Tsang, MD	Thomas, Sonya
<b>Glucose (Bedside)</b>				Routine	<b>Order Source:</b>

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 04:20	Thomas, Sonya	QUV-CH03	No Signature is Necessary	NA
1 11/02/22 04:20	Thomas, Sonya	QUV-CH03	Order is Entered	NA
2 11/02/22 04:20		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Medications 221102-073034065		Completed	11/02/22 07:29	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
<b>NOVOLIN N</b>					<b>Order Source:</b> Provider

Stop Reason: Reached Stop Date

Medication	Dose	Per
Insulin NPH [NOVOLIN N]	10 UNTTS	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	Clinical Indication
Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	
SUB-Q	NOW	ONE				
Stop Date/Time: 11/02/22 07:30						
Discontinued: 11/02/22 07:30						

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 07:30	Amani-Yazdi, Rambod, MD	Desktop	Order is Entered and Signed	Y
2 11/02/22 07:30		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 11/02/22 07:30		QUV-CM03	Order Type edited: New: MED Old:	Y
4 11/02/22 07:30		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 11/02/22 07:34	Nguyen, Nichelle G, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
6 11/02/22 07:34		QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
7 11/02/22 08:44	Contreras, Elsa	Desktop	Order acknowledged	NA

Medications 221102-073034065 Completed 11/02/22 07:30 Amani-Yazdi, Rambod, MD Amani-Yazdi, Rambod, MD  
**Novolin N** Order Source: Provider  
 Stop Reason: Order edited - Discontinuing original order

Medication Insulin NPH [Novolin N] Dose 30 UNITS Per  
 Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 SUB-Q Q8HR SCH  
 Stop Date/Time: 11/03/22 11:10  
 Discontinued: 11/03/22 11:10

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Label Comments: HOLD IF THE TF WITHHELD.

Date & Time	User	Device	Event	Acknowledged
11/02/22 07:29	Amani-Yazdi, Rambod, MD	Desktop	Order created because of edit(s)	Y
11/02/22 07:29	Amani-Yazdi, Rambod, MD	Desktop	Copied from NOVOLIN N 221101-160347893	Y
11/02/22 07:30	Amani-Yazdi, Rambod, MD	Desktop	Order is signed by Amani-Yazdi, Rambod, MD	Y
11/02/22 07:30	Amani-Yazdi, Rambod, MD	QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
11/02/22 07:30	Amani-Yazdi, Rambod, MD	QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
11/02/22 07:33	Nguyen, Michelle G, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
11/02/22 08:44	Contreras, Elisa	Desktop	Order acknowledged	NA
11/03/22 11:10	Amani-Yazdi, Rambod, MD	Q5MSK103	Stop Request	Y
11/03/22 11:10	Amani-Yazdi, Rambod, MD	Q5MSK103	Copied to NOVOLIN N 221103-111010447	Y
11/03/22 11:10	Amani-Yazdi, Rambod, MD	QUV-CH03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	
11/03/22 11:11	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
11/02/22 09:05	Contreras, Elisa	QUV-CH03	No Signature is Necessary	NA
11/02/22 09:05	Contreras, Elisa	QUV-CH03	Order is Entered	NA
11/02/22 09:06	Contreras, Elisa	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221102-090546974 Completed 11/02/22 08:56 Routine Lau, Tsang, MD Contreras, Elisa  
 Order Source:

Stop Reason: Completed by Lis

Order Source:



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
X-Ray	221102-105940584	Resulted	11/02/22 10:59	Kassar, Alexander, MD	Contreras, Elsa
CXRI VP [XR chest IV portable]				Routine	Order Source: Verbal Orders- Read Back

Mode Of Transportation Hospital Bed

Reason for Exam Infiltrate(s)

Mode of Transport Hospital Bed

	Date & Time	User	Device	Event	Acknowledged
1	11/02/22 10:59	Contreras, Elsa	Desktop	Signature is Necessary	Y
1	11/02/22 10:59	Contreras, Elsa	Desktop	Order is Entered	Y
2	11/02/22 10:59		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
3	11/02/22 10:59		QUV-CM03	Query Mode Of Transportation edited:	NA
				New: Hospital Bed	
				Old:	
4	11/02/22 10:59		QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/02/22 12:11	Contreras, Elsa	Desktop	Order acknowledged	NA
6	11/02/22 12:51	Shields, Jaime M	QUV-CM03	Status changed:	NA
				New: Taken	
				Old: Logged	
7	11/02/22 16:01		QUV-CM03	Status changed:	NA
				New: Resulted	
				Old: Taken	
8	11/03/22 09:46	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA

Blood Cultures 221102-1059406151

Completed

11/02/22 11:23

Kassar, Alexander, MD

Contreras, Elsa

Blood Culture

Routine

Order Source: Verbal Orders- Read Back

Stop Reason: Completed by Lis

MTC Source Vain

Quantity 2

Specimen Has been collected

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By	Acknowledged
1	11/02/22 10:59	Contreras, Elisa		Desktop			Y
1	11/02/22 10:59	Contreras, Elisa		Desktop			Y
2	11/02/22 10:59			QUV-BG19			NA
3	11/02/22 10:59			QUV-CH03			NA
4	11/02/22 11:23	Munguia, Aleyda		Phone			NA
5	11/02/22 11:23	Munguia, Aleyda		Phone			NA
6	11/02/22 11:23	Munguia, Aleyda		Phone			NA
7	11/02/22 12:11	Contreras, Elisa		Desktop			NA
8	11/02/22 12:22			QUV-CH03			NA
9	11/02/22 12:22			QUV-CH03			NA
10	11/03/22 09:46	Kassar, Alexander, MD		QUV-BG19			NA
11	11/07/22 16:20			QUV-CH03			NA

Routine Bacteri 221102-105940631 Completed 11/02/22 12:20 Kassar, Alexander, MD Contreras, Elisa

Urine Culture Routine Order Source: Verbal Orders- Read Back

Stop Reason: Completed by Lis

MIC Source Urine Catheterized  
 Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
11/02/22 10:59	Contreras, Elisa	Desktop	Signature is Necessary	Y
11/02/22 10:59	Contreras, Elisa	Desktop	Order is Entered	Y
11/02/22 12:11	Contreras, Elisa	Desktop	Order acknowledged	NA
11/02/22 12:24	Contreras, Elisa	Desktop	Order is collected	NA
11/02/22 12:24	Contreras, Elisa	Desktop	Query Specimen edited:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/02/22 12:24	Completed	11/02/22 12:20	Kassar, Alexander, MD	Contreras, Elsa
<b>Routine Urinalysis</b>					
Stop Reason: Completed by LIS					
<b>Specimen</b>					
Has been collected					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	11/02/22 10:59	Contreras, Elsa	Desktop	Signature is Necessary	Y
1	11/02/22 10:59	Contreras, Elsa	Desktop	Order is Entered	Y
2	11/02/22 12:11	Contreras, Elsa	Desktop	Order acknowledged	NA
3	11/02/22 12:24	Contreras, Elsa	Desktop	Order is collected	NA
4	11/02/22 12:24	Contreras, Elsa	Desktop	Query Specimen edited:	NA
				New: Has been collected	
				Old: Nurse/Care Provider to collect	
5	11/02/22 12:24	Contreras, Elsa	Desktop	Status changed:	NA
6	11/02/22 12:24	Contreras, Elsa	Desktop	Status changed:	NA
7	11/02/22 12:24		QUV-CM03	Status changed:	NA
8	11/02/22 13:20		QUV-CM03	Status changed:	NA
9	11/02/22 13:20		QUV-CM03	Status changed:	NA
10	11/03/22 09:46	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA
11	11/05/22 09:30		QUV-CM03	Status changed:	NA
				New: Completed	
				Old: In Process	
<b>Urinalysis</b> 221102-105940600 Completed 11/02/22 12:20 Kassar, Alexander, MD					
<b>Routine Urinalysis</b> Routine Kassar, Alexander, MD					
Order Source: Verbal Orders- Read Back					

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	
	6	11/02/22 12:24	Contreras,Elsa	Desktop	New: Verified Old: Uncollected Status changed: New: Transmitted Old: Verified Status changed: New: Logged Old: Transmitted Start Time edited: New: 12:20 Old: 10:59 Status changed: New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
	7	11/02/22 12:24		QUV-CM03	Status changed: New: Logged Old: Transmitted Start Time edited: New: 12:20 Old: 10:59 Status changed: New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
	8	11/02/22 13:20		QUV-CM03	Status changed: New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
	9	11/02/22 13:20		QUV-CM03	Status changed: New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
	10	11/02/22 13:38		QUV-CM03	Status changed: New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
	11	11/03/22 09:46	Kassar,Alexander, MD	QUV-BG19	Order is signed by Kassar,Alexander, MD Kassar,Alexander, MD Contreras,Elsa	NA

Medications 221102-110420121 Completed 11/02/22 11:03 Kassar,Alexander, MD      Order Source: Verbal Orders- Read Back  
 Tylenol Liquid      Stop Reason: Completed by Pha

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
Acetaminophen Liquid [Tylenol Liquid]	650 MG				PRN	Pain Or Fever (>100.4)				
FEED TUBE Q6H      Stop Date/Time: Discontinued: 11/02/22 14:18										

Label Comments: Maximum acetaminophen (in any form) allowable in 24 hours is 4gm.

Date & Time	User	Device	Event	Acknowledged
11/02/22 11:04	Contreras,Elsa	Desktop	Signature is Necessary	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/02/22 11:04	Contreras, Elsa	Desktop	Order Is Entered	Y
2	11/02/22 11:04	QUV-BG19	Desktop	Status changed:	NA
				New: Transmitted	
				Old: Verified	
3	11/02/22 11:04	QUV-CH03	Desktop	Order Type edited:	Y
				New: MED	
				Old:	
4	11/02/22 11:04	QUV-CH03	Desktop	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/02/22 11:12	Tran, Ian P, PharmD	QUV-CH03	Status changed:	NA
				New: Pha Verified	
				Old: Logged	
6	11/02/22 12:11	Contreras, Elsa	Desktop	Order acknowledged	NA
7	11/02/22 13:13	Contreras, Elsa	Desktop	Order acknowledged	NA
8	11/02/22 14:18	Gebur, Ilene Kris, PharmD	QUV-CH03	Copied to Tylenol Liquid 221102-141837650	Y
9	11/02/22 14:18	Gebur, Ilene Kris, PharmD	QUV-CH03	Status changed:	Y
				New: Completed	
				Old: Pha Verified	
10	11/02/22 15:15	Contreras, Elsa	Desktop	Order acknowledged	NA
11	11/03/22 09:46	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA
Routine Microbi 221102-122426707 Completed 11/02/22 13:11 Kassar, Alexander, MD   Routine					
<b>Sputum Culture and Gram Stain</b>					
<b>Stop Reason: Completed by LIS</b>					
<b>MTC Source</b> Tracheal Aspirate					
<b>Specimen</b> Has been collected					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	11/02/22 12:24	Contreras, Elsa	Desktop	Signature is Necessary	Y
1	11/02/22 12:24	Contreras, Elsa	Desktop	Order Is Entered	Y
2	11/02/22 12:33	Contreras, Elsa	Desktop	Order acknowledged	NA
3	11/02/22 12:53	Li, Qing	Desktop	Order is collected	NA
4	11/02/22 12:53	Li, Qing	Desktop	Start Time edited:	NA
				New: 12:53	
				Old: 12:24	

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Order source: Verbal Orders- Read Back



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/02/22 12:53	Li, Qing		Desktop	Query Specimen edited: New: Has been collected Old: Nurse/Care Provider to collect
5	11/02/22 12:53	Li, Qing		Desktop	Status changed: New: Verified Old: Uncollected
6	11/02/22 12:53	Li, Qing		Desktop	Queued to destination: New: Q11310 #3478185 Old:
7	11/02/22 12:53	Li, Qing		Desktop	Status changed: New: Transmitted Old: Verified
8	11/02/22 12:54			QUV-CM03	Status changed: New: Logged Old: Transmitted
9	11/02/22 13:19			QUV-CM03	Start Time edited: New: 13:11 Old: 12:53
10	11/02/22 13:19			QUV-CM03	Status changed: New: In Process Old: Logged
11	11/03/22 09:46	Kassar, Alexander, MD		QUV-BG19	Order is Signed by Kassar, Alexander, MD
12	11/07/22 15:30			QUV-CM03	Status changed: New: Completed Old: In Process
Bedside Testing 221102-130554222 Completed 11/02/22 12:55 Lau, Tsang, MD Contreras, Elisa Glucose (Bedside) Routine Order Source:					
Stop Reason: Completed by LIS					
Date & Time	User	Device	Event	Acknowledged	
1 11/02/22 13:05	Contreras, Elisa	QUV-CM03	No Signature is Necessary	NA	
1 11/02/22 13:05	Contreras, Elisa	QUV-CM03	Order is Entered	NA	
2 11/02/22 13:06		QUV-CM03	Status changed: New: Completed Old: In Process	NA	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Hematology

221102-135221396

Completed

11/05/22 05:45

Lau, Tsang, MD

Lau, Tsang, MD

CBC [Complete Blood Count/Auto diff]

AM

Order Source: Provider

Stop Reason: Completed by LIS

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 13:52	Lau, Tsang, MD	Desktop	Order is Entered and Signed	Y
2 11/02/22 15:18	Contreras, Elisa	Desktop	Order acknowledged	NA
3 11/05/22 00:03		QUV-BG19	Status changed: New: Transmitted	NA
4 11/05/22 00:10		QUV-CM03	OLD: Verified Status changed:	NA
5 11/05/22 00:52		QUV-CM03	New: Logged OLD: Transmitted Status changed:	NA
6 11/05/22 06:15		QUV-CM03	New: In Process OLD: Logged start Time edited:	NA
7 11/05/22 06:49		QUV-CM03	OLD: 05:00 Status changed: New: Completed OLD: In Process	NA

Hematology 221102-135221381 Completed 11/03/22 05:57 Lau, Tsang, MD Lau, Tsang, MD  
 CBC [Complete Blood Count/Auto diff] AM Order Source: Provider  
 Stop Reason: Completed by LIS

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 13:52	Lau, Tsang, MD	Desktop	Order is Entered and Signed	Y
2 11/02/22 15:15	Contreras, Elisa	Desktop	Order acknowledged	NA
3 11/03/22 00:05		QUV-BG19	Status changed: New: Transmitted OLD: Verified	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/03/22 00:12	QUV-CM03		Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/03/22 01:07	QUV-CM03		Status changed:	NA
				New: In Process	
				Old: Logged	
6	11/03/22 06:42	QUV-CM03		Start Time edited:	NA
				New: 05:57	
				Old: 05:00	
7	11/03/22 06:53	QUV-CM03		Status changed:	NA
				New: Completed	
				Old: In Process	

Hematology 221102-1352213811

Completed 11/04/22 05:16

Lau, Tsang, MD

Lau, Tsang, MD

CBC [Complete Blood Count/Auto diff]

AM

Order Source: Provider

Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 13:52	Lau, Tsang, MD	Desktop	Order is Entered and Signed	Y
2 11/02/22 15:15	Contreras, Elsa	Desktop	Order acknowledged	NA
3 11/04/22 00:04		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/04/22 00:10		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 11/04/22 01:18		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
6 11/04/22 07:01		QUV-CM03	Start Time edited:	NA
			New: 05:16	
			Old: 05:00	
7 11/04/22 07:22		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221102-141837650	Completed	11/02/22 14:18	Kassar, Alexander, MD	Gebur, Ilene Kris, PharmD
Tylenol Liquid					
Stop Reason: Completed by Pha					
Order Source: Verbal Orders - Read Back					

Medication Acetaminophen Liquid [Tylenol Liquid]  
 Dose 650 MG  
 Per

Route NG-TUBE Frequency Q6H Sched PRN PRN Reason Pain Or Fever (>100.4)  
 Stop Date/Time: Discontinued: 11/21/22 12:43

Label Comments: Maximum acetaminophen (in any form) allowable in 24 hours is 4gm.

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 14:18	Gebur, Ilene Kris, PharmD	QUV-CH03	No Signature is Necessary	Y
1 11/02/22 14:18	Gebur, Ilene Kris, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
2 11/02/22 15:15	Contreras, Elsa	Desktop	Order acknowledged	NA
3 11/03/22 09:46	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Maglunog, Alexander, MD Manage Transfer - Order is continued upon transfer	Y
7 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
8 11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
9 11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Copied to Tylenol 221121-124337487	Y
10 11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Status changed:	Y
New: Completed				
Old: Pha Verified				
11 11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221102-163038123	Completed	11/02/22 16:20	Lau, Tsang, MD	Contreras, Elisa
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					
Order Source: Routine					

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 16:30	Contreras, Elisa	QUV-CM03	No Signature is Necessary	NA
1 11/02/22 16:30	Contreras, Elisa	QUV-CM03	Order is Entered	NA
2 11/02/22 16:31		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Chemistry 221102-165702431 Cancelled 11/03/22 05:00 Amani-Yazdi, Rambod, MD  
 Basic Metabolic Panel AM  
 Order Source: Provider  
 Stop Reason: REDUNDANT ORDER FOR BMP

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 16:57	Amani-Yazdi, Rambod, MD	QCCK101	Order is Entered and Signed	Y
2 11/02/22 17:56	Contreras, Elisa	Desktop	Order acknowledged	NA
3 11/03/22 00:05		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/03/22 00:13		QUV-CM03	Status changed:	Y
			New: Cancelled	
			Old: Transmitted	
5 11/03/22 07:19	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA

Bedside Testing 221102-203048780 Completed 11/02/22 20:23 Lau, Tsang, MD  
 Glucose (Bedside) Routine  
 Order Source: Lamparero, Henry

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/02/22 20:30	Lamparero, Henry	QUV-CM03	No Signature is Necessary	NA
1 11/02/22 20:30	Lamparero, Henry	QUV-CM03	Order is Entered	NA
2 11/02/22 20:31		QUV-CM03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Bedside Testing 221103-001554237	Completed	11/03/22 00:07	Lau, Tsang, MD	Lamparero, Henry	
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Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/03/22 00:15	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
11/03/22 00:15	Lamparero, Henry	QUV-CH03	Order is Entered	NA
11/03/22 00:16		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process

Bedside Testing 221103-041048394 Completed 11/03/22 03:59

Lau, Tsang, MD

Order Source: Lamparero, Henry

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/03/22 04:10	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
11/03/22 04:10	Lamparero, Henry	QUV-CH03	Order is Entered	NA
11/03/22 04:10		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process

Bedside Testing 221103-081546027 Completed 11/03/22 08:04

Lau, Tsang, MD

Order Source: Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/03/22 08:15	Ordanza, Cristina Arenas	QUV-CH03	No Signature is Necessary	NA
11/03/22 08:15	Ordanza, Cristina Arenas	QUV-CH03	Order is Entered	NA
11/03/22 08:15		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Medications 221103-111010447 Completed 11/03/22 11:10 Amani-Yazdi, Rambod, MD Amani-Yazdi, Rambod, MD

Novolin N Order Source: Provider

Stop Reason: Order edited - Discontinuing original order

Medication Insulin NPH [Novolin N] Dose 35 UNITS Per

Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication

SUB-Q Q8HR SCH

Stop Date/Time: Discontinued: 11/05/22 08:03

Label Comments: HOLD IF THE TF WITHHELD.

Date & Time	User	Device	Event	Acknowledged
1 11/03/22 11:09	Amani-Yazdi, Rambod, MD	Q5MSK103	Order created because of edit(s)	Y
1 11/03/22 11:09	Amani-Yazdi, Rambod, MD	Q5MSK103	Copied from Novolin N 221102-073034065	Y
2 11/03/22 11:10	Amani-Yazdi, Rambod, MD	Q5MSK103	Order is signed by Amani-Yazdi, Rambod, MD	Y
3 11/03/22 11:10		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 11/03/22 11:10		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 11/03/22 11:11	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
6 11/03/22 11:15	Lieu, Anne, PharmD	QUV-CM03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
7 11/05/22 08:03	Amani-Yazdi, Rambod, MD	Desktop	Stop Request	Y
8 11/05/22 08:03	Amani-Yazdi, Rambod, MD	Desktop	Copied to Novolin N 221105-080329555	Y
9 11/05/22 08:03	Amani-Yazdi, Rambod, MD	QUV-CM03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
10 11/05/22 08:17	Malacca, Jessalite	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221103-111145246	Cancelled	11/04/22 05:00	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
<b>Basic Metabolic Panel</b>					
Stop Reason: REDUNDANT ORDER FOR BMP					

Order: 221103-111145246

Status: Cancelled

Start: 11/04/22 05:00

Ord Provider: Amani-Yazdi, Rambod, MD

Entered By: Amani-Yazdi, Rambod, MD

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/03/22 11:11	Amani-Yazdi, Rambod, MD	Q5MSK103	Order is Entered and Signed	Y
2 11/03/22 11:25	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
3 11/04/22 00:04		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
4 11/04/22 00:11		QUV-CH03	Status changed:	Y
			New: Cancelled	
			OLD: Transmitted	
5 11/04/22 07:32	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA

Bedside Testing 221103-115556511 Completed 11/03/22 11:45

Lau, Tsang, MD

Order Source: Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/03/22 11:55	Ordanza, Cristina Arenas	QUV-CH03	No Signature is Necessary	NA
1 11/03/22 11:55	Ordanza, Cristina Arenas	QUV-CH03	Order is Entered	NA
2 11/03/22 11:56		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Bedside Testing 221103-161040660 Completed 11/03/22 16:01

Lau, Tsang, MD

Order Source: Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/03/22 16:10	Ordanza, Cristina Arenas	QUV-CH03	No Signature is Necessary	NA
1 11/03/22 16:10	Ordanza, Cristina Arenas	QUV-CH03	Order is Entered	NA
2 11/03/22 16:10		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Bedside Testing 221103-201550829	Completed	11/03/22 20:06	Lau, Tsang, MD	Lamparero, Henry	
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Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/03/22 20:15	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
11/03/22 20:15	Lamparero, Henry	QUV-CH03	Order is Entered	NA
11/03/22 20:16	Lamparero, Henry	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221104-004043074 Completed 11/04/22 00:30 Lau, Tsang, MD Lamparero, Henry

Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/04/22 00:40	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
11/04/22 00:40	Lamparero, Henry	QUV-CH03	Order is Entered	NA
11/04/22 00:40	Lamparero, Henry	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221104-044530490 Completed 11/04/22 04:34 Lau, Tsang, MD Lamparero, Henry

Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/04/22 04:45	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
11/04/22 04:45	Lamparero, Henry	QUV-CH03	Order is Entered	NA
11/04/22 04:45	Lamparero, Henry	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221104-081051827 Completed 11/04/22 07:57

Lau, Tsang, MD

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/04/22 08:10	Ordanza, Cristina Arenas	QUV-CH03	No Signature is Necessary	NA
1 11/04/22 08:10	Ordanza, Cristina Arenas	QUV-CH03	Order is Entered	NA
2 11/04/22 08:11		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Medications 221104-085206228 Completed 11/04/22 09:00

Lau, Tsang, MD

Lau, Tsang, MD

Septira DS

Order Source: Provider

Stop Reason: Discontinue

Medication	Dose	Per	Days	Hours	Total Doses	Clinical Indication
TMP 160 mg-SMZ 800 mg [Septira DS]	1 TAB					Urinary Tract Infection

Route Frequency Sched PRN Reason  
 NG-TUBE Q12HR SCH  
 Stop Date/Time: 11/11/22 08:59  
 Discontinued: 11/08/22 09:08

Date & Time	User	Device	Event	Acknowledged
1 11/04/22 08:52	Lau, Tsang, MD	QICUK101	Order is Entered and Signed	Y
2 11/04/22 08:52		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
3 11/04/22 08:52		QUV-CH03	Order Type edited:	Y
			New: MED	
			OLD:	
4 11/04/22 08:52		QUV-CH03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/04/22 08:56	Everge, Ivy Kristina, PharmD	QUV-CH03	Route edited: New: NG-TUBE Old: PO	Y
6	11/04/22 08:56	Everge, Ivy Kristina, PharmD	QUV-CH03	Status changed: New: Pha Verified Old: Logged	NA
7	11/04/22 09:18	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
8	11/08/22 09:08	Batou, Augen, DO	QDDK101	Stop Request	Y
9	11/08/22 09:09	Batou, Augen, DO	QUV-CH03	Status changed: New: Completed Old: Pha Verified	Y
10	11/08/22 09:32	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
Miscellaneous O 221104-100720191		Transmitted	11/04/22 10:06	Lau, Tsang, MD NOW	Ordanza, Cristina Arenas
Pharmacy Missing Med Slip					Order Source: Nursing Orders
Requesting Person		ORDACRI			
Extension		29084			
Please send the following medication(s) TMP SMK PLS. THANKS					
Date & Time	User	Device	Event	Acknowledged	
11/04/22 10:07	Ordanza, Cristina Arenas	Desktop	No Signature is Necessary	Y	
11/04/22 10:07	Ordanza, Cristina Arenas	Desktop	Order is Entered	Y	
11/04/22 10:07	Ordanza, Cristina Arenas	Desktop	Reflex Set: Pharmacy Missing Med generated	Y	
11/04/22 10:07		QUV-BG19	Queued to destination: New: QPHARMP2 #3483179 Old:	NA	
11/04/22 10:07		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA	
11/04/22 10:49	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Chemistry

221104-1100229451

Cancelled

11/05/22 05:00

Amani-Yazdi, Rambod, MD

Amani-Yazdi, Rambod, MD

Basic Metabolic Panel

AM

Order Source: Provider

Stop Reason: REDUNDANT ORDER FOR BMP

Specimen

Send someone from the department to collect

Date & Time

User

Device

Event

Acknowledged

1 11/04/22 11:00

Amani-Yazdi, Rambod, MD

QUCUR104

Order is Entered and Signed

Y

2 11/04/22 11:15

Ordanza, Cristina Arenas

Desktop

Order acknowledged

NA

3 11/05/22 00:04

Ordanza, Cristina Arenas

QUV-BG19

Status changed:

NA

New: Transmitted

Old: Verified

4 11/05/22 00:12

Ordanza, Cristina Arenas

QUV-CH03

Status changed:

Y

New: Cancelled

Old: Transmitted

5 11/05/22 07:35

Malaca, Jessalie

Desktop

Order acknowledged

NA

Bedside Testing 221104-122038988

Completed

11/04/22 12:10

Lau, Tsang, MD

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/04/22 12:20

Ordanza, Cristina Arenas

QUV-CH03

No Signature is Necessary

NA

1 11/04/22 12:20

Ordanza, Cristina Arenas

QUV-CH03

Order is Entered

NA

2 11/04/22 12:21

Ordanza, Cristina Arenas

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221104-163054585

Completed

11/04/22 16:22

Lau, Tsang, MD

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/04/22 16:30

Ordanza, Cristina Arenas

QUV-CH03

No Signature is Necessary

NA

1 11/04/22 16:30

Ordanza, Cristina Arenas

QUV-CH03

Order is Entered

NA

2 11/04/22 16:31

Ordanza, Cristina Arenas

QUV-CH03

Status changed:

NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Bedside Testing 221104-223549072	Completed	11/04/22 22:28	Lau, Tsang, MD	Chow, Kristin	
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Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/04/22 22:35	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
11/04/22 22:35	Chow, Kristin	QUV-CH03	Order is Entered	NA
11/04/22 22:36		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process

Bedside Testing 221105-014537241 Completed 11/05/22 01:36 Lau, Tsang, MD Chow, Kristin

Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/05/22 01:45	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
11/05/22 01:45	Chow, Kristin	QUV-CH03	Order is Entered	NA
11/05/22 01:45		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process

Bedside Testing 221105-050533453 Completed 11/05/22 04:58 Lau, Tsang, MD Chow, Kristin

Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/05/22 05:05	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
11/05/22 05:05	Chow, Kristin	QUV-CH03	Order is Entered	NA
11/05/22 05:06		QUV-CH03	Status changed:	NA

New: Completed

Old: In Process

Order Source: Routine

Order Source: Routine



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Medications 221105-080329955 Completed 11/05/22 08:03 Amani-Yazdi, Rambod, MD Amani-Yazdi, Rambod, MD  
 Novolin N Order Source: Provider

Stop Reason: Order edited - Discontinuing original order

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Insulin NPH [Novolin N]	40 UNITS		SUB-Q	Q8HR	SCH				
Stop Date/Time: Discontinued: 11/05/22 10:27									

Label Comments: HOLD IF THE TF WITHHELD.

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 08:03	Amani-Yazdi, Rambod, MD	Desktop	Order created because of edit(s)	Y
1 11/05/22 08:03	Amani-Yazdi, Rambod, MD	Desktop	Copied from Novolin N 221103-111010447	Y
2 11/05/22 08:03	Amani-Yazdi, Rambod, MD	Desktop	Order is signed by Amani-Yazdi, Rambod, MD	Y
3 11/05/22 08:03		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 11/05/22 08:03		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 11/05/22 08:08	Trinh, Karen, PharmD	QUV-CH03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
6 11/05/22 08:20	Malaca, Jessalie	Desktop	Order acknowledged	NA
7 11/05/22 10:26	Malaca, Jessalie	Desktop	Stop Request	Y
8 11/05/22 10:26	Malaca, Jessalie	Desktop	Copied to Novolin N 221105-102658933	Y
9 11/05/22 10:27	Malaca, Jessalie	QUV-CH03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
10 11/05/22 10:44	Malaca, Jessalie	Desktop	Order acknowledged	NA
11 11/05/22 19:22	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is signed by Amani-Yazdi, Rambod, MD	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Routine Care	221105-080910238	Completed	11/06/22 10:00	Amani-Yazdi, Rambod, MD	Malaca, Jessalje
<b>Glucose Check (Bedside)</b>					
<b>Stop Reason:</b> Order Change					
					Order Source: Telephone Orders - Read Back

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 08:09	Malaca, Jessalje	Desktop	Signature is Necessary	Y
1 11/05/22 08:09	Malaca, Jessalje	Desktop	Order is Entered	Y
2 11/05/22 08:09		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 11/05/22 08:19	Malaca, Jessalje	Desktop	Freq edited:	Y
			New: Q4H	
			Old: Q4HR	
4 11/05/22 08:20	Malaca, Jessalje	Desktop	Order acknowledged	NA
5 11/05/22 08:36	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA
6 11/06/22 10:55	Malaca, Jessalje	Desktop	Start Date edited:	Y
			New: Sun Nov 6	
			Old: Sat Nov 5	
6 11/06/22 10:55	Malaca, Jessalje	Desktop	Freq added:	Y
			New: Q4H	
			Old:	
6 11/06/22 10:55	Malaca, Jessalje	Desktop	Freq removed:	Y
			New: Q4H	
			Old:	
7 11/06/22 11:31	Malaca, Jessalje	Desktop	Order acknowledged	NA
8 11/06/22 18:09	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA
9 11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
10 11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA
11 11/09/22 22:57	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	Y
12 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
13 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA
14 11/22/22 10:51	RN 131, CVMC Registry	Desktop	Freq added:	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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15	11/22/22 10:51	RN 131, CVMC Registry	Desktop	New: Q6HR Old: Freq added:	Y
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16	11/22/22 10:52	RN 131, CVMC Registry	Desktop	New: Q6HR Old: Freq added:	Y
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17	11/22/22 11:02	RN 131, CVMC Registry	Desktop	New: Q6HR Old: Order acknowledged	NA
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18	11/22/22 13:58	Amani-Yazdi, Rambod, MD	QUV-BG19	New: Q6H Old: Order is signed by Amani-Yazdi, Rambod, MD	NA
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19	11/22/22 14:00	Amani-Yazdi, Rambod, MD	QDUOK101	New: Q6H Old: Stop Request	Y
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20	11/22/22 14:01	Amani-Yazdi, Rambod, MD	QDUOK101	New: Q6H Old: Order is Completed	NA
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21	11/22/22 14:10	RN 131, CVMC Registry	Desktop	New: Q6H Old: Order acknowledged	NA
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Bedside Testing 221105-102035494 Completed 11/05/22 10:13 Kamdar, Sana, MD Malacca, Jessalie  
 Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 10:20	Malacca, Jessalie	QUV-CH03	No Signature is Necessary	NA
1 11/05/22 10:20	Malacca, Jessalie	QUV-CH03	Order is Entered	NA
2 11/05/22 10:20		QUV-CH03	Status changed: New: Completed Old: In Process	NA

Medications 221105-102658833 Completed 11/05/22 14:00 Amani-Yazdi, Rambod, MD Malacca, Jessalie  
 Novolin N Order Source: Telephone Orders- Read Back  
 Stop Reason: Order edited - Discontinuing original order

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Insulin NPH [Novolin N]	37 UNITS		SUB-Q	Q8H	SCH				
Stop Date/Time: 11/07/22 16:39 Discontinued: 11/07/22 16:39									

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Label Comments: HOLD IF THE TF WITHHELD.

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 10:25	Malaca, Jessalije	Desktop	Order created because of edit(s)	Y
1 11/05/22 10:25	Malaca, Jessalije	Desktop	Copied from NOVOLIN N 221105-080329955	Y
2 11/05/22 10:26	Malaca, Jessalije	Desktop	Signature is Necessary	Y
3 11/05/22 10:26	Malaca, Jessalije	Desktop	First Dose:	NA
			<b>New:</b> Order dose for 11/05/22 14:00, then continue schedule	
			<b>Old:</b>	
4 11/05/22 10:27		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
5 11/05/22 10:27		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
6 11/05/22 10:27	True, Genevieve M.S., PharmD	QUV-CH03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
7 11/05/22 10:44	Malaca, Jessalije	Desktop	Order acknowledged	NA
8 11/05/22 19:22	Amani-Yazdi, Rambod, MD	QUV-BG19	Order is Signed by Amani-Yazdi, Rambod, MD	NA
9 11/07/22 16:38	Amani-Yazdi, Rambod, MD	QICUK101	Stop Request	Y
10 11/07/22 16:38	Amani-Yazdi, Rambod, MD	QICUK101	Copied to NOVOLIN N 221107-163844355	Y
11 11/07/22 16:39	Amani-Yazdi, Rambod, MD	QUV-CH03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
12 11/07/22 16:49	Donske, Ruth	Desktop	Order acknowledged	NA

Routine Care 221105-114221767 Cancelled 11/05/22 11:41 Cutler, Aaron, MD  
**External Ventricular Drain / ICP** NOW Order Source: Provider

Stop Reason: Cancelled by PCS

Physician Instructions Raise to open to drain @ 10 cm H2O

Desired Height Level (cmH2O) 10

Continuous Drainage Or Clamped Continuous

CSF & ICP Monitor Frequency Every 1 hour

Head of Bed Elevation 30 Degrees

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/05/22 12:05	Malaca, Jessalje	Desktop	Freq added: <b>New:</b> Q1HR <b>Old:</b>	Y
5	11/05/22 12:22	Cutler, Aaron, MD	QUV-BG19	Order is Signed by Cutler, Aaron, MD	NA
6	11/05/22 12:26	Malaca, Jessalje	Desktop	Order acknowledged	NA
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Start Date edited: <b>New:</b> Sun Nov 6 <b>Old:</b> Sat Nov 5	Y
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Start Time edited: <b>New:</b> 15:00 <b>Old:</b> 11:43	Y
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Freq added: <b>New:</b> Q1HR <b>Old:</b>	Y
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Freq removed: <b>New:</b> NOW <b>Old:</b>	Y
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Freq removed: <b>New:</b> Q1HR <b>Old:</b>	Y
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Query Desired Height Level (cmH2O) edited: <b>New:</b> 10 <b>Old:</b> 5	Y
7	11/06/22 14:24	Malaca, Jessalje	Desktop	Query Physician Instructions edited: <b>New:</b> Raise to open to drain @ 10 cm H2O <b>Old:</b> Raise to open to drain @ 5 cm H2O	Y
8	11/06/22 14:24	Malaca, Jessalje	Desktop	Order acknowledged	NA
9	11/08/22 12:01	Olsson, Ingrid, PA-C	QUV-BG19	Order is Signed by Olsson, Ingrid, PA-C	NA
10	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
12	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
13	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
14	11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
15	11/14/22 11:10	Malaca, Jessalije	Desktop	Start Date edited: New: Mon Nov 14 Old: Sun Nov 6	Y
15	11/14/22 11:10	Malaca, Jessalije	Desktop	Start Time edited: New: 11:00 Old: 15:00	Y
15	11/14/22 11:10	Malaca, Jessalije	Desktop	Freq added: New: Q1HR Old:	Y
15	11/14/22 11:10	Malaca, Jessalije	Desktop	Freq removed: New: Q1HR Old:	Y
15	11/14/22 11:10	Malaca, Jessalije	Desktop	Query Desired Height Level (cmH2O) edited: New: 0 Old: 10	Y
15	11/14/22 11:10	Malaca, Jessalije	Desktop	Query Physician Instructions edited: New: Open to drain @ 0 cm H2O Old: Raise to open to drain @ 10 cm H2O	Y
16	11/14/22 11:26	Malaca, Jessalije	Desktop	Order acknowledged Order is Signed by Ball, Benjamin	NA
17	11/15/22 09:07	Ball, Benjamin	QUV-BG19	Start Date edited:	NA
18	11/16/22 10:17	Malaca, Jessalije	Desktop	New: Wed Nov 16 Old: Mon Nov 14	Y
18	11/16/22 10:17	Malaca, Jessalije	Desktop	Start Time edited: New: 10:00 Old: 11:00	Y
18	11/16/22 10:17	Malaca, Jessalije	Desktop	Freq added: New: Q1HR Old:	Y
18	11/16/22 10:17	Malaca, Jessalije	Desktop	Freq removed: New: Q1HR Old:	Y
18	11/16/22 10:17	Malaca, Jessalije	Desktop	Query Desired Height Level (cmH2O) edited: New: 5 Old: 0	Y
18	11/16/22 10:17	Malaca, Jessalije	Desktop	Query Physician Instructions edited:	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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19	11/16/22 11:33	Malaca, Jessalite	Desktop	<b>New:</b> Open to drain @ 5 cm H20 <b>Old:</b> Open to drain @ 0 cm H20	NA
20	11/17/22 08:26	Ball, Benjamin	QUV-BG19	Order acknowledged Order is Signed by Ball, Benjamin	NA
21	11/18/22 09:40	Tong, Malina I	Desktop	Query Desired Height Level (cmH2O) edited: <b>New:</b> 10 <b>Old:</b> 5	Y
22	11/18/22 09:40	Tong, Malina I	Desktop	Order acknowledged	NA
23	11/18/22 10:04	Ramos, Jessica	Desktop	Query Physician Instructions edited: <b>New:</b>	Y
24	11/18/22 10:04	Ramos, Jessica	Desktop	<b>Old:</b> Open to drain @ 5 cm H20 Order acknowledged	NA
25	11/19/22 07:05	Ball, Benjamin	QUV-BG19	Order is Signed by Ball, Benjamin	NA
26	11/20/22 09:25	Vandemark, Joann M	Desktop	Status changed: <b>New:</b> completed <b>Old:</b> In Process	NA

Bedside Testing 221105-134044085	Completed	11/05/22 13:29	Kamdar, Sana, MD	DEVERA, JUSTIN
Glucose (Bedside)			Routine	Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 13:40	DEVERA, JUSTIN	QUV-CH03	No Signature is Necessary	NA
1 11/05/22 13:40	DEVERA, JUSTIN	QUV-CH03	Order is Entered	NA
2 11/05/22 13:40		QUV-CH03	Status changed: <b>New:</b> Completed <b>Old:</b> In Process	NA

Medications 221105-135127635	Completed	11/05/22 14:00	Kamdar, Sana, MD	Kamdar, Sana, MD
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Vancomycin per Pharmacy

Order Source: Provider

Stop Reason: Reached Stop Date

Medication	Dose	Par
Vancomycin - Dosed by BHA [Vancomycin per Pharmacy]	1 EACH	

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Continued on Next Page						



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

MISCELLANE PROTOCOL

SCH

Urinary Tract Infection

Stop Date/Time: 11/13/22 17:00

Discontinued: 11/13/22 17:00

Target Level(s): Per Pharmacy

Dose Instruction: DC Vancomycin after last dose if given on 11/13

Date & Time	User	Device	Event	Acknowledged
11/05/22 13:51	Kandar, Sana, MD	QDJK102	Order Is Entered and Signed	Y
11/05/22 13:51		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
11/05/22 13:51		QUV-CM03	Order Type edited:	Y
			New: zCONS1	
			Old:	
			Status changed:	NA
			New: Logged	
			Old: Transmitted	
11/05/22 13:54	Enverga, Ivy Kristina, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
11/05/22 14:36	Malaca, Jessalje	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPAUCUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPAUCUK101	Manage Transfer - Transfer Provider added:	NA
11/09/22 22:57	Maglunog, Alexander A, MD	QPAUCUK101	Manage Transfer - Order is continued upon transfer	Y
11/09/22 22:57	Apa, Mary Jurem	QPAUCUK101	Process Transfer	NA
11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
11/11/22 14:32	Huyhnh, Hanh H, PharmD	Desktop	Order is renewed	NA
11/11/22 16:49	Batou, Augen, DO	QUV-BG19	Order is Signed by Batou, Augen, DO	NA
11/13/22 08:43	Batou, Augen, DO	QDLK101	Dose Instructions added	Y
11/13/22 08:48	Enverga, Ivy Kristina, PharmD	QUV-CM03	Pha Stop Date edited:	Y
			New: Sun Nov 13	

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				Old:	
15	11/13/22 08:48	Evergs, Ivy Kristina, PharmD	QUV-CH03	Pha Stop Time edited:	Y
				New: 13:59	
16	11/13/22 09:06	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
17	11/13/22 11:55	Phong, Suzanne, PharmD	QUV-CH03	Pha Stop Time edited:	Y
				New: 17:00	
				Old: 13:59	
18	11/13/22 11:58	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
19	11/13/22 17:00		QUV-CH03	Status changed:	Y
				New: Completed	
				Old: Pha Verified	
20	11/13/22 17:06	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA
Chemistry	221105-135450732	Completed	11/06/22 06:00	Kamdar, Sana, MD	
Basic Metabolic Panel				Routine	
				Order Source: Provider	
				Stop Reason: Completed by LIS	
Specimen				Send someone from the department to collect	
1	11/05/22 13:54	Kamdar, Sana, MD	QDIK102	Order is Entered and Signed	Y
2	11/05/22 14:36	Malaca, Jessalite	Desktop	Order acknowledged	NA
3	11/06/22 00:01		QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
4	11/06/22 00:06		QUV-CH03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/06/22 00:53		QUV-CH03	Status changed:	NA
				New: In Process	
				Old: Logged	
6	11/06/22 06:51		QUV-CH03	Start Time edited:	NA
				New: 06:00	
				Old: 05:00	
7	11/06/22 07:42		QUV-CH03	Status changed:	NA
				New: Completed	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**

Chemistry 221105-1354507321 Completed 11/06/22 06:00 Kamdar, Sana, MD Kamdar, Sana, MD  
 Magnesium Routine **Order Source:** Provider

**Stop Reason:** Completed by Lis

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 13:54	Kamdar, Sana, MD	QDJK102	Order is Entered and Signed	Y
2 11/05/22 14:36	Malaca, Jessalje	Desktop	Order acknowledged	NA
3 11/06/22 00:01		QUV-BG19	Status changed: New: Transmitted	NA
4 11/06/22 00:06		QUV-CH03	OLD: Verified Status changed: New: Logged	NA
5 11/06/22 00:53		QUV-CH03	OLD: Transmitted Status changed: New: In Process	NA
6 11/06/22 06:51		QUV-CH03	OLD: Logged Start time edited: New: 06:00	NA
7 11/06/22 07:42		QUV-CH03	OLD: 05:00 Status changed: New: Completed	NA
			OLD: In Process	

Hematology 221105-135450732 Completed 11/06/22 06:00 Kamdar, Sana, MD Kamdar, Sana, MD  
**Complete Blood Count/Auto diff** Routine **Order Source:** Provider

**Stop Reason:** Completed by Lis

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/05/22 13:54	Kamdar, Sana, MD	QDJK102	Order is Entered and Signed	Y
2 11/05/22 14:36	Malaca, Jessalje	Desktop	Order acknowledged	NA
3 11/06/22 00:01		QUV-BG19	Status changed: New: Transmitted	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/06/22 00:06	QUV-CM03	QUV-CM03	Old: Verified Status changed: New: Logged	NA
5	11/06/22 00:53	QUV-CM03	QUV-CM03	Old: Transmitted Status changed: New: In Process	NA
6	11/06/22 06:51	QUV-CM03	QUV-CM03	Old: Logged Start time edited: New: 06:00 Old: 05:00	NA
7	11/06/22 08:13	QUV-CM03	QUV-CM03	New: Completed Status changed: New: Completed Old: In Process	NA

Medications 221105-140201802 Completed 11/05/22 15:00 Kamdar, Sana, MD Enverga, Ivy Kristina, PharmD

Vancomycin

Order source: Protocol Orders (Sig Required)

Stop Reason: Reached Stop Date

Medication	Dose	Per
Vancomycin	1,250 MG	
Dextrose 5% 250 ml	Vol Per Bag: 250 ML	
QS Drug	QS Volume	Total Volume
		250 ML

Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Clinical Indication
IVPB	Q24H	SCH				Urinary Tract Infection
Rate: 125 ML/HR						
Stop Date/Time: 11/13/22 17:00						
Discontinued: 11/13/22 17:00						

Label Comments: \*Refrigerate\*  
RX TO DOSE

Date & Time	User	Device	Event	Acknowledged
11/05/22 14:02	Enverga, Ivy Kristina, PharmD	Desktop	Signature is Necessary	Y
11/05/22 14:02	Enverga, Ivy Kristina, PharmD	Desktop	Order is Entered	Y
11/05/22 14:02		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>New:</b> Transmitted <b>Old:</b> Verified
	3		11/05/22 14:02	QUV-CH03	<b>New:</b> Rate edited: 125 MLS/HR <b>Old:</b> 125 MLS/HR
	4		11/05/22 14:02	QUV-CH03	<b>New:</b> Status changed: Logged <b>Old:</b> Transmitted
	5		11/05/22 14:11	QUV-BG19	<b>New:</b> Order is Signed by Kamdar, Sana, MD Status changed: Pha Verified <b>Old:</b> Logged
	6		11/05/22 14:17	QUV-CH03	<b>New:</b> Status changed: Pha Verified <b>Old:</b> Logged
	7		11/05/22 14:36	Desktop	<b>New:</b> Order acknowledged Manage Transfer - Order is set to continue upon transfer <b>Old:</b> Manage Transfer - Order is continued upon transfer
	8		11/09/22 12:08	QFACUK101	<b>New:</b> Manage Transfer - Transfer Provider added: Maglumog, Alexander, MD <b>Old:</b> Manage Transfer - Order is continued upon transfer
	9		11/09/22 12:08	QFACUK101	<b>New:</b> Manage Transfer - Transfer Provider added: Maglumog, Alexander, MD <b>Old:</b> Manage Transfer - Order is continued upon transfer
	10		11/09/22 22:57	QFACUK101	<b>New:</b> Manage Transfer - Transfer Provider added: Maglumog, Alexander, MD <b>Old:</b> Manage Transfer - Order is continued upon transfer
	11		11/09/22 22:57	QFACUK101	<b>New:</b> Process Transfer Order acknowledged <b>Old:</b> Order is renewed
	12		11/10/22 03:09	Desktop	<b>New:</b> Order is renewed Order is signed by Batou, Augen, DO <b>Old:</b> Pha Stop Date edited: Sun Nov 13
	13		11/11/22 14:32	Desktop	<b>New:</b> Order is renewed Order is signed by Batou, Augen, DO <b>Old:</b> Pha Stop Date edited: Sun Nov 13
	14		11/11/22 16:49	QUV-BG19	<b>New:</b> Order is signed by Batou, Augen, DO Pha Stop Date edited: Sun Nov 13 <b>Old:</b> Pha Stop Date edited: Sun Nov 13
	15		11/13/22 08:49	QUV-CH03	<b>New:</b> Pha Stop Time edited: 17:00 <b>Old:</b> Pha Stop Time edited: 17:00
	16		11/13/22 09:06	Desktop	<b>New:</b> Order acknowledged Status changed: Completed <b>Old:</b> Pha Verified
	17		11/13/22 17:00	QUV-CH03	<b>New:</b> Order acknowledged Status changed: Completed <b>Old:</b> Pha Verified
	18		11/13/22 17:06	Desktop	<b>New:</b> Order acknowledged Status changed: Completed <b>Old:</b> Pha Verified



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Stop Ord Provider Entered By

Routine Care 221105-143536500 Completed 11/05/22 18:00 Kamdar, Sana, MD Malacca, Jessalie

Other Nursing Interventions Q6HR Order Source: Telephone Orders - Read Back

Stop Reason: Discontinue

Intervention Text WATER FLUSH VTA OGT 100ML Q6HRS

Date & Time User Device Event Acknowledged

1 11/05/22 14:35 Malacca, Jessalie Desktop Signature is Necessary Y

1 11/05/22 14:35 Malacca, Jessalie Desktop Order is Entered Y

2 11/05/22 14:35 QUV-BG19 Status changed: New: In Process NA

3 11/05/22 14:36 Malacca, Jessalie Desktop Order is Entered: Old: Verified NA

4 11/06/22 08:09 Kamdar, Sana, MD Desktop Order acknowledged NA

5 11/06/22 10:44 Malacca, Jessalie Desktop Order is Signed by Kamdar, Sana, MD NA

6 11/06/22 10:44 Malacca, Jessalie Desktop Stop Request Y

7 11/06/22 10:47 Malacca, Jessalie Desktop Order is Completed NA

8 11/06/22 14:04 Kamdar, Sana, MD Desktop Order acknowledged NA

8 Bedside Testing 221105-182029850 Completed 11/05/22 18:10 Kamdar, Sana, MD Order is Signed by Kamdar, Sana, MD NA

Glucose (Bedside) Malacca, Jessalie Order Source:

Stop Reason: Completed by Lis

Date & Time User Device Event Acknowledged

1 11/05/22 22:00 Chow, Kristin QUV-CH03 No Signature is Necessary NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/05/22 22:00	Chow, Kristin	QUV-CH03	Order Is Entered	NA
2	11/05/22 22:00	QUV-CH03	QUV-CH03	Status changed:	NA
				New: Completed	
				Old: In Process	
Bedside Testing 221106-025031354 Completed 11/06/22 02:39					
Glucose (Bedside) Kamdar, Sana, MD Chow, Kristin					
Routine					
Order Source:					
Stop Reason: Completed by Lis					

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 02:50	Chow, Kristin	QUV-CH03	No Signature Is Necessary	NA
1 11/06/22 02:50	Chow, Kristin	QUV-CH03	Order Is Entered	NA
2 11/06/22 02:51	Chow, Kristin	QUV-CH03	Status changed:	NA
				New: Completed
				Old: In Process
Bedside Testing 221106-063103740 Completed 11/06/22 06:22				
Glucose (Bedside) Kamdar, Sana, MD Chow, Kristin				
Routine				
Order Source:				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 06:31	Chow, Kristin	QUV-CH03	No Signature Is Necessary	NA
1 11/06/22 06:31	Chow, Kristin	QUV-CH03	Order Is Entered	NA
2 11/06/22 06:31	Chow, Kristin	QUV-CH03	Status changed:	NA
				New: Completed
				Old: In Process
Bedside Testing 221106-102017812 Completed 11/06/22 10:10				
Glucose (Bedside) Kamdar, Sana, MD DEVERA, JUSTIN				
Routine				
Order Source:				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 10:20	DEVERA, JUSTIN	QUV-CH03	No Signature Is Necessary	NA
1 11/06/22 10:20	DEVERA, JUSTIN	QUV-CH03	Order Is Entered	NA
2 11/06/22 10:20	DEVERA, JUSTIN	QUV-CH03	Status changed:	NA
				New: Completed

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Ultrasound 221106-103815805 Resulted 11/06/22 10:38 Kamdar, Sana, MD Entered By  
 renal [US renal BI] Routine Order Source: Provider

Mode Of Transportation Hospital Bed  
 Reason For Exam worsening creatinine

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 10:38	Kamdar, Sana, MD	QDDUK102	Order Is Entered and Signed	Y
2 11/06/22 10:38		QUV-BG19	Status changed: New: Transmitted	NA
3 11/06/22 10:38		QUV-CH03	Old: Verified New: Hospital Bed Query Mode Of Transportation edited:	NA
4 11/06/22 10:38		QUV-CH03	Old: New: Hospital Bed Status changed: New: Logged	NA
5 11/06/22 10:47	Malaca, Jessalite	Desktop	Old: Transmitted New: Transmitted Order acknowledged	NA
6 11/06/22 17:54	Cheng, Bonnie	QUV-CH03	Status changed: New: Taken	NA
7 11/06/22 22:44		QUV-CH03	Old: Logged New: Taken Status changed: New: Resulted Old: Taken	NA

Chemistry 221106-120704281 Cancelled 11/06/22 14:30 Kamdar, Sana, MD Enverga, Ivy Kristina, PharmD  
 Vancocycin Random Timed Order Source: Protocol Orders (Sig Required)  
 Stop Reason: Discontinue

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 12:07	Enverga, Ivy Kristina, PharmD	Desktop	Signature Is Necessary	Y
1 11/06/22 12:07	Enverga, Ivy Kristina, PharmD	Desktop	Order Is Entered	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				New: 05:40	
				Old: 05:00	
				Status changed:	
				New: Completed	
				Old: In Process	

Chemistry 1 221106-1209435031 Completed 11/07/22 14:15

Kamdar, Sana, MD

Enverga, Ivy Kristina, PharmD

Vancomycin Trough

Timed

Order Source: Protocol Orders (Sig Required)

Stop Reason: Completed by Lis

Comment: Draw 30 minutes before dose, check with RN Specimen: Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 12:09	Enverga, Ivy Kristina, PharmD	Desktop	Signature is Necessary	Y
1 11/06/22 12:09	Enverga, Ivy Kristina, PharmD	Desktop	Order is Entered	Y
2 11/06/22 12:10	Malaca, Jessalite	Desktop	Order acknowledged	NA
3 11/06/22 14:04	Kamdar, Sana, MD	QUV-BG19	Order is Signed by Kamdar, Sana, MD	NA
4 11/07/22 00:02		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
5 11/07/22 00:06		QUV-CH03	Priority edited:	NA
			New: Routine	
			Old: Timed	
6 11/07/22 00:06		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
7 11/07/22 00:08		QUV-CH03	Status changed:	NA
			New: In Process	
			Old: Logged	
8 11/07/22 14:09	Villanueva, Ramon	Phone	Specimen Collected: 1107:C00140R	NA
9 11/07/22 14:09	Villanueva, Ramon	Phone	Order is collected	NA
10 11/07/22 14:09		QUV-CH03	Start Time edited:	NA
			New: 14:30	
			Old: 13:46	
11 11/07/22 14:34		QUV-CH03	Start Time edited:	NA
			New: 14:15	

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Patient Order Summary

Page: 244 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	11/06/22 14:20	Malaca, Jessalie	Desktop	Order acknowledged	NA
3	11/07/22 00:04		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4	11/07/22 00:12		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5	11/07/22 00:23	Tagorda, Buenafe P	QUV-CM03	Status changed: New: Cancelled Old: Logged	Y
6	11/07/22 01:43	Chow, Kristin	Desktop	Order acknowledged	NA
Chemistry 221106-135648878 Cancelled 11/07/22 05:00 Kamdar, Sana, MD					
Basic Metabolic Panel					
Stop Reason: Cancelled by Lis					
Order Source: Provider					
Specimen Send someone from the department to collect					
Date & Time	User	Device	Event	Acknowledged	
1 11/06/22 13:56	Kamdar, Sana, MD	QDJK101	Order is Entered and signed	Y	
2 11/06/22 14:20	Malaca, Jessalie	Desktop	Order acknowledged	NA	
3 11/07/22 00:04		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA	
4 11/07/22 00:12		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA	
5 11/07/22 00:23	Tagorda, Buenafe P	QUV-CM03	Status changed: New: Cancelled Old: Logged	Y	
6 11/07/22 01:43	Chow, Kristin	Desktop	Order acknowledged	NA	
Bedside Testing 221106-142034255 Completed 11/06/22 14:05 Kamdar, Sana, MD					
Glucose (Bedside) Routine					
Stop Reason: Completed by Lis					
Order Source: Malaca, Jessalie					
Date & Time	User	Device	Event	Acknowledged	
Continued on Next Page					





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/06/22 14:20	Malaca, Jessalie		QUV-CH03	NA
1	11/06/22 14:20	Malaca, Jessalie		QUV-CH03	NA
2	11/06/22 14:21			QUV-CH03	NA

New: Completed  
Old: In Process

Medications 221106-154132829 Completed 11/06/22 21:00

Batou, Augen, DO

Enverga, Ivy Kristina, PharmD

Order Source: Protocol Orders (Sig Required)

Stop Reason: Completed by Pha

Medication Famotidine [Pepcid] Dose 20 MG Per

Route NG-TUBE BID Sched SCH PRN Reason

Days Hours Total Doses

Clinical Indication

Stop Date/Time: Discontinued: 11/21/22 12:43

Label Comments: IV TO NG PER PROTOCOL

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 15:41	Enverga, Ivy Kristina, PharmD	Desktop	Signature is Necessary	Y
1 11/06/22 15:41	Enverga, Ivy Kristina, PharmD	Desktop	Order is Entered	Y
2 11/06/22 15:41	Enverga, Ivy Kristina, PharmD	Desktop	First Dose:	NA
			New: Keep the current schedule: 11/06/22 21:00	
			Old:	
3 11/06/22 15:41		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/06/22 15:41		QUV-CH03	Order Type edited:	Y
			New: MED	
			Old:	
5 11/06/22 15:41		QUV-CH03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
6 11/06/22 15:44	Villlegas, Karen, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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7	11/06/22 15:46	Malaca, Jessalje	Desktop	Logged	NA
8	11/07/22 07:36	Batou, Augen, DO	QUV-BG19	Order acknowledged Order is Signed by Batou, Augen, DO	NA
9	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
10	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
11	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
12	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
13	11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
14	11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Copied to Pepcid 221121-124355050	Y
15	11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Status changed: <b>New:</b> Completed <b>Old:</b> Pha Verified	Y
16	11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA

Bedside Testing 221106-181536211 Completed 11/06/22 18:04 **Order Source:** Malaca, Jessalje  
**Glucose (Bedside)** Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 18:15	Malaca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/06/22 18:15	Malaca, Jessalje	QUV-CH03	Order is Entered	NA
2 11/06/22 18:16		QUV-CH03	Status changed: <b>New:</b> Completed <b>Old:</b> In Process	NA

Bedside Testing 221106-222031639 Completed 11/06/22 22:11 **Order Source:** Chow, Kristin  
**Glucose (Bedside)** Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 22:20	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
1 11/06/22 22:20	Chow, Kristin	QUV-CH03	Order is Entered	NA
2 11/06/22 22:20		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By

Medications	1221106-2246180511	Completed	11/06/22 22:45	Rizvi, Abid A, MD	Chow, Kristin
-------------	--------------------	-----------	----------------	-------------------	---------------

NS Bolus by Liter

Order Source: Telephone Orders- Read Back

Stop Reason: Reached Stop Date

Medication	Dose	Per
0.9% Sodium Chloride [Sodium Chloride 0.9%]	Vol Per Bag: 1,000 ML	
QS Drug	QS Volume	Total Volume
		1000 ML

Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Bags	Clinical Indication
IV	.Q1H1M	SCH			1,000	1	
Rate: 999 MLS/HR							
Stop Date/Time: 11/06/22 23:45							
Discontinued: 11/06/22 23:45							

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 22:46	Chow, Kristin	Desktop	Signature is Necessary	Y
1 11/06/22 22:46	Chow, Kristin	Desktop	Order is Entered	Y
2 11/06/22 22:46		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
3 11/06/22 22:46		QUV-CM03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
4 11/06/22 22:49	Tran, Steven Wade, PharmD	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			OLD: Logged	
5 11/06/22 22:52	Chow, Kristin	Desktop	Order acknowledged	NA
6 11/06/22 23:45		QUV-CM03	Status changed:	Y
			New: Completed	
			OLD: Pha Verified	
7 11/06/22 23:49	Chow, Kristin	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**

8 11/08/22 09:41 Rizvi,Abid A, MD QUV-BG19 Order Is Signed by Rizvi,Abid A, MD Chow, Kristin NA  
 Medications 1221106-224618051 Completed 11/06/22 22:45 Rizvi,Abid A, MD **Order Source:** Telephone Orders - Read Back

**Stop Reason:** Reached Renew Stop Date

**Medication** **Dose** **Per**  
 Ceftriaxone [Rocephin] 1 GM  
 Dextrose 5% 50 ml Vol Per Bag: 50 ML  
**QS Drug** **QS Volume** **Total Volume**  
 50 ML 50 ML

**Route** **Frequency** **Sched** **PRN Reason** **Days Hours** **Total Vol to Infuse** **Clinical Indication**  
 IVPB Q24H SCH Urinary Tract Infection  
**Rate:** 100 MLs/HR  
**Stop Date/Time:**  
**Discontinued:** 11/13/22 22:44

**Label Comments:** Refrigerate

Date & Time	User	Device	Event	Acknowledged
1 11/06/22 22:46	Chow, Kristin	Desktop	Signature is Necessary	Y
1 11/06/22 22:46	Chow, Kristin	Desktop	Order is Entered	Y
2 11/06/22 22:46		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 11/06/22 22:46		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
4 11/06/22 22:48	Tran, Steven Wade, PharmD	QUV-CH03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
5 11/06/22 22:52	Chow, Kristin	Desktop	Order acknowledged	NA
6 11/08/22 09:41	Rizvi, Abid A, MD	QUV-BG19	Order is Signed by Rizvi, Abid A, MD	NA
7 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
8 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	11/09/22 22:57	Maglunog, Alexander A, MD	QPAUCUK101	Maglunog, Alexander, MD	
				Manage Transfer - Order is continued upon transfer	Y
10	11/09/22 22:57	Apa, Mary Jurem	QPAUCUK101	Process Transfer	NA
11	11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged	NA
12	11/13/22 14:41	Phong, Suzanne, PharmD	QUV-CH03	Special Instructions added: New: FER DR. BAYOU, D/C ABX AFTER TODAY 11/13	NA
				OLD: Status changed:	Y
13	11/13/22 22:44		QUV-CH03	New: Completed	
				OLD: Pha Verified	
14	11/13/22 23:09	Lamparero, Henry	Desktop	Order acknowledged	NA
				Miscellaneous O 221106-224727960 Transmitted 11/06/22 22:46	
				Kamdar, Sana, MD	
				Order Source: Nursing Orders	
				Pharmacy Missing Med Slip	
				Requesting Person	
				CHOWKRI	
				Extension	
				29085	
				Please send the following medication(s) please send rocephin. thanks!	
				Date & Time	
				User	
				Device	
				Event	
				Acknowledged	
1	11/06/22 22:47	Chow, Kristin	Desktop	No Signature is Necessary	Y
1	11/06/22 22:47	Chow, Kristin	Desktop	Order is Entered	Y
1	11/06/22 22:47	Chow, Kristin	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2	11/06/22 22:47		QUV-BG19	Queued to destination:	NA
				New: QPHARMP2 #3489317	
				OLD:	
3	11/06/22 22:47		QUV-BG19	Status changed:	NA
				New: Transmitted	
				OLD: Verified	
4	11/06/22 22:52	Chow, Kristin	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Chemistry 221107-002303981 Completed 11/07/22 05:40 Kamdar, Sana, MD Enverga, Ivy Kristina, PharmD

Basic Metabolic Panel

Routine

Order Source: Protocol Orders (Sig Required)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 00:23	Tagorda, Buenafe P	QUV-CM03	Signature is Necessary	Y
1 11/07/22 00:23	Tagorda, Buenafe P	QUV-CM03	Order is Entered	Y
2 11/07/22 00:44		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
3 11/07/22 01:43	Chow, Kristin	Desktop	Order acknowledged	NA
4 11/07/22 06:04		QUV-CM03	Start Time edited:	NA
			New: 05:40	
			Old: 05:00	
5 11/07/22 06:55		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	
6 11/07/22 12:58	Kamdar, Sana, MD	QUV-BG19	Order is Signed by Kamdar, Sana, MD	NA

Chemistry 221107-002303981 Completed 11/07/22 05:40 Kamdar, Sana, MD Enverga, Ivy Kristina, PharmD

Magnesium

Routine

Order Source: Protocol Orders (Sig Required)

Stop Reason: Completed by Lis

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	6	11/07/22 12:58	Kamdar, Sana, MD	QUV-BG19	Old: In Process
			Completed	11/07/22 02:26	Kamdar, Sana, MD
					Order is Signed by Kamdar, Sana, MD
					Chow, Kristin
					Order Source: Routine
					Old: In Process
					Order Source: Routine

Date & Time	User	Device	Event	Acknowledged
11/07/22 02:35	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
11/07/22 02:35	Chow, Kristin	QUV-CH03	Order is Entered	NA
11/07/22 02:35	Chow, Kristin	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Stop Reason: Completed by Lis

Order Source: Routine

Bedside Testing 221107-055551894 Completed 11/07/22 05:46

Kamdar, Sana, MD Chow, Kristin

Glucose (Bedside)

Routine

Order Source: Routine

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/07/22 05:55	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
11/07/22 05:55	Chow, Kristin	QUV-CH03	Order is Entered	NA
11/07/22 05:56	Chow, Kristin	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Medications 221107-084205690 Completed 11/07/22 10:00

Batou, Augen, DO

Batou, Augen, DO

Apresoline

Order Source: Provider

Stop Reason: Completed by Pha

Medication	Dose	Per
hydrALAZINE [Apresoline]	25 MG	

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
NG-TUBE	BID	SCH				
Stop Date/Time: 11/21/22 12:43						
Discontinued: 11/21/22 12:43						

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By	Acknowledged
Dose Instruction: HOLD if SBR<130						
1	11/07/22 08:42	User Batou, Augen, DO	Device QDUK101	Event Order is Entered and Signed		Y
2	11/07/22 08:42		QUV-BG19	Status changed: New: Transmitted		NA
3	11/07/22 08:42		QUV-CM03	Old: Verified Order Type edited: New: MED		Y
4	11/07/22 08:42		QUV-CM03	Old: Status changed: New: Logged		NA
5	11/07/22 08:58	Dao, Thao, PharmD	QUV-CM03	Old: Transmitted Route edited: New: NG-TUBE		Y
6	11/07/22 08:58	Dao, Thao, PharmD	QUV-CM03	Old: PO Status changed: New: Pha Verified		NA
7	11/07/22 09:48	Donske, Ruth	Desktop	Old: Logged Order acknowledged		NA
8	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Order acknowledged Manage Transfer - Order is set to continue upon transfer		NA
9	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD		NA
10	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer		Y
11	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer		NA
12	11/10/22 03:09	Apa, Mary Jurem	Desktop	Order acknowledged		NA
13	11/21/22 12:44	Yang, David, PharmD	QUV-CM03	Copied to Apresoline 221121-124401737		Y
14	11/21/22 12:44	Yang, David, PharmD	QUV-CM03	Status changed: New: Completed		Y
15	11/21/22 14:19	Vandemark, Joann M	Desktop	Old: Pha Verified Order acknowledged		NA





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221107-100546114	Completed	11/07/22 09:54	Batou, Augen, DO	Donske, Ruth
Glucose (Bedside)				Routine	Order Source:
Stop Reason: Completed by LIS					

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 10:05	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA
1 11/07/22 10:05	Donske, Ruth	QUV-CH03	Order is Entered	NA
2 11/07/22 10:06		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Consultations 221107-132201089 Verified 11/07/22 13:21 Batou, Augen, DO Batou, Augen, DO  
 Consult to Physician Routine Order Source: Provider

Consulting Provider Maglunog, Alexander A, MD  
 Reason for consultation a/w Tracheostomy

Person Notified: DR MAGLUNOG  
 Date Notified: 11/07/22  
 Time Notified: 14:11

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 13:22	Batou, Augen, DO	QNSUK101	Order is Entered and Signed	Y
2 11/07/22 13:50	Donske, Ruth	Desktop	Order acknowledged	NA
3 11/07/22 14:11	Ramos, Jessica	Desktop	Query Date Notified: edited:	Y
			New: 11/07/22	
			Old:	
3 11/07/22 14:11	Ramos, Jessica	Desktop	Query Person Notified: edited:	Y
			New: DR MAGLUNOG	
			Old:	
3 11/07/22 14:11	Ramos, Jessica	Desktop	Query Time Notified: edited:	Y
			New: 14:11	
			Old:	
4 11/07/22 14:19	Ramos, Jessica	Desktop	Order acknowledged	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
6	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Maglunog, Alexander, MD	upon transfer
7	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Maglunog, Alexander, MD	Manage Transfer - Transfer Provider added:
8	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Apa, Mary Jurem	Manage Transfer - Order is continued upon transfer
9	11/10/22 03:10	Apa, Mary Jurem	Desktop	Apa, Mary Jurem	Process Transfer
Consultations	221107-1322010891	Verified	11/07/22 13:21	Batou, Augen, DO	Order acknowledged
Consult to Physician				Batou, Augen, DO	Order Source: Provider

Consulting Provider: Sharma, Ankuash, MD

Reason for consultation: a/w G tube placement

Person Notified: TINA  
 Date Notified: 11/07/22  
 Time Notified: 13:39

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 13:22	Batou, Augen, DO	QNSUK101	Order is Entered and Signed	Y
2 11/07/22 13:39	Ramos, Jessica	Desktop	Query Date Notified: edited: New: 11/07/22 Old:	Y
2 11/07/22 13:39	Ramos, Jessica	Desktop	Query Person Notified: edited: New: TINA Old:	Y
2 11/07/22 13:39	Ramos, Jessica	Desktop	Query Time Notified: edited: New: 13:39 Old:	Y
3 11/07/22 13:50	Donske, Ruth	Desktop	Order acknowledged	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added:	NA
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
7	11/09/22 22:57	Apa, Mary Jurem		QPACUK101	Process Transfer
8	11/10/22 03:10	Apa, Mary Jurem		Desktop	Order acknowledged
CT Scan	221107-135112668	Resulted	11/08/22 08:00	Young, Richard M, MD	Young, Richard M, MD
CT head/brain w/ con					Order Source: Provider

Mode Of Transportation: Hospital Bed  
Reason For Exam: F/u IVH

Mode of Transport: Hospital Bed

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 13:51	Young, Richard M, MD	QNSUK102	Order is Entered and Signed	Y
2 11/07/22 13:51		QUV-BG19	Status changed: New: Transmitted	NA
3 11/07/22 13:51		QUV-CM03	Old: Verified Query Mode Of Transportation edited: New: Hospital Bed	NA
4 11/07/22 13:51		QUV-CM03	Old: Status changed: New: Logged	NA
5 11/07/22 16:49	Donske, Ruth	Desktop	Old: Transmitted Order acknowledged	NA
6 11/08/22 08:25	Oda, Thomas Tsutomu	QUV-CM03	Status changed: New: Taken	NA
7 11/08/22 12:17		QUV-CM03	Old: Logged Status changed: New: Resulted Old: Taken	NA

Bedside Testing 221107-141023141 Completed 11/07/22 14:00 Ratou, Augen, DO Donske, Ruth

Glucose (Bedside) | Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 14:10	Donske, Ruth	QUV-CM03	No Signature Is Necessary	NA
1 11/07/22 14:10	Donske, Ruth	QUV-CM03	Order is Entered	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	2	11/07/22 14:10		QUV-CH03	Status changed: New: Completed Old: In Process
				Batou, Augen, DO	Batou, Augen, DO

Hematology 221107-150530976 Completed 11/13/22 05:30 Batou, Augen, DO Batou, Augen, DO  
**Complete Blood Count/Auto diff** AM **Order Source:** Provider  
**Stop Reason:** Completed by Lis

Specimen	Date & Time	User	Device	Event	Acknowledged	
	1	11/07/22 15:05	Batou, Augen, DO	QNSUKI02	Order is Entered and Signed	Y
	2	11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
	3	11/09/22 12:08	Maglunog, Alexander A, MD	QPAUCUKI01	Manage Transfer - Order is set to continue upon transfer	NA
	4	11/09/22 12:08	Maglunog, Alexander A, MD	QPAUCUKI01	Manage Transfer - Transfer Provider added:	NA
	5	11/09/22 22:57	Maglunog, Alexander A, MD	QPAUCUKI01	Manage Transfer - Order is continued upon transfer	NA
	6	11/09/22 22:57	Apa, Mary Jurem	QPAUCUKI01	Process Transfer	NA
	7	11/13/22 00:04		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
	8	11/13/22 00:11		QUV-CH03	Status changed: New: Logged	NA
	9	11/13/22 00:57		QUV-CH03	Status changed: New: In Process	NA
	10	11/13/22 06:56		QUV-CH03	Start time edited: New: 05:30 Old: 05:00	NA
	11	11/13/22 07:53		QUV-CH03	Status changed: New: Completed Old: In Process	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Hematology	221107-1505309761	Completed	11/14/22 06:23	Batou, Augen, DO	Batou, Augen, DO
<b>Complete Blood Count/Auto diff</b>				AM	<b>Order Source:</b> Provider
<b>Stop Reason:</b> Completed by LIS					

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA
5 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7 11/14/22 00:03		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
8 11/14/22 00:11		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
9 11/14/22 00:51		QUV-CM03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
10 11/14/22 06:24		QUV-CM03	Start Time edited:	NA
			<b>New:</b> 06:23	
			<b>Old:</b> 05:00	
11 11/14/22 07:44		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221107-150530992	Completed	11/08/22 05:56	Batou, Augen, DO	Batou, Augen, DO
<b>Basic Metabolic Panel</b>					
<b>Stop Reason:</b> Completed by LIs					

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/08/22 00:05		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 11/08/22 00:14		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 11/08/22 01:51		QUV-CH03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
6 11/08/22 06:30		QUV-CH03	start Time edited:	NA
			<b>New:</b> 05:56	
			<b>Old:</b> 05:00	
7 11/08/22 07:15		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Chemistry 221107-150531008 Cancelled 11/09/22 05:00 Batou, Augen, DO Batou, Augen, DO  
**Basic Metabolic Panel** | AM **Order Source:** Provider  
**Stop Reason:** Cancelled by LIs

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 00:05		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/09/22 00:14	QUV-CH03		Status changed:	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	11/09/22 00:48	Lemus, Sandra	QUV-CH03	Status changed:	Y
				<b>New:</b> Cancelled	
				<b>Old:</b> Logged	
6	11/09/22 07:19	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
Chemistry	221107-1505310081	Completed	11/10/22 05:30	Batou, Augen, DO	Batou, Augen, DO
<b>Basic Metabolic Panel</b>				AM	<b>Order Source:</b> Provider

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSUK102	Order is Entered and signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
5 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
7 11/10/22 00:04		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
8 11/10/22 00:14		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
9 11/10/22 01:16		QUV-CH03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
10 11/10/22 06:26		QUV-CH03	Start Time edited:	NA
			<b>New:</b> 05:30	
			<b>Old:</b> 05:00	
11 11/10/22 07:08		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221107-150531023	Completed	11/11/22 04:15	Batou, Augen, DO	Batou, Augen, DO
Basic Metabolic Panel				AM	Order Source: Provider
Stop Reason: Completed by Lis					

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
11/07/22 15:05	Batou, Augen, DO	QNSUK102	Order is Entered and Signed	Y
11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	NA
11/09/22 22:57	Apá, Mary Jurem	QPACUK101	Process Transfer	NA
11/11/22 00:05		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
11/11/22 00:14		QUV-CH03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
11/11/22 01:03		QUV-CH03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
11/11/22 04:15	Allen, Lisa	Phone	Specimen Collected: 1111:000310R	NA
11/11/22 04:15	Allen, Lisa	Phone	Order is collected	NA
11/11/22 04:36		QUV-CH03	Start Time edited:	NA
			<b>New:</b> 04:15	
			<b>Old:</b> 04:12	
11/11/22 05:43		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221107-1505310231	Completed	11/12/22 06:00	Batou, Augen, DO	Batou, Augen, DO
Basic Metabolic Panel				AM	Order Source: Provider

Stop Reason: Completed by LIS

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added: Maglumog, Alexander, MD	NA
5 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7 11/12/22 00:04		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
8 11/12/22 00:13		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
9 11/12/22 00:49		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
10 11/12/22 06:25		QUV-CM03	Start Time edited:	NA
			New: 06:00	
			Old: 05:00	
11 11/12/22 07:12		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
                  Reason: Hydrocephalus      Registration: 10/18/22

Category      Order      Status      Start      Ord Provider      Entered By  
 Chemistry      221107-150531039      Completed      11/14/22 06:23      Batou, Augen, DO      Batou, Augen, DO  
 Basic Metabolic Panel                     AM           Order Source: Provider

Stop Reason: Completed by LIS

Specimen      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added: Maglumog, Alexander, MD	NA
5 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7 11/14/22 00:03		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
8 11/14/22 00:10		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
9 11/14/22 00:51		QUV-CM03	Status changed: New: In Process Old: Logged	NA
10 11/14/22 06:24		QUV-CM03	Start Time edited: New: 06:23 Old: 05:00	NA
11 11/14/22 07:12		QUV-CM03	Status changed: New: Completed Old: In Process	NA



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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221107-1505310551	Completed	11/08/22 05:56	Batou, Augen, DO	Batou, Augen, DO
Magnesium				AM	Order Source: Provider

Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/08/22 00:05		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 11/08/22 00:14		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA
5 11/08/22 01:51		QUV-CH03	Status changed: New: In Process Old: Logged	NA
6 11/08/22 06:30		QUV-CH03	start Time edited: New: 05:56 Old: 05:00	NA
7 11/08/22 07:15		QUV-CH03	Status changed: New: Completed Old: In Process	NA

Chemistry 221107-150531071 Completed 11/10/22 05:30 Batou, Augen, DO Batou, Augen, DO  
 Magnesium AM Order Source: Provider  
 Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Maglunog, Alexander, MD	NA
Manage Transfer - Order is continued upon transfer					
6	11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
Status changed:					
7	11/10/22 00:04		QUV-BG19	<b>New:</b> Transmitted	NA
<b>Old:</b> Verified					
8	11/10/22 00:14		QUV-CM03	Status changed:	NA
<b>New:</b> Logged					
<b>Old:</b> Transmitted					
9	11/10/22 01:16		QUV-CM03	Status changed:	NA
<b>New:</b> In Process					
<b>Old:</b> Logged					
10	11/10/22 06:26		QUV-CM03	Start time edited:	NA
<b>New:</b> 05:30					
<b>Old:</b> 05:00					
11	11/10/22 07:08		QUV-CM03	Status changed:	NA
<b>New:</b> Completed					
<b>Old:</b> In Process					

Chemistry 221107-150531086 Completed 11/12/22 06:00 Batou, Augen, DO Batou, Augen, DO **Order Source:** Provider  
 Magnesium AM

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSUK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Transfer Provider added:	NA
5 11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
7 11/12/22 00:04		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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8	11/12/22 00:13	QUV-CH03	QUV-CH03	Batou, Augen, DO	New: Transmitted Old: Verified Status changed: New: Logged Old: Transmitted Status changed: New: In Process Old: Logged Start time edited: New: 06:00 Old: 05:00 Status changed: New: Completed Old: In Process	NA
9	11/12/22 00:49	QUV-CH03	QUV-CH03	Batou, Augen, DO	New: In Process Old: Logged Status changed: New: In Process Old: Logged Start time edited: New: 06:00 Old: 05:00 Status changed: New: Completed Old: In Process	NA
10	11/12/22 06:25	QUV-CH03	QUV-CH03	Batou, Augen, DO	New: In Process Old: Logged Status changed: New: In Process Old: Logged Start time edited: New: 06:00 Old: 05:00 Status changed: New: Completed Old: In Process	NA
11	11/12/22 07:12	QUV-CH03	QUV-CH03	Batou, Augen, DO	New: In Process Old: Logged Status changed: New: In Process Old: Logged Start time edited: New: 06:00 Old: 05:00 Status changed: New: Completed Old: In Process	NA

Chemistry 221107-1505310861 Completed 11/13/22 05:30

Batou, Augen, DO AM

Batou, Augen, DO

Magnesium

Order source: Provider

Stop Reason: Completed by LIS

Specimen	Date & Time	User	Device	Event	Acknowledged
1	11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2	11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3	11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4	11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
5	11/09/22 22:57	Maglunog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6	11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7	11/13/22 00:04		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
8	11/13/22 00:11		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	11/13/22 00:57			QUV-CM03	
				Status changed:	NA
				New: In Process	
				Old: Logged	
10	11/13/22 06:56			QUV-CM03	
				Start time edited:	NA
				New: 05:30	
				Old: 05:00	
11	11/13/22 07:31			QUV-CM03	
				Status changed:	NA
				New: Completed	
				Old: In Process	

Hematology 221107-150530945 Completed 11/08/22 05:56 Batou, Augen, DO Batou, Augen, DO  
 Complete Blood Count/Auto diff AM Order Source: Provider  
 Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSUK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/08/22 00:05		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/08/22 00:14		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 11/08/22 01:51		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
6 11/08/22 06:30		QUV-CM03	Start time edited:	NA
			New: 05:56	
			Old: 05:00	
7 11/08/22 07:14		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	
8 11/08/22 07:15	Cruz, Yannette L	QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Completed	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
9	11/08/22 08:40				

QUV-CH03

Status changed:

New: Completed

Old: In Process

Hematology

221107-1505309451

Completed

11/09/22 09:05

Batou, Augen, DO

Batou, Augen, DO

AM

Order Source: Provider

Complete Blood Count/Auto diff

Stop Reason: Completed by LIS

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSUK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 00:05		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 11/09/22 00:14		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA
5 11/09/22 01:14		QUV-CH03	Status changed: New: In Process Old: Logged	NA
6 11/09/22 06:59	Mijares, Veronica R	Phone	Specimen Collected: 1109:H00203R	NA
7 11/09/22 06:59	Mijares, Veronica R	Phone	Order is collected	NA
8 11/09/22 08:17		QUV-CH03	Status changed: New: 05:00 Old: 06:45	NA
9 11/09/22 09:32		QUV-CH03	Status changed: New: 09:05 Old: 05:00	NA
10 11/09/22 10:14		QUV-CH03	Status changed: New: Completed Old: In Process	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Hematology	221107-150530961	Completed	11/10/22 05:10	Batou, Augen, DO	Batou, Augen, DO
<b>Complete Blood Count/Auto diff</b>				AM	<b>Order Source:</b> Provider
<b>Stop Reason:</b> Completed by LIS					

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA
5 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7 11/10/22 00:04		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
8 11/10/22 00:14		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
9 11/10/22 01:16		QUV-CM03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
10 11/10/22 07:35		QUV-CM03	Start Time edited:	NA
			<b>New:</b> 05:10	
			<b>Old:</b> 05:00	
11 11/10/22 07:35		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Hematology 221107-1505309611 Completed 11/11/22 04:15 Batou, Augen, DO Batou, Augen, DO  
**Complete Blood Count/Auto diff** **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA
5 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7 11/11/22 00:05		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
8 11/11/22 00:14		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
9 11/11/22 01:03		QUV-CM03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
10 11/11/22 04:15	Allen, Lisa	Phone	Specimen Collected: 1111:H00217R	NA
11 11/11/22 04:15	Allen, Lisa	Phone	Order is collected	NA
12 11/11/22 05:28		QUV-CM03	Start Time edited:	NA
			<b>New:</b> 04:15	
			<b>Old:</b> 04:12	
13 11/11/22 05:53		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

**Category** Hematology **Order** 221107-150530976 **Status** Completed **Start** 11/12/22 06:00 **Ord Provider** Batou, Augen, DO **Entered By** Batou, Augen, DO  
**Complete Blood Count/Auto diff** **Order Source:** Provider **Stop Reason:** Completed by LIS

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA
5 11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACURK101	Process Transfer	NA
7 11/12/22 00:04		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
8 11/12/22 00:13		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
9 11/12/22 00:49		QUV-CM03	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
10 11/12/22 06:25		QUV-CM03	Start Time edited:	NA
			<b>New:</b> 06:00	
			<b>Old:</b> 05:00	
11 11/12/22 07:10		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221107-150531039	Completed	11/13/22 05:30	Batou, Augen, DO	Batou, Augen, DO
<b>Basic Metabolic Panel</b>				AM	Order Source: Provider

Stop Reason: Completed by LIS

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is set to continue upon transfer	NA
11/09/22 12:08	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Transfer Provider added:	NA
11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Manage Transfer - Order is continued upon transfer	NA
11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Process Transfer	NA
11/09/22 22:57	Maglumog, Alexander A, MD	QPACURK101	Status changed:	NA
11/13/22 00:04	Apa, Mary Jurem	QUV-BG19	New: Transmitted	NA
11/13/22 00:04	Apa, Mary Jurem	QUV-BG19	Old: Verified	NA
11/13/22 00:11		QUV-CM03	Status changed:	NA
11/13/22 00:11		QUV-CM03	New: Logged	NA
11/13/22 00:11		QUV-CM03	Old: Transmitted	NA
11/13/22 00:57		QUV-CM03	Status changed:	NA
11/13/22 00:57		QUV-CM03	New: In Process	NA
11/13/22 00:57		QUV-CM03	Old: Logged	NA
11/13/22 06:56		QUV-CM03	Status changed:	NA
11/13/22 06:56		QUV-CM03	New: In Process	NA
11/13/22 06:56		QUV-CM03	Old: Start Time edited:	NA
11/13/22 06:56		QUV-CM03	New: Status changed:	NA
11/13/22 06:56		QUV-CM03	Old: Status changed:	NA
11/13/22 07:31		QUV-CM03	New: Completed	NA
11/13/22 07:31		QUV-CM03	Old: In Process	NA



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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221107-150531071	Cancelled	11/09/22 05:00	Batou, Augen, DO	Batou, Augen, DO
Magnesium				AM	Order Source: Provider

Stop Reason: Cancelled by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 00:05		QUV-BG19	Status changed: New: Transmitted	NA
4 11/09/22 00:14		QUV-CH03	OLD: Verified Status changed:	NA
5 11/09/22 00:48	Lemus, Sandra	QUV-CH03	New: Logged OLD: Transmitted Status changed:	Y
6 11/09/22 07:19	DEVERA, JUSTIN	Desktop	New: Cancelled OLD: Logged Order acknowledged	NA

Chemistry 221107-150531071 Completed 11/11/22 04:15 Batou, Augen, DO  
 Magnesium AM  
 Stop Reason: Completed by LIS Order Source: Provider

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSURK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
5 11/09/22 22:57	Maglunog, Alexander A, MD	QPACKUK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACKUK101	Process Transfer	NA
7 11/11/22 00:05		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
                  Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	8		11/11/22 00:14		
	9		11/11/22 01:03		
	10		11/11/22 04:15		
	11		11/11/22 04:15		
	12		11/11/22 04:36		
	13		11/11/22 05:43		

Chemistry      221107-150531102      Completed      11/14/22 06:23      Batou, Augen, DO      Batou, Augen, DO  
 Magnesium            **Order Source:** Provider

**Stop Reason:** Completed by LIS

**Specimen**      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 15:05	Batou, Augen, DO	QNSUK102	Order is Entered and Signed	Y
2 11/07/22 15:37	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
5 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	NA
6 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
7 11/14/22 00:03		QUV-BG19	Status changed: <b>New:</b> Transmitted <b>Old:</b> Verified	NA
8 11/14/22 00:10		QUV-CM03	Status changed:	NA

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Date: 12/07/22 02:56

User: Gallego, Claudio H

**QH0054940416 Lyons, Kathleen A**      **Attending:** Lau, Tsang, MD      **Location:** Q 1 Intensive Care Unit      **Medical Record Number:** MR01483046  
**61/F**      **Reason:** Hydrocephalus      **Account Number:** QH0054940416      **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	9		11/14/22 00:51		
	10		11/14/22 06:24		
	11		11/14/22 07:12		

**Medications** 221107-163844355      **Completed** 11/07/22 18:00      **Amani-Yazdi, Rambod, MD**      **Order Source:** Provider  
**Novolin N**      **Stop Reason:** Order edited - Discontinuing original order

Medication	Dose	Per	Days	Hours	Total Doses	Clinical Indication
Insulin NPH [NOVOLIN N]	30 UNITS					
<b>Route</b>	<b>Frequency</b>	<b>Sched</b>	<b>PRN Reason</b>	<b>Days</b>	<b>Hours</b>	<b>Total Doses</b>
SUB-Q	Q12HR 06 18	SCH				
<b>Stop Date/Time:</b>						
<b>Discontinued:</b> 11/11/22 13:17						
<b>Label Comments:</b> HOLD IF THE TF WITHHELDS.						

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 16:38	Amani-Yazdi, Rambod, MD	QICUK101	Order created because of edit(s)	Y
1 11/07/22 16:38	Amani-Yazdi, Rambod, MD	QICUK101	Copied From NOVOLIN N 221105-102658833	Y
2 11/07/22 16:38	Amani-Yazdi, Rambod, MD	QICUK101	Order is Signed by Amani-Yazdi, Rambod, MD	Y
3 11/07/22 16:38	Amani-Yazdi, Rambod, MD	QICUK101	First Dose:	NA
			<b>New:</b> Keep the current schedule: 11/07/22 18:00	
			<b>Old:</b>	
4 11/07/22 16:38		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
5 11/07/22 16:39		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>New:</b> Logged <b>Old:</b> Transmitted
	6	11/07/22 16:40	Hyun, Diana S, PharmD	QUV-CH03	<b>New:</b> Status changed: <b>Old:</b> Pha Verified
	7	11/07/22 16:49	Donske, Ruth	Desktop	<b>New:</b> Logged <b>Old:</b> Order acknowledged
	8	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	<b>New:</b> Order acknowledged <b>Old:</b> Order is set to continue upon transfer
	9	11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	<b>New:</b> Manage Transfer - Transfer Provider added: <b>Old:</b> Manage Transfer - Order is continued upon transfer
	10	11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	<b>New:</b> Manage Transfer - Transfer Provider added: <b>Old:</b> Manage Transfer - Order is continued upon transfer
	11	11/09/22 22:57	Apa, Mary Jurem	QPACUK101	<b>New:</b> Process Transfer <b>Old:</b> Order acknowledged
	12	11/10/22 03:09	Apa, Mary Jurem	Desktop	<b>New:</b> Order acknowledged <b>Old:</b> stop Request
	13	11/11/22 13:17	Amani-Yazdi, Rambod, MD	QPACUK101	<b>New:</b> Copied to Novolin N 221111-131726679 <b>Old:</b> Status changed:
	14	11/11/22 13:17	Amani-Yazdi, Rambod, MD	QPACUK101	<b>New:</b> Status changed: <b>Old:</b> Status changed:
	15	11/11/22 13:17	Amani-Yazdi, Rambod, MD	QUV-CH03	<b>New:</b> Status changed: <b>Old:</b> Status changed:
	16	11/11/22 13:25	Nguyen, Michael	Desktop	<b>New:</b> Order acknowledged <b>Old:</b> Order acknowledged
<b>Glucose (Bedside)</b>					
Bedside Testing 221107-174038880		Completed	11/07/22 17:30	Batou, Augen, DO	Donske, Ruth
<b>Stop Reason:</b> Completed by LIS					
<b>Order Source:</b> Routine					
Date & Time	User	Device	Event	Acknowledged	
11/07/22 17:40	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA	
11/07/22 17:40	Donske, Ruth	QUV-CH03	Order is Entered	NA	
11/07/22 17:40		QUV-CH03	Status changed:	NA	
			<b>New:</b> Completed		
			<b>Old:</b> In Process		



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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Bedside Testing 221107-224026217 Completed 11/07/22 22:32 Batou, Augen, DO San Juan, Cherry M  
 Glucose (Bedside) Routine Order Source:  
 Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/07/22 22:40	San Juan, Cherry M	QUV-CM03	No Signature is Necessary	NA
1 11/07/22 22:40	San Juan, Cherry M	QUV-CM03	Order is Entered	NA
2 11/07/22 22:40		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Hematology 221108-071517450 Completed 11/08/22 05:56 Batou, Augen, DO Batou, Augen, DO  
 Manual Differential Routine Order Source: Provider  
 Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/08/22 07:15		QUV-CM03	Order is Entered and Signed	NA
2 11/08/22 08:40		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221108-020038759 Completed 11/08/22 01:49 Batou, Augen, DO San Juan, Cherry M  
 Glucose (Bedside) Routine Order Source:  
 Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/08/22 02:00	San Juan, Cherry M	QUV-CM03	No Signature is Necessary	NA
1 11/08/22 02:00	San Juan, Cherry M	QUV-CM03	Order is Entered	NA
2 11/08/22 02:01		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221108-060040740 Completed 11/08/22 05:51

Batou, Augen, DO

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time

User

Device

Event

Acknowledged

1 11/08/22 06:00

San Juan, Cherry M

QUV-CM03

No Signature is Necessary

NA

1 11/08/22 06:00

San Juan, Cherry M

QUV-CM03

Order is Entered

NA

2 11/08/22 06:00

QUV-CM03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221108-102549027 Completed 11/08/22 10:14

Batou, Augen, DO

Malaca, Jessalje

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time

User

Device

Event

Acknowledged

1 11/08/22 10:25

Malaca, Jessalje

QUV-CM03

No Signature is Necessary

NA

1 11/08/22 10:25

Malaca, Jessalje

QUV-CM03

Order is Entered

NA

2 11/08/22 10:26

QUV-CM03

Status changed:

NA

New: Completed

Old: In Process

Routine Care 221108-124808271 Completed 11/08/22 12:47

Maglunog, Alexander A, MD

Maglunog, Alexander A, MD

Pre-operative Checklist

ONCE

Order Source: Provider

Stop Reason: Completed by Pcs

Intervention Text

Date & Time

User

Device

Event

Acknowledged

1 11/08/22 12:48

Maglunog, Alexander A, MD

QICUK102

Order is Entered and Signed

Y

1 11/08/22 12:48

Maglunog, Alexander A, MD

QICUK102

Reflex Order generated from Consent, Obtain For 221108-124808255

Y

2 11/08/22 12:48

QUV-BG19

Status changed:

NA

New: In Process

Old: Verified

3 11/08/22 12:52

DEVERA, JUSTIN

Desktop

Order acknowledged

NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By
4	11/09/22 07:32	DEVERA, JUSTIN		Desktop		

Status changed:  
 New: Completed  
 Old: In Process

Surgical/Procedure Description	Completed	11/08/22 12:47	Maglunog, Alexander A, MD
Stop Reason: Discharged			.NOW

Maglunog, Alexander A, MD  
 Order Source: Provider

Date & Time	User	Device	Event	Acknowledged
1 11/08/22 12:48	Maglunog, Alexander A, MD	QICUK102	Order Is Entered and Signed	Y
1 11/08/22 12:48	Maglunog, Alexander A, MD	QICUK102	Reflex Order generated from Consent, Obtain For 221108-124808255	
2 11/08/22 12:48		QUV-BG19	Status changed: New: In Process Old: Verified	NA
3 11/08/22 12:52	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
4 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is set to continue upon transfer	NA
5 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD	NA
6 11/09/22 22:57	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order is continued upon transfer	Y
7 11/09/22 22:57	Apa, Mary Jurem	QPACUK101	Process Transfer	NA
8 11/10/22 03:11	Apa, Mary Jurem	Desktop	Order acknowledged	NA
9 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed: New: Completed Old: In Process	NA

Routine Care	221108-124808255	Completed	11/08/22 12:47	Maglunog, Alexander A, MD	Maglunog, Alexander A, MD
Consent, Obtain For				.NOW	Order Source: Provider

Stop Reason: Discharged

Surgical/Procedure Description: Tracheostomy

Obtain Consent for Surgical Consent  
 Intervention Text

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By	Acknowledged
1	11/08/22 12:48			QICURK102			Y
1	11/08/22 12:48			QICURK102			Y
1	11/08/22 12:48			QICURK102			Y
2	11/08/22 12:48			QUV-BG19			NA
3	11/08/22 12:52			Desktop			NA
4	11/09/22 12:08			QPACURK101			NA
5	11/09/22 12:08			QPACURK101			NA
6	11/09/22 22:57			QPACURK101			Y
7	11/09/22 22:57			QPACURK101			NA
8	11/10/22 03:10			Desktop			NA
9	12/02/22 10:08			Desktop			NA
<b>Dietary</b> 221108-124808271 Completed 11/09/22 00:01 Maglunog, Alexander A, MD							
<b>NPO</b> Completed 11/09/22 00:01 Maglunog, Alexander A, MD							
<b>Stop Reason:</b> stop date/time met							
<b>Order Source:</b> Provider							
<b>NPO Exceptions</b> Except meds							
1	11/08/22 12:48			QICURK102			Y
2	11/08/22 12:48			QUV-BG19			NA
3	11/08/22 12:48			QUV-BG19			NA
4	11/08/22 12:48			QUV-BG19			NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>New:</b> Transmitted <b>Old:</b> Verified
	5		11/08/22 12:52	DEVERA, JUSTIN	Desktop <b>New:</b> Transmitted <b>Old:</b> Verified
	6		11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101 Manage Transfer - Order is set to stop upon transfer <b>New:</b> Transmitted <b>Old:</b> Verified
	7		11/09/22 12:08	Maglunog, Alexander A, MD	QPACURK101 Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD <b>New:</b> Transmitted <b>Old:</b> Verified
	8		11/09/22 12:27	Sharma, Ankush, MD	QGILABR101 Diet Stop Dt/Time added: <b>New:</b> 11/09/22 16:59 <b>Old:</b> Verified
	9		11/09/22 12:27	Sharma, Ankush, MD	QGILABR101 Queued to destination: <b>New:</b> QDIETPI <b>Old:</b> Verified
	10		11/09/22 13:12	DEVERA, JUSTIN	Desktop Order acknowledged <b>New:</b> Transmitted <b>Old:</b> Verified
	11		11/09/22 16:59		QUV-BG19 New Order Created. Order is Completed via Auto Complete. <b>New:</b> Transmitted <b>Old:</b> Verified
	12		11/09/22 16:59		QUV-BG19 Status changed: <b>New:</b> Completed <b>Old:</b> Transmitted
	13		11/09/22 17:27	DEVERA, JUSTIN	Desktop Order acknowledged <b>New:</b> Transmitted <b>Old:</b> Verified
<b>Chemistry</b> 221108-143149889 Completed 11/09/22 09:05 <b>Order Source:</b> Protocol Orders (Sig Required) <b>AM</b>					
<b>Stop Reason:</b> Completed by LIS					
<b>Specimen</b> Has been collected					
		<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>
	1	11/08/22 14:31	Dao, Thao, PharmD	Desktop	Signature is Necessary <b>Acknowledged</b> Y
	1	11/08/22 14:31	Dao, Thao, PharmD	Desktop	Order is Entered <b>Acknowledged</b> Y
	2	11/08/22 14:39	DEVERA, JUSTIN	Desktop	Order acknowledged <b>Acknowledged</b> NA
	3	11/09/22 00:03		QUV-BG19	Status changed: <b>New:</b> Transmitted <b>Old:</b> Verified
	4	11/09/22 00:09		QUV-CH03	Status changed: <b>New:</b> Logged <b>Old:</b> Transmitted

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/09/22 01:13			QUV-CH03	NA
				Status changed:	
				New: In Process	
				OLD: Logged	
6	11/09/22 06:59	Mijares, Veronica R	Phone	Specimen Collected: 1109:C00196R	NA
7	11/09/22 06:59	Mijares, Veronica R	Phone	Order is collected	NA
8	11/09/22 08:17		QUV-CH03	Start Time edited:	NA
				New: 05:00	
				OLD: 06:45	
9	11/09/22 09:32			Start Time edited:	NA
				New: 09:05	
				OLD: 05:00	
10	11/09/22 10:58	Kamdar, Sana, MD	QUV-BG19	Order is signed by Kamdar, Sana, MD	NA
11	11/09/22 12:43		QUV-CH03	Status changed:	NA
				New: Completed	
				OLD: In Process	
Chemistry	221108-1431498891	Completed	11/09/22 15:00	Kamdar, Sana, MD	Daoy, Thao, PharmD
<b>Vancocycin Trough</b>				Timed	<b>Order Source:</b> Protocol Orders (Sig Required)
<b>Stop Reason:</b> Completed by Lis					
<b>Comment</b>	Draw 30 minutes before dose, check with RN				
<b>Specimen</b>	Has been collected				
<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>	
1	11/08/22 14:31	Daoy, Thao, PharmD	Desktop	Signature is Necessary	Y
1	11/08/22 14:31	Daoy, Thao, PharmD	Desktop	Order is Entered	Y
2	11/08/22 14:39	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
3	11/09/22 00:03		QUV-BG19	Status changed:	NA
				New: Transmitted	
				OLD: Verified	
4	11/09/22 00:09		QUV-CH03	Priority edited:	NA
				New: Routine	
				OLD: Timed	
5	11/09/22 00:09		QUV-CH03	Status changed:	NA
				New: Logged	
				OLD: Transmitted	
6	11/09/22 00:18		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					<b>New:</b> In Process <b>Old:</b> Logged
7	11/09/22 10:58	Kamdar, Sana, MD		QUV-BG19	Order is signed by Kamdar, Sana, MD
8	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUKI01	Manage Transfer - Order is set to continue upon transfer
9	11/09/22 12:08	Maglunog, Alexander A, MD		QPACUKI01	Manage Transfer - Transfer Provider added: Maglunog, Alexander, MD
10	11/09/22 14:29	Cox, Cori		Phone	Specimen Collected: 1109:C00197R
11	11/09/22 14:29	Cox, Cori		Phone	Order is collected
12	11/09/22 14:30	Cox, Cori		Phone	Specimen Collected: 1109:C00197R
13	11/09/22 14:30	Cox, Cori		Phone	Order is collected
14	11/09/22 14:56	Cox, Cori		Phone	Specimen Collected: 1109:C00197R
15	11/09/22 14:56	Cox, Cori		Phone	Order is collected
16	11/09/22 14:56	Cox, Cori		QUV-CM03	Start time edited: <b>New:</b> 14:30 <b>Old:</b> 14:32
17	11/09/22 15:00	Hartman, Mattea		Phone	Specimen Collected: 1109:C00197R
18	11/09/22 15:00	Hartman, Mattea		Phone	Order is collected
19	11/09/22 16:23			QUV-CM03	status changed: <b>New:</b> Completed <b>Old:</b> In Process
<b>Bedside Testing 221108-144041423</b> Completed 11/08/22 14:29 <b>Order Source:</b> DEVERA, JUSTIN Batou, Augen, DO Routine					
<b>Glucose (Bedside)</b>					
<b>Stop Reason:</b> Completed by LIs					
Date & Time	User	Device	Event	AcknowLdged	
1 11/08/22 14:40	DEVERA, JUSTIN	QUV-CM03	No Signature is Necessary	NA	
1 11/08/22 14:40	DEVERA, JUSTIN	QUV-CM03	Order is Entered	NA	
2 11/08/22 14:41		QUV-CM03	Status changed:	NA	
			<b>New:</b> Completed		
			<b>Old:</b> In Process		



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221108-183038471	Completed	11/08/22 17:33	Batou, Augen, DO	DEVERA, JUSTIN
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					
Order Source: DEVERA, JUSTIN					

Date & Time	User	Device	Event	Acknowledged
1 11/08/22 18:30	DEVERA, JUSTIN	QUV-CH03	No Signature is Necessary	NA
1 11/08/22 18:30	DEVERA, JUSTIN	QUV-CH03	Order is Entered	NA
2 11/08/22 18:30		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Date & Time	User	Device	Event	Acknowledged
1 11/08/22 21:55	San Juan, Cherry M	QUV-CH03	No Signature is Necessary	NA
1 11/08/22 21:55	San Juan, Cherry M	QUV-CH03	Order is Entered	NA
2 11/08/22 21:55		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Chemistry 221109-004832648 Completed 11/09/22 09:05 Kamdar, Sana, MD Dao, Thao, PharmD  
 Basic Metabolic Panel Order Source: Protocol Orders (Sig Required)  
 Stop Reason: Completed by Lis Routine

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 00:48	Lemus, Sandra	QUV-CH03	Signature is Necessary	Y
1 11/09/22 00:48	Lemus, Sandra	QUV-CH03	Order is Entered	Y
2 11/09/22 01:13		QUV-CH03	Status changed:	NA
			New: In Process	
			Old: Logged	
3 11/09/22 06:59	Mijares, Veronica R	Phone	Specimen Collected: 11091C00196R	NA
4 11/09/22 06:59	Mijares, Veronica R	Phone	Order is collected	NA
5 11/09/22 07:19	DEVERA, JUSTIN	Desktop	Order acknowledged	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A  
61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
6	11/09/22 08:17		QUV-CM03	Start Time edited: New: 05:00 Old: 06:45	NA
7	11/09/22 09:32		QUV-CM03	Start Time edited: New: 09:05 Old: 05:00	NA
8	11/09/22 10:58		QUV-BG19	Order Is Signed by Kamdar, Sana, MD	NA
9	11/09/22 12:43		QUV-CM03	Status changed: New: Completed Old: In Process	NA

Chemistry 221109-004832648 Completed 11/09/22 09:05

Kamdar, Sana, MD

Dao, Thao, PharmD

Order Source: Protocol Orders (Sig Required)

Stop Reason: Completed by Lis

	Date & Time	User	Device	Event	Acknowledged
1	11/09/22 00:48	Lemus, Sandra	QUV-CM03	Signature is Necessary	Y
1	11/09/22 00:48	Lemus, Sandra	QUV-CM03	Order Is Entered	Y
2	11/09/22 01:13		QUV-CM03	Status changed: New: In Process Old: Logged	NA
3	11/09/22 06:59	Mijares, Veronica R	Phone	Specimen Collected: 1109+C00196R	NA
4	11/09/22 06:59	Mijares, Veronica R	Phone	Order Is Collected	NA
5	11/09/22 07:19	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
6	11/09/22 08:17		QUV-CM03	Start Time edited: New: 05:00 Old: 06:45	NA
7	11/09/22 09:32		QUV-CM03	Start Time edited: New: 09:05 Old: 05:00	NA
8	11/09/22 10:58	Kamdar, Sana, MD	QUV-BG19	Order Is Signed by Kamdar, Sana, MD	NA
9	11/09/22 12:43		QUV-CM03	Status changed: New: Completed Old: In Process	NA





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221109-021541498 Completed 11/09/22 02:07

Batou, Augen, DO

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/09/22 02:15

San Juan, Cherry M

QUV-CH03

No Signature is Necessary

NA

1 11/09/22 02:15

San Juan, Cherry M

QUV-CH03

Order is Entered

NA

2 11/09/22 02:16

San Juan, Cherry M

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221109-061041334 Completed 11/09/22 06:03

Batou, Augen, DO

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/09/22 06:10

San Juan, Cherry M

QUV-CH03

No Signature is Necessary

NA

1 11/09/22 06:10

San Juan, Cherry M

QUV-CH03

Order is Entered

NA

2 11/09/22 06:11

San Juan, Cherry M

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221109-102524736 Completed 11/09/22 10:15

Batou, Augen, DO

DEVERA, JUSTIN

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/09/22 10:25

DEVERA, JUSTIN

QUV-CH03

No Signature is Necessary

NA

1 11/09/22 10:25

DEVERA, JUSTIN

QUV-CH03

Order is Entered

NA

2 11/09/22 10:25

San Juan, Cherry M

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** Order **Status** **Start** **Entered By**  
 Transfer 221109-120846665 Completed 11/09/22 12:06 Maglunog, Alexander A, MD  
**Transfer Order** Routine **Order Source:** Provider

**Stop Reason:**

**Patient Destination** ICU CC

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Order is Entered and Signed	Y
2 11/09/22 12:08		QUV-BG19	Queued to destination: New: Q11339 #3496828	NA
3 11/09/22 12:08		QUV-BG19	Old: Status changed:	NA
4 11/09/22 12:13	DEVERA, JUSTIN	Desktop	New: Transmitted	
5 11/09/22 22:57	Apa, Mary Jurem	Desktop	Old: Verified	
6 11/09/22 22:57	Apa, Mary Jurem	Desktop	Order acknowledged	NA
			Process Transfer - Order is Completed	NA
			Status changed:	NA
			New: Completed	
7 11/09/22 22:57	Apa, Mary Jurem	Desktop	Old: Transmitted	NA
			Process Transfer	
X-Ray 221109-120845821	Resulted	11/09/22 12:08	Maglunog, Alexander A, MD	NA
CKR1VP [XR chest IV portable]			Stat	
			Order Source: Provider	

**Mode Of Transportation** Portable

**Reason for Exam**

Other (Please comment)

**Mode of Transport**

Portable

**Additional Notes/Special Instructions** s/p Tracheostomy

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Order entered	Y
2 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Manage Transfer - Provider signed:	NA
			Maglunog, Alexander A, MD	
3 11/09/22 12:08	Maglunog, Alexander A, MD	QPACUK101	Order is Signed by Maglunog, Alexander A, MD	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/09/22 12:08	Maglunog, Alexander A, MD	11/09/22 22:55	Maglunog, Alexander A, MD	Maglunog, Alexander A, MD
5	11/09/22 12:08	QUPACUK101	QUPACUK101	ONCE	Order Is Processed "Now"
		QUV-BG19	QUV-BG19		Status changed:
					New: Transmitted
					Old: Verified
6	11/09/22 12:08	QUV-CM03	QUV-CM03		Query Mode Of Transportation edited:
					New: Portable
					Old:
7	11/09/22 12:08	QUV-CM03	QUV-CM03		Status changed:
					New: Logged
					Old: Transmitted
8	11/09/22 12:13	DEVERA, JUSTIN	DESKTOP		Order acknowledged
9	11/09/22 12:33	Dominguez, Victoria	QUV-CM03		Status changed:
					New: Taken
					Old: Logged
10	11/09/22 12:55	QUV-CM03	QUV-CM03		Status changed:
					New: Resulted
					Old: Taken

Other Nursing Interventions      Stop Reason: Discharged      Intervention Text: Resume tube feeds previously ordered

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:08	Maglunog, Alexander A, MD	QUPACUK101	Manage Transfer - Order entered	Y
2 11/09/22 12:08	Maglunog, Alexander A, MD	QUPACUK101	Manage Transfer - Provider signed	NA
3 11/09/22 22:57		QUPACUK101	Maglunog, Alexander A, MD Start Time edited:	Y
			New: 22:55	
			Old: 12:07	
4 11/09/22 22:57	Maglunog, Alexander A, MD	QUPACUK101	Order Is Signed by Maglunog, Alexander A, MD	Y
5 11/09/22 22:57	Apa, Mary Jurem	QUPACUK101	Process Transfer	NA
6 11/09/22 22:58		QUV-BG19	Status changed:	NA
			New: In Process	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
7	12/02/22 10:08	Ramos, Jessica	Desktop	Status changed: New: Completed Old: In Process	NA

Medications 221109-122742324 Completed 11/10/22 10:00 Sharma, Ankush, MD  
 cefazolin Order Source: Provider

Stop Reason: Reached Stop Date  
 Medication Cefazolin [Ancef] Dose 1 GM Per  
 Ns 50 ML Mini-Bag [0.9% Vol Per Bag: 50 ML  
 Sodium Chloride 50 ML  
 Mini-Bag] QS Drug QS Volume Total Volume 50 ML

Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Clinical Indication
IVPB	PRBOP	ONE				Surgical Prophylaxis
Rate: 100 ML/HR						
Stop Date/Time: 11/10/22 10:29						
Discontinued: 11/10/22 10:29						

Label Comments: Give 30 minutes prior to procedure.

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:27	Sharma, Ankush, MD	QGILABK101	Order is Entered and Signed	Y
2 11/09/22 12:27		QUV-BG19	Status changed: New: Transmitted	NA
3 11/09/22 12:28		QUV-CM03	Old: Verified Status changed: New: Logged	NA
4 11/09/22 12:31	Huyynh, Hanh H, PharmD	QUV-CM03	Old: Transmitted Status changed: New: Pha Verified	NA
5 11/09/22 13:12	DEVERA, JUSTIN	Desktop	Old: Logged Order acknowledged	NA
6 11/09/22 22:57	Apa, Mary Jurem	Desktop	Manage Transfer - No transfer decision	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					recorded
	7		11/09/22 22:57	Apa, Mary Jurem	Process Transfer
	8		11/10/22 03:08	Apa, Mary Jurem	Order acknowledged
	9		11/10/22 10:29		Status changed:
					New: Completed
					Old: Pha Verified
	10		11/10/22 10:56	Nguyen, Michael	Order acknowledged

Routine Care 221109-122742293 Completed 11/09/22 12:27 Sharma, Ankush, MD  
 Pre-operative Checklist ONCE Order Source: Provider

Stop Reason: Discharged

Intervention Text

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:27	Sharma, Ankush, MD	QGILABK101	Order Is Entered and signed	Y
1 11/09/22 12:27	Sharma, Ankush, MD	QGILABK101	Reflex Order generated from Consent, Obtain For 221109-122742293	Y
2 11/09/22 12:27		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 11/09/22 13:12	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
4 11/09/22 22:57	Apa, Mary Jurem	Desktop	Manage Transfer - No transfer decision recorded	Y
5 11/09/22 22:57	Apa, Mary Jurem	Desktop	Process Transfer	NA
6 11/10/22 03:11	Apa, Mary Jurem	Desktop	Order acknowledged	NA
7 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
			New: Completed	
			Old: In Process	

Routine Care 221109-1227422931 Completed 11/09/22 12:27 Sharma, Ankush, MD  
 Surgical/Procedure Description .NOW Order Source: Provider  
 Stop Reason: Discharged

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:27	Sharma, Ankush, MD	QGILABK101	Order Is Entered and Signed	Y
1 11/09/22 12:27	Sharma, Ankush, MD	QGILABK101	Reflex Order generated from Consent, Obtain	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	2		11/09/22 12:27		
				QUV-BG19	For 221109-122742293
					Status changed:
					<b>New:</b> In Process
					<b>Old:</b> Verified
	3		11/09/22 13:12		
				DEVERA, JUSTIN	Order acknowledged
				Apa, Mary Jurem	Manage Transfer - No transfer decision recorded
					<b>Old:</b> Verified
	4		11/09/22 22:57		
				Apa, Mary Jurem	Process Transfer
				Apa, Mary Jurem	Order acknowledged
				Ramos, Jessica	Status changed:
					<b>New:</b> Completed
					<b>Old:</b> In Process
Dietary	221109-122742309	Cancelled	11/09/22 17:00	Sharma, Ankush, MD	Sharma, Ankush, MD
					<b>Order Source:</b> Provider
					<b>Clear Liquid Diet</b>
					<b>Stop Reason:</b> Stop Old Orders
	1		11/09/22 12:27		
				Sharma, Ankush, MD	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>
	2		11/09/22 12:27		
				QUV-BG19	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>
	3		11/09/22 12:27		
				QUV-BG19	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>
	4		11/09/22 12:27		
				QUV-BG19	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>
	5		11/09/22 15:00		
				DEVERA, JUSTIN	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>
	6		11/09/22 15:00		
				DEVERA, JUSTIN	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>
	7		11/09/22 15:00		
				DEVERA, JUSTIN	Event
					Order is Entered and Signed
					Queued to destination:
					<b>New:</b> QDIETP1 #3496882
					<b>Old:</b>
					Sent to Other Vendor:
					<b>New:</b> OM Diet Orders to Computation
					<b>Old:</b>
					Status changed:
					<b>New:</b> Transmitted
					<b>Old:</b> Verified
					New Order Created. Order is Cancelled via Auto Complete.
					Status changed:
					<b>New:</b> Cancelled
					<b>Old:</b> Transmitted
					Queued to destination:
					<b>New:</b> QDIETP1 #3497476
					<b>Old:</b>

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By
	8	11/09/22 15:19	Batou, Augen, DO	QUV-BG19	Sharma, Ankush, MD	Order is Signed by Batou, Augen, DO
	9	11/09/22 16:51	DEVERA, JUSTIN	Desktop	Sharma, Ankush, MD	Order acknowledged
Dietary	221109-1227423091	Completed	11/10/22 00:01		Sharma, Ankush, MD	Order Source: Provider

NPO

Stop Reason:

NPO Exceptions Except meds

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 12:27	Sharma, Ankush, MD	QGILABK101	Order is Entered and Signed	Y
2 11/09/22 12:27		QUV-BG19	Queued to destination: New: QDITFP1 #3496883 Old:	NA
3 11/09/22 12:27		QUV-BG19	sent to Other Vendor: New: OM Diet Orders to Computation Old:	NA
4 11/09/22 12:27		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
5 11/09/22 13:12	DEVERA, JUSTIN	Desktop	Order acknowledged	NA
6 11/09/22 22:57	Apa, Mary Jurem	Desktop	Manage Transfer - No transfer decision recorded	Y
7 11/09/22 22:57	Apa, Mary Jurem	Desktop	Process Transfer	NA
8 11/10/22 03:10	Apa, Mary Jurem	Desktop	Order acknowledged	NA
9 11/10/22 19:25	Nguyen, Michael	Desktop	New Order Created. Order is Completed via Auto Complete.	NA
10 11/10/22 19:25	Nguyen, Michael	Desktop	Status changed: New: Completed Old: Transmitted	NA

Gastroenterolog 221109-122742324	Transmitted	11/09/22 12:27	Sharma, Ankush, MD	Sharma, Ankush, MD
GI Procedures			Routine	Order Source: Provider

GI Procedures EGG

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By	Acknowledged
1	11/09/22 12:27	User		QGITLABK101			Y
		Sharma, Ankush, MD					
2	11/09/22 12:27			QUV-BG19			NA
					New: QGITLABC1 #3496884		
					Old:		
3	11/09/22 12:27			QUV-BG19			NA
					Queued to destination:		
					New: QNURC1 #3496885		
					Old:		
4	11/09/22 12:27			QUV-BG19			NA
					Status changed:		
					New: Transmitted		
					Old: Verified		
5	11/09/22 13:12	DEVERA, JUSTIN		Desktop			NA
					Order acknowledged		
6	11/09/22 22:57	Apa, Mary Jurem		Desktop			Y
					Manage Transfer - No transfer decision recorded		
7	11/09/22 22:57	Apa, Mary Jurem		Desktop			NA
					Process Transfer		
8	11/10/22 03:10	Apa, Mary Jurem		Desktop			NA
					Order acknowledged		
Dietary	221109-150024918	Completed	11/09/22 17:00		Batou, Augen, DO		NA
					DEVERA, JUSTIN		
<b>Tube Feeding</b>							
Stop Reason: Stop date/time met							
<b>Formula</b> Glucerna 1.2							
Continuous Start Rate (mL/hour) 45							
Continuous Goal Rate (mL/hour) 45							
<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>			
1 11/09/22 15:00	DEVERA, JUSTIN	Desktop	Signature is Necessary	Y			
1 11/09/22 15:00	DEVERA, JUSTIN	Desktop	Order is Entered	Y			
2 11/09/22 15:00		QUV-BG19	Queued to destination:	NA			
			New: QDIFTP1 #3497482				
			Old:				

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Order Source: Verbal Orders- Read Back



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	11/09/22 15:00			QUV-BG19	NA
				Sent to Other Vendor:	
				New: OM Diet Orders to Computation	
				OLD:	
				Status changed:	
				New: Transmitted	
				OLD: Verified	
				Order is Signed by Batou,Augen, DO	
				Order acknowledged	
				Manage Transfer - No transfer decision recorded	
				Process Transfer	
				New Order Created. Order is Completed via Auto Complete.	
				Status changed:	
				New: Completed	
				OLD: Transmitted	
				Order acknowledged	
				DEVERA, JUSTIN	
				Order Source:	
				Completed	
				11/09/22 15:10	
				Batou, Augen, DO	
				Routine	
				Stop Reason: Completed by LIS	
				11/10/22 03:11	
				Apa, Mary Jurem	
				Desktop	
				NA	
				11/10/22 00:00	
				QUV-BG19	
				NA	
				11/09/22 22:57	
				Apa, Mary Jurem	
				Desktop	
				NA	
				11/09/22 16:51	
				DEVERA, JUSTIN	
				Desktop	
				NA	
				11/09/22 15:19	
				Batou, Augen, DO	
				QUV-BG19	
				NA	
				11/10/22 00:00	
				QUV-BG19	
				NA	
				11/09/22 15:20	
				DEVERA, JUSTIN	
				QUV-CM03	
				NA	
				11/09/22 15:20	
				QUV-CM03	
				NA	
				221109-152020797	
				Completed	
				11/10/22 08:00	
				Stannislau, Sharon, PA-C	
				Routine	
				Order Source: Provider	
				221109-160334588	
				Resulted	
				11/10/22 08:00	
				Stannislau, Sharon, PA-C	
				Routine	
				Order Source: Provider	

CT Scan 221109-160334588 Resulted 11/10/22 08:00 Stannislau, Sharon, PA-C  
 CT head/brain w/ con Routine  
 Mode Of Transportation Portable  
 Reason For Exam Hydrocephalus  
 Mode of Transport Portable  
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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	6		11/09/22 22:57	Apa, Mary Jurem	recorded
	7		11/10/22 03:10	Apa, Mary Jurem	Process Transfer
	8		12/02/22 10:08	Ramos, Jessica	Order acknowledged
					Status changed:
					New: Completed
					Old: In Process

Bedside Testing 221109-181059564 Completed 11/09/22 17:59 Batou, Augen, DO DEVERA, JUSTIN

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 18:10	DEVERA, JUSTIN	QUV-CH03	No Signature is Necessary	NA
1 11/09/22 18:10	DEVERA, JUSTIN	QUV-CH03	Order is Entered	NA
2 11/09/22 18:11		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221109-221045966 Completed 11/09/22 22:01 Batou, Augen, DO Mills, Phyllis C

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 22:10	Mills, Phyllis C	QUV-CH03	No Signature is Necessary	NA
1 11/09/22 22:10	Mills, Phyllis C	QUV-CH03	Order is Entered	NA
2 11/09/22 22:10		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Medications 221109-224957250 Once 11/09/22 12:24 Ye, Donald Joannino, Harlene

Zemuron

Order Source:

Medication Recuronium Bromide [Zemuron] Dose 50 MG Par

Route .ROUTE Frequency .STK-MED Sched PRN Reason Days Hours Total Doses Clinical Indication

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Stop Date/Time: 11/09/22 12:25  
Discontinued: 11/09/22 12:25

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 22:49	Joanino, Harlene	QUV-CH03	No Signature is Necessary	NA
1 11/09/22 22:49	Joanino, Harlene	QUV-CH03	Order is Entered in Pharmacy	NA
2 11/09/22 22:49	Joanino, Harlene	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: Pha Verified	

Medications 221109-224958000 Once 11/09/22 12:24 Yes, Donald Joanino, Harlene

Lactated Ringer's Order Source:

Medication Lactated Ringer's Dose 1,000 ML Per

Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication

IV .5PK-MED ONE

Stop Date/Time: 11/09/22 12:25

Discontinued: 11/09/22 12:25

Date & Time	User	Device	Event	Acknowledged
1 11/09/22 22:49	Joanino, Harlene	QUV-CH03	No Signature is Necessary	NA
1 11/09/22 22:49	Joanino, Harlene	QUV-CH03	Order is Entered in Pharmacy	NA
2 11/09/22 22:49	Joanino, Harlene	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: Pha Verified	

Bedside Testing 221110-015042306 Completed 11/10/22 01:42 Batou, Augen, DO Mills, Phyllis C

Glucose (Bedside) Routine

Stop Reason: Completed by Lis Order Source:

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 01:50	Mills, Phyllis C	QUV-CH03	No Signature is Necessary	NA
1 11/10/22 01:50	Mills, Phyllis C	QUV-CH03	Order is Entered	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	11/10/22 01:51			QUV-CH03	NA
Bedside Testing 221110-060543662 Completed 11/10/22 05:58 Batou, Augen, DO Mills, Phyllis C Glucose (Bedside) Routine Stop Reason: Completed by Lis Order Source:					
				QUV-CH03	NA
				QUV-CH03	NA
				QUV-CH03	NA
Miscellaneous O 221110-092614827 Transmitted 11/10/22 09:25 Batou, Augen, DO Nguyen, Michael Pharmacy Missing Med Slip NOW Order Source: ZPha/Verified					
Requesting Person NGUMICH Extension 29084 Please send the following medication(s) ANCEF					
Date & Time	User	Device	Event	Acknowledged	
1 11/10/22 09:26	Nguyen, Michael	Desktop	No Signature is Necessary	Y	
1 11/10/22 09:26	Nguyen, Michael	Desktop	Order is Entered	Y	
1 11/10/22 09:26	Nguyen, Michael	Desktop	Reflex Set: Pharmacy Missing Med generated	Y	
2 11/10/22 09:26		QUV-BG19	Queued to destination: New: QPHARMP2 #349313 Old:	NA	
3 11/10/22 09:26		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA	
4 11/10/22 09:51	Nguyen, Michael	Desktop	Order acknowledged	NA	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221110-094541990	Completed	11/10/22 09:34	Batou, Augen, DO	INFCE, INFCE
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by Lhs

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 09:45	INFCE, INFCE	QUV-CH03	No Signature is Necessary	NA
1 11/10/22 09:45	INFCE, INFCE	QUV-CH03	Order is Entered	NA
2 11/10/22 09:46		QUV-CH03	Status changed:	NA

New: Completed  
Old: In Process

Medications 221110-140134446 Completed 11/10/22 15:00

Young, Richard M, MD

Nguyen, Michael

Order Source: Verbal Orders- Read Back

Stop Reason: Completed by Pha

Medication	Dose	Per
Sodium Chloride	1 GM	

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
NG-TUBE	TTD	SCH					
Stop Date/Time:							
Discontinued: 11/21/22 12:44							

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 14:01	Nguyen, Michael	Desktop	Signature is Necessary	Y
1 11/10/22 14:01	Nguyen, Michael	Desktop	Order is Entered	Y
2 11/10/22 14:01		QUV-BG19	Status changed:	NA
New: Transmitted				
Old: Verified				
3 11/10/22 14:01		QUV-CH03	Order Type edited:	Y
New: MED				
Old:				
4 11/10/22 14:01		QUV-CH03	Status changed:	NA
New: Logged				
Old: Transmitted				

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	11/10/22 14:02	Yang, David, PharmD	QUV-CM03	Route edited: New: NG-TUBE Old: PO	Y
6	11/10/22 14:02	Yang, David, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
7	11/10/22 14:11	Nguyen, Michael	Desktop	Order acknowledged	NA
8	11/10/22 14:25	Young, Richard M, MD	QUV-BG19	Order is Signed by Young, Richard M, MD	NA
9	11/10/22 14:55	Nguyen, Michael	Desktop	Order acknowledged	NA
10	11/21/22 12:44	Yang, David, PharmD	QUV-CM03	Copied to Sodium Chloride 221121-124425863	Y
11	11/21/22 12:44	Yang, David, PharmD	QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
12	11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA

Medications 221110-143013488 Completed 11/10/22 14:30 Ahuja, Jaspreet, MD Nguyen, Michael **Order source:** Verbal Orders- Read Back

**0.9 % Sodium Chloride**  
 Stop Reason: Order edited - Discontinuing original order

**Medication** 0.9% Sodium Chloride [Sodium Chloride 0.9%] **Dose** Vol Per Bag: 1,000 ML **Par**  
**QS Drug** **QS Volume** 1000 ML **Total Volume** 1000 ML

Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Clinical Indication
IV	.Q13H20M	SCH				
<b>Rate:</b> 75 MLs/HR						
<b>Stop Date/Time:</b>						
Discontinued: 11/10/22 15:08						

Date & Time	User	Device	Event	Acknowledged
11/10/22 14:30	Nguyen, Michael	Desktop	Signature is Necessary	Y
11/10/22 14:30	Nguyen, Michael	Desktop	Order is Entered	Y
11/10/22 14:30		QUV-BG19	Status changed:	NA
			New: Transmitted	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					Old: Verified Status changed: New: Logged Old: Transmitted Status changed: New: Pha Verified Old: Logged
	3	11/10/22 14:30		QUV-CH03	Status changed: New: Logged Old: Transmitted Status changed: New: Pha Verified Old: Logged
	4	11/10/22 14:31		Gebur, Ilene Kris, PharmD	Status changed: New: Pha Verified Old: Logged
	5	11/10/22 14:55		Nguyen, Michael	Order acknowledged Stop Request Copied to 0.9 % Sodium Chloride 221110-150926982 Status changed: New: Completed Old: Pha Verified
	6	11/10/22 15:09		Laher, Mary Jane	Order acknowledged Stop Request Copied to 0.9 % Sodium Chloride 221110-150926982 Status changed: New: Completed Old: Pha Verified
	7	11/10/22 15:09		Laher, Mary Jane	Order acknowledged Stop Request Copied to 0.9 % Sodium Chloride 221110-150926982 Status changed: New: Completed Old: Pha Verified
	8	11/10/22 15:09		Laher, Mary Jane	Status changed: New: Completed Old: Pha Verified
	9	11/10/22 15:12		Nguyen, Michael	Order acknowledged Order acknowledged Order is signed by Ahuja, Jaspreet, MD
	10	11/11/22 09:41		Ahuja, Jaspreet, MD	Order acknowledged Order is signed by Ahuja, Jaspreet, MD
	Bedside Testing 221110-143549902		In Process	11/10/22 11:35	INFCF, INFCF Routine Order Source:
	Glucose (Bedside)				
	Bedside Testing 221110-150542012		Completed	11/10/22 14:58	INFCF, INFCF Routine Order Source:
	Stop Reason: Completed by Lis				
Date & Time	User	Device	Event	Acknowledged	
11/10/22 15:05	INFCF, INFCF	QUV-CH03	No Signature is Necessary	NA	
11/10/22 15:05	INFCF, INFCF	QUV-CH03	Order is Entered	NA	
11/10/22 15:05	INFCF, INFCF	QUV-CH03	Status changed:	NA	
			New: Completed		
			Old: In Process		



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221110-150926937	Completed	11/10/22 15:08	Sharma,Ankush, MD	Laher, Mary Jane
	<b>0.9 % Sodium Chloride</b>				Order Source: Standard Procedure Orders

Stop Reason: Reached Stop Date

**Medication**  
 0.9% Sodium Chloride 250 ML Vol Per Bag: 250 ML Per  
 [Sodium Chloride 0.9% 250 ML]  
**QS Drug QS Volume Total Volume**  
 250 ML

Route	Frequency	Sched	PRN Reason	Days Hours	Total Vol to Infuse	Clinical Indication
IV	.Q16M	ONE				
Rate: 999 MLS/HR						
Stop Date/Time: 11/10/22 15:23						
Discontinued: 11/10/22 15:23						

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 15:09	Laher, Mary Jane	Desktop	No Signature is Necessary	Y
1 11/10/22 15:09	Laher, Mary Jane	Desktop	Order is Entered	Y
2 11/10/22 15:09	Laher, Mary Jane	Desktop	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 11/10/22 15:09	Laher, Mary Jane	Desktop	Status changed:	NA
			New: Logged	
			Old: Transmitted	
4 11/10/22 15:10	Yang, David, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
5 11/10/22 15:10	Laher, Mary Jane	Desktop	Order acknowledged	NA
6 11/10/22 15:23	Laher, Mary Jane	QUV-CH03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	
7 11/10/22 15:36	Nguyen, Michael	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221110-1509269371	Completed	11/10/22 14:00	Sharma, Ankush, MD	Laher, Mary Jane
<b>Sublimaze Incremental dosing</b>					
Stop Reason: Reached Stop Date					
Order Source: Standard Procedure Orders					

**Medication**  
 Fentanyl Incremental Dosing 100 MCG Per  
 [Sublimaze Incremental dosing]

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
IV-Push	ONCE	ONE					
Stop Date/Time: 11/10/22 14:01							
Discontinued: 11/10/22 14:01							

**Dose Instruction:** Incremental dosing determined by MD during procedure  
**Label Comments:** Check parameters for incremental dosing

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 15:09	Laher, Mary Jane	Desktop	No Signature Is Necessary	Y
1 11/10/22 15:09	Laher, Mary Jane	Desktop	Order Is Entered	Y
2 11/10/22 15:09	Laher, Mary Jane	Desktop	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
3 11/10/22 15:09	Laher, Mary Jane	Desktop	Order Type edited:	Y
			<b>New:</b> MED	
			<b>Old:</b>	
4 11/10/22 15:09	Laher, Mary Jane	Desktop	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 11/10/22 15:10	Yang, David, PharmD	QUV-CM03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
6 11/10/22 15:10	Laher, Mary Jane	Desktop	Order acknowledged	NA
7 11/10/22 15:15		QUV-CM03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
8 11/10/22 15:19	Nguyen, Michael	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Medications

221110-150926952

Cancelled

11/10/22 14:00

Sharma, Ankush, MD

Lahey, Mary Jane

VerSED Incremental dosing

Order Source: Standard Procedure Orders

Stop Reason: Rejected By Phai: Patient on retry queue.

Medication

Dose

Per

Midazolam Incremental dosing

5 MG

[VerSED Incremental dosing]

Route Frequency

Sched PRN Reason

Days Hours Total Doses

Clinical Indication

IV-Push ONCE

ONCE

Stop Date/Time: 11/10/22 14:01

Dose Instruction: Incremental dosing to be determined by MD during procedure

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 15:09	Lahey, Mary Jane	Desktop	No Signature is Necessary	Y
1 11/10/22 15:09	Lahey, Mary Jane	Desktop	Order is Entered	Y
2 11/10/22 15:09	Lahey, Mary Jane	Desktop	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 11/10/22 15:09	Lahey, Mary Jane	Desktop	Status changed:	Y
			New: Cancelled	
			Old: Transmitted	
4 11/10/22 15:12	Nguyen, Michael	Desktop	Order acknowledged	NA

Medications

221110-150926952

Completed

11/10/22 15:09

Sharma, Ankush, MD

Lahey, Mary Jane

0.9 % Sodium Chloride

Order Source: Standard Procedure Orders

Stop Reason: Discontinue

Medication

Dose

Per

0.9% Sodium Chloride [Sodium Chloride 0.9%]

Vol Per Bag: 1,000 ML

QS Drug

QS Volume

Total Volume

1000 ML

Route Frequency

Sched PRN Reason

Days Hours Total Vol to Infuse

Clinical Indication

IV .Q13H20M

SCH

Continued on Next Page



Patient Order Summary

Page: 305 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Rate: 75 MLS/HR  
 Stop Date/Time:  
 Discontinued: 11/11/22 11:32

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 15:08	Laher, Mary Jane	Desktop	Order created because of edit(s)	Y
1 11/10/22 15:08	Laher, Mary Jane	Desktop	Copied from 0.9 % Sodium Chloride 221110-143013488	Y
2 11/10/22 15:09	Laher, Mary Jane	Desktop	No Signature is Necessary	Y
3 11/10/22 15:09		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
4 11/10/22 15:09		QUV-CH03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
5 11/10/22 15:10	Yang, David, PharmD	QUV-CH03	Status changed:	NA
			New: Pha Verified	
			OLD: Logged	
6 11/10/22 15:12	Nguyen, Michael	Desktop	Order acknowledged	NA
7 11/11/22 11:32	Nguyen, Michael	Desktop	Stop Request	Y
8 11/11/22 11:33	Nguyen, Michael	QUV-CH03	Status changed:	Y
			New: Completed	
			OLD: Pha Verified	
9 11/11/22 11:33	Nguyen, Michael	Desktop	Order acknowledged	NA
10 11/12/22 10:06	Ahuja, Jaspreet, MD	QUV-BG19	Order is Signed by Ahuja, Jaspreet, MD	NA

Medications 221110-151342943 Completed 11/10/22 14:00 Sharma, Ankush, MD Laher, Mary Jane  
 Versed Incremental dosing Order Source: Standard Procedure Orders  
 Stop Reason: Reached Stop Date

Medication	Dose	Par	Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
Midazolam Incremental dosing [Versed Incremental dosing]	5 MG		IV-Push	ONCE	ONE					

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Stop Date/Time: 11/10/22 14:01

Discontinued: 11/10/22 14:01

Dose Instruction: Incremental dosing to be determined by MD during procedure

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 15:13	Laher, Mary Jane	Desktop	No Signature is Necessary	Y
1 11/10/22 15:13	Laher, Mary Jane	Desktop	Order is Entered	Y
2 11/10/22 15:13	Laher, Mary Jane	Desktop	Status changed: New: Transmitted	NA
3 11/10/22 15:13	Laher, Mary Jane	Desktop	Order Type edited: New: MED Old:	Y
4 11/10/22 15:13	Laher, Mary Jane	Desktop	Status changed: New: Logged Old: Transmitted	NA
5 11/10/22 15:14	Yang, David, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
6 11/10/22 15:14		QUV-CM03	Status changed: New: Completed Old: Pha Verified	Y
7 11/10/22 15:14	Laher, Mary Jane	Desktop	Order acknowledged	NA

Routine Care 221110-151927608

Completed 11/10/22 15:18

Young, Richard W, MD

Nguyen, Michael

External Ventricular Drain / ICP

NOW

Order Source: Verbal Orders- Read Back

Stop Reason: Discharged

Physician Instructions OPEN DRAIN AT 10 CM H2O

Desired Height Level (cmH2O) 10

Continuous Drainage Or Clamped Continuous

CSF & ICP Monitor Frequency Every 1 hour

Head of Bed Elevation 30 Degrees

Date & Time

User

Device

Event

Acknowledged

Continued on Next Page



Patient Order Summary

Page: 307 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/10/22 15:19	Nguyen, Michael	Desktop	Signature is Necessary	Y
1	11/10/22 15:19	Nguyen, Michael	Desktop	Order is Entered	Y
2	11/10/22 15:19		QUV-BG19	Status changed:	NA
				<b>New:</b> In Process	
				<b>Old:</b> Verified	
3	11/10/22 15:19	Nguyen, Michael	Desktop	Order acknowledged	NA
4	11/10/22 17:00	Young, Richard M, MD	QUV-BG19	Order is Signed by Young, Richard M, MD	NA
5	12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
				<b>New:</b> Completed	
				<b>Old:</b> In Process	

Bedside Testing 221110-180037608 Completed 11/10/22 17:50 Batou, Augen, DO **INFECE, INFECE**  
**Glucose (Bedside)** Routine **Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/10/22 18:00	INFECE, INFECE	QUV-CM03	No Signature is Necessary	NA
1 11/10/22 18:00	INFECE, INFECE	QUV-CM03	Order is Entered	NA
2 11/10/22 18:00		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Dietary 221110-192551667 Completed 11/10/22 17:00 Batou, Augen, DO **Nguyen, Michael**

Tube Feeding

Stop Reason: Stop date/time met

Order Source: Telephone Orders- Read Back

Formula Glucerna 1.2

Continuous Start Rate (mL/hour) 45  
 Continuous Goal Rate (mL/hour) 45

Date & Time User Device Event Acknowledged  
 Continued on Next Page



Patient Order Summary

Page: 308 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

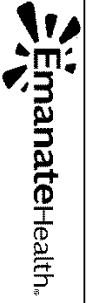
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/10/22 19:25	Nguyen, Michael		Desktop	Signature is Necessary
1	11/10/22 19:25	Nguyen, Michael		Desktop	Order is Entered
2	11/10/22 19:26			QUV-BG19	Queued to destination:
					New: QDITFP1 #3501443
					OLD:
3	11/10/22 19:26			QUV-BG19	Sent to Other Vendor:
					New: OM Diet Orders to Computation
					OLD:
4	11/10/22 19:26			QUV-BG19	Status changed:
					New: Transmitted
					OLD: Verified
5	11/11/22 07:31	Nguyen, Michael		Desktop	Order acknowledged
6	11/11/22 08:10	Batou, Augen, DO		QUV-BG19	Order is Signed by Batou, Augen, DO
7	11/15/22 09:49	Donske, Ruth		Desktop	Diet Stop Dt/Time added:
					New: 11/15/22 11:14
					OLD:
8	11/15/22 09:49	Donske, Ruth		Desktop	Queued to destination:
					New: QDITFP1
					OLD:
9	11/15/22 10:17	Donske, Ruth		Desktop	Order acknowledged
10	11/15/22 11:14			QUV-BG19	New Order Created. Order is Completed via Auto Complete.
11	11/15/22 11:14			QUV-BG19	Status changed:
					New: Completed
					OLD: Transmitted
12	11/15/22 13:09	Donske, Ruth		Desktop	Order acknowledged
13	11/18/22 11:02	Batou, Augen, DO		QUV-BG19	Order is Signed by Batou, Augen, DO
					New: Completed
					OLD: Transmitted
					Order Source: Ventura, Arturo
					Stop Reason: Completed by Lis
					Event
1	11/10/22 22:40	Ventura, Arturo		QUV-CH03	No Signature is Necessary
1	11/10/22 22:40	Ventura, Arturo		QUV-CH03	Order is Entered
2	11/10/22 22:41			QUV-CH03	Status changed:

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Acknowledged





Patient Order Summary

Page: 309 of 500

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046

61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416

Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Bedside Testing 221111-023537787	Completed	11/11/22 02:23	Batou, Augen, DO	Ventura, Arturo	
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Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/11/22 02:35	Ventura, Arturo	QUV-CH03	No Signature is Necessary	NA
1 11/11/22 02:35	Ventura, Arturo	QUV-CH03	Order is Entered	NA
2 11/11/22 02:35		QUV-CH03	Status changed:	NA

New: Completed  
Old: In Process

Bedside Testing 221111-064541880      Completed      11/11/22 06:34      Batou, Augen, DO      Ventura, Arturo

Glucose (Bedside)

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/11/22 06:45	Ventura, Arturo	QUV-CH03	No Signature is Necessary	NA
1 11/11/22 06:45	Ventura, Arturo	QUV-CH03	Order is Entered	NA
2 11/11/22 06:45		QUV-CH03	Status changed:	NA

New: Completed  
Old: In Process

Routine Care 221111-092107124      Completed      11/11/22 09:20      Batou, Augen, DO      Batou, Augen, DO

Consult to Care Coordination

Stop Reason: Completed by Pcs

Order Source: Provider

Instructions      LTRAC placement, once EVD has been weaned off by neurosurgery

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Date & Time	User	Device	Event	Acknowledged
1 11/11/22 09:21	Batou, Augen, DO	QDUK101	Order is Entered and Signed	Y
2 11/11/22 09:21	Batou, Augen, DO	QDUK101	Queued to destination: New: QCMP1	NA
3 11/11/22 09:21		QUV-BG19	OLD: Queued to destination: New: QREHBP2 #3502680	NA
4 11/11/22 09:21		QUV-BG19	OLD: Status changed: New: In Process	NA
5 11/11/22 09:22	Batou, Augen, DO	QDUK101	OLD: Verified Query Instructions edited: New: LTAC placement, once EVD has been weaned off by neurosurgery	Y
6 11/11/22 09:28	Nguyen, Michael	Desktop	OLD: LTAC placement Order acknowledged	NA
7 11/22/22 10:07	Ramos, Alma L	Desktop	Status changed: New: Completed	NA
			OLD: In Process	

Bedside Testing 221111-101040132 Completed 11/11/22 10:02 Batou, Augen, DO INFCE, INFCE  
 Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/11/22 10:10	INFCE, INFCE	QUV-CH03	No Signature is Necessary	NA
1 11/11/22 10:10	INFCE, INFCE	QUV-CH03	Order is Entered	NA
2 11/11/22 10:11		QUV-CH03	Status changed: New: Completed	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221111-131726679	Completed	11/11/22 13:17	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
Novolin N					Order Source: Provider

Stop Reason: Order edited - Discontinuing original order

Medication	Route	Frequency	Sched	PRN Reason	Dose	Per	Days	Hours	Total Doses	Clinical Indication
Insulin NPH [NOVOLIN N]	SUB-Q	Q12HR	06 18	SCH	33 UNITS					
		<b>Stop Date/Time:</b>								
		<b>Discontinued:</b>	11/13/22 14:07							

Label Comments: HOLD IF THE TF WITHHELD.

Date & Time	User	Device	Event	Acknowledged
11/11/22 13:17	Amani-Yazdi, Rambod, MD	QCCUK101	Order created because of edit(s)	Y
11/11/22 13:17	Amani-Yazdi, Rambod, MD	QCCUK101	Copied from Novolin N 221107-163844355	Y
11/11/22 13:17	Amani-Yazdi, Rambod, MD	QCCUK101	Order is signed by Amani-Yazdi, Rambod, MD	Y
11/11/22 13:17		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
11/11/22 13:17		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
11/11/22 13:24	Hyun, Diana S, PharmD	QUV-CM03	Status changed:	NA
			<b>New:</b> Pha Verified	
			<b>Old:</b> Logged	
11/11/22 13:25	Nguyen, Michael	Desktop	Order acknowledged	NA
11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Stop Request	Y
11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Copied to Novolin N 221113-140745885	Y
11/13/22 14:07	Amani-Yazdi, Rambod, MD	QUV-CM03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
11/13/22 14:23	Ordanza, Cristina Arenas	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
 Medications 221111-151514953 Completed 11/11/22 15:15 Young, Richard M, MD Young, Richard M, MD  
 LovenoX Order Source: Provider

Stop Reason: Discontinue

Medication Enoxaparin [Lovenox] Dose 40 MG Per  
 Route Frequency Sched PRN Reason Days Hours Total Doses Clinical Indication  
 SUB-Q Q24H SCH

Stop Date/Time: 11/22/22 13:45

Protocol text:

SQ ADMINISTRATION DIRECTIONS  
 \*Do not expel the air bubble when administering the contents of an entire syringe.  
 \*When administering only a partial dose from a syringe, expel the excess drug and tap any medication from the tip of the needle before administration.  
 \*Always administer the SQ injection when the patient is lying down.  
 \*The ideal injection site is under the skin of the anterolateral and posterolateral abdominal wall. Alternate injections between the right and left sides.  
 \*Do not rub the injection site.

Date & Time	User	Device	Event	Acknowledged
1 11/11/22 15:15	Young, Richard M, MD	QICUK101	Order is Entered and Signed	Y
2 11/11/22 15:15		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 11/11/22 15:15		QUV-CM03	Protocol Text edited:	Y
			New: SQ ADMINISTRATION DIRECTIONS	

\*Do not expel the air bubble when administering the contents of an entire syringe.  
 \*When administering only a partial dose from a syringe, expel the excess drug and tap any medication from the tip of the needle before administration.  
 \*Always administer the SQ injection when the patient is



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
					Lying down. *The ideal injection site is under the skin of the skin of the anterolateral and posterolateral abdominal wall. Alternate injections between the right and left sides. *Do not rub the injection site. <b>OLD:</b> SQ ADMINISTRATION DIRECTIONS *Do not expel the air bubble when administering the contents of an entire syringe. *When administering only a partial dose from a syringe, expel the excess drug and tap any medication from the tip of the needle before administration. *Always administer the SQ injection when the patient is lying down. *The ideal injection site is under the skin of the skin of the anterolateral and posterolateral abdominal wall. Alternate injections between the right and left sides. *Do not rub the injection site.
	3		11/11/22 15:15	QUV-CH03	Y Order Type edited: <b>New:</b> MED <b>OLD:</b> Status changed: <b>New:</b> Logged <b>OLD:</b> Transmitted Status changed: <b>New:</b> Pha Verified <b>OLD:</b> Logged
	4		11/11/22 15:15	QUV-CH03	NA Status changed: <b>New:</b> Logged <b>OLD:</b> Transmitted
	5		11/11/22 15:21	Hyun, Diana S, PharmD	NA Status changed: <b>New:</b> Pha Verified <b>OLD:</b> Logged
	6		11/11/22 15:23	Nguyen, Michael	NA Order acknowledged
	7		11/22/22 13:46	Amirnovin, Ramin, MD	Y Stop Request
	8		11/22/22 13:47	Amirnovin, Ramin, MD	Y Status changed: <b>New:</b> Completed <b>OLD:</b> Pha Verified
	9		11/22/22 14:10	RN 131, CVMC Registry	NA Order acknowledged



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221111-153533947 Completed 11/11/22 15:27

Batou, Augen, DO

INPCE, INPCE

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/11/22 15:35

INPCE, INPCE

QUV-CH03

No Signature is Necessary

NA

1 11/11/22 15:35

INPCE, INPCE

QUV-CH03

Order is Entered

NA

2 11/11/22 15:35

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221111-184033530 Completed 11/11/22 18:29

Batou, Augen, DO

INPCE, INPCE

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/11/22 18:40

INPCE, INPCE

QUV-CH03

No Signature is Necessary

NA

1 11/11/22 18:40

INPCE, INPCE

QUV-CH03

Order is Entered

NA

2 11/11/22 18:40

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221111-214543114 Completed 11/11/22 21:37

Batou, Augen, DO

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/11/22 21:45

San Juan, Cherry M

QUV-CH03

No Signature is Necessary

NA

1 11/11/22 21:45

San Juan, Cherry M

QUV-CH03

Order is Entered

NA

2 11/11/22 21:46

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

Page: 315 of 500

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221112-021019954 Completed 11/12/22 02:02

Batou, Augen, DO

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 02:10

San Juan, Cherry M

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 02:10

San Juan, Cherry M

QUV-CH03

Order is Entered

NA

2 11/12/22 02:10

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221112-054038096 Completed 11/12/22 05:33

Batou, Augen, DO

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 05:40

San Juan, Cherry M

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 05:40

San Juan, Cherry M

QUV-CH03

Order is Entered

NA

2 11/12/22 05:40

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221112-081055380 Completed 11/12/22 08:01

Batou, Augen, DO

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 08:10

Ordanza, Cristina Arenas

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 08:10

Ordanza, Cristina Arenas

QUV-CH03

Order is Entered

NA

2 11/12/22 08:11

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221112-102048600 Completed 11/12/22 10:12

Batou, Augen, DO

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 10:20

Ordanza, Cristina Arenas

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 10:20

Ordanza, Cristina Arenas

QUV-CH03

Order is Entered

NA

2 11/12/22 10:21

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221112-140541106 Completed 11/12/22 13:54

Batou, Augen, DO

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 14:05

Ordanza, Cristina Arenas

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 14:05

Ordanza, Cristina Arenas

QUV-CH03

Order is Entered

NA

2 11/12/22 14:05

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221112-174559115 Completed 11/12/22 17:34

Batou, Augen, DO

Ordanza, Cristina Arenas

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 17:45

Ordanza, Cristina Arenas

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 17:45

Ordanza, Cristina Arenas

QUV-CH03

Order is Entered

NA

2 11/12/22 17:46

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process





Patient Order Summary

Page: 317 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221112-223542967 Completed 11/12/22 22:28

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/12/22 22:35

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 11/12/22 22:35

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 11/12/22 22:36

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221113-012041778 Completed 11/13/22 01:09

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/13/22 01:20

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 11/13/22 01:20

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 11/13/22 01:20

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221113-061550945 Completed 11/13/22 06:08

Batou, Augen, DO

Benson, Jessica A

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/13/22 06:15

Benson, Jessica A

QUV-CH03

No Signature is Necessary

NA

1 11/13/22 06:15

Benson, Jessica A

QUV-CH03

Order is Entered

NA

2 11/13/22 06:16

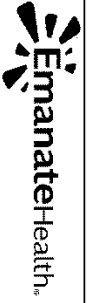
QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221113-104100092	Completed	11/13/22 10:30	Batou, Angen, DO	Ordanza, Cristina Arenas
Glucose (Bedside)				Routine	

Stop Reason: Completed by Lis

Order Source:

Date & Time	User	Device	Event	Acknowledged
1 11/13/22 10:41	Ordanza, Cristina Arenas	QUV-CM03	No Signature is Necessary	NA
1 11/13/22 10:41	Ordanza, Cristina Arenas	QUV-CM03	Order is Entered	NA
2 11/13/22 10:41		QUV-CM03	Status changed:	NA

New: Completed  
Old: In Process

Bedside Testing	221113-14046299	Completed	11/13/22 13:49	Batou, Angen, DO	Ordanza, Cristina Arenas
Glucose (Bedside)				Routine	

Stop Reason: Completed by Lis

Order Source:

Date & Time	User	Device	Event	Acknowledged
1 11/13/22 14:00	Ordanza, Cristina Arenas	QUV-CM03	No Signature is Necessary	NA
1 11/13/22 14:00	Ordanza, Cristina Arenas	QUV-CM03	Order is Entered	NA
2 11/13/22 14:01		QUV-CM03	Status changed:	NA

New: Completed  
Old: In Process

Medications	221113-140745885	Completed	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Amani-Yazdi, Rambod, MD
Novolin N					Order Source: Provider

Stop Reason: Order edited - Discontinuing original order

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
Insulin NPH [NOVOLIN N]	25 UNITS		SUB-Q	Q12HR 06 18	SCH					
Stop Date/Time: Discontinued: 11/15/22 16:59										

Label Comments: HOLD IF THE TF WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Device	Ord Provider	Entered By	Acknowledged
1	11/13/22 14:06	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Order created because of edit(s)	Y	
1	11/13/22 14:06	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Copied from NOVOLIN N 221111-131726679	Y	
2	11/13/22 14:07	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Order is Signed by Amani-Yazdi, Rambod, MD	Y	
3	11/13/22 14:07		QUV-BG19		Status changed:	NA	
					<b>New:</b> Transmitted		
					<b>Old:</b> Verified		
4	11/13/22 14:08		QUV-CM03		Status changed:	NA	
					<b>New:</b> Logged		
					<b>Old:</b> Transmitted		
5	11/13/22 14:11	Vu, Christina Anh	QUV-CM03		Status changed:	NA	
					<b>New:</b> Pha Verified		
					<b>Old:</b> Logged		
6	11/13/22 14:23	Ordanza, Cristina Arenas	Desktop	Desktop	Order acknowledged	NA	
7	11/13/22 18:18	Amani-Yazdi, Rambod, MD	Desktop	Desktop	Label Comments edited:	Y	
					<b>New:</b> HOLD IF THE TF WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.		
					<b>Old:</b> HOLD IF THE TF WITHHELD.		
8	11/13/22 18:21	Ordanza, Cristina Arenas	Desktop	Desktop	Order acknowledged	NA	
9	11/15/22 16:59	Amani-Yazdi, Rambod, MD	QICUK101		Stop Request	Y	
10	11/15/22 16:59	Amani-Yazdi, Rambod, MD	QICUK101		Copied to NOVOLIN N 221115-165941493	Y	
11	11/15/22 16:59	Amani-Yazdi, Rambod, MD	QUV-CM03		Status changed:	Y	
					<b>New:</b> Completed		
					<b>Old:</b> Pha Verified		
12	11/15/22 20:54	Chow, Kristin	Desktop	Desktop	Order acknowledged	NA	
CT Scan	221113-140822080	Resulted	11/14/22 08:00		Stannislau, Sharon, PA-C	Ordanza, Cristina Arenas	
CT head/brain w/ con					Routine	Order Source: Verbal Orders- Read Back	
Mode Of Transportation	Portable	Reason For Exam	Follow up				
Mode of Transport	Portable						
Date & Time	User	Device	Event	Acknowledged			
11/13/22 14:08	Ordanza, Cristina Arenas	Desktop	Signature is Necessary	Y			
11/13/22 14:08	Ordanza, Cristina Arenas	Desktop	Order is Entered	Y			
11/13/22 14:08		QUV-BG19	Status changed:	NA			

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**

3	11/13/22 14:08	QUV-CM03		QUV-CM03	New: Transmitted Old: Verified New: Query Mode Of Transportation edited: Old: Portable New: Status changed: Old: Status changed: New: Logged	NA
4	11/13/22 14:08	QUV-CM03		QUV-CM03	New: Status changed: Old: Status changed: New: Logged	NA
5	11/13/22 14:23	Ordanza, Cristina Arenas		Desktop	Old: Transmitted New: Order acknowledged	NA
6	11/13/22 15:00	Stannislaus, Sharon, PA-C		QUV-BG19	Old: Order is signed by Stannislaus, Sharon, PA-C New: Order is signed by Young, Richard M, MD	NA
7	11/13/22 18:20	Young, Richard M, MD		QUV-BG19	Old: Status changed: New: Status changed:	NA
8	11/14/22 09:47	Dominguez, Victoria		QUV-CM03	Old: Status changed: New: Status changed: Old: Logged New: Status changed:	NA
9	11/14/22 10:48			QUV-CM03	Old: Status changed: New: Status changed: Old: Logged New: Status changed:	NA

Bedside Testing 221113-181525243 **Completed** 11/13/22 18:03 **Batou, Augen, DO** **Order Source:** Ordanza, Cristina Arenas  
**Glucose (Bedside)** **Stop Reason:** Completed by LIS **Routine**

Date & Time	User	Device	Event	Acknowledged
1 11/13/22 18:15	Ordanza, Cristina Arenas	QUV-CM03	No Signature is Necessary	NA
1 11/13/22 18:15	Ordanza, Cristina Arenas	QUV-CM03	Order is Entered	NA
2 11/13/22 18:15		QUV-CM03	Status changed: New: Completed Old: In Process	NA

Bedside Testing 221113-221530787 **Completed** 11/13/22 22:07 **Batou, Augen, DO** **Order Source:** Lamparero, Henry  
**Glucose (Bedside)** **Stop Reason:** Completed by LIS **Routine**

Date & Time	User	Device	Event	Acknowledged
1 11/13/22 22:15	Lamparero, Henry	QUV-CM03	No Signature is Necessary	NA
1 11/13/22 22:15	Lamparero, Henry	QUV-CM03	Order is Entered	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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2	11/13/22 22:15			QUV-CH03	NA
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Status changed:  
 New: Completed  
 Old: In Process

Bedside Testing 221114-024517593	Completed	11/14/22 02:38	Batou, Augen, DO	Lamparero, Henry
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Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/14/22 02:45	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
1 11/14/22 02:45	Lamparero, Henry	QUV-CH03	Order is Entered	NA
2 11/14/22 02:45		QUV-CH03	Status changed:	NA

New: Completed  
 Old: In Process

Bedside Testing 221114-042057220	Completed	11/14/22 04:09	Batou, Augen, DO	Lamparero, Henry
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Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/14/22 04:20	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
1 11/14/22 04:20	Lamparero, Henry	QUV-CH03	Order is Entered	NA
2 11/14/22 04:21		QUV-CH03	Status changed:	NA

New: Completed  
 Old: In Process

Bedside Testing 221114-064058421	Completed	11/14/22 06:30	Batou, Augen, DO	Lamparero, Henry
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Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/14/22 06:40	Lamparero, Henry	QUV-CH03	No Signature is Necessary	NA
1 11/14/22 06:40	Lamparero, Henry	QUV-CH03	Order is Entered	NA
2 11/14/22 06:41		QUV-CH03	Status changed:	NA

New: Completed  
 Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
61/F  
Attending: Lau, Tsang, MD  
Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category Order Status Start Ord Provider Entered By  
Bedside Testing 221114-101540167 Completed 11/14/22 10:05 Ashouri, Anousheh, MD Malacca, Jessalje  
Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/14/22 10:15	Malacca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/14/22 10:15	Malacca, Jessalje	QUV-CH03	Order is Entered	NA
2 11/14/22 10:16		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221114-135548058 Completed 11/14/22 13:45 Ashouri, Anousheh, MD Malacca, Jessalje  
Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/14/22 13:55	Malacca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/14/22 13:55	Malacca, Jessalje	QUV-CH03	Order is Entered	NA
2 11/14/22 13:56		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221114-174551058 Completed 11/14/22 17:37 Ashouri, Anousheh, MD Malacca, Jessalje  
Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/14/22 17:45	Malacca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/14/22 17:45	Malacca, Jessalje	QUV-CH03	Order is Entered	NA
2 11/14/22 17:46		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

Page: 323 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221114-221533160 Completed 11/14/22 22:06

Ashouri, Anousheh, MD

Chow, Kristin

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/14/22 22:15

Chow, Kristin

QUV-CH03

No Signature is Necessary

NA

1 11/14/22 22:15

Chow, Kristin

QUV-CH03

Order is Entered

NA

2 11/14/22 22:15

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221115-022029523 Completed 11/15/22 02:12

Ashouri, Anousheh, MD

Chow, Kristin

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/15/22 02:20

Chow, Kristin

QUV-CH03

No Signature is Necessary

NA

1 11/15/22 02:20

Chow, Kristin

QUV-CH03

Order is Entered

NA

2 11/15/22 02:20

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221115-055027360 Completed 11/15/22 05:40

Ashouri, Anousheh, MD

INFCE, INFCE

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/15/22 05:50

INFCE, INFCE

QUV-CH03

No Signature is Necessary

NA

1 11/15/22 05:50

INFCE, INFCE

QUV-CH03

Order is Entered

NA

2 11/15/22 05:50

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

Page: 324 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221115-091718894	Completed	11/16/22 05:42	Ashouri, Anousheh, MD	Ashouri, Anousheh, MD
<b>CMP [Comprehensive Metabolic Panel]</b>					<b>Order Source:</b> Provider
<b>Stop Reason:</b> Completed by LIS					

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/15/22 09:17	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/15/22 10:17	Donske, Ruth	Desktop	Order acknowledged	NA
3 11/16/22 00:05		QUV-BG19	Status changed: New: Transmitted	NA
4 11/16/22 00:12		QUV-CM03	OLD: Verified Status changed:	NA
5 11/16/22 01:14		QUV-CM03	New: Logged OLD: Transmitted Status changed:	NA
6 11/16/22 06:25		QUV-CM03	New: In Process OLD: Logged start Time edited:	NA
7 11/16/22 07:04		QUV-CM03	New: 05:42 OLD: 05:00 Status changed: New: Completed OLD: In Process	NA

Hematology 221115-091718941 Completed 11/16/22 05:42 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
**CBC [Complete Blood Count/Auto diff]** AM **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/15/22 09:17	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/15/22 10:17	Donske, Ruth	Desktop	Order acknowledged	NA
3 11/16/22 00:05		QUV-BG19	Status changed: New: Transmitted OLD: Verified	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Attending: Lau, Tsang, MD      Account Number: QH0054940416  
    Reason: Hydrocephalus      Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/16/22 00:12			QUV-CM03	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	11/16/22 01:14			QUV-CM03	NA
				<b>Status changed:</b>	
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	11/16/22 06:25			QUV-CM03	NA
				<b>Start Time edited:</b>	
				<b>New:</b> 05:42	
				<b>Old:</b> 05:00	
7	11/16/22 07:18			QUV-CM03	NA
				<b>Status changed:</b>	
				<b>New:</b> Completed	
				<b>Old:</b> In Process	

Coagulation 221115-091718863 Completed 11/16/22 05:42 Ashouri, Anousheh, MD  
 Prothrombin Time INR AM  
 Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/15/22 09:17	Ashouri, Anousheh, MD	Laptop	Order Is Entered and Signed	Y
2 11/15/22 10:17	Donske, Ruth	Desktop	Order acknowledged	NA
3 11/16/22 00:05		QUV-BG19	<b>Status changed:</b>	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 11/16/22 00:12		QUV-CM03	<b>Status changed:</b>	NA
			<b>New:</b> Logged	
			<b>Old:</b> Transmitted	
5 11/16/22 01:14		QUV-CM03	<b>Status changed:</b>	NA
			<b>New:</b> In Process	
			<b>Old:</b> Logged	
6 11/16/22 06:25		QUV-CM03	<b>Start Time edited:</b>	NA
			<b>New:</b> 05:42	
			<b>Old:</b> 05:00	
7 11/16/22 07:10		QUV-CM03	<b>Status changed:</b>	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** Order **Status** Start **Ord Provider** Entered By  
 Chemistry 221115-091718910 Completed 11/16/22 05:42 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
**Magnesium** **Order Source:** Provider  
**Stop Reason:** Completed by LIS

**Specimen** Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/15/22 09:17	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/15/22 10:17	Donske, Ruth	Desktop	Order acknowledged	NA
3 11/16/22 00:05		QUV-BG19	Status changed: New: Transmitted	NA
4 11/16/22 00:12		QUV-CM03	OLD: Verified Status changed: New: Logged	NA
5 11/16/22 01:14		QUV-CM03	OLD: Transmitted Status changed: New: In Process	NA
6 11/16/22 06:25		QUV-CM03	OLD: Logged start Time edited: New: 05:42	NA
7 11/16/22 07:04		QUV-CM03	OLD: 05:00 Status changed: New: Completed	NA

**Dietary** 221115-094919230 Completed 11/15/22 11:15 **Ord Source:** ZRecommendations  
 Batou, Augen, DO Donske, Ruth  
**Tube Feeding**  
**Stop Reason:** Stop date/time met

**Formula** Glucerna 1.2  
**Continuous Start Rate (mL/hour)** 45  
**Continuous Goal Rate (mL/hour)** 55

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category Order Status Start Ord Provider Entered By

Dietary Comment INCREASED GOAL TO 55ML/HR PER DIET REC

Date & Time	User	Device	Event	Acknowledged
1 11/15/22 09:49	Donske, Ruth	Desktop	Signature is Necessary	Y
1 11/15/22 09:49	Donske, Ruth	Desktop	Order is Entered	Y
2 11/15/22 09:49		QUV-BG19	Queued to destination:	NA
			New: QDIFTP1 #3513123	
			Old:	
3 11/15/22 09:49		QUV-BG19	Sent to Other Vendor:	NA
			New: OM Diet Orders to Computation	
			Old:	
4 11/15/22 09:49		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
5 11/15/22 10:17	Donske, Ruth	Desktop	Order acknowledged	NA
6 11/18/22 11:02	Batou, Augen, DO	QUV-BG19	Order is Signed by Batou, Augen, DO	NA
7 11/21/22 16:22	Ye, Donald	Desktop	Diet Stop Dt/Time added:	Y
			New: 11/23/22 00:01	
			Old:	
8 11/21/22 16:22	Ye, Donald	Desktop	Queued to destination:	NA
			New: QDIFTP1	
			Old:	
9 11/21/22 21:33	Chow, Kristin	Desktop	Order acknowledged	NA
10 11/23/22 00:01		QUV-BG19	New Order Created. Order is Completed via Auto Complete.	Y
11 11/23/22 00:01		QUV-BG19	Status changed:	NA
			New: Completed	
			Old: Transmitted	
12 11/23/22 07:53	Ramos, Jessica	Desktop	Order acknowledged	NA

Stop Reason: Completed by Lis

Bedside Testing 221115-105554925 Completed 11/15/22 10:46 Ashourri, Anousheh, MD Donske, Ruth  
 Glucose (Bedside) Routine Order Source:

Date & Time User Device Event Acknowledged

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/15/22 10:55	Donske, Ruth		QUV-CH03	NA
1	11/15/22 10:55	Donske, Ruth		QUV-CH03	NA
2	11/15/22 10:56			QUV-CH03	NA

New: Completed

Bedside Testing 221115-145035797 Completed 11/15/22 14:40

Ashouri, Anousheh, MD

Donske, Ruth

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
11/15/22 14:50	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA
11/15/22 14:50	Donske, Ruth	QUV-CH03	Order is Entered	NA
11/15/22 14:50		QUV-CH03	Status changed:	NA

New: completed

Medications 221115-160249752 Completed 11/15/22 16:15

Ashouri, Anousheh, MD

Donske, Ruth

0.9 % Sodium Chloride

Order Source: Verbal Orders- Read Back

Stop Reason: Discontinue

Medication 0.9% Sodium Chloride [Sodium Chloride 0.9%]  
 Dose Vol Per Bag: 1,000 ML  
 Per  
 QS Drug QS Volume Total Volume  
 1000 ML

Route Frequency Sched PRN Reason Days Hours Total Vol to Infuse Clinical Indication  
 IV .Q13H20M SCH  
 Rate: 75 MLs/HR  
 Stop Date/Time:  
 Discontinued: 11/21/22 12:37

Date & Time	User	Device	Event	Acknowledged
11/15/22 16:02	Donske, Ruth	Desktop	Signature is Necessary	Y
11/15/22 16:02	Donske, Ruth	Desktop	Order is Entered	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	11/15/22 16:02			QUV-BG19	NA
				Status changed:	
				New: Transmitted	
				Old: Verified	
3	11/15/22 16:02			QUV-CM03	NA
				Status changed:	
				New: Logged	
				Old: Transmitted	
4	11/15/22 16:03			QUV-CM03	NA
				Status changed:	
				New: Pha Verified	
				Old: Logged	
5	11/15/22 16:39			Donske, Ruth	NA
				Desktop	
				Order acknowledged	
6	11/16/22 10:19			Ashouri, Anousheh, MD	NA
				QUV-BG19	
				Order is Signed by Ashouri, Anousheh, MD	
7	11/21/22 12:37			Lau, Tsang, MD	Y
				QDOUK104	
				Stop Request	
8	11/21/22 12:38			Lau, Tsang, MD	Y
				QUV-CM03	
				Status changed:	
				New: Completed	
				Old: Pha Verified	
9	11/21/22 12:40			Vandemark, Joann M	NA
				Desktop	
				Order acknowledged	
Medications	221113-165941483	Completed	11/15/22 16:59	Amani-Yazdi, Rambod, MD	NA
Novolin N				Amani-Yazdi, Rambod, MD	
				Order Source: Provider	
<b>Stop Reason:</b> Order edited - Discontinuing original order					
<b>Medication</b>	<b>Dose</b>	<b>Per</b>			
Insulin NPH [Novolin N]	30 UNTTS				
<b>Route</b>	<b>Frequency</b>	<b>Sched</b>	<b>PRN Reason</b>	<b>Days Hours</b>	<b>Total Doses</b>
SUB-Q	Q12HR 06 18	SCH			
<b>Stop Date/Time:</b>					
<b>Discontinued:</b>	11/19/22 09:03				
<b>Label Comments:</b> HOLD IF THE TF WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.					
<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>	
1 11/15/22 16:59	Amani-Yazdi, Rambod, MD	QICUK101	Order created because of edit(s)	Y	
1 11/15/22 16:59	Amani-Yazdi, Rambod, MD	QICUK101	Copied from Novolin N 221113-140745885	Y	
2 11/15/22 16:59	Amani-Yazdi, Rambod, MD	QICUK101	Order is Signed by Amani-Yazdi, Rambod, MD	Y	
3 11/15/22 16:59		QUV-BG19	Status changed:	NA	
			New: Transmitted		

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/15/22 16:59	QUV-CH03		Old: Verified Status changed: New: Logged Old: Transmitted Status changed: New: Pha Verified Old: Logged	NA
5	11/15/22 17:09	Phong, Suzanne, PharmD		QUV-CH03 Status changed: New: Pha Verified Old: Logged	NA
6	11/15/22 17:48	Donske, Ruth		Desktop Order acknowledged	NA
7	11/19/22 09:03	Amani-Yazdi, Rambod, MD		Desktop Stop Request	Y
8	11/19/22 09:03	Amani-Yazdi, Rambod, MD		Desktop Copied to Novolin N 221119-090358486	Y
9	11/19/22 09:04	Amani-Yazdi, Rambod, MD		QUV-CH03 Status changed: New: Completed Old: Pha Verified	Y
10	11/19/22 11:07	Donske, Ruth		Desktop Order acknowledged	NA
<b>Glucose (Bedside)</b>					
Bedside Testing 221115-175042555 Completed 11/15/22 17:43 Ashouri, Anousheh, MD Donske, Ruth <b>Order Source:</b>					
<b>Stop Reason:</b> Completed by LIS Routine					
<b>Date &amp; Time</b>					
1	11/15/22 17:50	Donske, Ruth		QUV-CH03 No Signature is Necessary	NA
1	11/15/22 17:50	Donske, Ruth		QUV-CH03 Order is Entered	NA
2	11/15/22 17:51			QUV-CH03 Status changed: New: Completed Old: In Process	NA
<b>Glucose (Bedside)</b>					
Bedside Testing 221115-220529691 Completed 11/15/22 21:56 Ashouri, Anousheh, MD Chow, Kristin <b>Order Source:</b>					
<b>Stop Reason:</b> Completed by LIS Routine					
<b>Date &amp; Time</b>					
1	11/15/22 22:05	Chow, Kristin		QUV-CH03 No Signature is Necessary	NA
1	11/15/22 22:05	Chow, Kristin		QUV-CH03 Order is Entered	NA
2	11/15/22 22:05			QUV-CH03 Status changed: New: Completed Old: In Process	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221116-025044489	Completed	11/16/22 02:43	Ashouri, Anousheh, MD	Chow, Kristin
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 02:50	Chow, Kristin	QUV-CM03	No Signature Is Necessary	NA
1 11/16/22 02:50	Chow, Kristin	QUV-CM03	Order Is Entered	NA
2 11/16/22 02:50		QUV-CM03	Status changed:	NA

New: Completed

Old: In Process

Bedside Testing	221116-061541333	Completed	11/16/22 06:08	Ashouri, Anousheh, MD	Chow, Kristin
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 06:15	Chow, Kristin	QUV-CM03	No Signature Is Necessary	NA
1 11/16/22 06:15	Chow, Kristin	QUV-CM03	Order Is Entered	NA
2 11/16/22 06:15		QUV-CM03	Status changed:	NA

New: Completed

Old: In Process

CT Scan	221116-081009979	Resulted	11/16/22 08:09	Ball, Benjamin	Ball, Benjamin
CT head/brain w/ con				Routine	Order Source: Provider

Mode Of Transportation: Portable  
Reason For Exam: hydrocephalus

Mode of Transport: Portable

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 08:10	Ball, Benjamin	QICUK102	Order Is Entered and Signed	Y
2 11/16/22 08:10		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 11/16/22 08:10		QUV-CM03	query Mode Of Transportation edited:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				New: Portable Old:	
	4		11/16/22 08:10	QUV-CH03 Status changed: New: Logged Old: Transmitted	NA
	5		11/16/22 08:22	Malacca, Jessalje Desktop Order acknowledged Status changed: New: Taken Old: Logged	NA
	6		11/16/22 09:45	Oda, Thomas Tsutomu QUV-CH03 Status changed: New: Taken Old: Logged	NA
	7		11/16/22 14:22	QUV-CH03 Status changed: New: Resulted Old: Taken	NA

Bedside Testing 221116-100602439 Completed 11/16/22 09:57 Ashouri, Anousheh, MD Malacca, Jessalje  
 Glucose (Bedside) Routine Order Source:  
 Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 10:06	Malacca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/16/22 10:06	Malacca, Jessalje	QUV-CH03	Order is Entered	NA
2 11/16/22 10:06		QUV-CH03	Status changed: New: Completed Old: In Process	NA

Coagulation 221116-120618391 Completed 11/17/22 05:00 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
 Prothrombin Time INR AM Order Source: Provider  
 Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 12:06	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/16/22 12:31	Malacca, Jessalje	Desktop	Order acknowledged	NA
3 11/17/22 00:02		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 11/17/22 00:06		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Attending: Lau, Tsang, MD Account Number: QH0054940416  
 Reason: Hydrocephalus Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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5	11/17/22 01:28			QUV-CM03	New: Logged Old: Transmitted Status changed: New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
6	11/17/22 07:02			QUV-CM03	New: Completed Old: In Process	NA

Hematology 221116-1206184221 Completed 11/17/22 05:00 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
 Order Source: Provider

CBC [Complete Blood Count/Auto diff]

Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 12:06	Ashouri, Anousheh MD	Laptop	Order is Entered and signed	Y
2 11/16/22 12:31	Malaca, Jessalje	Desktop	Order acknowledged	NA
3 11/17/22 00:02		QUV-BGI9	Status changed: New: Transmitted Old: Verified	NA
4 11/17/22 00:06		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 11/17/22 01:28		QUV-CM03	Status changed: New: In Process Old: Logged	NA
6 11/17/22 07:17		QUV-CM03	Status changed: New: Completed Old: In Process	NA

Chemistry 221116-120618406 Completed 11/17/22 05:00 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
 Order Source: Provider

CMP [Comprehensive Metabolic Panel]

Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event
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Acknowledged



**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/16/22 12:06	Ashouri, Anousheh, MD	Laptop	Order Is Entered and Signed	Y
2	11/16/22 12:31	Malaca, Jessalje	Desktop	Order acknowledged	NA
3	11/17/22 00:02		QUV-BG19	Status changed:	NA
				<b>New:</b> Transmitted	
				<b>Old:</b> Verified	
4	11/17/22 00:06		QUV-CH03	Status changed:	NA
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	11/17/22 01:28		QUV-CH03	Status changed:	NA
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	11/17/22 07:37		QUV-CH03	Status changed:	NA
				<b>New:</b> Completed	
				<b>Old:</b> In Process	
Chemistry 221116-1206184061 Completed 11/17/22 05:00 Ashouri, Anousheh, MD Ashouri, Anousheh, MD					
<b>Magnesium</b> AM Order source: Provider					
<b>Stop Reason:</b> Completed by LIS					
<b>Specimen</b> Send someone from the department to collect					
Date & Time	User	Device	Event	Acknowledged	
1 11/16/22 12:06	Ashouri, Anousheh, MD	Laptop	Order Is Entered and Signed	Y	
2 11/16/22 12:31	Malaca, Jessalje	Desktop	Order acknowledged	NA	
3 11/17/22 00:02		QUV-BG19	Status changed:	NA	
			<b>New:</b> Transmitted		
			<b>Old:</b> Verified		
4 11/17/22 00:06		QUV-CH03	Status changed:	NA	
			<b>New:</b> Logged		
			<b>Old:</b> Transmitted		
5 11/17/22 01:28		QUV-CH03	Status changed:	NA	
			<b>New:</b> In Process		
			<b>Old:</b> Logged		
6 11/17/22 07:37		QUV-CH03	Status changed:	NA	
			<b>New:</b> Completed		
			<b>Old:</b> In Process		



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Routine Care 221116-125237567 Completed 11/16/22 12:52 Abidali, Moustapha, DO Malacca, Jessalje  
**Primary Catheter, Removal** NOW **Order Source:** Telephone Orders - Read Back  
**Stop Reason:** Completed by Pcs

Intervention Text Follow Urinary Catheter Protocol for post-catheter care & monitor post-void residual volumes.

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 12:52	Malacca, Jessalje	Desktop	Signature is Necessary	Y
1 11/16/22 12:52	Malacca, Jessalje	Desktop	Order is Entered	Y
2 11/16/22 12:52		QUV-BG19	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Verified	
3 11/16/22 12:54	Ramos, Jessica	Desktop	Order acknowledged	NA
4 11/16/22 13:57	Malacca, Jessalje	Desktop	Status changed:	NA
			<b>New:</b> completed	
			<b>Old:</b> In Process	
5 11/17/22 09:02	Abidali, Moustapha, DO	QUV-BG19	Order is Signed by Abidali, Moustapha, DO	NA

Bedside Testing 221116-141031303 Completed 11/16/22 14:03 Ashouri, Anousheh, MD Malacca, Jessalje  
**Glucose (Bedside)** Routine **Order Source:**

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 14:10	Malacca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/16/22 14:10	Malacca, Jessalje	QUV-CH03	Order is Entered	NA
2 11/16/22 14:10		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Bedside Testing 221116-173600331 Completed 11/16/22 17:26 Ashouri, Anousheh, MD Malacca, Jessalje  
**Glucose (Bedside)** Routine **Order Source:**

**Stop Reason:** Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 17:36	Malacca, Jessalje	QUV-CH03	No Signature is Necessary	NA
1 11/16/22 17:36	Malacca, Jessalje	QUV-CH03	Order is Entered	NA

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**Patient Order Summary**

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	11/16/22 17:36	QUV-CH03	11/16/22 23:55	Ashouri, Anousheh, MD	Malaca, Jessalie

Status changed:  
 New: Completed  
 Old: In Process

Routine Care 221116-182455155 Completed 11/16/22 23:55 Ashouri, Anousheh, MD Malaca, Jessalie

**Other Nursing Interventions** ONCE **Order Source:** Verbal Orders- Read Back  
**Stop Reason:** Discharged

**Intervention Text** \*\*\*IF NO URINE OUTPUT, INSERT A FOLEY CATHETER FOR URINARY RETENTION\*\*\*

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 18:24	Malaca, Jessalie	Desktop	Signature is Necessary	Y
1 11/16/22 18:24	Malaca, Jessalie	Desktop	Order is Entered	Y
2 11/16/22 18:25		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 11/16/22 18:41	Ramos, Jessica	Desktop	Order acknowledged	NA
4 11/17/22 09:05	Ashouri, Anousheh, MD	QUV-BG19	Order is Signed by Ashouri, Anousheh, MD	NA
5 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221116-222056517 Completed 11/16/22 22:10 Ashouri, Anousheh, MD San Juan, Cherry M  
**Glucose (Bedside)** Routine **Order Source:**

**Stop Reason:** Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/16/22 22:20	San Juan, Cherry M	QUV-CH03	No Signature is Necessary	NA
1 11/16/22 22:20	San Juan, Cherry M	QUV-CH03	Order is Entered	NA
2 11/16/22 22:21		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Bedside Testing 221117-013059579 Completed 11/17/22 01:23 Ashouri, Anousheh, MD San Juan, Cherry M  
**Glucose (Bedside)** Routine **Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 01:30	San Juan, Cherry M	QUV-CM03	No Signature is Necessary	NA
1 11/17/22 01:30	San Juan, Cherry M	QUV-CM03	Order is Entered	NA
2 11/17/22 01:31		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Bedside Testing 221117-055536053 Completed 11/17/22 05:48 Ashouri, Anousheh, MD San Juan, Cherry M  
**Glucose (Bedside)** Routine **Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 05:55	San Juan, Cherry M	QUV-CM03	No Signature is Necessary	NA
1 11/17/22 05:55	San Juan, Cherry M	QUV-CM03	Order is Entered	NA
2 11/17/22 05:55		QUV-CM03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Coagulation 221117-100613778 Completed 11/18/22 06:22 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
**Prothrombin Time INR** AM **Order Source:** Provider

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 10:06	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/17/22 10:12	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/18/22 00:01		QUV-BG19	Status changed:	NA
			<b>New:</b> Transmitted	
			<b>Old:</b> Verified	
4 11/18/22 00:04		QUV-CM03	Status changed:	NA
			<b>New:</b> Logged	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A      Attending: Lau, Tsang, MD      Location: Q 1 Intensive Care Unit      Medical Record Number: MR01483046  
 61/F      Reason: Hydrocephalus      Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By

Chemistry      221117-100613794      Completed      11/18/22 06:22      Ashouri, Anousheh, MD      Ashouri, Anousheh, MD  
**CMP [Comprehensive Metabolic Panel]**      AM      Order Source: Provider  
 Stop Reason: Completed by LIS

Specimen      Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1      11/17/22 10:06	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2      11/17/22 10:12	Ramos, Jessica	Desktop	Order acknowledged	NA
3      11/18/22 00:01		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4      11/18/22 00:04		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5      11/18/22 01:12		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
6      11/18/22 06:37		QUV-CM03	Start time edited:	NA
			New: 06:22	
			Old: 05:00	
7      11/18/22 07:17		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221117-100613810	Completed	11/18/22 06:22	Ashouri, Anousheh, MD	Ashouri, Anousheh, MD
Magnesium				AM	Order Source: Provider

Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 10:06	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/17/22 10:12	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/18/22 00:01		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 11/18/22 00:04		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 11/18/22 01:12		QUV-CM03	Status changed: New: In Process Old: Logged	NA
6 11/18/22 06:37		QUV-CM03	start Time edited: New: 06:22 Old: 05:00	NA
7 11/18/22 07:17		QUV-CM03	Status changed: New: Completed Old: In Process	NA

Hematology 221117-1006138101 Completed 11/18/22 06:22 Ashouri, Anousheh, MD Ashouri, Anousheh, MD  
 CBC [Complete Blood Count/Auto diff] AM Order Source: Provider  
 Stop Reason: Completed by LIS

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 10:06	Ashouri, Anousheh, MD	Laptop	Order is Entered and Signed	Y
2 11/17/22 10:12	Ramos, Jessica	Desktop	Order acknowledged	NA
3 11/18/22 00:01		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/18/22 00:04			QUV-CH03	NA
				<b>Status changed:</b>	
				<b>New:</b> Logged	
				<b>Old:</b> Transmitted	
5	11/18/22 01:12			QUV-CH03	NA
				<b>Status changed:</b>	
				<b>New:</b> In Process	
				<b>Old:</b> Logged	
6	11/18/22 06:37			QUV-CH03	NA
				<b>Start Time edited:</b>	
				<b>New:</b> 06:22	
				<b>Old:</b> 05:00	
7	11/18/22 08:04			QUV-CH03	NA
				<b>Status changed:</b>	
				<b>New:</b> Completed	
				<b>Old:</b> In Process	
Bedside Testing 221117-112542681 Completed 11/17/22 11:16 Ashouri, Anousheh, MD Vandemark, Joann M					
<b>Glucose (Bedside)</b> Routine   Routine <b>Order Source:</b>					
<b>Stop Reason:</b> Completed by Lis					
				Completed 11/17/22 14:13	Vandemark, Joann M
<b>Glucose (Bedside)</b> Routine					
<b>Stop Reason:</b> Completed by Lis					
Date & Time	User	Device	Event	Acknowledged	
1 11/17/22 14:20	Vandemark, Joann M	QUV-CH03	No Signature is Necessary	NA	
1 11/17/22 14:20	Vandemark, Joann M	QUV-CH03	Order is Entered	NA	
2 11/17/22 14:21		QUV-CH03	Status changed:	NA	
			<b>New:</b> Completed		
			<b>Old:</b> In Process		





Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221117-171537765	Completed	11/17/22 17:08	Ashouri, Anousheh, MD	Vandemark, Joann M
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 17:15	Vandemark, Joann M	QUV-CH03	No Signature is Necessary	NA
1 11/17/22 17:15	Vandemark, Joann M	QUV-CH03	Order is Entered	NA
2 11/17/22 17:15		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing	221117-215100571	Completed	11/17/22 21:40	Ashouri, Anousheh, MD	San Juan, Cherry M
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					

Date & Time	User	Device	Event	Acknowledged
1 11/17/22 21:51	San Juan, Cherry M	QUV-CH03	No Signature is Necessary	NA
1 11/17/22 21:51	San Juan, Cherry M	QUV-CH03	Order is Entered	NA
2 11/17/22 21:51		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing	221118-014545310	Completed	11/18/22 01:34	Ashouri, Anousheh, MD	San Juan, Cherry M
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					

Date & Time	User	Device	Event	Acknowledged
1 11/18/22 01:45	San Juan, Cherry M	QUV-CH03	No Signature is Necessary	NA
1 11/18/22 01:45	San Juan, Cherry M	QUV-CH03	Order is Entered	NA
2 11/18/22 01:46		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Bedside Testing 221118-053102429 Completed 11/18/22 05:22

Ashouri, Anousheh, MD

San Juan, Cherry M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/18/22 05:31

San Juan, Cherry M

QUV-CH03

No Signature is Necessary

NA

1 11/18/22 05:31

San Juan, Cherry M

QUV-CH03

Order is Entered

NA

2 11/18/22 05:31

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221118-095557598 Completed 11/18/22 09:48

Ashouri, Anousheh, MD

Ramos, Jessica

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/18/22 09:55

Ramos, Jessica

QUV-CH03

No Signature is Necessary

NA

1 11/18/22 09:55

Ramos, Jessica

QUV-CH03

Order is Entered

NA

2 11/18/22 09:56

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process

Bedside Testing 221118-153035328 Completed 11/18/22 15:20

Ashouri, Anousheh, MD

Vandemark, Joann M

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time

User

Device

Event

Acknowledged

1 11/18/22 15:30

Vandemark, Joann M

QUV-CH03

No Signature is Necessary

NA

1 11/18/22 15:30

Vandemark, Joann M

QUV-CH03

Order is Entered

NA

2 11/18/22 15:31

QUV-CH03

Status changed:

NA

New: Completed

Old: In Process



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221118-172542614	Completed	11/18/22 17:18	Ashouri, Anousheh, MD	Vandemark, Joann M
<b>Glucose (Bedside)</b>					
Stop Reason: Completed by Lis					

Date & Time	User	Device	Event	Acknowledged
1 11/18/22 17:25	Vandemark, Joann M	QUV-CH03	No Signature is Necessary	NA
1 11/18/22 17:25	Vandemark, Joann M	QUV-CH03	Order is Entered	NA
2 11/18/22 17:26		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Date & Time	User	Device	Event	Acknowledged
1 11/18/22 22:45	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
1 11/18/22 22:45	Chow, Kristin	QUV-CH03	Order is Entered	NA
2 11/18/22 22:46		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Date & Time	User	Device	Event	Acknowledged
1 11/19/22 02:10	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
1 11/19/22 02:10	Chow, Kristin	QUV-CH03	Order is Entered	NA
2 11/19/22 02:10		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221119-021032670 Completed 11/19/22 02:04 Ashouri, Anousheh, MD Chow, Kristin  
**Glucose (Bedside)** Routine Order Source:  
 Stop Reason: Completed by Lis



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Bedside Testing	221119-060530712	Completed	11/19/22 05:56	Ashouri, Anousheh, MD	Chow, Kristin
Glucose (Bedside)				Routine	Order Source:

Stop Reason: Completed by LIS

Date & Time	User	Device	Event	Acknowledged
1 11/19/22 06:05	Chow, Kristin	QUV-CM03	No Signature is Necessary	NA
1 11/19/22 06:05	Chow, Kristin	QUV-CM03	Order is Entered	NA
2 11/19/22 06:05		QUV-CM03	Status changed:	NA

New: Completed  
Old: In Process

Chemistry 221119-061246305 Cancelled 11/19/22 06:12 Amani-Yazdi, Rambod, MD Chow, Kristin

BMP [Basic Metabolic Panel]

Stat

Order Source: Standard Procedure Orders

Stop Reason: Order edited - Discontinuing original order

Comment: no longer line draw  
Specimen: Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/19/22 06:12	Chow, Kristin	Desktop	No Signature is Necessary	Y
1 11/19/22 06:12	Chow, Kristin	Desktop	Order is Entered	Y
2 11/19/22 06:12		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 11/19/22 06:16	Chow, Kristin	Desktop	Stop Request	Y
4 11/19/22 06:16	Chow, Kristin	Desktop	Copied to BMP [Basic Metabolic Panel]	NA
			221119-061614567	
5 11/19/22 06:16	Chow, Kristin	Desktop	Order acknowledged	NA
6 11/19/22 06:17		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
7 11/19/22 06:17	Chow, Kristin	QUV-CM03	Status changed:	Y
			New: Cancelled	
			Old: Logged	
8 11/19/22 11:07	Donske, Ruth	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Hematology

221119-061246305

Cancelled

11/19/22 06:12

Amani-Yazdi, Rambod, MD

Chow, Kristin

CBC [Complete Blood Count/Auto diff]

Cancelled

Stat

Order Source: Standard Procedure Orders

Stop Reason: Order edited - Discontinuing original order

Comment: no longer line draw  
Specimen: Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
11/19/22 06:12	Chow, Kristin	Desktop	No Signature is Necessary	Y
11/19/22 06:12	Chow, Kristin	Desktop	Order is Entered	Y
11/19/22 06:12	Chow, Kristin	QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
			Stop Request	Y
11/19/22 06:15	Chow, Kristin	Desktop	Copied to CBC [Complete Blood Count/Auto diff]	NA
11/19/22 06:15	Chow, Kristin	Desktop	Order acknowledged	NA
11/19/22 06:16	Chow, Kristin	Desktop	Status changed:	NA
			New: Logged	
			Old: Transmitted	
			Status changed:	Y
			New: Cancelled	
			Old: Logged	
11/19/22 06:17	Chow, Kristin	QUV-CM03	Order acknowledged	NA
11/19/22 11:07	Donske, Ruth	Desktop	Order acknowledged	NA

Hematology

221119-061542080

Completed

11/19/22 09:50

Abidali, Moustapha, DO

Chow, Kristin

CBC [Complete Blood Count/Auto diff]

Completed

Stat

Order Source: Standard Procedure Orders

Stop Reason: Completed by LIS

Comment: no longer a line draw  
Specimen: Has been collected

Date & Time	User	Device	Event	Acknowledged
11/19/22 06:15	Chow, Kristin	Desktop	Order created because of edit(s)	Y
11/19/22 06:15	Chow, Kristin	Desktop	Copied from CBC [Complete Blood Count/Auto diff]	Y
11/19/22 06:15	Chow, Kristin	Desktop	No Signature is Necessary	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
3	11/19/22 06:15	QUV-BG19	11/19/22 06:12	Abidali, Moustapha, DO	Chow, Kristin
		Status changed:			
		<b>New:</b> Transmitted			
		<b>OLD:</b> Verified			
4	11/19/22 06:15	QUV-CM03			
		Status changed:			
		<b>New:</b> Logged			
		<b>OLD:</b> Transmitted			
5	11/19/22 06:16	Desktop			
		Order acknowledged			
6	11/19/22 06:38	Phone			
		Specimen Collected: 1119:H00304S			
7	11/19/22 09:50	Phone			
		Specimen Collected: 1119:H00304S			
8	11/19/22 09:50	Phone			
		Order is collected			
9	11/19/22 10:05	QUV-CM03			
		Status changed:			
		<b>New:</b> In Process			
		<b>OLD:</b> Logged			
10	11/19/22 10:11	QUV-CM03			
		Status changed:			
		<b>New:</b> Completed			
		<b>OLD:</b> In Process			
Chemistry	221119-061614567	Cancelled	11/19/22 06:12	Abidali, Moustapha, DO	Chow, Kristin
<b>BMP [Basic Metabolic Panel]</b>					
<b>Stop Reason:</b> REDUNDANT ORDER FOR BMP					
<b>Order Source:</b> Standard Procedure Orders					
<b>Comment</b>	no longer line a draw				
<b>Specimen</b>	Send someone from the department to collect				
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	11/19/22 06:16	Chow, Kristin	Desktop	Order created because of edit(s)	Y
1	11/19/22 06:16	Chow, Kristin	Desktop	Copied from BMP [Basic Metabolic Panel]	Y
				221119-061246305	
2	11/19/22 06:16	Chow, Kristin	Desktop	No Signature Is Necessary	Y
3	11/19/22 06:16		QUV-BG19	Status changed:	NA
				<b>New:</b> Transmitted	
				<b>OLD:</b> Verified	
4	11/19/22 06:16	Chow, Kristin	Desktop	Order acknowledged	NA
5	11/19/22 06:17		QUV-CM03	Status changed:	Y
				<b>New:</b> Cancelled	
				<b>OLD:</b> Transmitted	
6	11/19/22 11:07	Donskey, Ruth	Desktop	Order acknowledged	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Location: Q 1 Intensive Care Unit  
 61/F Attending: Lau, Tsang, MD  
Reason: Hydrocephalus  
Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category **Order** **Status** **Start** **Ord Provider** **Entered By**  
 Routine Care 221119-075007812 Completed 11/19/22 07:49 Ball, Benjamin Donske, Ruth  
 Communication order NOW **Order Source:** Verbal Orders- Read Back

Stop Reason: Discharged

Physician Instructions EVD - INCREASE H2O CM FROM 10 TO 15.

Date & Time	User	Device	Event	Acknowledged
1 11/19/22 07:50	Donske, Ruth	Desktop	Signature is Necessary	Y
1 11/19/22 07:50	Donske, Ruth	Desktop	Order is Entered	Y
2 11/19/22 07:50		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 11/19/22 11:07	Donske, Ruth	Desktop	Order acknowledged	NA
4 11/20/22 10:01	Ball, Benjamin	QUV-BG19	Order is Signed by Ball, Benjamin	NA
5 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
			New: Completed	
			Old: In Process	

Medications 221119-090358486 Completed 11/19/22 09:03 Amani-Yazdi, Rambod, MD

Novolin N Amani-Yazdi, Rambod, MD **Order Source:** Provider

Stop Reason: Order edited - Discontinuing original order

Medication Insulin NPH [NOVOLIN N] **Dose** 22 UNITS **Per**

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
SUB-Q	Q12HR 06 18	SCH				
<b>Stop Date/Time:</b>						
Discontinued: 11/21/22 14:11						

Label Comments: HOLD IF THE TF WITHHELD OR BLOOD SUGAR BELOW 100 MG/DL.

Date & Time	User	Device	Event	Acknowledged
1 11/19/22 09:03	Amani-Yazdi, Rambod, MD	Desktop	Order created because of edit(s)	Y
1 11/19/22 09:03	Amani-Yazdi, Rambod, MD	Desktop	Copied from NOVOLIN N 221115-165941483	Y
2 11/19/22 09:03	Amani-Yazdi, Rambod, MD	Desktop	Order is Signed by Amani-Yazdi, Rambod, MD	Y
3 11/19/22 09:04		QUV-BG19	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
----------	-------	--------	-------	--------------	------------

7	11/19/22 10:53			QUV-CH03	New: In Process Old: Logged Status changed: New: Completed Old: In Process	NA
8	11/19/22 11:07			Desktop	Order acknowledged	NA
9	11/20/22 09:25			Ashouri, Anousheh, MD	Order is Signed by Ashouri, Anousheh, MD	NA

Bedside Testing 221119-095531029 Completed 11/19/22 09:48  
**Glucose (Bedside)** Ashouri, Anousheh, MD Donske, Ruth  
 Routine  
**Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/19/22 09:55	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA
11/19/22 09:55	Donske, Ruth	QUV-CH03	Order is Entered	NA
11/19/22 09:55	Donske, Ruth	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221119-143031097 Completed 11/19/22 14:23  
**Glucose (Bedside)** Ashouri, Anousheh, MD Donske, Ruth  
 Routine  
**Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/19/22 14:30	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA
11/19/22 14:30	Donske, Ruth	QUV-CH03	Order is Entered	NA
11/19/22 14:30	Donske, Ruth	QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221119-180037241 Completed 11/19/22 17:49  
**Glucose (Bedside)** Ashouri, Anousheh, MD Donske, Ruth  
 Routine  
**Order Source:**

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
11/19/22 18:00	Donske, Ruth	QUV-CH03	No Signature is Necessary	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/19/22 18:00	Donske, Ruth		QUV-CH03	Order Is Entered
2	11/19/22 18:00			QUV-CH03	Status changed:
					New: Completed
					Old: In Process
Bedside Testing 221119-222052760 Completed 11/19/22 22:13					
Glucose (Bedside) Ashouri, Anousheh, MD Chow, Kristin					
Routine					
Order Source:					
Stop Reason: Completed by Lis					

Date & Time	User	Device	Event	Acknowledged
1 11/19/22 22:20	Chow, Kristin	QUV-CH03	No Signature Is Necessary	NA
1 11/19/22 22:20	Chow, Kristin	QUV-CH03	Order Is Entered	NA
2 11/19/22 22:21		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	
Bedside Testing 221120-020535836 Completed 11/20/22 01:54				
Glucose (Bedside) Ashouri, Anousheh, MD Chow, Kristin				
Routine				
Order Source:				
Stop Reason: Completed by Lis				

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 02:05	Chow, Kristin	QUV-CH03	No Signature Is Necessary	NA
1 11/20/22 02:05	Chow, Kristin	QUV-CH03	Order Is Entered	NA
2 11/20/22 02:05		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	
CT Scan 221120-070546378 Cancelled 11/21/22 08:00				
CT head/brain w con Ball, Benjamin Chow, Kristin				
Routine				
Order Source: Verbal Orders- Read Back				
Stop Reason: Discontinue				

Mode Of Transportation	Portable			
Reason For Exam	Follow up after clamping of evd			
Mode of Transport	Portable			
Date & Time	User	Device	Event	Acknowledged
Continued on Next Page				



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/20/22 07:05	Chow, Kristin	Desktop	Signature is Necessary	Y
1	11/20/22 07:05	Chow, Kristin	Desktop	Order is Entered	Y
2	11/20/22 07:05	QUV-BG19	QUV-BG19	Status changed:	NA
				New: Transmitted	
				Old: Verified	
3	11/20/22 07:05	QUV-CM03	QUV-CM03	Query Mode Of Transportation edited:	NA
				New: Portable	
				Old:	
4	11/20/22 07:05	QUV-CM03	QUV-CM03	Status changed:	NA
				New: Logged	
				Old: Transmitted	
5	11/20/22 07:25	Vandemark, Joann M	Desktop	Stop Request	Y
6	11/20/22 07:25	QUV-CM03	QUV-CM03	Request Denied	Y
7	11/20/22 07:25	QUV-CM03	QUV-CM03	Queued to destination:	NA
				New: QRADFLRP8 #3526652	
				Old:	
8	11/20/22 07:27	Vandemark, Joann M	Desktop	Order acknowledged	NA
9	11/20/22 10:01	Ball, Benjamin	QUV-BG19	Order is Signed by Ball, Benjamin	NA
10	11/21/22 06:21	Oda, Thomas Tsutomu	QUV-CM03	Status changed:	Y
				New: Cancelled	
				Old: Logged	
11	11/21/22 07:13	Vandemark, Joann M	QICURK103	Order acknowledged	NA
Routine Care 221120-071545437 Completed 11/20/22 07:07 Ball, Benjamin					
Other Nursing Interventions ONCE Order Source: Verbal Orders- Read Back					
Stop Reason: Discharged					
Intervention Text EVD clamped at 0700, 11/2/22 monitor patient closely and notify Dr. Ball if there are any neurological changes					
	<b>Date &amp; Time</b>	<b>User</b>	<b>Device</b>	<b>Event</b>	<b>Acknowledged</b>
1	11/20/22 07:15	Chow, Kristin	Desktop	Signature is Necessary	Y
1	11/20/22 07:15	Chow, Kristin	Desktop	Order is Entered	Y
2	11/20/22 07:15	QUV-BG19	QUV-BG19	Status changed:	NA
				New: In Process	
				Old: Verified	
3	11/20/22 07:27	Vandemark, Joann M	Desktop	Order acknowledged	NA
4	11/20/22 10:01	Ball, Benjamin	QUV-BG19	Order is Signed by Ball, Benjamin	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
5	12/02/22 10:08	Ramos, Jessica	Desktop	Status changed: New: Completed Old: In Process	NA

CT Scan 221120-072538921 Resulted 11/21/22 08:00 Ball, Benjamin  
 CT head/brain wo con Routine Vandemark, Joann M  
 Order Source: Telephone Orders- Read Back

Mode Of Transportation Portable  
 Reason For Exam F/U S/P EVD CLAMPING

Mode of Transport Portable

	Date & Time	User	Device	Event	Acknowledged
1	11/20/22 07:25	Vandemark, Joann M	Desktop	Signature is Necessary	Y
1	11/20/22 07:25	Vandemark, Joann M	Desktop	Order is Entered	Y
2	11/20/22 07:25		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3	11/20/22 07:25		QUV-CH03	Query Mode Of Transportation edited: New: Portable Old:	NA
4	11/20/22 07:25		QUV-CH03	Status changed: New: Logged Old: Transmitted	NA
5	11/20/22 07:27	Vandemark, Joann M	Desktop	Order acknowledged	NA
6	11/20/22 10:01	Ball, Benjamin	QUV-BG19	Order is Signed by Ball, Benjamin	NA
7	11/21/22 09:13	Oda, Thomas Tsutomu	QUV-CH03	Status changed: New: Taken Old: Logged	NA
8	11/21/22 10:41		QUV-CH03	Status changed: New: Resulted Old: Taken	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Routine Care	221120-092331082	Completed	11/20/22 07:00	Ball, Benjamin	Vandemark, Joann M
External Ventricular Drain / ICP				QJHR	Order Source: Telephone Orders - Read Back
Stop Reason:	Completed by Pcs				
Physician Instructions	CLAMPED. CONTINUOUS ICP MONITORING				
Continuous Drainage Or Clamped	Clamped				
Head of Bed Elevation	30 Degrees				
Intervention Text	CT HEAD WITHOUT CONTRAST TOMORROW AM 11/21/22				

Physician Instructions CLAMPED. CONTINUOUS ICP MONITORING

Continuous Drainage Or Clamped Clamped

Head of Bed Elevation 30 Degrees

Intervention Text CT HEAD WITHOUT CONTRAST TOMORROW AM 11/21/22

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 09:23	Vandemark, Joann M	Desktop	Signature is Necessary	Y
1 11/20/22 09:23	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/20/22 09:23		QUV-BG19	Status changed:	NA
			New: In Process	
			Old: Verified	
3 11/20/22 09:26	Vandemark, Joann M	Desktop	Freq edited:	Y
			New: QJHR	
			Old: NOW	
4 11/20/22 09:27	Vandemark, Joann M	Desktop	Order acknowledged	NA
5 11/20/22 10:01	Ball, Benjamin	QUV-BG19	Order is Signed by Ball, Benjamin	NA
6 11/21/22 14:04	Vandemark, Joann M	Desktop	Status changed:	NA
			New: Completed	
			Old: In Process	

Hematology 221120-093626216 Completed 11/20/22 10:05 Abidali, Moustapha, DO Vandemark, Joann M

Complete Blood Count/Auto diff Stat Order Source: Re-enter Orders

Stop Reason: Completed by Lis

Comment	Date & Time	User	Device	Event	Acknowledged
Specimen				PLS SEND SOMEONE. PICC LINE NO BLOOD RETURN	
				Has been collected	
1	11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1	11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y
2	11/20/22 09:36		QUV-BG19	Status changed:	NA
				New: Transmitted	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
	3	11/20/22 09:36	QUV-CM03	Old: Verified Status changed: New: Logged	NA
	4	11/20/22 10:06	Juarez, Mariana Phone	Old: Transmitted Specimen Collected: 1120:H003125 Order is collected	NA
	5	11/20/22 10:06	Juarez, Mariana Phone	Order acknowledged	NA
	6	11/20/22 10:17	Vandemark, Joann M Desktop	Start time edited: New: 10:05	NA
	7	11/20/22 10:19	QUV-CM03	Old: 09:57 Status changed: New: In Process	NA
	8	11/20/22 10:19	QUV-CM03	Old: Logged Status changed: New: Completed	NA
	9	11/20/22 10:31	QUV-CM03	Old: In Process	NA
Chemistry	221120-093626248	Completed	11/21/22 06:15	Abidalli, Moustapha, DO	Vandemark, Joann M
<b>Comprehensive Metabolic Panel</b>					
Order Source: Re-enter Orders					
Stop Reason: Completed by LIS					
Specimen					
Send someone from the department to collect					
Date & Time	User	Device	Event	Acknowledged	
11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y	
11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y	
11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA	
11/21/22 00:01		QUV-BG19	Status changed: New: Transmitted	NA	
11/21/22 00:05		QUV-CM03	Old: Verified Status changed: New: Logged	NA	
11/21/22 01:10		QUV-CM03	Old: Transmitted Status changed: New: In Process	NA	
11/21/22 06:35		QUV-CM03	Old: Logged Start time edited:	NA	

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A Attending: Lau, Tsang, MD Location: Q 1 Intensive Care Unit Medical Record Number: MR01483046  
 61/F Reason: Hydrocephalus Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				New: 06:15 Old: 05:00	
	7		11/21/22 07:39	QUV-CM03	
				New: Completed Old: In Process	

Chemistry 221120-093626216 Completed 11/20/22 10:05 Abidali, Moustapha, DO Vandemark, Joann M  
 Comprehensive Metabolic Panel Stat Order Source: Re-enter Orders  
 Stop Reason: Completed by Lis

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/20/22 09:36		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
3 11/20/22 09:36		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
4 11/20/22 10:06	Juarez, Mariana	Phone	Specimen Collected: 1120:C00432S	NA
5 11/20/22 10:06	Juarez, Mariana	Phone	Order is collected	NA
6 11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA
7 11/20/22 10:19		QUV-CM03	Start Time edited:	NA
			New: 10:05	
			Old: 09:57	
8 11/20/22 10:19		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
9 11/20/22 10:49		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Chemistry	221120-093626232	Completed	11/20/22 10:05	Abidali, Moustapha, DO	Vandemark, Joann M
Magnesium				Stat	Order Source: Re-enter Orders

Stop Reason: Completed by LIS

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/20/22 09:36		QUV-BG19	Status changed:	NA
			New: Transmitted	
			OLD: Verified	
3 11/20/22 09:36		QUV-CH03	Status changed:	NA
			New: Logged	
			OLD: Transmitted	
4 11/20/22 10:06	Juarez, Mariana	Phone	Specimen Collected: 1120:C00432S	NA
5 11/20/22 10:06	Juarez, Mariana	Phone	Order is collected	NA
6 11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA
7 11/20/22 10:19		QUV-CH03	start time edited:	NA
			New: 10:05	
			OLD: 09:57	
8 11/20/22 10:19		QUV-CH03	Status changed:	NA
			New: In Process	
			OLD: Logged	
9 11/20/22 10:49		QUV-CH03	Status changed:	NA
			New: Completed	
			OLD: In Process	

Chemistry 221120-0936262321 Completed 11/20/22 10:05 Abidali, Moustapha, DO Vandemark, Joann M  
 Phosphorus Stat Order Source: Re-enter Orders

Stop Reason: Completed by LIS

Specimen Has been collected

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Attending:** Lau, Tsang, MD **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Reason:** Hydrocephalus **Account Number:** QH0054940416 **Registration:** 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
2	11/20/22 09:36	QUV-BG19		Status changed: New: Transmitted Old: Verified	NA
3	11/20/22 09:36	QUV-CM03		Status changed: New: Logged Old: Transmitted	NA
4	11/20/22 10:06	Juarez, Mariana	Phone	Specimen Collected: 1120:C00433S	NA
5	11/20/22 10:06	Juarez, Mariana	Phone	Order is collected	NA
6	11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA
7	11/20/22 10:19	QUV-CM03	QUV-CM03	Start time edited: New: 10:05 Old: 09:57	NA
8	11/20/22 10:19	QUV-CM03	QUV-CM03	Status changed: New: In Process Old: Logged	NA
9	11/20/22 10:48	QUV-CM03	QUV-CM03	Status changed: New: Completed Old: In Process	NA

Hematology 221120-093626248 Completed 11/21/22 06:15 AM Abidali, Mounstapha, DO Vandemark, Joann M  
**Complete Blood Count/Auto diff** **Order Source:** Re-enter Orders  
**Stop Reason:** Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA
3 11/21/22 00:01	QUV-BG19	QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
4 11/21/22 00:05	QUV-CM03	QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 11/21/22 01:10	QUV-CM03	QUV-CM03	Status changed: New: In Process	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
				Old: Logged	
				New: 06:15	
				Old: 05:00	
				New: Completed	
				Old: In Process	

6	11/21/22 06:35	QUV-CM03	Start Time edited:	NA
			New: 06:15	
			Old: 05:00	
			Status changed:	
			New: Completed	
			Old: In Process	

7	11/21/22 07:27	QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Chemistry	221120-093626263	Completed	11/21/22 06:15	Abidalli, Moustapha, DO	Vandemark, Joann M
Magnesium				AM	Order Source: Re-enter Orders

Stop Reason: Completed by Lis

Specimen Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA
3 11/21/22 00:01		QUV-BGI9	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/21/22 00:05		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
5 11/21/22 01:10		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
6 11/21/22 06:35		QUV-CM03	Start Time edited:	NA
			New: 06:15	
			Old: 05:00	
			Status changed:	
			New: Completed	
			Old: In Process	
7 11/21/22 07:39		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

Page: 359 of 550

Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Chemistry

221120-0936262791 Completed 11/21/22 06:15

Abidali, Moustapha, DO

Vandemark, Joann M

Phosphorus

AM

Order Source: Re-enter Orders

Stop Reason: Completed by LIS

Specimen

Send someone from the department to collect

Date & Time	User	Device	Event	Acknowledged
11/20/22 09:36	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
11/20/22 09:36	Vandemark, Joann M	Desktop	Order is Entered	Y
11/20/22 10:17	Vandemark, Joann M	Desktop	Order acknowledged	NA
11/21/22 00:01		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
11/21/22 00:05		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
11/21/22 01:10		QUV-CM03	Status changed:	NA
			New: In Process	
			Old: Logged	
11/21/22 06:35		QUV-CM03	Start time edited:	NA
			New: 06:15	
			Old: 05:00	
11/21/22 07:39		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	
Bedside Testing 221120-111530759 Completed 11/20/22 11:09 Ashouri, Anousheh, MD Vandemark, Joann M				
Glucose (Bedside) Routine				
Stop Reason: Completed by LIS Order Source:				
Date & Time	User	Device	Event	Acknowledged
11/20/22 11:15	Vandemark, Joann M	QUV-CM03	No Signature is Necessary	NA
11/20/22 11:15	Vandemark, Joann M	QUV-CM03	Order is Entered	NA
11/20/22 11:16		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	



Patient Order Summary

Page: 360 of 550

Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category

Order

Status

Start

Ord Provider

Entered By

Medications 221120-111915306 Completed 11/20/22 11:18

Rizvi,Abid A, MD

Vandemark, Joann M

Cathflo Activase

Order Source: Telephone Orders - Read Back

Stop Reason: Reached Stop Date

Medication Alteplase [Cathflo Activase] Dose 2 MG Per

Route	Frequency	Sched	PRN Reason	Days	Hours	Total Doses	Clinical Indication
INTRACATH	ONCE	ONE					
Stop Date/Time: 11/20/22 11:19							
Discontinued: 11/20/22 11:19							

Dose Instruction: Reconstitute each vial with 2.2 ml sterile water. Retain in occluded catheter for 0.5 to 2 hours.  
Label Comments: clotted picc line

Date & Time	User	Device	Event	Acknowledged
11/20/22 11:19	Vandemark, Joann M	Desktop	Signature is Necessary	Y
11/20/22 11:19	Vandemark, Joann M	Desktop	Order is Entered	Y
11/20/22 11:19		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
11/20/22 11:19		QUV-CM03	Order Type edited:	Y
			New: MED	
			Old:	
11/20/22 11:19		QUV-CM03	Status changed:	NA
			New: Logged	
			Old: Transmitted	
11/20/22 11:32	Dam, Quang Nghi	QUV-CM03	Status changed:	NA
			New: Pha Verified	
			Old: Logged	
11/20/22 11:32		QUV-CM03	Status changed:	Y
			New: Completed	
			Old: Pha Verified	
11/20/22 12:06	Vandemark, Joann M	Desktop	Order acknowledged	NA
11/21/22 00:36	Rizvi,Abid A, MD	QUV-BG19	Order is Signed by Rizvi,Abid A, MD	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Miscellaneous	O 221120-141046649	Transmitted	11/20/22 12:08	Ashouri, Anousheh, MD	Vandemark, Joann M
Pharmacy Missing Med Slip				NOW	Order Source: Nursing Orders

Requesting Person: RAMITJOA  
 Extension: 29084

Please send the following medication(s) CATHFLO

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 12:09	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/20/22 12:09	Vandemark, Joann M	Desktop	Order is Entered	Y
1 11/20/22 12:09	Vandemark, Joann M	Desktop	Reflex Set: Pharmacy Missing Med generated	Y
2 11/20/22 12:09		QUV-BG19	Queued to destination:	NA
			New: QPHARMP2 #3527267	
			OLD:	
3 11/20/22 12:09		QUV-BG19	Status changed:	NA
			New: Transmitted	
			Old: Verified	
4 11/20/22 12:14	Vandemark, Joann M	Desktop	Order acknowledged	NA

Bedside Testing 221120-141046649 Completed 11/20/22 14:01 Ashouri, Anousheh, MD Vandemark, Joann M

Glucose (Bedside) Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 14:10	Vandemark, Joann M	QUV-CM03	No Signature is Necessary	NA
1 11/20/22 14:10	Vandemark, Joann M	QUV-CM03	Order is Entered	NA
2 11/20/22 14:11		QUV-CM03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221120-180052780 Completed 11/20/22 17:50 Ashouri, Anousheh, MD Vandemark, Joann M

Glucose (Bedside) Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
Continued on Next Page				



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/20/22 18:00	Vandemark, Joann M	11/20/22 18:00	QUV-CH03	NA
1	11/20/22 18:00	Vandemark, Joann M	11/20/22 18:00	QUV-CH03	NA
2	11/20/22 18:01		11/20/22 18:01	QUV-CH03	NA

Bedside Testing 221120-215049650 Completed 11/20/22 21:42

Ashourli, Anousheh, MD

Chow, Kristin

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/20/22 21:50	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
1 11/20/22 21:50	Chow, Kristin	QUV-CH03	Order is Entered	NA
2 11/20/22 21:51		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221121-025554513 Completed 11/21/22 02:44

Ashourli, Anousheh, MD

Chow, Kristin

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 02:55	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
1 11/21/22 02:55	Chow, Kristin	QUV-CH03	Order is Entered	NA
2 11/21/22 02:55		QUV-CH03	Status changed:	NA
			New: Completed	
			Old: In Process	

Bedside Testing 221121-064050184 Completed 11/21/22 06:33

Ashourli, Anousheh, MD

Chow, Kristin

Glucose (Bedside)

Routine

Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 06:40	Chow, Kristin	QUV-CH03	No Signature is Necessary	NA
1 11/21/22 06:40	Chow, Kristin	QUV-CH03	Order is Entered	NA
2 11/21/22 06:41		QUV-CH03	Status changed:	NA

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category**      **Order**      **Status**      **Start**      **Ord Provider**      **Entered By**

Ultrasound      221121-084753303      Cancelled      11/21/22 08:47      Lau, Tsang, MD      Lau, Tsang, MD  
**US abdomen limited**      **Stop Reason:** Changed to 11/21 0847 US / ABDOM      **Order Source:** Provider  
**Mode Of Transportation**      Portable      **Reason For Exam**      LFT elevation  
**Mode of Transport**      Portable

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 08:47	Lau, Tsang, MD	QTCUK101	Order is Entered and Signed	Y
2 11/21/22 08:48		QUV-BG19	Status changed: New: Transmitted	NA
3 11/21/22 08:48		QUV-CM03	Old: Verified Query Mode Of Transportation edited: New: Portable Old:	NA
4 11/21/22 08:48		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 11/21/22 08:49	Han, Xueqing	QUV-CM03	Copied to US abdomen complete 221121-084905924	NA
6 11/21/22 08:49	Han, Xueqing	QUV-CM03	Status changed: New: Cancelled Old: Logged	Y
7 11/21/22 09:42	Vandemark, Joann M	Desktop	Order acknowledged	NA

Ultrasound      221121-084905924      Resulted      11/21/22 08:47      Lau, Tsang, MD      Lau, Tsang, MD  
**US abdomen complete**      **Order Source:** Provider

**Mode Of Transportation**      Portable  
**Reason For Exam**      LFT elevation

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 08:49	Han, Xueqing	QUV-CM03	Order created because of edit(s)	Y

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego,Claudio H

QH0054940416 Lyons, Kathleen A  
61/F  
Attending: Lau, Tsang, MD  
Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
Account Number: QH0054940416  
Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
1	11/21/22 08:49	Han, Xueqing	QUV-CH03	Copied from US abdomen limited Routine 221121-084753303	Y
2	11/21/22 08:49	Han, Xueqing	QUV-CH03	Order is Signed by Lau, Tsang, MD	Y
3	11/21/22 09:42	Vandemark, Joann M	Desktop	Order acknowledged	NA
4	11/21/22 17:22	Saez, Letisia	QUV-CH03	Status changed:	NA
				<b>New:</b> Taken	
				<b>Old:</b> Logged	
5	11/21/22 17:53		QUV-CH03	Status changed:	NA
				<b>New:</b> Resulted	
				<b>Old:</b> Taken	

Bedside Testing 221121-103044712 Completed 11/21/22 10:22 Lau, Tsang, MD Vandemark, Joann M  
Glucose (Bedside) Routine Order Source:

Stop Reason: Completed by Lis

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 10:30	Vandemark, Joann M	QUV-CH03	No Signature is Necessary	NA
1 11/21/22 10:30	Vandemark, Joann M	QUV-CH03	Order is Entered	NA
2 11/21/22 10:31		QUV-CH03	Status changed:	NA
			<b>New:</b> Completed	
			<b>Old:</b> In Process	

Medications 221121-124355050 Completed 11/21/22 12:43 Batou, Augen, DO Yang, David, PharmD

Peptic Stop Reason: Completed by Pha Order Source: Protocol Orders (Sig Required)

Medication	Dose	Per	Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
Famotidine [Pepcid]	20 MG		PO	BID	SCH				

Stop Date/Time:  
Discontinued: 11/21/22 13:20

Label Comments: IV TO MG PER PROTOCOL

Date & Time User Device Event Acknowledged

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Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
4	11/21/22 14:19	Vandemark, Joann M	11/21/22 12:43	Lau, Tsang, MD	Yang, David, PharmD
Medications	221121-124324768	Completed	11/21/22 12:43		Order Source: Provider
Norvasc					
Stop Reason: Completed by Pha					
Medication		Dose	Per	Days Hours	Total Doses
amlodipine [Norvasc]		5 MG			
Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses
PO	DAILY	SCH			
Stop Date/Time: Discontinued: 11/21/22 13:20					
Date & Time	User	Device	Event	Acknowledged	
11/21/22 12:43	Yang, David, PharmD	QUV-CH03	No Signature is Necessary	Y	
11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y	
11/21/22 13:20	Knapp, Sandy A, PharmD	QUV-CH03	Copied to Norvasc 221121-132033213	Y	
11/21/22 13:20	Knapp, Sandy A, PharmD	QUV-CH03	Status changed:	Y	
New: Completed					
Old: Pha Verified					
4	11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA
Medications 221121-124337487 Completed 11/21/22 12:43 Kassir, Alexander, MD Yang, David, PharmD					
Order Source: Verbal Orders- Read Back					
Tylenol Stop Reason: Completed by Pha					
Medication Acetaminophen [Tylenol] Dose 650 MG Per					
Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses
PO	Q6H	PRN	Pain Or Fever (>100.4)		
Stop Date/Time: Discontinued: 11/21/22 13:15					
Label Comments: Maximum acetaminophen (in any form) allowable in 24 hours is 4gm.					
Continued on Next Page					



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046

61/F

Attending: Lau, Tsang, MD

Account Number: QH0054940416

Reason: Hydrocephalus

Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
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Date & Time	User	Device	Event	Acknowledged	
1 11/21/22 12:43	Yang, David, PharmD	QUV-CH03	No Signature is Necessary	Y	
1 11/21/22 12:43	Yang, David, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y	
2 11/21/22 13:15	Knapp, Sandy A, PharmD	QUV-CH03	Copied to Tylenol Liquid 221121-131515778	Y	
3 11/21/22 13:15	Knapp, Sandy A, PharmD	QUV-CH03	Status changed:	Y	
			<b>New:</b> Completed		
			<b>Old:</b> Pha Verified		
4 11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA	
5 11/22/22 13:34	Kassar, Alexander, MD	QUV-BG19	Order is Signed by Kassar, Alexander, MD	NA	
Medications	221121-12425863	Completed	11/21/22 12:44	Young, Richard M, MD	Yang, David, PharmD

Sodium Chloride  
Stop Reason: Completed by Pha  
Order Source: Verbal Orders- Read Back

Medication	Dose	Par	Days	Hours	Total Doses	Clinical Indication
Sodium Chloride	1 GM					

Route Frequency Sched PRN Reason  
 PO TID SCH  
 Stop Date/Time:  
 Discontinued: 11/21/22 13:21

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 12:44	Yang, David, PharmD	QUV-CH03	No Signature is Necessary	Y
1 11/21/22 12:44	Yang, David, PharmD	QUV-CH03	Order is Entered in Pharmacy	Y
2 11/21/22 13:21	Knapp, Sandy A, PharmD	QUV-CH03	Copied to Sodium Chloride 221121-132155123	Y
3 11/21/22 13:21	Knapp, Sandy A, PharmD	QUV-CH03	Status changed:	Y
			<b>New:</b> Completed	
			<b>Old:</b> Pha Verified	
4 11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA
5 12/06/22 10:44	Young, Richard M, MD	QUV-BG19	Order is Signed by Young, Richard M, MD	NA



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A  
 61/F  
 Attending: Lau, Tsang, MD  
 Reason: Hydrocephalus

Location: Q 1 Intensive Care Unit

Medical Record Number: MR01483046  
 Account Number: QH0054940416  
 Registration: 10/18/22

Category	Order	Status	Start	Ord Provider	Entered By
Medications	221121-124850014	Completed	11/21/22 13:00	Lau, Tsang, MD	Vandemark, Joann M
<b>Route Change - PO to G-Tube - Per Pharmacy</b>					
<b>Stop Reason: DC'd by Discharge</b>					
<b>Order Source: Protocol Orders (Sig Required)</b>					

**Medication**  
 PO to G-Tube - Rx Consult [Route 1 EACH  
 Change - PO to G-Tube - Per Pharmacy]

**Route** Frequency Sched PRN Reason  
 MISCELLANEOUS PROTOCOL SCH

Days Hours Total Doses

Clinical Indication

Stop Date/Time:  
 Discontinued: 12/02/22 10:08

Label Comments: PATIENT HAS PEG1

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 12:48	Vandemark, Joann M	Desktop	Signature is Necessary	Y
1 11/21/22 12:48	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/21/22 12:48		QUV-BG19	Status changed: New: Transmitted Old: Verified	NA
3 11/21/22 12:49		QUV-CM03	Order Type edited: New: ZMISC Old:	Y
4 11/21/22 12:49		QUV-CM03	Status changed: New: Logged Old: Transmitted	NA
5 11/21/22 13:14	Knapp, Sandy A, PharmD	QUV-CM03	Status changed: New: Pha Verified Old: Logged	NA
6 11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA
7 11/21/22 18:03	Lau, Tsang, MD	QUV-BG19	Order is Signed by Lau, Tsang, MD	NA
8 12/02/22 10:08		QUV-CM03	Status changed: New: Completed Old: Pha Verified	N



Patient Order Summary

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Date: 12/07/22 02:56

User: Gallego, Claudio H

QH0054940416 Lyons, Kathleen A **Location:** Q 1 Intensive Care Unit **Medical Record Number:** MR01483046  
 61/F **Attending:** Lau, Tsang, MD **Account Number:** QH0054940416  
**Reason:** Hydrocephalus **Registration:** 10/18/22

**Category** Order **Status** **Start** **Ord Provider** **Entered By**  
 Routine Care 221121-125052395 Completed 11/21/22 12:50 Ball, Benjamin Vandemark, Joann M  
**Clinical Parameters** . ONGOING **Order Source:** Re-enter Orders

**Stop Reason:** Discharged

**Intervention Text** SBP<160

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 12:50	Vandemark, Joann M	Desktop	No Signature is Necessary	Y
1 11/21/22 12:50	Vandemark, Joann M	Desktop	Order is Entered	Y
2 11/21/22 12:50		QUV-BG19	Status changed:	NA
			<b>New:</b> In Process	
			<b>Old:</b> Verified	
3 11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA
4 12/02/22 10:08	Ramos, Jessica	Desktop	Status changed:	NA
			<b>New:</b> completed	
			<b>Old:</b> In Process	

**Medications** 221121-131515778 Completed 11/21/22 13:14 **Order Source:** Verbal Orders- Read Back  
 Kasssar, Alexander, MD Knapp, Sandy A, PharmD

**Tylenol Liquid**

**Stop Reason:** DC'd by Discharge

**Medication** Acetaminophen Liquid [Tylenol Liquid] **Dose** 650 MG **Per**

Route	Frequency	Sched	PRN Reason	Days Hours	Total Doses	Clinical Indication
G-TUBE	Q6H	PRN	Pain Or Fever (>100.4)			
<b>Stop Date/Time:</b>						
Discontinued: 12/02/22 10:08						

Date & Time	User	Device	Event	Acknowledged
1 11/21/22 13:15	Knapp, Sandy A, PharmD	QUV-CM03	No Signature is Necessary	Y
1 11/21/22 13:15	Knapp, Sandy A, PharmD	QUV-CM03	Order is Entered in Pharmacy	Y
2 11/21/22 14:19	Vandemark, Joann M	Desktop	Order acknowledged	NA
3 11/22/22 13:34	Kasssar, Alexander, MD	QUV-BG19	Order is Signed by Kasssar, Alexander, MD	NA
4 12/02/22 10:08		QUV-CM03	Status changed:	N

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