

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

03/10 17:00	Admission Note	Ginta C. Draugelis, RN
	Pt A&Ox0. HOH. Son at bedside; transferred from cardiac monitoring. Patient oriented to room, call bell and unit. IV infusing per orders. Will continue to monitor.	
19:05	Case Mgmt-Initial Note	Kyle L. Jossi, RN/CM
	Problem: Potential Need for Post Acute Care ER CASE MANAGEMENT INITIAL NOTE Met with patient's son, Alexander Neustadter (301-649-9658, w 202-260-2454) Pt brought to ER via 911 accompanied by family. He is currently not verbally responsive. Son was reluctant to have him admitted, wanted to care for him at home. Pt lives w/ son, has a caregiver all the time. Uses a cane to get around. No steps. Able to perform ADLs independently with direction. Family and caregiver provide meals and meds. Son plans return to same arrangement following discharge. Discharge planning needs uncertain at this time, CM to follow.	
22:07	Transfer Note	Carol M. Smith, RN
	Problem: Potential Need for Post Acute Care Pt. transferred to rm 61072 per MD. request. No acute distress noted. Report given to nurse. Abdominal x-ray cancelled per MD. request.	
03/11 02:26	Summary	Siona B. Fangmbeng-Mbah, RN
	Pt is a transfer from the 4th floor. Received in bed lethargic. Only mumbled a few unclear words. Accompanied by son. Pt Sat 89 to 91% on O2 2L. Lung are very diminished to the right and clear upper left. Ivf d5ns infusing at 75cc/hr. Foley cath intact and patent. Temp. when pt came to unit 101 but decreased on it own. Will continue to monitor temperature.	
13:45	PT Evaluation	Laura R. Heughens, PT, 20326
	Problem: Impaired Functional Mobility This patient is referred to physical therapy for consultation. MEDICAL DIAGNOSIS: pneumonia c sepsis HPI: pt is a 91 yo male adm to HCH on 3-10-03 for altered mental status. PMH: HTN, CAD, hypothyroid, anemia, dementia, macular degeneration. P.T. DIAGNOSIS: Impaired functional mobility Impaired safety with ambulation Impaired functional ability due to decreased endurance DATE OF ONSET: 3-10-03 PRIOR FUNCTION: pt's son states pt able to amb c cane & CG. Pt also was I in ADLs c direction. PRIOR THERAPY: no HOME ASSESSMENT: lives c son in home s steps. Pt has caregiver during day while son is at work. SUBJECTIVE: pt lethargic OBJECTIVE FINDINGS: pt seen bedside for PT eval. MENTAL STATUS: Patient is: lethargic during eval. Pt is unable to follow 1 step commands. -- Continued on next page --	

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14-Apr-1911

Age: 91

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MT

NEUSTADTER, ISRAEL

Wt: 61.900Kg

Admit Physician: NAWAZ AHMED MD

Attending: NAWAZ AHMED MD

Holy Cross Hospital

Progress Notes

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