



AMERICAN MEDICAL RESPONSE
SAN JOAQUIN
Patient Care Report

M05308 025643024
PARVIN, MARY JEAN
03/16/43 71 F
SALIXA 04/01/14 MC

Case #: 02273510

Unit ID: 8S104

Date: 4/1/2014

Dispatch Information

02273510

12 Time Call Received: 14:17:29
2 Time Dispatched: 14:19:20
3 Time Enroute: 14:19:43
4 Time at Scene: 14:19:45
Time at Pt Side: 14:20:00

Disposition: Transported-To Hospital ER/ED
From Location:

845 S Fairmont Ave, LODI, CA 95240

Incident Location Type: Medical - Clinic/Office

To Location:
Lodi Memorial Hospital

Time Transporting: 14:24:00
Time Transport Arrived: 14:27:00
Time Available: 14:44:00
Final Response Mode: Lights and Siren
Final Transport Mode: No Lights and Siren

975 S. Fairmont, Lodi, Ca 95240

Destination Type:

Nature of Call: Falls

Caller Name: 911 STOCKTON POLICE DEPT

ALS Assessment: AMR Paramedic

PD Case Number:

Patient Demographics

02273510

Name: PARVIN, MARY J
Address: 341 E LOCUST ST
City, State, Zip: LODI, CA 95240
Phone: (209)333-8121
SSN: xxxx-xx-7161
Pt. #: 1 of 1

Cell:

DOB: 3/16/1943
Age: 71 years

Gender: Female
Weight: 80 Kg

Ethnicity: Caucasian

History Of Present Illness

02273510

Patient's Complaint: dizziness
Chief Complaint: Chronic onset Dizziness
Secondary Complaint: Acute onset Fall since 10 Minutes.
Physician:

Safety Equipment:

Past Medical History

02273510

History Obtained From:
History: Diabetes, Hypertension
Allergies: None,
Medications:

Advanced Directives:

Impression

02273510

Primary Impression: Other - Dizziness
Secondary Impression: Trauma - Unspecified,
Other Impression:

Narrative

02273510

U/a pt found sitting on the ground, near doctors office. Per pt, she became dizzy while getting out of her vehicle and she fell to the ground. Pt states this has happened to her many time in the past and has been to the ED for evaluation. She has never received a diagnosis as to why she gets dizzy. Pt was stood up and stated she slightly dizzy, but not as bad as she was. Pt denies chest pain, shortness of breath, loc, back/neck pain, or any other pain. Pt treated and transported w/o incident or injury. Pt taken to LMH and care transferred to awaiting staff.

Vitals

Time	BP	Pulse	RR	SpO2 %	GCS	Performed By	
14:22	160/90 (113)	72	18		15	Lauren Ramey	M053082 V025643024
14:27					15	Lauren Ramey	PARVIN, MARY JEAN
14:27	164/90 (115)	66	18			Lauren Ramey	03/16/43 71 F
							SALIXA 04/01/14 MC

Treatment and Response 02273510

PTA	Time	Medic	Procedure
	14:22:00	Lauren Ramey	Glasgow Coma Scale - Eyes: 4 , Verbal: 5 , Motor: 6 . Total : 15 . .
	14:22:00	Lauren Ramey	Lung Sounds - Upper Right Lung: Clear , Upper Left Lung: Clear , Lower Right Lung: Clear , Lower Left Lung: Clear . .
	14:22:00	Lauren Ramey	Skin Assessment - Normal color, Warm temperature, Normal moisture, .
	14:22:00	Lauren Ramey	Vital Signs - BP: 160 / 90 , Patient Position: Semi-Fowlers . Pulse at: Radial , Pulse Rate: 72 , Pulse Regularity: Regular , Pulse Strength: Normal , Respirations: 18 , Respiration Depth: Normal , Respiration Effort: Normal ,
	14:24:00	Lauren Ramey	EKG - Indication: Protocol/Standing Order , Type: 4 Lead , Clinical Interpretation: Normal Sinus Rhythm ,
	14:24:00	Lauren Ramey	Pain Scale - 0 on a scale of 10 . .
	14:25:00	Lauren Ramey	Blood Glucose - 341 mg/dL .
	14:27:00	Lauren Ramey	Glasgow Coma Scale - Eyes: 4 , Verbal: 5 , Motor: 6 . Total : 15 . .
	14:27:00	Lauren Ramey	Vital Signs - BP: 164 / 90 , Patient Position: Semi-Fowlers . Pulse at: Radial , Pulse Rate: 66 , Pulse Regularity: Regular , Pulse Strength: Normal , Respirations: 18 , Respiration Depth: Normal , Respiration Effort: Normal ,

Patient Disposition

02273510

Mode of Transport: Ground by BLS

Mileage Scene: 0.0
Mileage Hospital: 0.4
Total Mileage: 0.4

Destination Decis: Patient/Family Request

Transfer Time:

Other Caregivers

02273510

Caregiver Name	Certification	Agency	Role
Lauren Ramey	EMT	Other health care provider	Intern

Patient Medical Insurances 02273510

BLUE CROSS/SHIELD OUT OF AREA P O BOX 1505, (FOR OUT OF STATE BS), RED BLUFF, CA 96080, (800)622-0632, Policy#:MHB848137522, Group Number#:083125,

Guarantor:

Self

PARVIN, MARY

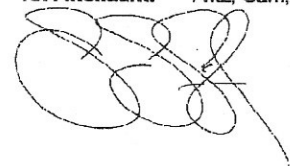
341 E LOCUST ST, LODI, CA 95240

Employer:

(209)333-8121

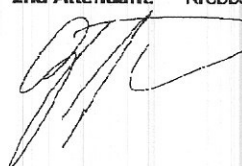
1st Attendant: Fritz, Sam,AMR

2nd Attendant: Krebs, Garrett,AMR



Number: P24265

Certification: Paramedic



Number: E036144

Certification: EMT

Hospital Signature:

Case # 02273510

PCR ID 2014040114250659971

Date: 4/1/2014

Device Name: WSTKMEDS41

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Pt: PARVIN, MARY J

Printed: 4/1/2014 3:48:36 PM

197-40362

3.10.4777.20234

Received Time Apr. 1. 2014 2:43PM No. 8093

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