

Visit Summary

for 02da79e5-c136-4b8e-bd08-89149abd7fd9

OID: 1.3.6.1.4.1.22812.40

Dates

From: 08/29/2022, 16:59

To: 08/31/2022, 14:48

Discharge Disposition: to home or self-care (routine discharge)

Patient Info

GORDON GRAHAM

3042 SAVAGE RD

SARASOTA, FL 34231

Tel: +1-(941)321-5252

CARE TEAM

Pail Dennis S MD (*primary care physician*)

Lyons Jeffrey S DO (*admitting physician*)

Browning Robert MD (*consulting physician / surgeon*)

Rech Alicia E DO (*ER attending physician*)

Travis Regina DO (*hospitalist*)

Reason For Visit

SMALL BOWEL OBSTRUCTION

[source: <https://myhealthone.com/> - details available to team providers from hospital records]



8-30-2022

Procedures

- CT ABDOMEN/PELVIS W/ CONT

Result: HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING DEPARTMENT Phys: Browning, Robert MD 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex: M SARASOTA, FL 34233 Acct: D19896705 Loc: D.317 1 PHONE #: (941) 342-1060 Exam Date: 08/30/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 EXAMS: REASON FOR EXAM?: 001879931 CT ABDOMEN/PELVIS W/ CONT sbo INDICATION: sbo SMALL BOWEL OBSTRUCTION EXAMINATION: CT ABDOMEN AND PELVIS WITH CONTRAST - CT Abdomen And Pelvis W/ Contrast Injection TECHNIQUE: Helically acquired images were obtained of the abdomen and pelvis following IV contrast. A radiation dose optimization technique was used for this scan. IV Contrast dosage and agent: Oral contrast: Small amount of contrast is present in the small and distal bowel. COMPARISON: 08/29/2022

FINDINGS: LOWER CHEST: Lung bases are clear. No cardiomegaly or pericardial effusion. LIVER: Homogeneous. No focal mass. GALLBLADDER AND BILIARY TREE: Unchanged cholelithiasis. No gallbladder distension or wall edema. No intra- or extrahepatic biliary ductal dilation. PANCREAS: No focal cystic or solid mass. SPLEEN: Normal size without focal cystic or solid mass. ADRENAL GLANDS: No nodules. KIDNEYS AND URETERS: Normal renal size and position. There is evidence of nonobstructive multiple stones in the lower aspect of the left kidney, additional nonobstructive stone in mid pole of the left. On the right no stones are seen. There is no evidence of hydronephrosis on either side. No distal ureter stone. PERITONEUM: No ascites or free air. No other fluid collection. BOWEL: No evidence of acute appendicitis. The stomach is decompressed at, there is a nasogastric tube in place. Patient is status post a colectomy. There is evidence of an ileostomy in the right lower quadrant. There is evidence of mild distention of mid and distal small bowel loops prior to the ileostomy. There is PAGE 1 Signed Report (CONTINUED) HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING DEPARTMENT Phys: Browning, Robert MD 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex: M SARASOTA, FL 34233 Acct: D19896705 Loc: D.317 1 PHONE #: (941) 342-1060 Exam Date: 08/30/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 EXAMS: REASON FOR EXAM?: 001879931 CT ABDOMEN/PELVIS W/ CONT sbo evidence of an ileostomy hernia with multiple nondistended loops of small bowel. The distended loops of small bowels in the abdomen extends up to but not including the stomal hernia loops. They stoma is through a mesh defect. LYMPH NODES: No enlarged mesenteric or retroperitoneal lymph nodes. VESSELS: Aorta is non-dilated. URINARY BLADDER: No bladder stones are seen, normal bladder. REPRODUCTIVE ORGANS: No pelvic masses. ABDOMINAL WALL: No discrete abdominal or pelvic wall hernia. BONES: No lytic or blastic abnormality. IMPRESSION: Small bowel obstruction leading up to the stoma, with a decompressed small bowel loops within the stoma hernia. Therefore, the are show obstruction is at the stoma level. Post colectomy. Cholelithiasis and nonobstructive multiple left kidney stones. ** Electronically Signed by M.D. ALBERTO M. RIGHI ** ** on 08/30/2022 at 1352 ** Reported and signed by: ALBERTO M. RIGHI, M.D. CC: Browning, Robert MD; Pail,Dennis S MD Dictated Date/Time: 08/30/2022 (1352) Technologist: KRISTINA L.BELANGIA RT.(R)(CT); ... Transcribed Date/Time: 08/30/2022 (1352) Transcriptionist: RAD.VR Printed Date/Time: 08/30/2022 (1353) BATCH NO: N/A PAGE 2 Signed Report Date: 30-Aug-2022 13:52

Status: Completed

- CHEST, PORTABLE

Result: HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING
DEPARTMENT Phys: Lyons, Jeffrey S DO 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex:
M SARASOTA, FL 34233 Acct: D19896705 Loc: D.317 1 PHONE #: (941) 342-1060 Exam Date:
08/29/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 EXAMS:
REASON FOR EXAM?: 001879852 CHEST, PORTABLE Tube placement INDICATION: Tube
placement SMALL BOWEL OBSTRUCTION EXAMINATION/TECHNIQUE: X-RAY - XR Chest 1 View
COMPARISON: None. _____ FINDINGS:
LINES/DEVICES: Nasogastric tube is in the stomach. LUNGS: No consolidation, edema or
effusion. No pneumothorax. MEDIASTINUM AND CARDIOVASCULAR STRUCTURES: Cardiac
silhouette not enlarged. Central airways and mediastinal contour are unremarkable. BONES
AND SOFT TISSUES: Unremarkable. IMPRESSION: No radiographic evidence of acute
cardiopulmonary disease. Nasogastric tube in the stomach. ** Electronically Signed by M.D.
ALBERTO M. RIGHI ** ** on 08/30/2022 at 0814 ** Reported and signed by: ALBERTO M.
RIGHI, M.D. CC: Pail, Dennis S MD Dictated Date/Time: 08/30/2022 (0814) Technologist:
BETHANY P CHRISTMAN RT (R) Transcribed Date/Time: 08/30/2022 (0814) Transcriptionist:
RAD.VR Printed Date/Time: 08/30/2022 (0815) BATCH NO: N/A PAGE 1 Signed Report Date:
30-Aug-2022 8:14
Status: Completed

- CT ABDOMEN/PELVIS W/O CONT

Result: HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING DEPARTMENT Phys: Rech, Alicia E DO 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex: M SARASOTA, FL 34233 Acct: D19896705 Loc: D.EDIP1 7 PHONE #: (941) 342-1060 Exam Date: 08/29/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 ** Report Has Been Amended ** EXAMS: REASON FOR EXAM?: 001879804 CT ABDOMEN/PELVIS W/O CON abd pain Addendum - 08/29/2022 SIGNED 08/29/2022 ADDENDUM: 001879804 CT/CTABDPELWO STUDY: CT ABDOMEN AND PELVIS WITHOUT CONTRAST REASON FOR EXAM: Male, 66 years old. abd pain ABD PAIN TECHNIQUE: Transaxial images were obtained from the dome of the diaphragm to the symphysis pubis without oral contrast. No intravenous contrast was given to the patient. Sagittal and coronal images were reconstructed. Individualized dose optimization techniques were used for this CT. COMPARISON: None.

FINDINGS: Evaluation of the organ and vascular structures is limited by lack of intravenous contrast. No consolidative airspace opacities are seen. No discrete pleural effusion is seen. The cardiac silhouette is at the upper limits of normal in size. Coronary calcifications are seen. The visualized hepatic parenchyma is mildly low in attenuation. No calcific cholelithiasis is seen. Cholelithiasis is seen. The spleen and pancreas are unremarkable. The bilateral adrenal glands are unremarkable. Both kidneys demonstrate no evidence of hydronephrosis. There is a punctate 6 cm calculus seen at the left renal pelvis. There are additional left renal calculi present. No gross right renal calculi are seen. No ureteral calculi are apparent. The stomach is not well distended. There are dilated loops of small bowel. There is a right-sided ostomy noted with a parastomal hernia present. The transition point is likely a parastomal hernia the right lower pelvic wall. There is nonspecific swirling within the midline mesentery. There are post surgical changes likely from subtotal colectomy noted. PAGE 1 Signed Report (CONTINUED) HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING DEPARTMENT Phys: Rech, Alicia E DO 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex: M SARASOTA, FL 34233 Acct: D19896705 Loc: D.EDIP1 7 PHONE #: (941) 342-1060 Exam Date: 08/29/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 ** Report Has Been Amended ** EXAMS: REASON FOR EXAM?: 001879804 CT ABDOMEN/PELVIS W/O CON abd pain The abdominal aorta is within normal limits in size. There is moderate atherosclerotic calcification of aorta and into the iliac arteries. The IVC is unremarkable. No suspicious abdominal or pelvic lymphadenopathy is seen. There is no evidence to suggest pneumoperitoneum. Trace free intraperitoneal fluid is seen. The urinary bladder is not well distended, and appears grossly unremarkable. No acute osseous abnormality is seen. There are multilevel degenerative changes seen at the lumbar spine. There is reticulation within the subcutaneous soft tissues suggesting edema and/or cellulitis.

IMPRESSION: There are dilated loops of small bowel concerning for small bowel obstruction. There is some swirling within the mesentery. The transition point may be a parastomal hernia at the right lower pelvic wall. Hepatic steatosis N.B. : Marissa Rizzo , PA, confirmed on 08/29/2022 17:07:58 (ET) that the healthcare facility has received the radiology report. ** Electronically Signed by D.O. LINDA ARMSTRONG ** ** on 08/29/2022 at 1631 ** Reported and signed by: LINDA ARMSTRONG, D.O. Dictated Date/Time: 08/29/2022 (1631) Transcribed: 08/29/2022 (1631) RAD.VR Report **ACR Level 3 findings have been noted. An addendum which confirms receipt of the report will follow. ** PAGE 2 Signed Report (CONTINUED) HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING DEPARTMENT Phys: Rech, Alicia E DO 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex: M SARASOTA, FL 34233 Acct: D19896705 Loc: D.EDIP1 7 PHONE #: (941) 342-1060 Exam Date: 08/29/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 **

Report Has Been Amended ** EXAMS: REASON FOR EXAM?: 001879804 CT ABDOMEN/PELVIS W/O CON abd pain STUDY: CT ABDOMEN AND PELVIS WITHOUT CONTRAST REASON FOR EXAM: Male, 66 years old. abd pain ABD PAIN TECHNIQUE: Transaxial images were obtained from the dome of the diaphragm to the symphysis pubis without oral contrast. No intravenous contrast was given to the patient. Sagittal and coronal images were reconstructed. Individualized dose optimization techniques were used for this CT. COMPARISON: None.

FINDINGS: Evaluation of the organ and vascular structures is limited by lack of intravenous contrast. No consolidative airspace opacities are seen. No discrete pleural effusion is seen. The cardiac silhouette is at the upper limits of normal in size. Coronary calcifications are seen. The visualized hepatic parenchyma is mildly low in attenuation. No calcific cholelithiasis is seen. Cholelithiasis is seen. The spleen and pancreas are unremarkable. The bilateral adrenal glands are unremarkable. Both kidneys demonstrate no evidence of hydronephrosis. There is a punctate 6 cm calculus seen at the left renal pelvis. There are additional left renal calculi present. No gross right renal calculi are seen. No ureteral calculi are apparent. The stomach is not well distended. There are dilated loops of small bowel. There is a right-sided ostomy noted with a parastomal hernia present. The transition point is likely a parastomal hernia the right lower pelvic wall. There is nonspecific swirling within the midline mesentery. There are post-surgical changes likely from subtotal colectomy noted. The abdominal aorta is within normal limits in size. There is moderate atherosclerotic calcification of aorta and into the iliac PAGE 3 Signed Report (CONTINUED) HCA FL Sarasota Doc Hosp Name: GRAHAM,GORDON C DIAGNOSTIC IMAGING DEPARTMENT Phys: Rech, Alicia E DO 5731 BEE RIDGE ROAD DOB: 05/31/1956 Age: 66 Sex: M SARASOTA, FL 34233 Acct: D19896705 Loc: D.EDIP1 7 PHONE #: (941) 342-1060 Exam Date: 08/29/2022 Status: ADM IN FAX #: (941) 371-3941 Radiology No: Unit No: D000383395 ** Report Has Been Amended ** EXAMS: REASON FOR EXAM?: 001879804 CT ABDOMEN/PELVIS W/O CON abd pain arteries. The IVC is unremarkable. No suspicious abdominal or pelvic lymphadenopathy is seen. There is no evidence to suggest pneumoperitoneum. Trace free intraperitoneal fluid is seen. The urinary bladder is not well distended, and appears grossly unremarkable. No acute osseous abnormality is seen. There are multilevel degenerative changes seen at the lumbar spine. There is reticulation within the subcutaneous soft tissues suggesting edema and/or cellulitis.

IMPRESSION: There are dilated loops of small bowel concerning for small bowel obstruction. There is some swirling within the mesentery. The transition point may be a parastomal hernia at the right lower pelvic wall. Hepatic steatosis ** Electronically Signed by D.O. LINDA ARMSTRONG ** ** on 08/29/2022 at 1631 ** Reported and signed by: LINDA ARMSTRONG, D.O. CC: Pail, Dennis S MD Dictated Date/Time: 08/29/2022 (1631) Technologist: FAYE E. MANZ, R.T.(R)(CT); ... Transcribed Date/Time: 08/29/2022 (1631) Transcriptionist: RAD.VR Printed Date/Time: 08/29/2022 (1714) BATCH NO: N/A PAGE 4 Signed Report Date: 29-Aug-2022 16:31 Status: Completed

Results

GLUCOSE METER Ordered On: 31-Aug-2022 11:34 Comments: Nurse Notified
31-Aug-2022 11:40 GLUCOSE METER 270 mg/dL (High) Range: 65 mg/dL - 110 mg/dL
Comments: TEST PERFORMED BY: INFCE

BASIC METABOLIC PANEL Ordered On: 31-Aug-2022 5:23
31-Aug-2022 6:24 ANION GAP 11 mmol/L (Normal) Range: 4 mmol/L - 15 mmol/L
BUN/CREATININE RATIO 15 (Normal) Range: 9 - 25
UREA NITROGEN 24 mg/dL (High) Range: 7 mg/dL - 21 mg/dL
CALCIUM 8.6 mg/dL (Normal) Range: 8.6 mg/dL - 10.6 mg/dL
CHLORIDE 104 mmol/L (Normal) Range: 101 mmol/L - 109 mmol/L
CARBON DIOXIDE 28 mmol/L (Normal) Range: 22 mmol/L - 31 mmol/L
CREATININE 1.59 mg/dL (High) Range: 0.7 mg/dL - 1.5 mg/dL
est GLOMERULAR FILTRATION RATE 44 mL/min (Low) Range: 60 mL/min - 0
Comments: Note: Persistent reduction for 3 months or more in an eGFR less than 60 mL/min/1.73 m² defines CKD. Patients with eGFR values greater than or equal to 60 mL/min/1.73 m² may also have CKD if evidence of persistent proteinuria is present.

GLUCOSE 190 mg/dL (High) Range: 70 mg/dL - 110 mg/dL
POTASSIUM 3.9 mmol/L (Normal) Range: 3.6 mmol/L - 5 mmol/L
SODIUM 139 mmol/L (Normal) Range: 136 mmol/L - 145 mmol/L

CBC-HEMOGRAM W PLAT NO DIFF Ordered On: 31-Aug-2022 5:23
31-Aug-2022 6:18 HEMATOCRIT 45.5 % (Normal) Range: 40.1 % - 51 %
HGB 14.5 g/dL (Normal) Range: 13.7 g/dL - 17.5 g/dL
MEAN CORPUSCULAR HEMOGLOBIN 27.1 pg (Normal) Range: 25.7 pg - 32.2 pg
MEAN CORPUSCULAR HGB CONC 31.9 % (Low) Range: 32.3 % - 36.5 %
MEAN CORPUSCULAR VOLUME 85.0 fL (Normal) Range: 79 fL - 92.2 fL
MEAN PLATELET VOLUME 9.6 fL (Normal) Range: 9.4 fL - 12.4 fL
PLATELET COUNT 271 {10³/uL} (Normal) Range: 150 {10³/uL} - 450 {10³/uL}
RBC 5.35 {10⁶/uL} (Normal) Range: 4.63 {10⁶/uL} - 6.08 {10⁶/uL}
RDW 15.2 % (High) Range: 11.6 % - 14.4 %
WBC 6.6 {10³/uL} (Normal) Range: 4 {10³/uL} - 10.5 {10³/uL}

GLUCOSE METER Ordered On: 31-Aug-2022 4:03
31-Aug-2022 4:09 GLUCOSE METER 178 mg/dL (High) Range: 65 mg/dL - 110 mg/dL
Comments: TEST PERFORMED BY: INFCE

GLUCOSE METER Ordered On: 30-Aug-2022 16:34 Comments: Nurse Notified
30-Aug-2022 16:40 GLUCOSE METER 173 mg/dL (High) Range: 65 mg/dL - 110 mg/dL
Comments: TEST PERFORMED BY: INFCE

GLUCOSE METER Ordered On: 30-Aug-2022 12:48 Comments: Capillary sample
30-Aug-2022 12:54 GLUCOSE METER 244 mg/dL (High) Range: 65 mg/dL - 110 mg/dL
Comments: TEST PERFORMED BY: INFCE

GLUCOSE METER Ordered On: 30-Aug-2022 9:58 Comments: Nurse Notified
30-Aug-2022 10:04 GLUCOSE METER 205 mg/dL (High) Range: 65 mg/dL - 110 mg/dL
Comments: TEST PERFORMED BY: INFCE

GLUCOSE METER Ordered On: 30-Aug-2022 7:04
30-Aug-2022 7:10 GLUCOSE METER 202 mg/dL (High) Range: 65 mg/dL - 110 mg/dL
Comments: TEST PERFORMED BY: INFCE

COMPREHENSIVE METABOLIC PANEL Ordered On: 30-Aug-2022 5:25
30-Aug-2022 7:17 ALBUMIN/GLOBULIN RATIO 0.9 (Low) Range: 1.3 - 2.8
ANION GAP 18 mmol/L (High) Range: 4 mmol/L - 15 mmol/L

ALBUMIN 3.5 g/dL (Normal) Range: 3.5 g/dL - 5 g/dL
ALKALINE PHOSPHATASE 83 U/L (Normal) Range: 38 U/L - 126 U/L
ALANINE AMINOTRANSFERASE 15 U/L (Normal) Range: 7 U/L - 56 U/L
ASPARTATE AMINOTRANSFERASE 14 U/L (Normal) Range: 5 U/L - 40 U/L
BUN/CREATININE RATIO 20 (Normal) Range: 9 - 25
UREA NITROGEN 30 mg/dL (High) Range: 7 mg/dL - 21 mg/dL
CALCIUM 8.9 mg/dL (Normal) Range: 8.6 mg/dL - 10.6 mg/dL
CORRECTED CALCIUM 9.3 mg/dL (Normal) Range: 8.8 mg/dL - 10.5 mg/dL
Comments: Calcium corrected for Albumin.
CHLORIDE 102 mmol/L (Normal) Range: 101 mmol/L - 109 mmol/L
CARBON DIOXIDE 21 mmol/L (Low) Range: 22 mmol/L - 31 mmol/L
CREATININE 1.50 mg/dL (Normal) Range: 0.7 mg/dL - 1.5 mg/dL
est GLOMERULAR FILTRATION RATE 47 mL/min (Low) Range: 60 mL/min - 0
Comments: Note: Persistent reduction for 3 months or more in an eGFR less than 60 mL/min/1.73 m² defines CKD. Patients with eGFR values greater than or equal to 60 mL/min/1.73 m² may also have CKD if evidence of persistent proteinuria is present.
GLOBULIN 4.0 g/dL (High) Range: 2.4 g/dL - 3.2 g/dL
GLUCOSE 193 mg/dL (High) Range: 70 mg/dL - 110 mg/dL
POTASSIUM 4.2 mmol/L (Normal) Range: 3.6 mmol/L - 5 mmol/L
SODIUM 136 mmol/L (Normal) Range: 136 mmol/L - 145 mmol/L
TOTAL BILIRUBIN 2.7 mg/dL (High) Range: 0.2 mg/dL - 1.3 mg/dL
TOTAL PROTEIN 7.5 g/dL (Normal) Range: 6.3 g/dL - 8.2 g/dL
CBC WITH DIFFERENTIAL Ordered On: 30-Aug-2022 5:25
30-Aug-2022 7:03 BASO# 0.02 {10₃/uL} (Normal) Range: 0.01 {10₃/uL} - 0.08 {10₃/uL}
BASO% 0.2 % (Normal) Range: 0.2 % - 1.2 %
EO# 0.19 {10₃/uL} (Normal) Range: 0.04 {10₃/uL} - 0.54 {10₃/uL}
EO% 2.0 % (Normal) Range: 0.8 % - 7 %
HEMATOCRIT 48.4 % (Normal) Range: 40.1 % - 51 %
HGB 15.5 g/dL (Normal) Range: 13.7 g/dL - 17.5 g/dL
IMMATURE GRANS # 0.05 {10₃/uL} (High) Range: 0 {10₃/uL} - 0.03 {10₃/uL}
IMMATURE GRANS % 0.5 % (High) Range: 0 % - 0.4 %
LYMPH# 1.00 {10₃/uL} (Low) Range: 1.32 {10₃/uL} - 3.57 {10₃/uL}
LYMPH% 10.5 % (Low) Range: 21.8 % - 53.1 %
MEAN CORPUSCULAR HEMOGLOBIN 27.0 pg (Normal) Range: 25.7 pg - 32.2 pg
MEAN CORPUSCULAR HGB CONC 32.0 % (Low) Range: 32.3 % - 36.5 %
MEAN CORPUSCULAR VOLUME 84.3 fL (Normal) Range: 79 fL - 92.2 fL
MONO# 1.10 {10₃/uL} (High) Range: 0.3 {10₃/uL} - 0.82 {10₃/uL}
MONO% 11.6 % (Normal) Range: 5.3 % - 12.2 %
MEAN PLATELET VOLUME 9.4 fL (Normal) Range: 9.4 fL - 12.4 fL
NEUT# 7.12 {10₃/uL} (High) Range: 1.78 {10₃/uL} - 5.38 {10₃/uL}
NEUT% 75.2 % (High) Range: 34 % - 67.9 %
PLATELET COUNT 282 {10₃/uL} (Normal) Range: 150 {10₃/uL} - 450 {10₃/uL}
RBC 5.74 {10₆/uL} (Normal) Range: 4.63 {10₆/uL} - 6.08 {10₆/uL}
RDW 15.6 % (High) Range: 11.6 % - 14.4 %
WBC 9.5 {10₃/uL} (Normal) Range: 4 {10₃/uL} - 10.5 {10₃/uL}
GLUCOSE METER Ordered On: 29-Aug-2022 22:20
29-Aug-2022 22:26 GLUCOSE METER 145 mg/dL (High) Range: 65 mg/dL - 110 mg/dL

Comments: TEST PERFORMED BY: INFCE

INFL A B SMR RAPID DETECTION Ordered On: 29-Aug-2022 15:52

29-Aug-2022 17:00 INFLUENZA A NEGATIVE Range: NEGATIVE

INFLUENZA B NEGATIVE Range: NEGATIVE

SPECIMEN TYPE VIRAL NASOPHARYNGEAL

Novel Coronavirus 2019 InHouse Ordered On: 29-Aug-2022 15:52

29-Aug-2022 17:01 Novel Coronavirus 2019 InHouse Negative Range: Negative

Comments: Negative results should be treated as presumptive and, if inconsistent with clinical signs and symptoms or necessary for patient management, should be tested with different authorized or cleared molecular tests. Negative results do not preclude SARS-CoV-2 infection and should not be used as the sole basis for patient management decisions. Negative results should be considered in the context of a patient's recent exposures, history, and the presence of clinical signs and symptoms consistent with COVID-19. The ID NOW COVID-19 has been authorized by the FDA under an emergency use authorization for use by authorized laboratories and patient care settings. The test has been authorized only for the detection of nucleic acid from SARS-CoV-2. Assay Methodology: Isothermal nucleic acid amplification technology

URINALYSIS W/REFLEX CULTURE Ordered On: 29-Aug-2022 14:46 Comments: Indication for culture: Dysuria/Frequency

29-Aug-2022 15:19 COLOR Yellow Range: YELLOW

NITRITES NEGATIVE Range: NEGATIVE

BILE Negative Range: NEGATIVE

BLOOD NEGATIVE Range: NEGATIVE

CLARITY URINE Clear Range: CLEAR

GLUCOSE SEMI-QNT NEGATIVE mg/dL Range: NEGATIVE mg/dL

KETONE NEGATIVE mg/dL Range: NEGATIVE mg/dL

LEUKOCYTE ESTERASE NEGATIVE Range: NEGATIVE

PH, URINE 5.0 (Normal) Range: 5 - 8

U PROTEIN SEMI-QNT 30 mg/dL (Abnormal) Range: NEGATIVE mg/dL

SPECIFIC GRAVITY, URINE 1.020 (Normal) Range: 1.001 - 1.03

UROBILINOGEN URINE Negative {E.U./dL} Range: 0.2 E.U./dL

URINE MICROSCOPIC ONLY Ordered On: 29-Aug-2022 14:46 Comments: Indication for culture: Dysuria/Frequency

29-Aug-2022 15:19 EPITHELIAL CELLS 0-5 /[HPF] Range: 0 /[HPF] - 5 /[HPF]

RBC URINE 0-2 /[HPF] Range: 0 /[HPF] - 2 /[HPF]

WBC URINE 0-2 /[HPF] Range: 0 /[HPF] - 2 /[HPF]

COMPREHENSIVE METABOLIC PANEL Ordered On: 29-Aug-2022 14:34

29-Aug-2022 15:01 ALBUMIN/GLOBULIN RATIO 0.9 (Low) Range: 1.3 - 2.8

ANION GAP 14 mmol/L (Normal) Range: 4 mmol/L - 15 mmol/L

ALBUMIN 3.9 g/dL (Normal) Range: 3.5 g/dL - 5 g/dL

ALKALINE PHOSPHATASE 88 U/L (Normal) Range: 38 U/L - 126 U/L

ALANINE AMINOTRANSFERASE 20 U/L (Normal) Range: 7 U/L - 56 U/L

ASPARTATE AMINOTRANSFERASE 15 U/L (Normal) Range: 5 U/L - 40 U/L

BUN/CREATININE RATIO 17 (Normal) Range: 9 - 25

UREA NITROGEN 28 mg/dL (High) Range: 7 mg/dL - 21 mg/dL

CALCIUM 9.6 mg/dL (Normal) Range: 8.6 mg/dL - 10.6 mg/dL

CORRECTED CALCIUM 9.7 mg/dL (Normal) Range: 8.8 mg/dL - 10.5 mg/dL

Comments: Calcium corrected for Albumin.

CHLORIDE 101 mmol/L (Normal) Range: 101 mmol/L - 109 mmol/L
CARBON DIOXIDE 22 mmol/L (Normal) Range: 22 mmol/L - 31 mmol/L
CREATININE 1.68 mg/dL (High) Range: 0.7 mg/dL - 1.5 mg/dL
est GLOMERULAR FILTRATION RATE 41 mL/min (Low) Range: 60 mL/min - 0
Comments: Note: Persistent reduction for 3 months or more in an eGFR less than 60 mL/min/1.73 m² defines CKD. Patients with eGFR values greater than or equal to 60 mL/min/1.73 m² may also have CKD if evidence of persistent proteinuria is present.
GLOBULIN 4.2 g/dL (High) Range: 2.4 g/dL - 3.2 g/dL
GLUCOSE 126 mg/dL (High) Range: 70 mg/dL - 110 mg/dL
POTASSIUM 4.3 mmol/L (Normal) Range: 3.6 mmol/L - 5 mmol/L
SODIUM 132 mmol/L (Low) Range: 136 mmol/L - 145 mmol/L
TOTAL BILIRUBIN 2.9 mg/dL (High) Range: 0.2 mg/dL - 1.3 mg/dL
TOTAL PROTEIN 8.1 g/dL (Normal) Range: 6.3 g/dL - 8.2 g/dL
LIPASE Ordered On: 29-Aug-2022 14:34
29-Aug-2022 15:01 LIPASE 80 U/L (Normal) Range: 73 U/L - 393 U/L
CBC WITH DIFFERENTIAL Ordered On: 29-Aug-2022 14:34
30-Aug-2022 8:30 BASO# 0.02 {10⁻³/uL} (Normal) Range: 0.01 {10⁻³/uL} - 0.08 {10⁻³/uL}
BASO% 0.2 % (Normal) Range: 0.2 % - 1.2 %
EO# 0.15 {10⁻³/uL} (Normal) Range: 0.04 {10⁻³/uL} - 0.54 {10⁻³/uL}
EO% 1.5 % (Normal) Range: 0.8 % - 7 %
HEMATOCRIT 50.7 % (Normal) Range: 40.1 % - 51 %
HGB 16.1 g/dL (Normal) Range: 13.7 g/dL - 17.5 g/dL
IMMATURE GRANS # 0.07 {10⁻³/uL} (High) Range: 0 {10⁻³/uL} - 0.03 {10⁻³/uL}
IMMATURE GRANS % 0.7 % (High) Range: 0 % - 0.4 %
LYMPH# 1.30 {10⁻³/uL} (Low) Range: 1.32 {10⁻³/uL} - 3.57 {10⁻³/uL}
LYMPH% 12.8 % (Low) Range: 21.8 % - 53.1 %
MEAN CORPUSCULAR HEMOGLOBIN 26.5 pg (Normal) Range: 25.7 pg - 32.2 pg
MEAN CORPUSCULAR HGB CONC 31.8 % (Low) Range: 32.3 % - 36.5 %
MEAN CORPUSCULAR VOLUME 83.4 fL (Normal) Range: 79 fL - 92.2 fL
MONO# 0.92 {10⁻³/uL} (High) Range: 0.3 {10⁻³/uL} - 0.82 {10⁻³/uL}
MONO% 9.1 % (Normal) Range: 5.3 % - 12.2 %
NEUT# 7.66 {10⁻³/uL} (High) Range: 1.78 {10⁻³/uL} - 5.38 {10⁻³/uL}
NEUT% 75.7 % (High) Range: 34 % - 67.9 %
PLATELET COUNT 300 {10³/uL} (Normal) Range: 150 {10³/uL} - 450 {10³/uL}
RBC 6.08 {10⁶/uL} (Normal) Range: 4.63 {10⁶/uL} - 6.08 {10⁶/uL}
RDW 15.3 % (High) Range: 11.6 % - 14.4 %
WHITE BLOOD CELL 10.1 {10³/uL} (Normal) Range: 4 {10³/uL} - 10.5 {10³/uL}
CBC INTERPRETATION Ordered On: 29-Aug-2022 14:34
30-Aug-2022 8:30 CBC INTERPRETATION Comments: Results verified by pathologist.
PABICON,VISITACION H 08/30/22 0830

Vital Signs

31-Aug-2022 3:22

Systolic : 138 mm[Hg]

BP Diastolic 88 mm[Hg]

Respiratory Rate 16

Pulse 72

O2 SAT 97 %

30-Aug-2022 19:16

O2 SAT 97 %

Pulse 87

Respiratory Rate 16

BP Diastolic 79 mm[Hg]

Systolic : 137 mm[Hg]

Temperature 36.8 c

30-Aug-2022 16:55

Systolic : 128 mm[Hg]

BP Diastolic 76 mm[Hg]

Pulse 86

O2 SAT 95 %

30-Aug-2022 7:53

O2 SAT 94 %

Pulse 84

Respiratory Rate 18

BP Diastolic 74 mm[Hg]

Systolic : 142 mm[Hg]

Temperature 36.9 c

30-Aug-2022 3:23

Systolic : 157 mm[Hg]

BP Diastolic 79 mm[Hg]

Pulse 90

O2 SAT 99 %

29-Aug-2022 19:26

BP Diastolic 69 mm[Hg]

O2 SAT 94 %

Respiratory Rate 18

Pulse 80

Systolic : 114 mm[Hg]

Temperature 36.9 c

29-Aug-2022 17:58

Temperature 36.8 c

Systolic : 134 mm[Hg]

Pulse 83

Respiratory Rate 16

O2 SAT 95 %

BP Diastolic 77 mm[Hg]

29-Aug-2022 14:05

BP Diastolic 86 mm[Hg]

O2 SAT 98 %

Pulse 92
Respiratory Rate 17
Systolic : 138 mm[Hg]
Temperature 98.4 f
Height 6.166667 [ft_us]
Weight 156.818 kg
29-Aug-2022 14:05
BMI 44.4 kg/m2

[source: <https://myhealthone.com/> - details available to team providers from hospital records]