

Ex. 38

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, abdomen, upper extremities			
SECONDARY DXS: ② Mandibular angle fracture			
③ Parosymphysis fracture			
④ Lower anterior alveolar fracture			
⑤ Hx asthma			
SURGICAL AND ALL OTHER PROCEDURES: (DO NOT ABBREVIATE)			
- IV maintenance and W antibiotics, Decan, Azoxymycin aminophyllin			
- debridement of gun shot wound			
- bipharyngeal fixation			
- Extraction tooth #27, stent placement			
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 Clecin 300mg T Q 6h x 7 dgs			
② Plavix 75mg T-H 946L per par			
③ Theoban 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, no strenuous 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, OM, B, geriatric			
Follow-Up-HHMC Oral Surgery Clinic 8/3/90 DATE OF APPT			
Admitting Office notified of this discharge on _____ At _____ am/pm BY _____ 285			
COMPLETED BY D. Cobble MD SIGNATURE ATTENDING PHYSICIAN [Signature]			
PRINT NAME D. Cobble MD DATE 7/31/90 PRINT ATTENDING NAME [Signature]			



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

117-25

7-17-90

Unknown Female #1

JOSEPHINE MENDEZ

117 2500

ADMISSION HISTORY AND PHYSICAL EXAMINATION

SERVICE TRAUMA ATTENDING MD Guiliani RESIDENT MD Narullo

DATE & TIME 7/17/90 INFORMANT _____

CHIEF COMPLAINT

* Patient sustained GSW to face, chest and upper extremities.

HISTORY OF PRESENT ILLNESS:

* 37 yr. old hispanic female came to the ER by EMS with the history of sustained multiple GSWs 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 injury 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.

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506 Lenox Avenue
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117-25

901701-2

MEMO 7 30

7-17-20

ADMISSION HISTORY AND PHYSICAL EXAMINATION-PAGE 5

PHYSICAL EXAMINATION

BLOOD PRESSURE: 140/90 PULSE: 96 RESP: — TEMP: —

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

HEAD: Normocephalic

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

EARS: no bleeding or discharge

NOSE:

THROAT: Bleeding from intraoral wound and free easily
mobile mandibular segment

NECK (including thyroid): 0.5 cm below at the level of cricoid cartilage over middle of the
sternocleidomastoid - carotid pulse palpable

CHEST/THORAX: No breath heard
good air entry bilaterally

LUNGS: clear to percussion & auscultation
HEART: 1) A GSW 0.5 cm at 1st ICS on left side
2) A GSW 0.5 cm on 6th ICS mid clavicular line (right)
3) A 0.5 cm GSW Rt. anterior axillary line in 4th ICS

HEENT: S1, S2 heard, no murmur

BREASTS:

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

BACK: normal



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New York, N.Y. 10037

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
Pulseations are normal on both upper limbs

Neuro: Considerable, no gross motor or
SPECIAL EXAMINATIONS: Sensory loss

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:

(3) 0.5 cm wound mid mandibular
area on (L)

ELECTROCARDIOGRAM:

OTHER:

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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

MENDOCZ

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 ICA trauma service.

PE Intubated, alert, follows commands

BP 120/80 R 100 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. Jolson

Continue Notes on Other

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

Name

Admitted

19

Ward

Chart No.

0.5cm GSW @ chest overlying zygoma

0.5cm GSW @ chin, 1cm GSW @ chin (through mandibular arch)

Amber nasal cannula

NECK: 1cm GSW @ Neck at level of cricoid cartilage and
along ant border SCM. No hemorrhage. Carotid pulse
2+. @ Brach TVP → 0

CHEST: 1cm GSW @ 4ICS, MCL

1cm GSW @ 1st ICS, MCL

1cm GSW @ 3ICS, AAL

BS equal bilat

CVS: S1S2 @ murmur.

ABD: Soft, nontender, BS @

EXTS: Moving all limbs.

1cm GSW post. aspect @ Shoulder, and 1cm GSW ant.
aspect of @ Shoulder

Through & through GSW mid @ Forearm & 2+ Rad pulse
and no neurologic deficits

1cm GSW ~~ant~~ @ Wrist flex aspect on the radial side and

1.5cm GSW ext aspect of @ Hand over the ~~base~~ base of 5th finger

Absent distal radial pulse, but ulnar pulse 2+. Hand warm
& good capillary refill, and no neuro deficits. Swelling @ Forearm
neuro! No gross motor/sensory deficits

Xrays: Skull, Spine, CXR, @ Shoulder/Forearm - WNL

Face - comminuted ^{comp} Fr @ Mandible, Fr @ Mandible

Comminuted Fr @ 4, 5th metacarpal ? Fr 3rd MC.

N/G - food debris

Foley - Clear urine

Chart No. 1172500

HOSPITAL Harlem

117-25-00

961701-0

MENDEZ 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 & 3rd metacarp
- ③ Radial artery injury, but hand without signs of ischemia (good Ulnar pulse)

② Hunt Trunc

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 ATTE BY Dr. Vinkh
Numbness and pain, both dist
Rt arm & forearm, left h

Fr of both humeri, Fr 1st rib
No lower extremity injury. 299

MONITOR & FOLLOW FOR INTERVAL
INTELLIGENCE

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

Chart No. _____

HOSPITAL _____

PROGRESS RECORD

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 n/c

Patient is Sp ASW to face. Lt forearm brought in by RM
 Patient was intubated E. Cervical collar when OMTS examined
 this patient. -LOC; NV

PMH: Asthma

Med. unobtainable

allergy unobtainable PR head and neck only

PR Patient is Alert BP = 154/80 R = 28° P = 42

- intubated.

- PERRLA, conj. full sclera clear

- no battle sign

- no periorbital ecchymosis b/c

- Maxilla intact except for small wound of RL 2nd premolar

- stellate laceration of Rt mand. at #27 area and

stellate laceration of Lt mand. at #22

- crepitus noted on anterior mand

- tooth #22 → 27 9/16 mobility

- mucosal laceration distal to #22 → 27

- floor of mouth ecchymosis on anterior mand

- maxilla & dentulous

- tooth #22 → 27; #18 present in mouth

- 2 cm laceration of anterior chest wall

- ASW to Lt wrist

Continues

300

Continue Notes on Other Side

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

Social Hx - Not obtained

Re Patient

Patient was in moderate distress on arrival

B/P 140/90

HEENT

HEAD - Normocephalic, Face has a

(a) 1.5 cm puncture wound at

● right midmandibular area

● 0.5 cm puncture wound at the right zygomatic area

● A 0.5 cm puncture mid mandibular area on the left

NECK -

Has a 0.5 cm puncture wound at the level of hyoid cartilage at the medial border of the sternocleidomastoid muscle.

Has and about 3 cm 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 wound.

Chart No. _____

HOSPITAL _____

PROGRESS RECORD

117-25-00

F.

961701-0

MENDEZ JOSEPHINE

9-8-77

7-17-90

Name _____

Admitted _____

19 _____

Ward _____

Observations and Opinions of Visitings, Consultants and House Staff.
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Chest

Good air entry bilaterally

clear to percussion and auscultation

(a) A 0.5 cm puncture wound at the level of 1st intercostal space on the left side

(b) Another 0.5 cm puncture wound on the level of 6th mid clavicular line.

(c) A 0.5 cm puncture wound at the right anterior axillary line 4th intercostal space

~~Heart~~
Abdomen

S1 & 2 heard no murmurs

Abdomen

Full not distended, bowel sound heard no mass, palp.

N/G 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

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* puncture wound at the middle $\frac{1}{3}$ of the medial aspect of the forearm arm.

* @ A 0.5 cm puncture wound lateral lower $\frac{1}{3}$ of the forearm and
* another middle $\frac{1}{3}$ of the forearm.
Left hand has a 0.5 cm wound on the dorsum of the hand with carbon particles surrounding the wound. A second 0.5 cm 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~~ mandible with severe soft tissue swelling
Fractured wrist bone.

Plan

Admit Trauma to service A/CU
CBC smears PT PTT. Type & hold
x-ray skull neck and the chest. and ~~Thorax~~ @ arm and forearm x-ray left hand.

Assisted ventilation via NG tube
N/G tube to low suction

Foley to gravity drainage
GWS + 1/2 N/G.

Chart No. _____
HOSPITAL Durham

961/01-0
MENDEZ JOSEPHINE
9-2-??
7-17-90

PROGRESS RECORD

Name Mendez Josephine Admitted _____ 19____ Ward _____

Observations and Opinions of Visitings, Consultants and House Staff.
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Hand surgery consult
Oral surgery consult
Monitor 110-
Neuro check 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.

History on admission

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

PMHx significant for Bronchial Asthma.

Allergy PCN.

PE: awake, alert and responsive
pupils equal and reactive to light

HR 120 P-120 R-20

HEENT - traumatic, RT RRLA.

0.5cm GSW @ cheek overlying Zygoma

0.5cm GSW @ chin. 1cm GSW @ chin

Wedge GSW @ neck at level of cricoid

Continue Notes on Other

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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.

Ears = 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.

⊕ GSW (1.5 cm) at level of cricoid cartilage over middle of SCM, carotid pulse palpable.

Chart No. _____

HOSPITAL _____

PROGRESS RECORD

461/01-0

MENDEZ JOSEPH NE

9-9-32

S-

Name Mendez Josephine Admitted 90

19 _____ Ward _____

Observations and Opinions of Visitings, Consultants and House Staff.

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

Rx acceptance Note.

Chest - clear to A + P

NO wheezing, rales or crackles

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 @ hand.

Neuro = (F) V₃ parathesia

A + O R 3 responsive.

LAD = 7/25

15.3 | 11.6 | 253
34.1

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

396

Continue Notes on Other Side

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