

Ex. 39

HARLEM HOSPITAL MEDICAL CENTER

506 LENOX AVENUE
NEW YORK, N. Y. 10037

DISCHARGE INFORMATION AND RESUME - PAGE 2

DATE OF DISCHARGE _____

IF DISCHARGE RESUME IS DICTATED COMPLETE THIS PAGE ONLY.

DATE OF DICTATION _____

CODE _____

PLEASE PRINT ALL ENTRIES

DIAGNOSIS ON ADMISSION: ① Multiple gun shot wounds			
ALL DIAGNOSES AT THE TIME OF DISCHARGE (DO NOT ABBREVIATE)			
PRINCIPAL DX: ① Multiple gun shot wounds to face, chest,			
SECONDARY DXS: ② depressed, upper extremities			
③ mandibular angle fracture			
④ para-symphysis fracture			
⑤ lower anterior alveolar fracture			
⑥ Hx asthma			
SURGICAL AND ALL OTHER PROCEDURES: (DO NOT ABBREVIATE):			
	MO	DAY	YR
- IV mandamine and W antibiotics, decan,			
Upromycin aminophyllin			
- debridement of gun shot wound	07	26	90
- cephalosporin fixation	07	26	90
- Extraction tooth #27, stent placement	07	26	90
LIST INFECTIONS: BEFORE ADMISSION: none			
DURING HOSPITALIZATION:			
WAS ADVERSE DRUG REACTION PRESENT? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES TO WHAT DRUG?			
COMPLETE IF MALIGNANT NEOPLASM PRESENT: MICROSCOPICALLY CONFIRMED <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNKNOWN			
PRIMARY SITE _____		HISTOLOGIC TYPE _____	
STAGE OF DISEASE <input type="checkbox"/> In Situ <input type="checkbox"/> Localized <input type="checkbox"/> Regional Involvement <input type="checkbox"/> Distant Metastatic <input type="checkbox"/> Stage Unknown			
DISCHARGE DISPOSITION: <input checked="" type="checkbox"/> Home <input type="checkbox"/> Skill Nurs. Fac. <input type="checkbox"/> Health Related Fac. <input type="checkbox"/> Domic. Care <input type="checkbox"/> Other Acute Inst.			
<input type="checkbox"/> Other Inst. <input type="checkbox"/> MMTP <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> AGAINST MEDICAL ADVICE <input type="checkbox"/> EXPIRED			
PLAN FOR CONTINUING CARE			
MEDICATIONS: (LIST MEDICATIONS AND DOSAGE PRESCRIBED AT DISCHARGE): IF NONE, CHECK HERE <input type="checkbox"/>			
① Clestin 300mg T Q6H x 7 dgs			
② Plavix 10.3 T-TI q4h pr pain			
③ Zovirax 100mg PO BID			
DIET: <input type="checkbox"/> No Restrictions <input checked="" type="checkbox"/> Restricted, (specify) full liquid diet			
ACTIVITY: <input type="checkbox"/> No Restrictions <input checked="" type="checkbox"/> Restricted, (specify) no contact sport, strength exercise			
PATIENT TO BE FOLLOWED: Office Home			
<input type="checkbox"/> Care Within Weeks <input type="checkbox"/> Health Care <input checked="" type="checkbox"/> Other, (specify) Medicine, OMB, gender			
Follow-Up-HHMC Oral surgery clinic		8/3/90	
SPECIFY CLINIC OR PROGRAM		DATE OF APPT	
Admitting Office notified of this discharge on _____ At _____ am/pm BY _____ 285			
COMPLETED BY D. Corbett MD		SIGNATURE ATTENDING PHYSICIAN _____	
SIGNATURE D. Corbett MD		SIGNATURE _____	
PRINT NAME D. Corbett MD		PRINT ATTENDING NAME _____	
DATE 7/31/90		DATE _____	

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NEW YORK CITY HEALTH & HOSPITALS CORPORATION
 HARLEM HOSPITAL CENTER
 506 Lenox Avenue
 New York, N.Y. 10037

117-25
 -6
 7-17-90

Unknown Female #1
 JOSEPHINE MENDEZ
 117 2500

ADMISSION HISTORY AND PHYSICAL EXAMINATION

SERVICE TRAUMA ATTENDING MD Guiliani RESIDENT MD Navlath

DATE & TIME 7/17/90 INFORMANT _____

CHIEF COMPLAINT
 * Patient sustained (GSU) to face, chest and upper extremities.

HISTORY OF PRESENT ILLNESS:
 57 yr. old hispanic female came to the ER by EMS with the history of sustained multiple GSUs to the face, chest and upper extremities. Patient was reportedly hypotensive at the scene and arrived with MAST pants on. The patient was hemodynamically stable on arrival and was bleeding from facial injuries which was controlled with pressure. She was subsequently intubated to secure the airway. After stabilization with fluids and vital signs the MAST pants were deflated. Patient is conscious but agitated.

MEDICATION	DOSAGE	TIME	NURSE	TIME					
					T				
					BP				
					P				
					R				

HISTORY AND PHYSICAL EXAMINATION - TIME

ALLERGY NO YES TYPE:

Patient brought in by EMS with GCS
to the face and stable - on scene. Patient
Assess E Most Trauma

1/2 Conscious with slow response to
mouth, swell tongue and difficulty to
mandible -

* Multiple abrasions - on chest
* Bruise found near
neck R2L

Distal leg

Defect on the right upper extremity
BP 110/70 P 90

Distal

* Multiple abrasions - on lower extremities
shin

by GCS & Face

Shin C-spine
Chest

Upper extremity

Multiple abrasions *
Chest. Swell on right upper limb

Wound on right chest 12cm x 1cm

1cm x 1cm WPS

Tetanus status on file in.

Arched note

700 - post process delay, lactate noted as 0
but aspect of tongue cut area, the oral wound is noted
the bottom of the throat. Distal

RX

CONDITION ON DISCHARGE:

IMPROVED

OTHER:

CONSULTS ORDERED

INSTRUCTIONS:

INSTRUCTIONS UNDERSTOOD

NURSES NOTES

PATIENT'S SIGNATURE

See PCA sheet

NURSE'S SIGNATURE

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TIN



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 HARLEM HOSPITAL CENTER
 506 Lenox Avenue
 New York, N.Y. 10037

117-25
 90-1701-2
 MEMO 7 10
 7-17-98

ADMISSION HISTORY AND PHYSICAL EXAMINATION-PAGE 5

PHYSICAL EXAMINATION

BLOOD PRESSURE: 140/90 PULSE: 98 RESP: — TEMP: —

GENERAL: obese middle aged elderly hispanic woman is in moderate distress

HEAD: Normocephalic

EYES (including funduscopic): pupils 3 mm equally reacting to light bilaterally

EARS: no bleeding or discharge

NOSE: no bleeding or discharge

THROAT: bleeding from intraoral wound and free easily

NECK (including thyroid): mobile mandibular segment 0.5 cm below at the level of cricoid cartilage over middle of the

CHEST/THORAX: sternocleidomastoid - carotid pulse palpable

LUNGS: good air entry bilaterally clear to percussion & auscultation

HEART: 1) A-GW 0.5 cm at 1st ICS on left side
 2) A-GW 0.5 cm on 6th ICS mid clavicular line
 3) A-GW 0.5 cm on Rt. anterior axillary line in 4th ICS

Heart: S1, S2 heard, no murmur

BREASTS: —

ABDOMEN: full but not distended no palpable tender mass or rigidity

BACK: normal



ADMISSION HISTORY AND PHYSICAL EXAMINATION-PAGE 6

GENITALIA:

PELVIC:

RECTAL:

EXTREMITIES (including Pulses): (RT) 0.5 cm puncture wound on 1/2 of lateral arm and another 0.5 cm puncture wound at 1/2 of medial aspect of arm

SKIN: 0.5 cm puncture wound lat. lower 1/2 of forearm and another middle 1/2 of forearm

NEUROLOGICAL: (L) hand has 0.5 cm OSW on dorsum of hand with carbon particles, another 0.5 cm OSW on wrist anteriorly. Pulsations are normal on both upper limbs

Neuro: Considered, no gross motor or sensory loss

SPECIAL EXAMINATIONS:

Face:
 LABORATORY RESULTS: (1) 0.5 cm puncture wound at pt mid mandibular area
 (2) 0.5 cm wound at (RT) zygomatic area

CHEST X-RAY: (2) 0.5 cm wound mid mandibular areas on (L)

ELECTROCARDIOGRAM:

OTHER: 293



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HARLEM HOSPITAL CENTER
506 Lenox Avenue
New York, N.Y. 10037-77

117-25-00

7-17-90

ADMISSION HISTORY AND PHYSICAL EXAMINATION-PAGE 7

SUMMARY:

DIAGNOSES/IMPRESSIONS:

Multiple GSW to Face,
Chest and both upper extremities
with fractured mandible
and severe soft tissue swelling
with a fractured wrist bones.

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Chart No. 117 2500

HOSPITAL

Durham

117-2500
961701-0
MENDOZ JOSEPHINE
7-17-90

PROGRESS RECORD

Name Josephine Mendez Admitted 19 Ward

Observations and Opinions of Visitings, Consultants and House Staff.
A Final Discharge Note Must Be Entered on This Sheet. Sign and Date Every Entry.

7/17 Ortho Consult

- CTSP 8:30 pm for GSW @ hand

PT has multiple GSW (chest, mandible, R forearm, R humerus, L hand), all through and through, admitted to ICU trauma service. * * * * *

PE Intubated, alert, follows commands

BP 126/80 RR 23

L hand Radial pulse 2+ (proximal to GSW)

* Through and through GSW @ palm, from base of 5th metacarpal volar palm to base of 1st metacarpal volar palm.

Wound irrigated, dressed w gauze

Radial, median, ulnar nerves intact

Good cap refill to fingers

X-ray L hand comminuted fx base 5th, 4th metacarpals

Plan Ulnar gutter

Elevation L arm

✓ post reduction x-ray

Follow NV exam

Will follow trauma service

Discussed w Dr. Shalton

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R. J. Jolson
Continue Notes on Other

0.5cm GSW (L) Cheek overlying zygoma

0.5cm GSW (L) Chin, 1cm GSW (R) Chin (through Mandibular
~~bone)~~

NECK: 1cm GSW (L) Neck at level of cricoid cartilage and
 along ant. border SCM. No hemorrhage. Cerebral pulse
 2+. (L) Bruise TVP → 0

CHEST: 1cm GSW (L) 4th ICS, MCL

1cm GSW (L) 1st ICS, MCL

1cm GSW (R) 3rd ICS, AXIL

BS equal bilat

CVS: S1S2 @ murmur.

RES: Soft, non-tender, BSO

EXTS: Moving all limbs.

1cm GSW post. aspect (R) Shoulder, and 1cm GSW ant.
 aspect of (R) Shoulder

Through & through GSW mid (R) Forearm & 2+ Rad pulse
 and no neurologic deficits

1cm GSW (L) Wrist flex aspect on the radial side and

1.5cm GSW exten aspect of (L) Hand over the base of 5th finger

Absent distal radial pulse, but ulna pulse 2+. Hand warm
 & good capillary refill, and no neuro deficits. Swelling (L) forearm
 neuro! No gross motor/sensory deficits

Xrays: Skull, Spine, CXR, (R) Shoulder/Forearm - WNL

Face - comminuted ^{comp} Fr (R) Mandible, Fr (L) Mandible

Comminuted Fr (L) 4, 5th metacarpal ? Fr 3rd MC.

N/G - food debris

Foley - Clear urine

Chart No. 1172500
HOSPITAL HARLEM

117-25-00 F.
961701-0
HENDEZ JOSEPHINE
9-8-77
7-17-90

PROGRESS RECORD

Name Mendez Josephine Admitted 19 Ward

Observations and Opinions of Visitings, Consultants and House Staff.
A Final Discharge Note Must Be Entered on This Sheet. Sign and Date Every Entry.

APR ① Multiple GSWs to the Face/Neck/Chest
& Upper limbs ±

- Comm. Comp bilat Mandibular Fr
- Comm. Comp Fr ② 5th metacarpal, Fr 4) Fr 3rd metacarp
- ① Radial artery injury, but hand without signs of ischemia (good Ulnar pulse)

② Head Trauma

③ NPO, IV Antibiotics, Tet band

④ CBC, Sm, BUN, PT, PTT, UA, T&K, toxology

⑤ Orthopedics & Oral Surgery Consults

⑥ Close observation in the ICU

⑦ Will discuss attending any further diagnostic tests.

7/18/90 TRAUMA ATIE AS J. Vinski
Necktie saw face, lower chest
Rx in of forehead, left h.

Fr of both hands, he looks
me in under injury 299

MONITOR & FOLLOW FOR INTERVAL
Continue Notes on Other S

WTR: Rios

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION
EDOARDO GIULIANI, M.D.
ATTENDING SURGEON 060145

Chart No. _____
 HOSPITAL Harlem 117-25-00 F.
 961701-0
PROGRESS RECORD MENDEZ JOSEPHINE
 Name _____ Admitted _____ 19 ____ Ward _____

Observations and Opinions of Visiting Consultants and House Staff.
 A Final Discharge Note Must Be Entered on This Sheet. Sign and Date Every Entry.

7/17/90, OMTS R3 note
 Patient is Sp OSW to face; Lt forearm brought in by RM
 Patient was intubated & cervical collar when OMTS examined
 this patient - LOC; NV
 PMH: Asthma
 Med: unobtainable
 allergy unobtainable Ptz head and neck only
 Ptz Patient is Alert BP = 154/80 R = 20° P = 42°
 - intubated.
 - PERRLA, eoms full sclera clear
 - ϕ battle sign
 - no pain/hot/occlusion b/l
 - Maxilla intact except for small wound of RL zygomatic
 - stellate laceration of Rt mand at #27 area & l
 stellate laceration of Lt mand area #22
 - crepitus noted on anterior mand
 - teeth #22 \rightarrow 27 9/4 mobility
 - mucosal laceration distal to #22 \rightarrow 27
 - floor of mouth edematous on anterior mand
 - maxilla & dentures
 - teeth #22 \rightarrow 27; #18 present in mouth
 - 2 cm laceration of anterior chest wall
 - OSW to Lt wrist

Carmus

300
 Continue Notes on Other Side

Social Hx - Not obtained

Re Patient Patient was in moderate distress on arrival
B/P 140/90

HEENT

HEAD - Normocephalic, Face has 9

- (a) 0.5cm puncture wound at
 - right midmandibular area
 - 0.5cm puncture wound at the right zygomatic area
 - A 0.5cm puncture mid mandibular area on the left

NECK -

Has a 0.5cm puncture wound at the level of hyoid cartilage at the medial border of the sternocleidomastoid muscle. Has and about 3cm swelling. Carotid pulse was palpated No bruit was heard

EAR - No blood

Nose - No drainage, bloody.

Throat - Free, easily mobile mandibular segments with moderate to severe bleeding from the intraoral wounds.

Chart No. _____

HOSPITAL _____

PROGRESS RECORD

117-25-00 F.

961701-0

MENDEZ JOSEPHINE

0-R-??

7-17-90

Name _____

Admitted _____

19 _____

Ward _____

Observations and Opinions of Visitings, Consultants and House Staff.
A Final Discharge Note Must Be Entered on This Sheet. Sign and Date Every Entry.

Chest Good air entry bilaterally
clear to percussion and auscultation

- ⓐ A 0.5 cm puncture wound at the level of 1st intercostal space on the left side
- ⓑ Another 0.5 cm puncture wound on the level of 6ics mid clavicular line.
- ⓒ A 0.5 cm puncture wound at the right anterior axillary line 4th intercostal space

~~Head~~
Abdomen - S1 & 2 heard no murmurs

Abdomen Full not distended, bowel sound heard no mass, palp.
N/A tube passed moderate amount of food ^{particles} passed.

BACK - Within normal

Extremities * Right - 0.5 cm puncture wound on the upper 1/3 of the lateral part of arm * another 0.5 cm

Continued on Other Si 302

Time

Admitted

19

Ward

Chart No.

* puncture wound at the middle
1/3 of the medial aspect of
the forearm arm.

* @ A 0.5cm puncture wound lateral
lower 1/3 of the forearm and
* another middle 1/3 of the forearm.
Left hand has a 0.5cm wound on
the dorsum of the hand with
carbon particles surrounding the
wound. A second 0.5cm wound
on the wrist anteriorly.
Pulses are palpated on all limbs

Neurologic Exam - Patient is conscious but
agitated, he is alert
- No gross motor or sensory
neurologic deficit noted.

△ Multiple GSW, fractured mandible
with severe soft tissue swelling
fractured wrist bone.

Plan

Admit Trauma to service A&C
CBC, smms, PT, PTT. Type & hold
xray skull neck and the
chest. and ~~Thorax~~ @ arm and
forearm xray left hand.
Assisted ventilation via NG tube
N/G tube to low suction 303
Foley to gravity drainage
GWS + 1/2 N/S.

Chart No. _____

HOSPITAL Durham

961/01-0
MENDEZ JOSEPHINE
0-2-??
7-17-90

PROGRESS RECORD

Name Mendez Josephine Admitted _____ 19____ Ward _____

Observations and Opinions of Visitings, Consultants and House Staff.
A Final Discharge Note Must Be Entered on This Sheet. Sign and Date Every Entry.

Hand surgery consult
Oral surgery consult
Monitor I/O
New chelk Q2H

Josephine

7/17/90 SICU RESIDENT ADMIT. NOTE

47 yr old with GSW to face, @ neck both sides chest. both upper extremities brought to ER by EMS in waist trousers.

Vitals on admission

(P) was conscious with spontaneous breath
(P) intubated in ER to secure the airway and put on ventilator

Pn.Hx significant for bronchial asthma.

Allergy PCN.

(P) awake, alert and responsive
pupils equal and reactive to light

SpO2 100% P-120 R-20

HEENT - traumatic, PERRLA.

0.5cm GSW @ cheek overlying zygoma

0.5cm GSW @ chin. 1cm GSW @ chin

Neck. GSW @ neck at level of cricoid

Continue Notes on Other

PMH = ⊕ Asthma.

Medications = 1) Theodur 100mg TID. PO.

2) Tylenol # 3

3) Cleocin 600mg IVSS Q6h.

Allergy = 1) PCN

2) Aspirin.

RDS = ⊕ Asthma.

Physical Examination. (limited to Head + Neck)

T = 98.2 P = 78 R = 20 BP = 132/90.

Head = ⊕ GSW to face, Normocephalic

EYES = pupils equal round, reactive to light + Accommodation, EOMI, NO visual acuity problem

EAR = NO hearing loss, NO discharge, Tympanic membrane intact.

NOSE = NO obstruction, NO polyps, NO hemorrhage.

Throat = ⊕ GSW to mandible, B/L

mandible fx. limited mandibular movement. Oral hygiene poor, NO sore throat. ⊖ Thrush.

Neck = Supple, ⊖ JVD, ⊖ Thyroidmegaly,

⊖ Lymphadenopathy, Trachea in midline ³⁰⁵

⊕ GSW (35cm) at level of cricoid cartilage

over middle of SCM, carotid pulse palpable

Chart No. _____

HOSPITAL _____

461/01-0

MENDEZ JOSEPHINE

PROGRESS RECORD

9-9-32

S-

Name Mendez Josephine Admitted 90

19 _____ Ward _____

Observations and Opinions of Visiting, Consultants and House Staff.

Final Discharge Note Must Be Entered on This Sheet. Sign and Date Every Entry.

Rz acceptance Note

Chest - clear to A + P

NO wheezing, rales or rhales

1) A GSW 0.5 cm at 1st ICS on Left Side

2) A GSW 0.5 cm at 6th ICS mid-clavicle line @ S

3) A GSW 0.5 cm at (R) anterior axillary line in 6th

Heart = ⊕ S₁ S₂ ⊖ S₃ S₄ ⊖ murmur

Abdomen = Obesity, Not distended

NO mass, NO tenderness, NO organomegaly

Extremities = Pulses palpable of dorsalis pedis

(R) 0.5 cm puncture wound on Rt Forearm

0.5 cm GSW to (L) hand

Neuro = ⊕ V₃ parathesia

A + O R 3 responsive

LAD = 7/25

15.3 | 11.6 | 25.3
34.1

138 | 105 | 7 | 96
4.2 | 26 | 0.6

396

Continue Notes on Other Side