

**Holy Cross Hospital**

From: 10-Mar-2003 at 13:55  
 To: 27-Mar-2003 at 18:51

Printed: 06-May-2003 at 09:33  
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**Progress Notes**

03/15 17:59	update	Jennyline Nieva, RN	Patient seen by Dr. Ball and spoken to the son about patients condition. BUN elevated to 41 Dr. Ball notified and tried to insert an NGT/OGT 3x but failed. Patient was ordered to start on tube feeding but no access available. Still on IVF of NS @ 10cc/hr. Will continue to monitor and on same plan of care.
	update	Jennyline Nieva, RN	Patient seen by Dr. Ball and spoken to the son about patients condition. BUN elevated to 41 Dr. Ball notified and tried to insert an NGT/OGT 3x but failed. Patient was ordered to start on tube feeding but no access available. Still on IVF of NS @ 10cc/hr. Will continue to monitor and on same plan of care.
20:51	assessment	Luciana Delca, RN	Assumed pt. care at 19.30. Assessed per unit standards (see assessment flowsheet). Unresponsive, afebrile, vital signs stable. Lungs coarse, O2 sat. 98-99% on 45% vent. Abd. soft, bowel sounds present, good urine output. Will cont. to monitor.
03/16 07:03	update	Luciana Delca, RN	Son called, concerned about pt's nutrition status. Pt. has TPN ordered since yesterday evening which will be started this evening. Attempted NGT placement again, with no success.
11:32	Nutrition Progress Note	Chitua A. Okoh, RDLN, PHD	DIET: NPO Assessment/pxs: 1. Pt is anemic, poor appetite note 2. Possible dehydration 3. Hypokalemia Px w/NGT or OGT placement for TF 4. TPN considered @ this time PLAN: 1. May start Std Central TPN 1L/d @ 42cc/h pending tube placement for TF (1000 Cal, 50g pro) 2. Advance to TF if tube in place, Isosource HN @ goal rate of 62.5cc/h (1800 Cal, 80g pro, 1227cc free water) 3. RD will f/u
11:44	Breath Sounds	anthea e. obrien, rn	Problem: Impaired Airway Clearance Upper Lobes Bilaterally Patient remains on ventilator.
11:45	NG Tube Placement	anthea e. obrien, rn	Problem: Impaired Functional Mobility Patient transported downstairs on monitor for placement of ngt. ngt attempted but to no avail under fluoro. Dr Nawaz made aware and picc line to be placed. Hyperal to infused when received. Son to bedside.
12:19	Treatments	Susan A. John, RN	IV therapy attempted picc line placement in the right arm without success. No vein visible or palpable in the left arm for a PICC line placement. PA on call today does not have PICC line insertion experience. PA will attempt to insert on Monday.

No food for over 5 days! [Prealbumin sinks to 3.8 mg/dl](#) (reference=20-40 mg/dl) indicative of starvation.

0000815510	M	14-Apr-1911	Age: 91	<b>Holy Cross Hospital</b>  <b>Progress Notes</b>  Chart Copy Requested by: WHITLV
		I	MT	
<b>NEUSTADTER, ISRAEL</b>		Wt: 61.900Kg		
Admit Physician: NAWAZ AHMED MD		Attending: NAWAZ AHMED MD		