

06/14/13

MEDICATION DISCHARGE SUMMARY

PAGE: 1

NAME: PAVIA, MARY JEAN
 UNIT #: M05302
 ACCT #: V02470878
 PHA ALLERGIES: latex
 ALLERGIES: Sulfis (Sulfonamide Antibiotics), morphine
 No allergies recorded

AMIT DATE: 06/04/13
 DISCHARGE DATE: 06/09/13
 STATUS: DIS IM

AGE: 70
 SEX: F

ADMINISTRATION PERIOD:	START/STOP	
0701 06/04/13 to 0700 06/05/13		

0.9% Saline 50 ML
 (Sodium Chloride (0.9%) 50 ML)
 Rocephin 2000 MG
 (ceftriaxone sodium 2000 MG SD, VIAL)
 100 ML/HR IV Now dose/ONE
 Comments: Warning: Administration Instructions-
 Must NOT be mixed or administered simultaneously with
 products containing CALCIUM SALTS, even via different
 infusion lines. Calcium containing products must not be
 administered within 48 hours of last administration of
 ceftriaxone.
 RX #: 003295035

06/04/13	Edm Order 1449	CARRCH	
06/04/13	1500 KUMST at 1617	GAVE: 50 ML	
	NDC/DIN: (SOURCE: EMAR)		
	0409733503		CEFRX21
	0264180031		- Sodium Chloride (0.9%) 50 ML
	EDOC 06/04/13-1619	by KUMST	
	Discontinue 1529	SCHEDULER	
	1657 REASSSES	by KUMST at 1635	
	Stop date 06/04/13		
	Stop time 1635		
	IV fluids ml	50	
	Document volume only	if not using intake screen.	
	IV site #	1	

0.9% Saline 250 ML
 (Sodium Chloride (0.9%) 250 ML)
 Vancomycin 1000 MG
 (Vancomycin HCl 1000 MG SD, VIAL)
 166.6666 ML/HR IV Now dose/ONE
 Comments: *BEM* *GUARDRAILS*
 Check labs before administering med
 RX #: X000251159

06/04/13	Admin Criterion Entered	1450	CARRCH
06/04/13	Edm Order 1450	CARRCH	
	Cancel 1450	CARRCH	

Cleocin 900 MG 50 ML
 (Clindamycin 900 MG/DSW 50 ML, IVPB)
 100 ML/HR IV Now dose/ONE
 RX #: 003295186

06/04/13	1600 KUMST at 1618	GAVE: 50 ML	
06/04/13	NDC/DIN: (SOURCE: EMAR)		
	0009338201		CIN900
	EDOC 06/04/13-1619	by KUMST	
	Edm Order 1601	OSHTMA	
	Discontinue 1629	SCHEDULER	
	1648 REASSSES	by LOWRER at 1830	
	stop date 06/04/13		
	stop time 1830		
	IV fluids ml	50	
	Document volume only	if not using intake screen.	
	IV site #	1	

06/14/13

NAME: PARYIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V021703878

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ADMINISTRATION PERIOD:
0701 06/04/13 to 0700 06/04/13 (Continued)

START/
STOP

Lasix (Furosemide 40 MG/4 ML SD VIAL)
40 MG IV Now dose/ONE
Comments: Monitor Blood Pressure May contribute to falls
RX #: 003295187

06/04/13 1600 KUMST at 1618 GAVE: 40 MG
NDC/DIN: (SOURCE: eMAR)
0409610204
EDOC 06/04/13-1619 by KUMST
Edm Order 1601 OSHIMA
Discontinue 1601 SCHEDULER

FUR040I - Furosemide 40 MG/4 ML SD VIAL

Lasix (Furosemide 40 MG/4 ML SD VIAL)
See Dose Ins. IV .STR-MED/ONE
Comments: Monitor Blood Pressure May contribute to falls
RX #: 003295188

06/04/13 *1603 KUMST at 1618 NG
EDOC 06/04/13-1619 by KUMST
Discontinue 1604 STR MED
AO 2214 RUSUNA

HEPARIN PFS (Heparin (Porcine))/PF 5,000 UNIT/0.5 ML PFS)
5000 UNIT SUB-Q Three times daily
RX #: 003295259

06/04/13 Pem Order 1728 HIATMI
Verified 1739 HOANBR
AO 2156 ANDEDI
2200 ANDEDI at 2156 CO-SIGNER: WILLJEL SITE: ARIQ - Abdomen right lower quad GAVE: 5000 UNIT
NDC/DIN: (SOURCE: eMAR)
0409131632
EDOC 06/04/13-2203 by ANDEDI
0600 RUSUNA at 0627 CO-SIGNER: STEIEV SITE: ARUQ - Abdomen right upper quad GAVE: 5000 UNIT
NDC/DIN: (SOURCE: eMAR)
0409131632
EDOC 06/05/13-0628 by RUSUNA

HEPA5000I - heparin (Porcine)/PF 5,000 UN...

KCl 10% Oral PROTOCOL (Potassium Chloride 10% Oral PROTOCOL)
See Dose Ins. PO Per Pharmacy Protocol
RX #: 003295271

06/04/13 Admin Criterion Entered 1728 HIATMI
Pem Order 1728 HIATMI
Verified 1741 HOANBR
AO 2214 RUSUNA

Aspirin (Aspirin 81 MG CHEWABLE TAB)
81 MG PO Daily
Comments: Must be taken with food/meal. Look-alike/sound-alike drug.
RX #: 003295256

06/05/13 Pem Order 1728 HIATMI
Verified 1739 HOANBR
AO 2214 RUSUNA

06/14/13

NAME: PAREVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703878

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ADMINISTRATION PERIOD:
0701 06/04/13 to 0700 06/05/13 (CONTINUED)

START/STOP

Coreg (Carvedilol 12.5 MG TAB)
12.5 MG PO Twice daily
Comments: Monitor HR & BP. Must be taken with food/meal.
RX #: 003295258

06/04/13 Pom Order 1728 HLAIMI
| EDIT 1739 HOANBR
| Verified 1739 HOANBR
| 2200 RUSUNA at 2327 GAVE: 12.5 MG
| NDC/DIN: (SOURCE: eMAR)
| 6838209401
| FDOC 06/04/13-2327 By RUSUNA
| AO 2214 RUSUNA

CARV12.5T - Carvedilol 12.5 MG TAB

Lexapro * (Escitalopram Oxalate 10 MG TAB)
10 MG PO Daily
RX #: 003295263

06/05/13 Pom Order 1728 HLAIMI
| Verified 1740 HOANBR
| AO 2214 RUSUNA

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
25 UNIT SUB-Q Daily at 0800
Comments: <BRK>
HIGH ALERT
Look-alike/sound-alike med
RX #: 003295261

06/05/13 Pom Order 1728 HLAIMI
| EDIT 1739 HOANBR
| Verified 1739 HOANBR
| AO 2214 RUSUNA

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
27 UNIT SUB-Q Ac bedtime
Comments: <BRK>
HIGH ALERT
Look-alike/sound-alike med
RX #: 003295262

06/04/13 Pom Order 1728 HLAIMI
| EDIT 1739 HOANBR
| Verified 1739 HOANBR
| 2100 ANDEDI at 2202 SITE: ARLQ - Abdomen right lower quad GAVE: 27 UNIT
| Chem strip: 286
| FDOC 06/04/13-2203 by ANDEDI
| AO 2157 ANDEDI

Imdur (Isosorbide Mononitrate 30 MG TAB)
30 MG PO Daily
Comments: Monitor HR and BP Do not crush or chew
RX #: 003295260

06/05/13 Pom Order 1728 HLAIMI
| Verified 1739 HOANBR
| AO 2214 RUSUNA

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NAME: PARVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703878

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ADMINISTRATION PERIOD:
0701 06/04/13 to 0700 06/08/13 (Continued)

START/
STOP

Synthroid (Levothyroxine Sodium 100 MCG TAB)
100 MCG PO Daily before breakfast
Comments: Give on empty stomach
RX #: 003295269

06/05/13 Pom Order 1728 HLATMI
| Edit 1741 HOANBR
| Verified 1741 HOANBR
| AO 2214 RUSUNA
| 0700 RUSUNA at 0634 GAVE: 100 MCG
| NDC/DIN: (SOURCE: eMAR)
| 5107944201
| FDOC 06/05/13-0634 by RUSUNA

LEVO100T - Levothyroxine Sodium 100 MCG TAB

Lipitor (Atorvastatin Calcium 20 MG TAB)
20 MG PO At bedtime
RX #: 003295264

06/04/13 Pom Order 1728 HLATMI
| Verified 1740 HOANBR
| 2100 RUSUNA at 2327 GAVE: 20 MG
| NDC/DIN: (SOURCE: eMAR)
| 6808456511
| FDOC 06/04/13-2327 by RUSUNA
| AO 2214 RUSUNA

ATOR20T - Atorvastatin Calcium 20 MG TAB

Zaroxolyn (Metolazone 2.5 MG TAB)
2.5 MG PO Daily
Comments: Must be taken with food/meal.
May contribute to falls
RX #: 003295270

06/05/13 Pom Order 1728 HLATMI
| Edit 1741 HOANBR
| Verified 1741 HOANBR
| AO 2214 RUSUNA

Micardis (Telmisartan 40 MG TAB)
80 MG PO Daily
RX #: 003295265

06/05/13 Pom Order 1728 HLATMI
| Verified 1740 HOANBR
| AO 2214 RUSUNA

Catapres (clonidine HCL 0.2 MG TAB)
0.2 MG PO At bedtime
Comments: look-alike/sound-alike med
RX #: 003295257

06/04/13 Pom Order 1728 HLATMI
| Edit 1739 HOANBR
| Verified 1739 HOANBR
| 2100 ANDEDI at 2156 GAVE: 0.2 MG
| NDC/DIN: (SOURCE: eMAR)
| 0378018610
| FDOC 06/04/13-2203 by ANDEDI
| AO 2156 ANDEDI

CLONI.2T - CLONIDINE HCL 0.2 MG TAB

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NAME: PABVIN, MARY JEAN

UNIT #: M053082

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ADMINISTRATION PERIOD:
0701 06/04/13 to 0700 06/05/13 (Continued)

START/
STOP

0.9% Saline 250 ML
 (Sodium Chloride (0.9%) 250 ML)
 Vancomycin 1000 MG
 (Vancomycin HCl 1000 MG SD VIAL)
 250 MG/HR IV Per Pharmacy Protocol
 Comments:
 BMW *GUARDRAILS*
 Check labs before administering med
 RX #: 003295279

06/04/13 | Admin Criteion Entered 1728 HLAIMI
 Pom Order 1728 HLAIMI
 EDIT 1755 LEUNWI
 Verified 1756 LEUNWI
 AO 2214 RUSUNA

0.9% Saline 50 ML
 (Sodium Chloride (0.9%) 50 ML)
 Rocephin 1000 MG
 (ceftriaxone Sodium 1000 MG SD VIAL)
 100 MG/HR IV Every 24 hours
 Comments: Warning: Administration Instructions -
 Must NOT be mixed or administered simultaneously with
 products containing CALCIUM SALTS, even via different
 infusion lines. Calcium containing products must not be
 administered within 48 hours of last administration of
 cefTRIAxone.
 RX #: 003295276

06/05/13 | Pom Order 1728 HLAIMI
 EDIT 1745 HOANBR
 Verified 1745 HOANBR
 AO 2214 RUSUNA

Peppid * (Famotidine 20 MG TAB)
 20 MG PO Twice daily
 RX #: 003295268

06/04/13 | Pom Order 1728 HLAIMI
 Verified 1741 HOANBR
 AO 2155 ANDEDI
 2200 ANDEDI at 2155 GAVE: 20 MG
 NDC/DIN: (SOURCE: eMAR)
 0172572860
 FDCC 06/04/13-2203 by ANDEDI

FAM020T - Famotidine 20 MG TAB

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UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

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ADMINISTRATION PERIOD:
0701 06/04/13 to 0700 06/05/13 (Continued)

Lasix (Furosemide 40 MG/4 ML SD.VIAL)
40 MG IV Every 6 hours
Comments: Monitor Blood Pressure May contribute to falls
RX #: 003295278

DATE/TIME	SPRER/ SPOD	DESCRIPTION	UNIT
06/04/13		Pom Order 1751 HLAWMI	
		EDIT 1753 LEUNWI	
		Verified 1753 LEUNWI	
		AO 2210 RUSUNA	
		2359 RUSUNA at 2325 GAVE: 40 MG	
		NDC/DIN: (SOURCE: eMAR)	
		0409610204	
		POC 06/04/13-2327 by RUSUNA	FUR040I - Furosemide 40 MG/4 ML SD.VIAL
		0600 RUSUNA at 0627 GAVE: 40 MG	
		NDC/DIN: (SOURCE: eMAR)	
		0409610204	
		POC 06/05/13-0628 by RUSUNA	FUR040I - Furosemide 40 MG/4 ML SD.VIAL

Novolog (Insulin Aspart (Novolog)) 100 UNITS/ML 10 ML VIAL)
See Dose Ins.: ROUTE .STR-MED/ONE
Comments: <BRKX>
HIGH ALERT
Look-alike/sound-alike med
RX #: 003295322

DATE/TIME	DESCRIPTION	UNIT
06/04/13	*1839 LOWRRR at 1843 AG	
	ALREADY GIVEN AND DOCUMENTED ON ANOTHER ORDER	
	POC 06/04/13-1844 by LOWRRR	
	Discontinue 1839 STR MED	
	AO 1843 LOWRRR	

Norco 10 (HYDROCODONE/ACETAMINOPHEN 10 MG/325 MG TAB)
1 TAB PO Every 6 hours as needed/PRN
PRN Reason: .Bain, severe
Comments: *BBW* Max dose: 3000 mg Acetaminophen/24H
Look-alike/sound-alike drug. May contribute to falls
RX #: 003295266

DATE/TIME	DESCRIPTION	UNIT
06/04/13	Pom Order 1728 HLAWMI	
	EDIT 1740 HOANBR	
	Verified 1740 HOANBR	
	AO 2214 RUSUNA	

06/14/13

NAME: PARVIN MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703878

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ADMINISTRATION PERIOD:
0701 06/04/13 to 0700 06/05/13 (continued)

START/
STOP

Novolog Slide (Novolog Sliding Scale 100 UNITS/ML)
See Dose Ins. SUB-Q Before meals & HS as needed/PRN
PRN Reason: Sliding scale
Dose Ins: Enter units administered
Comments: Follow Sliding Scale Protocol <BRCC>
HIGH ALERT
Look-alike/sound-alike med
RX #: 003295267

| 06/04/13 | Admin Criterion Entered 1728 HLAMI
| | Pom Order 1728 HLAMI
| | EDT 1741 HOANBR
| | Verified 1741 HOANBR
| | AO 1841 LORRRR
| | 1842 LORRRR at 1842 SITE: ARLQ - Abdomen right lower quad GAVE: 10 UNIT
| | NDC/DIN: (SOURCE: eMAR)
| | 0169750111
| | Chem strip: 327
| | 10 UNITS GIVEN TO ABDOMEN SUBCUTANEOUS
| | FDOC 06/04/13-1842 by LORRRR
| | DOSE changed from UNIT to 10 UNIT
| | 2207 ANDEDI at 2207 SITE: ARLQ - Abdomen right lower quad GAVE: 7 UNIT
| | NDC/DIN: (SOURCE: eMAR)
| | 0169750111
| | Chem strip: 286
| | FDOC 06/04/13-2209 by ANDEDI
| | DOSE changed from UNIT to 7 UNIT
| | NOVO-SLIDE - Novolog Sliding Scale 100 UNI...

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
40 MEQ 90 Per Pharmacy Protocol/PRN
PRN Reason: Potassium Replacement
Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid only)
RX #: 003295272

| 06/04/13 | Admin Criterion Entered 1742 HOANBR
| | Enter 1742 HOANBR
| | AO 2214 RUSUNA

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
20 MEQ 90 Per Pharmacy Protocol/PRN
PRN Reason: Potassium Replacement
Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid only)
RX #: 003295273

| 06/04/13 | Admin Criterion Entered 1742 HOANBR
| | Enter 1742 HOANBR
| | AO 2214 RUSUNA

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
10 MEQ 90 Per Pharmacy Protocol/PRN
PRN Reason: Potassium Replacement
Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid only)
RX #: 003295274

| 06/04/13 | Admin Criterion Entered 1742 HOANBR
| | Enter 1742 HOANBR
| | AO 2214 RUSUNA

ADMINISTRATION PERIOD:
0701 06/05/13 to 0700 06/06/13

START/
STOP

ADMINISTRATION PERIOD:
 0701 06/08/13 to 0700 06/06/13 (continued)

Heparin Pfs (heparin (porcine)/pf 5,000 UNIT/0.5 ML PFS)
 5000 UNIT SUB-Q Three times daily
 RX #: 003295259

START/STOP	DATE	TIME	AMOUNT	ROUTE	SIGNER	SITE	DESCRIPTION
	06/04/13	1400	YADAJE	at 1358	CO-SIGNER: OLIVAM	SITE: ARLQ	Abdomen right lower quad GAVE: 5000 UNIT
			NDC/DIN:	(SOURCE: eMAR)			HEPA5000I - heparin (porcine)/pf 5,000 UN..
			FDOC	06/05/13-1400	By YADAJE		
				2200	RUSUNA	at 2135	CO-SIGNER: STEIEV
			NDC/DIN:	(SOURCE: eMAR)			SITE: ARLQ - Abdomen right lower quad GAVE: 5000 UNIT
			FDOC	06/05/13-2139	By RUSUNA		
				0600	RUSUNA	at 0603	CO-SIGNER: STEIEV
			NDC/DIN:	(SOURCE: eMAR)			SITE: ALUQ - Abdomen left upper quad GAVE: 5000 UNIT
			FDOC	06/06/13-0605	By RUSUNA		
							HEPA5000I - heparin (porcine)/pf 5,000 UN...

Aspirin (Aspirin 81 MG CHEWABLE TAB)
 81 MG PO Daily
 Comments: Must be taken with food/meal. Look-alike/sound-alike drug.
 RX #: 003295256

START/STOP	DATE	TIME	AMOUNT	ROUTE	SIGNER	SITE	DESCRIPTION
	06/05/13	1000	YADAJE	at 0923	GAVE: 81 MG		
			NDC/DIN:	(SOURCE: eMAR)			ASPI81T - Aspirin 81 MG CHEWABLE TAB
			FDOC	06/05/13-0926	By YADAJE		

Coreg (Carvedilol 12.5 MG TAB)
 12.5 MG PO Twice daily
 Comments: Monitor HR & BP. Must be taken with food/meal.
 RX #: 003295258

START/STOP	DATE	TIME	AMOUNT	ROUTE	SIGNER	SITE	DESCRIPTION
	06/04/13	1000	YADAJE	at 0923	GAVE: 12.5 MG		
			NDC/DIN:	(SOURCE: eMAR)			CARV12.5T - Carvedilol 12.5 MG TAB
			FDOC	06/05/13-0926	By YADAJE		
				2200	RUSUNA	at 2145	GAVE: 12.5 MG
			NDC/DIN:	(SOURCE: eMAR)			CARV12.5T - Carvedilol 12.5 MG TAB
			FDOC	06/05/13-2146	By RUSUNA		

Lexapro * (Escitalopram Oxalate 10 MG TAB)
 10 MG PO Daily
 RX #: 003295263

START/STOP	DATE	TIME	AMOUNT	ROUTE	SIGNER	SITE	DESCRIPTION
	06/05/13	1000	YADAJE	at 0923	GAVE: 10 MG		
			NDC/DIN:	(SOURCE: eMAR)			ESCI10T - Escitalopram Oxalate 10 MG TAB
			FDOC	06/05/13-0926	By YADAJE		

Lantus (Insulin Gargine, Human 100 UNIT/ML 10 ML VIAL)
 25 UNIT SUB-Q Daily at 0800
 Comments: <BRK>
 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003295261

06/14/13

NAME: PABVIN, MARY JEAN

UNIT #: M053082

ACCT #: V024703878

MEDICATION DISCHARGE SUMMARY

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ADMINISTRATION PERIOD:	START/STOP		
07/01 06/05/13 to 07/01 06/06/13 (Continued)			

Lantus (Insulin Gargine, Human 100 UNIT/ML 10 ML VIAL)
 27 UNIT SUB-Q At bedtime
 Comments:

 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003295262

Imdur (Isosorbide Mononitrate 30 MG TAB)
 30 MG PO Daily
 Comments: Monitor HR and BP Do not crush or chew
 RX #: 003295260

Synthroid (Levothyroxine Sodium 100 MCC TAB)
 100 MCC PO Daily before breakfast
 Comments: Give on empty stomach
 RX #: 003295269

Lipitor (Atorvastatin Calcium 20 MG TAB)
 20 MG PO At bedtime
 RX #: 003295264

Zaroxolyn (Metolazone 2.5 MG TAB)
 2.5 MG PO Daily
 Comments: Must be taken with food/meal.
 May contribute to falls
 RX #: 003295270

Micardis (Telmisartan 40 MG TAB)
 80 MG PO Daily
 RX #: 003295265

Catapres (Clonidine HCL 0.2 MG TAB)
 0.2 MG PO At bedtime
 Comments: Look-alike/sound-alike med
 RX #: 003295257

DATE	TIME	DOSE	ROUTE	STATUS	REASON	AGENCY	PREPARED BY	REVIEWED BY	REASON FOR STOP
06/04/13		1000	YADAJE	at 0923	GAVER: 30 MG	IS0930T			Isosorbide Mononitrate 30 MG TA
					NDC/DIN: (SOURCE: eMAR) 6217512837				
					EOC 06/05/13-0926				
06/05/13		Discontinue	0910		HLAIMI				
			AO 0920		YADAJE				
06/04/13		2100	RUSUNA	at 2135	GAVER: 20 MG	AT0920T			Atorvastatin Calcium 20 MG TAB
					NDC/DIN: (SOURCE: eMAR) 6808456511				
					EOC 06/05/13-2139				
06/05/13		1000	YADAJE	at 0924	GAVER: 2.5 MG	ME02.5T			Metolazone 2.5 MG TAB
					NDC/DIN: (SOURCE: eMAR) 0378617201				
					EOC 06/05/13-0926				
06/05/13		1000	YADAJE	at 0923	GAVER: 80 MG				
					NDC/DIN: (SOURCE: eMAR) 0597004037				
					EOC 06/05/13-0926				
06/04/13		2100	RUSUNA	at 2134	GAVER: 0.2 MG	CL01.2T			Clonidine HCL 0.2 MG TAB
					NDC/DIN: (SOURCE: eMAR) 0378018610				
					EOC 06/05/13-2139				

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This document is part of the legal medical record.

06/14/13

NAME: PARVIN, MARY JEAN

UNIT #: W053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703078

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ADMINISTRATION PERIOD:
0701 06/08/13 to 0701 06/06/13 (continued)

START/
STOP

0.9% Saline 50 ML

(Sodium Chloride (0.9%) 50 ML)

Rocephin 1000 MG

(ceftriaxone sodium 1000 MG SD, VIAL)

100 ML/HR IV Every 24 hours

Comments: Warning: Administration Instructions-

Must NOT be mixed or administered simultaneously with

products containing CALCIUM SALTS, even via different

infusion lines. Calcium containing products must not be

administered within 48 hours of last administration of

ceftriaXone.

ceFTRIAXone.

RX #: 003295276

Depoid * (Famotidine 20 MG TAB)

20 MG PO Twice daily

RX #: 003295268

06/04/13 1000 YADAJE at 0923 GAVE: 20 MG

NDC/DIN: (SOURCE: eMAR)

0172572860

EDOC 06/05/13-0926 By YADAJE

2200 RUSUNA at 2135 GAVE: 20 MG

NDC/DIN: (SOURCE: eMAR)

0172572860

EDOC 06/05/13-2139 By RUSUNA

EMO20T - Famotidine 20 MG TAB

EMO20T - Famotidine 20 MG TAB

Lastix (Furosemide 40 MG/4 ML SD, VIAL)

40 MG IV Every 6 hours

Comments: Monitor Blood Pressure May contribute to Falls

RX #: 003295278

06/04/13 1200 YADAJE at 1131 GAVE: 40 MG

NDC/DIN: (SOURCE: eMAR)

0409610204

EDOC 06/05/13-1131 By YADAJE

1800 YADAJE at 1800 GAVE: 40 MG

NDC/DIN: (SOURCE: eMAR)

0409610204

EDOC 06/05/13-1802 By YADAJE

2359 RUSUNA at 06/06/13 - 0006 GAVE: 40 MG

NDC/DIN: (SOURCE: eMAR)

0409610204

EDOC 06/06/13-0006 By RUSUNA

0600 RUSUNA at 0603 GAVE: 40 MG

NDC/DIN: (SOURCE: eMAR)

0409610204

EDOC 06/06/13-0605 By RUSUNA

EURO40I - Furosemide 40 MG/4 ML SD, VIAL

EURO40I - Furosemide 40 MG/4 ML SD, VIAL

EURO40I - Furosemide 40 MG/4 ML SD, VIAL

EURO40I - Furosemide 40 MG/4 ML SD, VIAL

EURO40I - Furosemide 40 MG/4 ML SD, VIAL

06/14/13

NAME: PARVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703878

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ADMINISTRATION PERIOD:
0761 06/05/13 to 0780 06/06/13 (Continued)

START/
STOP

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
15 UNIT SUB-Q At bedtime

Comments: <BKG>

HIGH ALERT

Look-alike/sound-alike med

RX #: 003295806

06/05/13	Pom Order 0908 HLAIMI	
	EDIT 0913 THALMA	
	Verified 0915 THALMA	
	AO 0920 YADAJE	
	2100 RUSUNA at 2134 SITE: UR - Upper extremity right GAVE: 15 UNIT	
	NDC/DIN: (SOURCE: eMAR) 0088222033	
	Chem strip: 157	GLARI - Insulin glargine, Human 100 U..
	EDOC 06/05/13-2139 by RUSUNA	

Synthroid (Levothyroxine Sodium 125 MCG TAB)
125 MCG PO Daily before breakfast

Comments: Give on empty stomach

RX #: 003295807

06/06/13	Pom Order 0910 HLAIMI	
	EDIT 0915 THALMA	
	Verified 0915 THALMA	
	AO 0920 YADAJE	
	0700 RUSUNA at 0604 GAVE: 125 MCG	
	NDC/DIN: (SOURCE: eMAR) 5107944301	
	EDOC 06/06/13-0605 by RUSUNA	
		LEVO125T - Levothyroxine Sodium 125 MCG TAB

Novolog Slide (Novolog Sliding Scale 100 UNITS/ML)
See Dose Ins. SUB-Q Before meals & HS as needed/PRN

PRN Reason: Sliding scale

Dose Ins: Enter units administered

Comments: Follow Sliding Scale Protocol <BKG>

HIGH ALERT

Look-alike/sound-alike med

RX #: 003295267

START/
STOP

06/04/13	1759 YADAJE at 1759 SITE: AUO - Abdomen left upper quad GAVE: 3 UNIT	
	NDC/DIN: (SOURCE: eMAR) 0169750111	
	Chem strip: 171	NOVO-SLIDE - Novolog Sliding Scale 100 UNI..
	EDOC 06/05/13-1802 by YADAJE	
	DOSE changed from UNIT to 3 UNIT	

ADMINISTRATION PERIOD:
0761 06/06/13 to 0780 06/07/13

06/14/13

NAME: BARVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703078

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ADMISSION/PERIOD: 0701 06/08/13 to 0700 06/07/13 (continued)

START/STOP

heparin Bps (heparin (porcine))/Pf 5,000 UNIT/0.5 ML PFS) 5000 UNIT SUB-Q three times daily
RX #: 003295259

START/STOP	DATE	TIME	AMOUNT	ROUTE	SITE	PREPARED BY	DRUG	STRENGTH	UNIT
	06/04/13	1400	OLIVAM	at 1402	CO-SIGNER:	ASUNJO	SITE: ALUQ - Abdomen left upper quad	5000	UNIT
			NDC/DIN:	(SOURCE: eMAR)					
			0409131632						
			2200	ONGJAC	at 2207	CO-SIGNER: DHEBNA	SITE: ARLQ - Abdomen right lower quad	5000	UNIT
				NDC/DIN:	(SOURCE: eMAR)				
			0409131632						
			0600	ONGJAC	at 0626	CO-SIGNER: ANICAD	SITE: ALUQ - Abdomen left lower quad	5000	UNIT
				NDC/DIN:	(SOURCE: eMAR)				
			0409131632						
			EDOC	06/07/13-0640	by	ONGJAC			

Aspirin (Aspirin 81 MG CHEWABLE TAB) 81 MG PO Daily
Comments: Must be taken with food/meal. Look-alike/sound-alike drug.
RX #: 003295256

START/STOP	DATE	TIME	AMOUNT	ROUTE	SITE	PREPARED BY	DRUG	STRENGTH	UNIT
	06/05/13	1000	OLIVAM	at 0851	GAVE:	81 MG			
			NDC/DIN:	(SOURCE: eMAR)					
			637943403						
			EDOC	06/06/13-0853	by	OLIVAM			

Coreg (Carvedilol 12.5 MG TAB) 12.5 MG PO twice daily
Comments: Monitor HR & BP. Must be taken with food/meal.
RX #: 003295258

START/STOP	DATE	TIME	AMOUNT	ROUTE	SITE	PREPARED BY	DRUG	STRENGTH	UNIT
	06/04/13	1000	OLIVAM	at 0851	GAVE:	12.5 MG			
			NDC/DIN:	(SOURCE: eMAR)					
			6838209401						
			126/74						
			EDOC	06/06/13-0853	by	OLIVAM			
			2200	ONGJAC	at 2206	GAVE:	12.5 MG		
				NDC/DIN:	(SOURCE: eMAR)				
			6838209401						
			113/58/60						
			EDOC	06/06/13-2212	by	ONGJAC			

Lexapro (Escitalopram Oxalate 10 MG TAB) 10 MG PO Daily
RX #: 003295263

START/STOP	DATE	TIME	AMOUNT	ROUTE	SITE	PREPARED BY	DRUG	STRENGTH	UNIT
	06/05/13	1000	OLIVAM	at 0851	GAVE:	10 MG			
			NDC/DIN:	(SOURCE: eMAR)					
			009385101						
			EDOC	06/06/13-0853	by	OLIVAM			

Lantus (Insulin Glargine, Human 100 UNIT/MG 10 ML VIAL) 25 UNIT SUB-Q Daily at 0800
Comments: <BRCD>
HIGH ALERT
Look-alike/sound-alike med
RX #: 003295261

START/STOP	DATE	TIME	AMOUNT	ROUTE	SITE	PREPARED BY	DRUG	STRENGTH	UNIT
	06/05/13	0800	OLIVAM	at 0849	SITE: ALUQ - Abdomen left upper quad	GAVE:	25 UNIT		
			NDC/DIN:	(SOURCE: eMAR)					
			0088222033						
			Chem strip:	209					
			EDOC	06/06/13-0853	by	OLIVAM			

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NAME: PARVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024T03878

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ADMINISTRATION PERIOD:
07/01/06/06/13 to 07/00/06/07/13 (continued)

Imdur (Isosorbide Mononitrate 30 MG TAB)
30 MG PO Daily
Comments: Monitor HR and BP Do not crush or chew
RX #: 003295260

Lipitor (Atorvastatin Calcium 20 MG TAB)
20 MG PO At bedtime
RX #: 003295264

Zaroxolyn (Metolazone 2.5 MG TAB)
2.5 MG PO Daily
Comments: Must be taken with food/meal.
May contribute to falls
RX #: 003295270

Micardis (Telmisartan 40 MG TAB)
80 MG PO Daily
RX #: 003295265

Catapres (CLONIDINE HCL 0.2 MG TAB)
0.2 MG PO At bedtime
Comments: Look-alike/sound-alike med
RX #: 003295257

0.9% Saline 50 ML
(Sodium Chloride (0.9%) 50 ML)
Rocephin 1000 MG
(cefTRIAXone Sodium 1000 MG SD, VIAL)
100 MLS/HR IV Every 24 hours
Comments: Warning: Administration Instructions-
Must NOT be mixed or administered simultaneously with
products containing CALCIUM SALTS, even via different
infusion lines. Calcium containing products must not be
administered within 48 hours of last administration of
cefTRIAXone.
RX #: 003295276

START/STOP	DATE	TIME	AMOUNT	STRENGTH	ROUTE	PREPARED BY	REASON FOR DISCHARGE
	06/05/13	1000	OLIVAM	at 0851 GAVE: 30 MG			
				NDC/DIN: (SOURCE: eMAR)			
				6217512837			
				126/74			
				FDOC 06/06/13-0853	By OLIVAM		
	06/04/13	2100	ONGJAC	at 2033 GAVE: 20 MG			
				NDC/DIN: (SOURCE: eMAR)			
				6808456511			
				FDOC 06/06/13-2039	By ONGJAC		
	06/05/13	1000	OLIVAM	at 0852 GAVE: 2.5 MG			
				NDC/DIN: (SOURCE: eMAR)			
				0378617201			
				FDOC 06/06/13-0853	By OLIVAM		
	06/05/13	1000	OLIVAM	at 0852 GAVE: 80 MG			
				NDC/DIN: (SOURCE: eMAR)			
				0597004037			
				FDOC 06/06/13-0853	By OLIVAM		
	06/04/13	2100	ONGJAC	at 2033 GAVE: 0.2 MG			
				NDC/DIN: (SOURCE: eMAR)			
				0378018610			
				FDOC 06/06/13-2039	By ONGJAC		
	06/05/13	1600	OLIVAM	at 1528 GAVE: 50 ML			
				NDC/DIN: (SOURCE: eMAR)			
				040973201			
				0264180031			
				FDOC 06/06/13-1528	By OLIVAM		

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NAME: PARVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: V024703878

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ADMINISTRATION PERIOD:
07/13 06/06/13 to 07/13 06/07/13 (Continued)

START/STOP

Pepcid * (Famotidine 20 MG TAB)
20 MG PO Twice daily
RX #: 003295268

06/04/13	1000 OLTIVAM at 0852 GAVE: 20 MG	
	NDC/DIN: (SOURCE: eMAR)	
	0172572860	
	EPDC 06/06/13-0853 by OLTIVAM	FAM020T - Famotidine 20 MG TAB
	2200 ONGJAC at 2206 GAVE: 20 MG	
	NDC/DIN: (SOURCE: eMAR)	
	0172572860	
	EPDC 06/06/13-2212 by ONGJAC	FAM020T - Famotidine 20 MG TAB

Lasix (Furosemide 40 MG/4 ML SP. VIAL)
40 MG IV Every 6 hours
Comments: Monitor Blood Pressure
May contribute to falls
RX #: 003295278

06/04/13	1200 OLTIVAM at 1118 GAVE: 40 MG	
	NDC/DIN: (SOURCE: eMAR)	
	0409610204	
	117/62	
	EPDC 06/06/13-1120 by OLTIVAM	
	1800 OLTIVAM at 1706 GAVE: 40 MG	
	NDC/DIN: (SOURCE: eMAR)	
	0409610204	
	EPDC 06/06/13-1708 by OLTIVAM	
	2359 ONGJAC at 06/07/13 - 0029 GAVE: 40 MG	
	NDC/DIN: (SOURCE: eMAR)	
	0409610204	
	EPDC 06/07/13-0029 by ONGJAC	
	0600 ONGJAC at 0628 GAVE: 40 MG	
	NDC/DIN: (SOURCE: eMAR)	
	0409610204	
	BP120/62, K 4.4	
	EPDC 06/07/13-0640 by ONGJAC	

Iantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)

15 UNIT SUB-Q At bedtime

Comments: <BRK>

HIGH ALERT

Look-alike/sound-alike med

RX #: 003295806

Synthroid (Levothyroxine Sodium 125 MCG TAB)

125 MCG PO Daily before breakfast

Comments: Give on empty stomach

RX #: 003295807

06/05/13	Discontinue 1603 HLAIMI	
	A0 1630 OLTIVAM	
06/06/13	0700 ONGJAC at 0625 GAVE: 125 MCG	
	NDC/DIN: (SOURCE: eMAR)	
	5107944301	
	EPDC 06/07/13-0640 by ONGJAC	

LEW0125T - Levothyroxine sodium 125 MCG TA

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NAME: PARVIN, MARY JEAN

UNIT #: M053082

ACCT #: V024T03878

MEDICATION DISCHARGE SUMMARY

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ADMINISTRATION PERIOD: 0701 06/06/13 to 0700 06/07/13 (continued)

START/STOP

106/06/13 Pom Order 1603 HLATMI
EDIT 1605 NGUYTI
Verified 1605 NGUYTI
AO 1630 OLVYAM
2100 ONGJAC at 2039 SITE: UR - Upper extremity right GAVE: 20 UNIT
NDC/DIN: (SOURCE: eMAR) 0088222033
Chem strip: 120
FDOC 06/06/13-2039 by ONGJAC

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
20 UNIT SUB-Q At bedtime
Comments: <BRC>
HIGH ALERT
Look-alike/sound-alike med

RX #: 003297254

106/06/13
FDOC 06/06/13-2039 by ONGJAC

Novolog Slide (Novolog Sliding Scale 100 UNITS/ML)
See Dose Ins. SUB-Q Before meals & HS as needed/PRN
PRN Reason: Sliding scale
Dose Ins: Enter units administered
Comments: Follow Sliding Scale Protocol <BRC>
HIGH ALERT
Look-alike/sound-alike med

RX #: 003295267

106/04/13 0850 OLVYAM at 0850 SITE: ALIQ - Abdomen left upper quad GAVE: 5 UNIT
NDC/DIN: (SOURCE: eMAR) 0169750111
Chem strip: 209
FDOC 06/06/13-0853 by OLVYAM
DOSE changed from UNIT to 5 UNIT
1120 OLVYAM at 1120 SITE: ALIQ - Abdomen left lower quad GAVE: 5 UNIT
NDC/DIN: (SOURCE: eMAR) 0169750111
Chem strip: 202
FDOC 06/06/13-1120 by OLVYAM
DOSE changed from UNIT to 5 UNIT

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
20 MEQ PO Per Pharmacy Protocol/PRN
PRN Reason: Potassium Replacement
Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid only)
RX #: 003295273

106/04/13 2039 ONGJAC at 2039 GAVE: 20 MEQ
NDC/DIN: (SOURCE: eMAR) 0121146515
FDOC 06/06/13-2039 by ONGJAC

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
10 MEQ PO Per Pharmacy Protocol/PRN
PRN Reason: Potassium Replacement
Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid only)
RX #: 003295274

106/04/13 0702 RUSUNA at 0702 GAVE: 10 MEQ
NDC/DIN: (SOURCE: eMAR) 0121146515
FDOC 06/06/13-0703 by RUSUNA

ADMINISTRATION PERIOD: 0701 06/07/13 to 0700 06/08/13

START/STOP

POTAZOL - Potassium Chloride 10% 20 MEQ..

06/14/13
 NAME: PABVIN MARY JEAN
 UNIT #: M053082
 MEDICATION DISCHARGE SUMMARY
 ACCT #: V024703878
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ADMINISTRATION PERIOD:
 0701 06/07/13 to 0700 06/08/13 (continued)

HEPARIN PFS (HEPARIN (PORCINE))/PF 5,000 UNIT/0.5 ML PFS)
 5000 UNIT SUB-Q Three times daily
 RX #: 003295259

START/STOP					
06/04/13	1400	KWIAO at 1628 CO-SIGNER: ASUNJO	SITE: ALIO	- Abdomen left lower quad	GAVE: 5000 UNIT
		NDC/DIN: (SOURCE: eMAR)			
		0409131632			HEPA50001 - heparin (porcine)/pf 5,000 UN..
		EDOC 06/07/13-1633 by KWIAO			
		2200 BERCAS at 2234 CO-SIGNER: ANTCAD	SITE: ARLQ	- Abdomen right lower quad	GAVE: 5000 UNIT
		NDC/DIN: (SOURCE: eMAR)			
		0409131632			HEPA50001 - heparin (porcine)/pf 5,000 UN...
		EDOC 06/07/13-2236 by BERCAS			
		0600 BERCAS at 0551 CO-SIGNER: HAMECA	SITE: ALIQ	- Abdomen left lower quad	GAVE: 5000 UNIT
		NDC/DIN: (SOURCE: eMAR)			
		0409131632			HEPA50001 - heparin (porcine)/pf 5,000 UN...
		EDOC 06/08/13-0555 by BERCAS			

Aspirin (Aspirin 81 MG CHEWABLE TAB)
 81 MG PO Daily
 Comments: Must be taken with food/meal. Look-alike/sound-alike drug.
 RX #: 003295256

06/05/13	1000	KWIAO at 0903 GAVE: 81 MG			
		NDC/DIN: (SOURCE: eMAR)			
		637943403			ASPI10T - Aspirin 81 MG CHEWABLE TAB
		EDOC 06/07/13-0909 by KWIAO			

Coreg (Carvedilol 12.5 MG TAB)
 12.5 MG PO Twice daily
 Comments: Monitor HR & BP. Must be taken with food/meal.
 RX #: 003295258

06/04/13	1000	KWIAO at 0904 GAVE: 12.5 MG			
		NDC/DIN: (SOURCE: eMAR)			
		6838209401			CARV12.5T - Carvedilol 12.5 MG TAB
		EDOC 06/07/13-0909 by KWIAO			
		2200 BERCAS at 2234 GAVE: 12.5 MG			
		NDC/DIN: (SOURCE: eMAR)			
		6838209401			CARV12.5T - Carvedilol 12.5 MG TAB
		BP 110/53			
		HR 62			
		EDOC 06/07/13-2236 by BERCAS			

Lexapro * (Escitalopram Oxalate 10 MG TAB)
 10 MG PO Daily
 RX #: 003295263

06/05/13	1000	KWIAO at 0906 GAVE: 10 MG			
		NDC/DIN: (SOURCE: eMAR)			
		0093585101			ESCI10T - Escitalopram Oxalate 10 MG TAB
		EDOC 06/07/13-0909 by KWIAO			

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
 25 UNIT SUB-Q Daily at 0800
 Comments: <BRCC>
 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003295261

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NAME: PARVIN, MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: W024703878

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ADMINISTRATION PERIOD:
07/01/06/07/13 to 07/06/06/08/13 (CONTINUED)

START/STOP

Indur (Isosorbide Mononitrate 30 MG TAB)
30 MG PO Daily
Comments: Monitor HR and BP Do not crush or chew
RX #: 003295260

06/05/13 1000 KWIACO at 0905 GAVE: 30 MG
NDC/DIN: (SOURCE: eMAR)
6217512837
FDOC 06/07/13-0909 by KWIACO

IS0830T - Isosorbide Mononitrate 30 MG TA

Lipitor (Atorvastatin Calcium 20 MG TAB)
20 MG PO At bedtime
RX #: 003295264

06/04/13 2100 BERCAS at 2058 GAVE: 20 MG
NDC/DIN: (SOURCE: eMAR)
6808456511
FDOC 06/07/13-2108 by BERCAS

AF0R20T - Atorvastatin Calcium 20 MG TAB

Zaroxolyn (Metolazone 2.5 MG TAB)
2.5 MG PO Daily
Comments: Must be taken with food/meal.
May contribute to falls
RX #: 003295270

06/05/13 1000 KWIACO at 0909 GAVE: 2.5 MG
NDC/DIN: (SOURCE: eMAR)
0378617201
FDOC 06/07/13-0909 by KWIACO

ME02.5T - Metolazone 2.5 MG TAB

Micardis (Telmisartan 40 MG TAB)
80 MG PO Daily
RX #: 003295265

06/05/13 1000 KWIACO at 0907 GAVE: 80 MG
NDC/DIN: (SOURCE: eMAR)
0597004037
FDOC 06/07/13-0909 by KWIACO

TELM40T - Telmisartan 40 MG TAB

Catapres (CLONIDINE HCL 0.2 MG TAB)
0.2 MG PO At bedtime
Comments: Look-alike/sound-alike med
RX #: 003295257

06/04/13 2100 BERCAS at 2059 GAVE: 0.2 MG
NDC/DIN: (SOURCE: eMAR)
0378018610
BP 116/56
HR 64
FDOC 06/07/13-2108 by BERCAS

CLON1.2T - CLONIDINE HCL 0.2 MG TAB

06/14/13
 NAME: PARVIN, MARY JEAN
 UNIT #: M053082
 MEDICATION DISCHARGE SUMMARY
 ACCT #: V024703878
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ADMINISTRATION PERIOD:
 0701 06/07/13 to 0708 06/08/13 (continued)

0.9% Saline 50 ML
 (Sodium Chloride (0.9%) 50 ML)
 Rocephin 1000 MG
 (ceftriaxone sodium 1000 MG SD, VIAL)
 100 MG/HR IV Every 24 hours
 Comments: Warning: Administration Instructions-
 Must NOT be mixed or administered simultaneously with
 products containing CALCIUM SALTS, even via different
 infusion lines. Calcium containing products must not be
 administered within 48 hours of last administration of
 ceftriaxone.
 RX #: 003295276

Depoid * (Famotidine 20 MG TAB)
 20 MG PO Twice daily
 RX #: 003295268

START/STOP	DATE	AMOUNT	SOURCE	BY	PK	STRENGTH	FORM
	06/04/13	1000	KWJACO	at 0908	GAVE:	20 MG	FAM020T - Famotidine 20 MG TAB
			NDC/DIN:	(SOURCE: eMAR)			
			0172572860				
			FDOC 06/07/13-0909	By KWJACO			
			2200	BERCAS	at 2235	GAVE:	20 MG
			NDC/DIN:	(SOURCE: eMAR)			
			0172572860				
			FDOC 06/07/13-2236	By BERCAS			

Lasix (Furosemide 40 MG/4 ML SD, VIAL)
 40 MG IV Every 6 hours
 Comments: Monitor Blood Pressure
 May contribute to falls
 RX #: 003295278

START/STOP	DATE	AMOUNT	SOURCE	BY	PK	STRENGTH	FORM
	06/04/13	1200	KWJACO	at 1253	GAVE:	40 MG	FURO40I - Furosemide 40 MG/4 ML SD, VIAL
			NDC/DIN:	(SOURCE: eMAR)			
			0409610204				
			FDOC 06/07/13-1254	By KWJACO			
			1800	KWJACO	at 1837	GAVE:	40 MG
			NDC/DIN:	(SOURCE: eMAR)			
			0409610204				
			FDOC 06/07/13-1837	By KWJACO			
			2359	BERCAS	at 2318	GAVE:	40 MG
			NDC/DIN:	(SOURCE: eMAR)			
			0409610204				
			FDOC 06/07/13-2319	By BERCAS			
			0600	BERCAS	at 0551	GAVE:	40 MG
			NDC/DIN:	(SOURCE: eMAR)			
			0409610204				
			FDOC 06/08/13-0555	By BERCAS			

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 NAME: PARVIN MARY JEAN
 UNIT #: M053082
 MEDICATION DISCHARGE SUMMARY
 ACCT #: V024703878
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ADMINISTRATION PERIOD:
 0701 06/07/13 to 0700 06/08/13 (continued)

Synthroid (Levothyroxine sodium 125 MCG TAB)
 125 MCG PO Daily before breakfast
 Comments: Give on empty stomach
 RX #: 003295807

START/STOP	DATE/TIME	DESCRIPTION	AMOUNT	ROUTE	STATUS
	06/06/13	BERCAS at 0552 GAVE: 125 MCG			
		NDC/DIN: (SOURCE: EMAR)			
		5107944301			
		EDOC 06/08/13-0555 by BERCAS			
					LEV0125T - Levothyroxine sodium 125 MCG TA

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
 20 UNIT SUB-Q At bedtime
 Comments:

 HIGH ALERT
 Lock-alike/sound-alike med
 RX #: 003297254

START/STOP	DATE/TIME	DESCRIPTION	AMOUNT	ROUTE	STATUS
	06/06/13	2100 BERCAS at 2107 SITE: ARLQ - Abdomen right lower quad GAVE: 20 UNIT			
		NDC/DIN: (SOURCE: EMAR)			
		0088222033			
		Chem strip: 94			
		EDOC 06/07/13-2108 by BERCAS			
					GLARI - Insulin Glargine, Human 100 U..

0.9% Saline 250 ML
 (Sodium Chloride (0.9%) 250 ML)
 Vancomycin 1000 MG
 (Vancomycin HCl 1000 MG SD VIAL)
 250 MGS/HR IV Every 48 hours
 Comments: *BBW *GUARDRAILS*
 Check labs before administering med
 RX #: 003298780

START/STOP	DATE/TIME	DESCRIPTION	AMOUNT	ROUTE	STATUS
	06/08/13	Enter 0320 MAYKAR			
		AO 0334 BERCAS			
		0400 BERCAS at 0340 GAVE: 250 MGS			
		NDC/DIN: (SOURCE: EMAR)			
		0409710102			
		0409653501			
		Is there a trough level due prior to this dose?: N			
		CHEATTINNE: 2.19 H 06/06/13 0540			
		Vancomycin Trough: :			
		EDOC 06/08/13-0340 by BERCAS			
					NS250 - Sodium Chloride (0.9%) 250 ML
					VANCI - Vancomycin HCl 1000 MG SD VIAL

ADMINISTRATION PERIOD:
 0701 06/08/13 to 0700 06/09/13

Heparin PFS (Heparin (Porcine))/PF 5,000 UNIT/0.5 ML PFS)
 5000 UNIT SUB-Q Three times daily
 RX #: 003295259

START/STOP	DATE/TIME	DESCRIPTION	AMOUNT	ROUTE	STATUS
	06/04/13	1400 SCHWKR at 1416 CO-SIGNER: SUASNO SITE: ALUQ - Abdomen left upper quad GAVE: 5000 UNIT			
		NDC/DIN: (SOURCE: EMAR)			
		0409131632			
		EDOC 06/08/13-1421 by SCHWKR			
		2200 ARIAN at 2111 CO-SIGNER: DUTIME SITE: ARLQ - Abdomen right lower quad GAVE: 5000 UNIT			
		NDC/DIN: (SOURCE: EMAR)			
		0409131632			
		EDOC 06/08/13-2114 by ARIAN			
		0600 ARIAN at 0633 CO-SIGNER: DUTIME SITE: ARLQ - Abdomen right lower quad GAVE: 5000 UNIT			
		NDC/DIN: (SOURCE: EMAR)			
		0409131632			
		EDOC 06/09/13-0636 by ARIAN			
					HEPA5000I - heparin (porcine)/PF 5,000 UN...
					HEPA5000I - heparin (porcine)/PF 5,000 UN...

06/14/13

NAME: PARVIN MARY JEAN

UNIT #: M053082

MEDICATION DISCHARGE SUMMARY

ACCT #: W024703078

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ADMINISTRATION PERIOD:
07/01 06/08/13 to 07/06 06/09/13 (continued)

Aspirin (Aspirin 81 MG CHEWABLE TAB)
81 MG PO Daily
Comments: Must be taken with food/meal. Look-alike/sound-alike drug.
RX #: 003295256

06/05/13 1000 SCHWKR at 1106 GAVE: 81 MG
NDC/DIN: (SOURCE: eMAR)
6972943403
FDOC 06/08/13-1106 by SCHWKR

ASPI91T - Aspirin 81 MG CHEWABLE TAB

Coreg (Carvedilol 12.5 MG TAB)
12.5 MG PO Twice daily
Comments: Monitor HR & BP. Must be taken with food/meal.
RX #: 003295258

06/04/13 1000 SCHWKR at 1106 GAVE: 12.5 MG
NDC/DIN: (SOURCE: eMAR)
6838209401
FDOC 06/08/13-1106 by SCHWKR
2200 ARIILAN at 2113 GAVE: 12.5 MG
NDC/DIN: (SOURCE: eMAR)
6838209401
FDOC 06/08/13-2114 by ARIILAN

CARV12.5T - Carvedilol 12.5 MG TAB

Lexapro * (Escitalopram Oxalate 10 MG TAB)
10 MG PO Daily
RX #: 003295263

06/05/13 1000 SCHWKR at 1106 GAVE: 10 MG
NDC/DIN: (SOURCE: eMAR)
0093565101
FDOC 06/08/13-1106 by SCHWKR

ESCI10T - Escitalopram Oxalate 10 MG TAB

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
25 UNIT SUB-Q Daily at 0800
Comments: <BRK>

HIGH ALERT
Look-alike/sound-alike med
RX #: 003295261

06/05/13 *0800 SCHWKR at 0809 CP
Chem strip: 54
PT BLOOD SUGAR 54. CRACKERS AND APPLE JUICE GIVEN, DOCTOR
PAGED
FDOC 06/08/13-0810 by SCHWKR

Imdur (Isosorbide Mononitrate 30 MG TAB)
30 MG PO Daily
Comments: Monitor HR and BP Do not crush or chew
RX #: 003295260

06/05/13 1000 SCHWKR at 1108 GAVE: 30 MG
FDOC 06/08/13-1108 by SCHWKR

Lipitor (Atorvastatin Calcium 20 MG TAB)
20 MG PO At bedtime
RX #: 003295264

06/04/13 2100 ARIILAN at 2112 GAVE: 20 MG
NDC/DIN: (SOURCE: eMAR)
6808456511
FDOC 06/08/13-2114 by ARIILAN

ATOR20T - Atorvastatin Calcium 20 MG TAB

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 MEDICATION DISCHARGE SUMMARY
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ADMINISTRATION PERIOD:
 0701 06/08/13 to 0706 06/09/13 (continued)

Zaroxolyn (Metolazone 2.5 MG TAB)
 2.5 MG PO Daily
 Comments: Must be taken with food/meal.
 May contribute to falls
 RX #: 003295270

Micardis (Telmisartan 40 MG TAB)
 80 MG PO Daily
 RX #: 003295265

Catapres (CLONIDINE HCL 0.2 MG TAB)
 0.2 MG PO At bedtime
 Comments: Look-alike/sound-alike med
 RX #: 003295257

0.9% Saline 50 ML
 (Sodium Chloride (0.9%) 50 ML)
 Rocephin 1000 MG
 (Ceftriaxone Sodium 1000 MG SD VIAL)
 100 MGS/HR IV Every 24 hours
 Comments: Warning: Administration instructions-
 Must NOT be mixed or administered simultaneously with
 products containing CALCIUM SALTS, even via different
 infusion lines. Calcium containing products must not be
 administered within 48 hours of last administration of
 Ceftriaxone.

RX #: 003295276

Pepold * (Famotidine 20 MG TAB)
 20 MG PO Twice daily
 RX #: 003295268

06/04/13 1000 SCHWKR at 1105 GAVE: 2.5 MG
 NDC/DIN: (SOURCE: eMAR)
 0378617201
 EDOC 06/08/13-1108 by SCHWKR
 METOZ.5T - Metolazone 2.5 MG TAB

06/05/13 1000 SCHWKR at 1105 GAVE: 80 MG
 NDC/DIN: (SOURCE: eMAR)
 0597004037
 EDOC 06/08/13-1108 by SCHWKR
 TELM40T - Telmisartan 40 MG TAB

06/04/13 2100 ARTLAN at 2118 GAVE: 0.2 MG
 NDC/DIN: (SOURCE: eMAR)
 0378018610
 EDOC 06/08/13-2118 by ARTLAN
 CLON1.2T - clonidine HCL 0.2 MG TAB

06/05/13 1600 SCHWKR at 1633 GAVE: 50 MLs
 NDC/DIN: (SOURCE: eMAR)
 0409732201
 0264180031
 EDOC 06/08/13-1633 by SCHWKR
 CEFR11I - ceftriaxone sodium 1000 MG SD.
 NS50 - Sodium Chloride (0.9%) 50 ML

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ADMINISTRATION PERIOD:
0701 06/08/13 to 0700 06/09/13 (continued)

START/STOP

Lasix (Furosemide 40 MG/4 ML SD. VIAL)
40 MG IV Every 6 hours
Comments: Monitor Blood Pressure
RX #: 003295278

106/04/13	1200	SCHWRK	AT 1107 GAVE: 40 MG	
			NDC/DIN: (SOURCE: eMAR)	
			0409610204	
			EDOC 06/08/13-1108 by SCHWRK	
			1800 SCHWRK AT 1810 GAVE: 40 MG	
			NDC/DIN: (SOURCE: eMAR)	
			0409610204	
			EDOC 06/08/13-1810 by SCHWRK	
			2359 ARIIAN AT 06/09/13 - 0035 GAVE: 40 MG	
			NDC/DIN: (SOURCE: eMAR)	
			0409610204	
			EDOC 06/09/13-0035 by ARIIAN	
			0600 ARIIAN AT 0634 GAVE: 40 MG	
			NDC/DIN: (SOURCE: eMAR)	
			0409610204	
			EDOC 06/09/13-0636 by ARIIAN	

Synthroid (Levothyroxine Sodium 125 MCG TAB)
125 MCG PO Daily before breakfast
Comments: Give on empty stomach
RX #: 003295807

106/06/13	0700	ARIIAN	AT 0634 GAVE: 125 MCG	
			NDC/DIN: (SOURCE: eMAR)	
			5107944301	
			EDOC 06/09/13-0636 by ARIIAN	

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
20 UNIT SUB-Q At bedtime
Comments: <BRK>
HIGH ALERT
Lock-alike/sound-alike med
RX #: 003297254

106/06/13			Discontinue 0828 HIAIMI	
			AO 0839 SCHWRK	

Nystatin (Nystatin 15 GM POWDER)
See Dose Ins. TOP twice daily
RX #: 003298868

106/08/13			Admin Criterion Entered 0828 HIAIMI	
			Form Order 0828 HIAIMI	
			Verified 0830 NGUYTA	
			AO 0839 SCHWRK	
			1000 SCHWRK AT 1107 GAVE: 0 GM	
			EDOC 06/08/13-1108 by SCHWRK	
			DOSE changed from GM to 0 GM	
			2200 ARIIAN AT 2112 GAVE: 15 GM	
			NDC/DIN: (SOURCE: eMAR)	
			6830815215	
			EDOC 06/08/13-2114 by ARIIAN	
			DOSE changed from GM to 15 GM	

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NR515P - Nystatin 15 GM POWDER

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ADMINISTRATION PERIOD:
0701 06/08/13 to 0700 06/09/13 (CONTINUOUS)

START/
STOP

Iantus (Insulin Gargine, Human 100 UNIT/ML 10 ML VIAL)
 16 UNIT SUB-Q At bedtime
 Comments: <BRK>
 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003298869

06/08/13	Pom Order 0828 HLAWI	
	EDIT 0830 NGUYTA	
	Verified 0830 NGUYTA	
	AO 0839 SCHWR	
	2100 ARILAN at 2106 SITE: ARUQ - Abdomen right upper quad GAVE: 16 UNIT	
	NDC/DIN: (SOURCE: eMAR)	
	0088222033	
	Chem strip: 232	GLARI - Insulin Gargine, Human 100 U...
	FDOC 06/08/13-2114 by ARILAN	

Novolog Slide (Novolog Sliding Scale 100 UNITS/ML)
 See Dose Ins. SUB-Q Before meals & HS as needed/ERN
 PRN Reason: Sliding scale
 Dose Ins: Enter units administered
 Comments: Follow Sliding Scale Protocol <BRK>
 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003295267

06/04/13	1810 SCHWR at 1810 SITE: UBR - Upper extremity right GAVE: 3 UNIT	
	NDC/DIN: (SOURCE: eMAR)	
	0169750111	
	Chem strip: 181	NOVO-SLIDE - Novolog Sliding Scale 100 UNI..
	FDOC 06/08/13-1810 by SCHWR	
	Dose changed from UNIT to 3 UNIT	
	2107 ARILAN at 2107 SITE: AUUQ - Abdomen left upper quad GAVE: 5 UNIT	
	NDC/DIN: (SOURCE: eMAR)	
	0169750111	
	Chem strip: 232	NOVO-SLIDE - Novolog Sliding Scale 100 UNI...
	FDOC 06/08/13-2114 by ARILAN	
	Dose changed from UNIT to 5 UNIT	

ADMINISTRATION PERIOD:
 0701 06/09/13 to 0700 06/10/13

06/04/13	1400	
	Discontinue 1602	DISCHARGE

Heparin pfs (heparin (Porcine)/PF 5,000 UNIT/0.5 ML PFS)
 5000 UNIT SUB-Q Three times daily
 RX #: 003295259

KCl 10% Oral PROTOCOL (Potassium Chloride 10% Oral PROTOCOL)
 See Dose Ins. PO Per Pharmacy Protocol
 RX #: 003295271

06/04/13	Discontinue 1602	DISCHARGE
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Aspirin (Aspirin 81 MG CHEWABLE TAB)
 81 MG PO Daily
 Comments: Must be taken with food/meal. Look-alike/sound-alike drug.
 RX #: 003295256

06/05/13	1000 HUNZDI at 1037 GAVE: 81 MG	
	NDC/DIN: (SOURCE: eMAR)	
	6373943403	
	FDOC 06/09/13-1038 by HUNZDI	ASPIRIN - Aspirin 81 MG CHEWABLE TAB
	Discontinue 1602	DISCHARGE

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ADMINISTRATION PERIOD:
0701 06/09/13 to 0700 06/10/13 (Current Inpatient)

Coreg (Carvedilol 12.5 MG TAB)
12.5 MG PO Twice daily
Comments: Monitor HR & BP. Must be taken with food/meal.
RX #: 003295258

Lexapro * (Escitalopram Oxalate 10 MG TAB)
10 MG PO Daily
RX #: 003295263

Lantus (Insulin Glargine, Human 100 UNIT/ML 10 ML VIAL)
25 UNIT SUB-Q Daily at 0800
Comments: <BRC>
HIGH ALERT
Look-alike/sound-alike med

Indur (Isosorbide Mononitrate 30 MG TAB)
30 MG PO Daily
Comments: Monitor HR and BP Do not crush or chew
RX #: 003295260

Lipitor (Atorvastatin Calcium 20 MG TAB)
20 MG PO At bedtime
RX #: 003295264

Zaroxolyn (Metolazone 2.5 MG TAB)
2.5 MG PO Daily
Comments: Must be taken with food/meal.
May contribute to falls
RX #: 003295270

START/STOP	DATE	DESCRIPTION	REASON
	06/04/13	1000 HUNZDI at 1037 GAVE: 12.5 MG NDC/DIN: (SOURCE: eMAR) 6838209401 FDOC 06/09/13-1038 by HUNZDI Discontinue 1602 DISCHARGE	CRV12.5F - Carvedilol 12.5 MG TAB
	06/05/13	1000 HUNZDI at 1037 GAVE: 10 MG NDC/DIN: (SOURCE: eMAR) 0093505101 FDOC 06/09/13-1038 by HUNZDI Discontinue 1602 DISCHARGE	ESCI10F - Escitalopram Oxalate 10 MG TAB
	06/05/13	*0800 HUNZDI at 0758 CP Chem strip: 52 FDOC 06/09/13-0759 by HUNZDI 0902 HUNZDI at 0902 SITE: UR - Upper extremity right GAVE: 25 UNIT NDC/DIN: (SOURCE: eMAR) 0086222033 Chem strip: 52 FDOC 06/09/13-0903 by HUNZDI Discontinue 1602 DISCHARGE	GLAR1 - Insulin Glargine, Human 100 U..
	06/05/13	1000 HUNZDI at 1036 GAVE: 30 MG NDC/DIN: (SOURCE: eMAR) 6808459111 FDOC 06/09/13-1038 by HUNZDI Discontinue 1602 DISCHARGE	IS0830T - Isosorbide Mononitrate 30 MG TA
	06/04/13	Discontinue 1602 DISCHARGE	
	06/05/13	1000 HUNZDI at 1036 GAVE: 2.5 MG NDC/DIN: (SOURCE: eMAR) 0378617201 FDOC 06/09/13-1038 by HUNZDI Discontinue 1602 DISCHARGE	ME702.5F - Metolazone 2.5 MG TAB

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ADMINISTRATION PERIOD:	START/STOP	
07/1 06/09/13 to 07/08 06/10/13 (Continued)		

Micardis (Telmisartan 40 MG TAB)
 80 MG PO Daily
 RX #: 003295265

06/05/13	1000 HUNZDI at 1036 GAVE: 80 MG NDC/DIN: (SOURCE: eMAR) 0597004037 FDOC 06/09/13-1038 by HUNZDI	TELMISARTAN - Telmisartan 40 MG TAB
	Discontinue 1602	DISCHARGE

Catapres (CLONIDINE HCL 0.2 MG TAB)
 0.2 MG PO At bedtime
 Comments: look-alike/sound-alike med
 RX #: 003295257

06/04/13	Discontinue 1602	DISCHARGE
----------	------------------	-----------

0.9% Saline 250 ML
 (Sodium Chloride (0.9%) 250 ML)
 Vancomycin 1000 MG
 (Vancomycin HCl 1000 MG SD VIAL)
 250 ML/HR IV Per Pharmacy Protocol
 Comments: *BBW* *GUARDRAILS*
 Check labs before administering med
 RX #: 003295279

06/04/13	Discontinue 1602	DISCHARGE
----------	------------------	-----------

0.9% Saline 50 ML
 (Sodium Chloride (0.9%) 50 ML)
 Rocephin 1000 MG
 (Ceftriaxone Sodium 1000 MG SD VIAL)
 100 ML/HR IV Every 24 hours
 Comments: Warnings: Administration Instructions-
 Must NOT be mixed or administered simultaneously with
 products containing CALCIUM SALTS, even via different
 infusion lines. Calcium containing products must not be
 administered within 48 hours of last administration of
 ceftriaxone.
 RX #: 003295276

06/05/13	Discontinue 1602	DISCHARGE
----------	------------------	-----------

Depoid * (Famotidine 20 MG TAB)
 20 MG PO twice daily
 RX #: 003295268

06/04/13	1000 HUNZDI at 1036 GAVE: 20 MG NDC/DIN: (SOURCE: eMAR) 0172572860 FDOC 06/09/13-1038 by HUNZDI	FAMOTIDINE - Famotidine 20 MG TAB
	Discontinue 1602	DISCHARGE

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ADMINISTRATION PERIOD:	START/STOP	
0781 06/09/13 to 0780 06/10/13 (continued)		

Lasix (Furosemide 40 MG/4 ML SD.VIAL)
 40 MG IV Every 6 hours
 Comments: Monitor Blood Pressure May contribute to falls
 RX #: 003295278
 Discontinue 1602 DISCHARGE

Synthroid (Levothyroxine Sodium 125 MCG TAB)
 125 MCG PO Daily before breakfast
 Comments: Give on empty stomach
 RX #: 003295807
 Discontinue 1602 DISCHARGE

0.9% Saline 250 ML
 (Sodium Chloride (0.9%) 250 ML)
 Vancomycin 1000 MG
 (Vancomycin HCl 1000 MG SD.VIAL)
 250 ML/HR IV Every 48 hours
 Comments: *BBW* *GUARDRAILS*
 Check Labs before administering med
 RX #: 003298780
 Discontinue 1602 DISCHARGE

Nystatin (Nystatin 15 GM POWDER)
 See Dose Ins. TOP Twice daily
 RX #: 003298868
 Discontinue 1602 DISCHARGE

Lantus (Insulin Glargine, Human 100 UNIT/MG 10 ML VIAL)
 16 UNIT SUB-Q Ac bedtime
 Comments: <BRK>
 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003298869
 Discontinue 0842 HIAIMI
 AO 0845 HUNZDI

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ADMINISTRATION PERIOD:	START/	STOP
0701 06/09/13 to 0708 06/10/13 (continued)		

Novo 10 (HYDROCODONE/ROXETAMINOPHEN 10 MG/325 MG TAB)
 1 TAB PO Every 6 hours as needed/PRN
 ERN Reason: Pain, severe
 Comments: *BBW* Max dose: 3000 mg Acetaminophen/24H
 Look-alike/sound-alike drug. May contribute to falls
 RX #: 003295266

Novolog Slide (Novolog Sliding Scale 100 UNITS/ML)
 See Dose Ins. SUB-Q Before meals & HS as needed/PRN
 PRN Reason: Sliding scale
 Dose Ins: Enter units administered
 Comments: Follow Sliding Scale Protocol <BRCC>
 HIGH ALERT
 Look-alike/sound-alike med
 RX #: 003295267

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
 40 MEQ PO Per Pharmacy Protocol/PRN
 PRN Reason: Potassium Replacement
 Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid Only)
 RX #: 003295272

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
 20 MEQ PO Per Pharmacy Protocol/PRN
 PRN Reason: Potassium Replacement
 Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid Only)
 RX #: 003295273

Potassium 10% Udc (Potassium Chloride 10% 20 MEQ/15 ML UDC)
 10 MEQ PO Per Pharmacy Protocol/PRN
 PRN Reason: Potassium Replacement
 Comments: Potassium Oral/Enteral Protocol (KCl 10% liquid Only)
 RX #: 003295274

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REASON: CODES

AG - Already given
CP - Clinical parameters
NG - Not given

SITE: CODES

ALUQ - Abdomen left lower quad
ALUQ - Abdomen left upper quad
ARUQ - Abdomen right lower quad
ARUQ - Abdomen right upper quad
UBL - Upper extremity left
UR - Upper extremity right

ACTIVITY: CODES
* - Not Administered
AO - Nursing Acknowledged Order
CAN - Canceled Order
DC - Pharmacy Discontinue
ED - Pharmacy Edit or Verification
ENTER - Order Entry
FDOC - File Document
REASSESS - Nursing Reassessment

ELECTRONICALLY SIGNED BY

USER: ANDREI - ANDERSON, DIANNE RN
USER: BERGAS - BERGHEIL, ASHLEY RN
USER: HUNZDI - HUNZIKER, DIANNE RN
USER: OLIVAM - OLIVERIA, AMANDA RN
USER: STELEV - STEINBERG, EVAN RN

USER: ANTCAD - ANTCEF, ADERLITO RN
USER: DRESNA - SANDHU, NAVNEET RN
USER: KUMJST - KUM, STACY RN
USER: ONGJAC - ONG, JACLYN RN
USER: SUASNO - SUSAN, NORLETA RN

USER: ASUNDO - ASUNCION, JOSHUA RN
USER: HARBON - HAMEL, CARLY RN
USER: IORRER - LOWRY, ERICA RN
USER: SCHERR - SCHWARTZ, KRISTI RN
USER: YADAVE - YADAO, JENIFE V RN

OTHER USERS

USER: CARTCH - CARTER, CHRISTIAN PA
USER: MAYKAR - MAY, KARL
USER: THALMA - THALKEN, MARK

USER: HILAIMI - HILAIMING, MIN M MD
USER: NGUYTA - NGUYEN, TAMMIE
USER: HOANB - HOANG, BRIAN
USER: NGUUTI - NGUYEN, TIN

USER: LEUNW - LEUNG, WILSON
USER: OSHIMA - OSHITA, MASARU MD

ALLERGY: DETAILS

COMBINED ALLERGY HISTORY

09/14/10 1104 MRI GONZVI - GONZALES, VICTORIA

by GONZVI

UCONV Allergic reaction-
OLD:
NEW: Converted from Medical Records Demo Recall Database
UCONV
Drug Allergy/Reaction
OLD:
NEW: Converted from Medical Records Demo Recall Database
UCONV
Food Allergy-
OLD:
NEW: Converted from Medical Records Demo Recall Database
ALLERGIS CONVERTED
Sulfa (Sulfonamide Antibiotics)
by GONZVI

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OLD:
 NEW: Converted from PHA.LMH Database
 ALLERGIES CONVERTED by GONZVI
 Latex

OLD:
 NEW: Converted from PHA.LMH Database
 ALLERGIES CONVERTED by GONZVI
 Sulfa (Sulfonamide Antibiotics)

OLD:
 NEW: Converted from RXM.LMH Database
 ALLERGIES CONVERTED by GONZVI
 Latex

OLD:
 NEW: Converted from RXM.LMH Database
 EDITED by WILLMA
 Sulfa (Sulfonamide Antibiotics)

OLD: Date: 11/21/07
 NEW: Date: 10/19/10 (Update)
 EDITED by WILLMA
 Latex

OLD: Date: 05/05/09
 NEW: Date: 10/19/10 (Update)
 EDITED by WILLMA
 Sulfa (Sulfonamide Antibiotics)

OLD: Date: 10/19/10
 NEW: Date: 10/19/10 (Update)
 EDITED by WILLMA
 Latex

OLD: Date: 10/19/10
 NEW: Date/Time: 10/19/10/0456 (Update)
 EDITED by TRUUTI
 Sulfa (Sulfonamide Antibiotics)

OLD: Type: Allergy
 NEW: Type: AdvReac
 EDITED by TRUUTI
 Sulfa (Sulfonamide Antibiotics)

OLD: Date: 10/19/10
 NEW: Date: 10/25/10 (Update)
 EDITED by TRUUTI
 Latex

OLD: Date: 10/19/10
 NEW: Date: 10/25/10 (Update)
 DELETED by TRUUTI
 (Continued)

OLD: (Continued) deleted.
 NEW:
 DELETED by TRUUTI
 Allergic reaction-

OLD: Allergic reaction- deleted.
 NEW:
 DELETED by TRUUTI
 Drug Allergy/Reaction

OLD: Drug Allergy/Reaction deleted.
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10/25/10 1553 RXM TRUUTI - TRUUTI, TIFPANY D

10/19/10 0456 NUR WILLMA - WILLIAMSON, MARY J

10/19/10 0359 RXM WILLMA - WILLIAMSON, MARY J

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03/07/11 1102 RXM TRULTI - TRULL, TIFFANY D
 NEW: DELETED by TRULTI
 Food Allergy-
 OLD: Food Allergy- deleted.
 NEW: EDITED
 Sulfu (Sulfonamide Antibiotics) by TRULTI
 OLD: Patient Reaction:
 NEW: Patient Reaction: Convulsions
 FILED by TRULTI

06/14/11 0956 RXM TRULTI - TRULL, TIFFANY D
 TEXT: User filed without changing allergy record.
 FILED by TRULTI

07/05/11 1455 RXM TRULTI - TRULL, TIFFANY D
 TEXT: User filed without changing allergy record.
 FILED by TRULTI

12/27/11 1352 RXM TRULTI - TRULL, TIFFANY D
 TEXT: User filed without changing allergy record.
 FILED by TRULTI

02/28/12 1035 RXM TRULTI - TRULL, TIFFANY D
 TEXT: User filed without changing allergy record.
 FILED by TRULTI

05/11/12 1214 RXM CANTCH - DRAIN, CHRISTINE
 TEXT: User filed without changing allergy record.
 EDITED by CANTCH

05/11/12 1720 PHA THALMA - THALKEN, MARK
 OLD: Allergy List Confirmed: Date: 05/11/12 - Time: 1214
 TEXT: List Confirmed:
 Sulfu (Sulfonamide Antibiotics), latex
 EDITED by THALMA
 Sulfu (Sulfonamide Antibiotics)
 OLD: Severity: Unknown
 NEW: Severity: Severe
 ADDED by OCAMSH
 morphine
 OLD:
 NEW: morphine added. MORPHINE
 FILED by MAYRAR

05/11/12 2300 PHA MAYRAR - MAY, KARL
 TEXT: User filed without changing allergy record.
 EDITED by OCAMSH
 morphine
 OLD: Type: Allergy
 NEW: Type: AdvReac
 FILED by TOYDEB

05/12/12 0052 RXM OCAMSH - OCAMPO, SHARON
 TEXT: User filed without changing allergy record.
 EDITED by OCAMSH
 morphine
 OLD: Type: Allergy
 NEW: Type: AdvReac
 FILED by TOYDEB

05/12/12 0819 PHA TOYDEB - TOY, DEBRA
 TEXT: User filed without changing allergy record.
 EDITED by LACYME
 morphine
 OLD: Type: Allergy
 NEW: Type: AdvReac
 FILED by TOYDEB

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LACYME - LACY, MELANIE

07/02/12 1304 RXM

LACYME - LACY, MELANIE

TEXT: User filed without changing allergy record.
EDITED by LACYME

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09/05/12 0408 RXM SINGSAI - SINGH, SACHIN A

OLD: Date: 05/11/12 - Time: 1214
NEW: Allergy List Confirmed: Date: 07/02/12 - Time: 1304
TEXT:
List Confirmed:
sulfa(sulfonamide Antibiotics), morphine, latex
FILED
by SINGSAI

09/05/12 0609 PHA NGUYEN - NGUYEN, TIN

TEXT:
User filed without changing allergy record.
FILED
by NGUYEN

09/05/12 1112 RXM MOEDKA - MOEDE, KATHERINE

TEXT:
User filed without changing allergy record.
EDITED
by MOEDKA
sulfa(sulfonamide Antibiotics)
OLD: Date: 07/02/12
NEW: Date: 09/05/12 (Confirm)
EDITED
by MOEDKA
latex

09/05/12 1114 RXM MOEDKA - MOEDE, KATHERINE

OLD: Date: 07/02/12
NEW: Date: 09/05/12 (Confirm)
EDITED
by MOEDKA
morphine
OLD: severity: Severe
NEW: severity: Mild
EDITED
by MOEDKA
morphine
OLD: Patient Reaction: DIFFICULTY OF BREATHING
NEW: Patient Reaction: MAKES HER FEEL FUNNY
FILED
by THALMA

09/05/12 1133 PHA THALMA - THALKEN, MARK

TEXT:
User filed without changing allergy record.
EDITED
by WALICH

09/27/12 0815 RXM WALICH - RHOADES, CHRISTINE

OLD: Date: 07/02/12 - Time: 1304
NEW: Allergy List Confirmed: Date: 09/27/12 - Time: 0815
TEXT:
List Confirmed:

sulfa(Sulfonamide Antibiotics), morphine, latex
EDITED
by ATWASA
sulfa(Sulfonamide Antibiotics)
OLD: Patient Reaction: Convulsions
NEW: Patient Reaction: CONVULSIONS; REACTION AS A CHILD. OK TO TAKE LASIX
EDITED
by CUSIKE

01/26/13 1459 RXM CUSIKE - CUSIDGE, KELLY

OLD: Date: 09/27/12 - Time: 0815
NEW: Allergy List Confirmed: Date: 01/26/13 - Time: 1459
TEXT:
List Confirmed:
sulfa (sulfonamide Antibiotics), morphine, latex
by TRULTI
EDITED

04/02/13 0932 RXM TRULTI - TRULL, TIFFANY D

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This document is part of the legal medical record.

06/14/13

NAME: PARVIN, MARY JEAN

MEDICATION DISCHARGE SUMMARY

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UNIT #: M053082

ACCT #: V024103878

04/14/13 0832 RXM JACIAL - JACINTO, ALEXANDRA M

OLD: Date: 01/26/13 - Time: 1459
NEW: Allergy List Confirmed: Date: 04/02/13 - Time: 0932
TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
by JACIAL
EDITED

04/14/13 1422 RXM BENNEL - BENNETT, ELIZABETH

OLD: Date: 04/02/13 - Time: 0932
NEW: Allergy List Confirmed: Date: 04/14/13 - Time: 0832
TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
by BENNEL
EDITED

04/19/13 1243 ADM CHAICH - CHAIDEZ, CHRIS

OLD: Date: 04/14/13 - Time: 0832
NEW: Allergy List Confirmed: Date: 04/14/13 - Time: 1422
TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
by CHAICH
FILED

04/19/13 1247 ADM CHAICH - CHAIDEZ, CHRIS

TEXT:
User filed without changing allergy record.
FILED
by CHAICH

04/25/13 1243 RXM TRULTI - TRULLI, TIFFANY D

TEXT:
User filed without changing allergy record.
EDITED
by TRULTI

04/29/13 1040 RXM JACIAL - JACINTO, ALEXANDRA M

OLD: Date: 04/14/13 - Time: 1422
NEW: Allergy List Confirmed: Date: 04/25/13 - Time: 1243
TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
by JACIAL
EDITED

05/16/13 0825 RXM TRULTI - TRULLI, TIFFANY D

OLD: Date: 04/25/13 - Time: 1243
NEW: Allergy List Confirmed: Date: 04/29/13 - Time: 1040
TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
by TRULTI
EDITED

06/04/13 1404 RXM JACIAL - JACINTO, ALEXANDRA M

OLD: Date: 04/29/13 - Time: 1040
NEW: Allergy List Confirmed: Date: 05/16/13 - Time: 0825
TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
by JACIAL
EDITED

OLD: Date: 05/16/13 - Time: 0825
NEW: Allergy List Confirmed: Date: 06/04/13 - Time: 1404
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NAME: PARVIN, MARY JEAN

MEDICATION DISCHARGE SUMMARY

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UNIT #: M053082

ACCT #: 0024703878

06/04/13 1453 PHA THALMA - THAKREN, MARK

TEXT:
List Confirmed:
Sulfa (sulfonamide Antibiotics), morphine, latex
FILED by THALMA

06/04/13 2252 RXM RUSUNA - RUSU, NATELLA

TEXT:
User filed without changing allergy record.
FILED by RUSUNA

TEXT:
User filed without changing allergy record.