



HOLY CROSS HOSPITAL
PHYSICIAN
PROGRESS NOTES

NEOSTACER, ISRAEL 91Y
03/10/03 0304900152
3127 NAWAZ, AHMED
03 1/P SICE 17
1111 UNIV BLVD WEST
SILVER SPRING MD 20902
301 649-1319

DATE	TIME	
3/11/03	2100	Medicine Accept Note
		<p>HPI: 91 yo ♂ in USOH until 3d pta, when he fell @ home + hit his head. Pt. developed progressive weakness over next 2d. ⊕ F of 101 1d pta. On ^{day of} admission pt. was hypotensive, BP of 100 systolic in Dr. Nawaz's office + sent to ED. CXR on arrival to hospital showed ⊕ LL infiltrate, small pleural effusion blunting of ⊕ costophrenic angle. Initial WBC - 38,000. PMH significant for dementia, HTN + Zenckers diverticulum. Recently placed on Diazide causing severe ↓Na, which responded to subsequent removal of drug. Hx of pacemaker placement. Hospital course: Pt. was admitted 3/10/03 + started on IV Abx + hydrated. Possible ⊕ inguinal hernia. Pt. became agitated on HD#2 ⚡ ↓ pulse ox to low 80's + ABG demonstrating severe hypoxemia. Pt. was agitated + given halodol, to which he responded. Lung exam demonstrated rales. PCXR demonstrated ⊕ pleural effusions - increased from admission. As pt. was Lasix naive, he was given 20mg IV. Pt. is currently DNR. Pt. is currently stable.</p>
<div style="border: 1px solid black; padding: 2px; width: fit-content;"> <p>3rd-year medical student sees 'DNR' on first Physician Order Form and wrongfully assumes patient is DNR.</p> </div>		<p>O: Vitals: T 100³ P 89 (67-102) R (21-32) BP 103/40 (¹⁰³⁻¹³⁶/₃₃₋₆₄) 93% 100% O₂ NRB</p>
		<p>Exam: GEN - in obvious distress, on 100% NRB Neck - ⊕ JVD CV - S₁S₂ 1/2 the lung fields Pulm - crackles crackles + bronchial lung sounds Abd - benign Ext - sw edema 1+ ⊕</p>

[Signature]
NILES
11/24/11