

**Ex. 41**



BETH ISRAEL MEDICAL CENTER

FIRST AVENUE AT 16TH STREET NEW YORK NY 10003

ALL ENTRIES MUST BE DATED AND SIGNED

PERSONAL, LYN  
ID-1075091 S/DEM  
AUTH. GARY J., GDS  
ID-2044308 F/ 26 B  
TEAM-  
07-19-90

DATE: 7-20-90 SOCIAL WORK ASSESSMENT

REFERRAL: pt, phys, nurse referral -  
high-risk x social

IDENTIFYING INFORMATION AND HOUSEHOLD COMPOSITION:

This pt is a 27 yo Hispanic female who is T-R-E-O  
GSM (close range) 1st. lives w/o MUC  
GSM to feel @.

FINANCIAL STATUS: /

OUTSTANDING FINANCIAL PROBLEMS, IF ANY:

ASSESSMENT: (i.e. PSYCHOLOGICAL, EMOTIONAL, PHYSICAL, ENVIRONMENTAL, SOCIAL ATTITUDE TOWARD ILLNESS)

This pt was admitted under an assumed name for security reasons.

Pt asked to see social worker due to anxiety and fear about noises in PT is currently under security guard She is witness of attempted murder male companion.

This pt presented as highly anxious and confused about her immediate future hospital. 605

Pt is appropriate of affect and behavior in her current context.

BIMC 44-15

359

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ADMISSION EVALUATION

HISTORY

Date 7/20/90

Source Patient

Reliability

Patient's Age

Sex F

Occupation

AD-20075091 15/0000 AL100  
2000-1000-1-1-0000  
AD-2044308 1/1-1-1  
TEAM- 07-19-90 JJE

CHIEF COMPLAINT (S): (list in order of importance)

Pt. 27 yo. hisp. ♀, s/p of Gun shot wound

PRESENT ILLNESS:

Pt., 2 days s/p GSW, close range, small caliber hand gun; low velocity GSW. ⊖ LOC, pt. claims angiogram was ⊖ at Harlem hospital. Pt. was transferred to Bimc for definitive tx of facial injury.

1629

Adverse Drug Reactions:

Penicillin

360

105



7:00 AM - Sp. 1 - Sp. 6505 at door -  
male hand gun wound is alert  
vitals x3

Injuring (+) Tenderness (+) Left chest (+) contusion (+)  
area

- ecchymosis (+) neck (post-)

(+) - (+) chest - GSW entrance (+) scar, wound healing (WAL)

P: Admit to ICU.  
IV - Abx + fluids hydration  
Vancomycin (gm 1000)  
Ht look for Sx repair, Facial Pk -

Judy Pedro 5353  
House Officer (Print) ID#

Attending Physician (Print)  
 Agree with the History & Physical as stated.  
 Have corrections or additions as indicated above or as stated in my note(s) in the record.

J. Pedro MD  
House Officer Signature

10/90 3:30 AM  
& Hour

1634  
Attending Physician Signature Date

361  
90X  
BS

6137566  
ID# Telephone#  
6 106



Date, Time and Title

Physicians: start notes at solid vertical line; All others: start at dotted line

Airway - clear  
Ears -

Nose - No fx, obstruction, crepitus, ~~no~~ Epistaxis.

Throat - No uvula deviation; No lateral Pharyngeal/Tonsillar swelling

(+) (L) Soft Palate & Buccal Edynosis.

Zygomas - (R) - intact, (L) (+) Pre-Auricular Edema + tender to palpation, difficult to assess. Tongue (+) (L) Parasthesia,

max grossly intact

mand - Dentate seg intact, (L) Ramus, (+) Crepitus, occlusal (+) (L) Apertognathia

max open - 19mm  $\pm$  deviation

V<sub>3</sub> = (+) (L) V<sub>3</sub> ↓ Tested =

sterile needle inserted

Lingual n (+) (L) ↓; Tested =

sterile needle



Extreme mand.

Dentition - grossly intact. TMJ - (L) (+) Tender, ~~no~~ no translation open

Neck (+) firm swelling (L) Neck +

~~sub~~ lateral Ramus area of mandible

for 7 mandible to (L) clavicle

No neck edema.

X Rays - CT Head & Neck - Done at Harbor Hosp. pending Films.

~~the~~ pending - Labo, CXR, C-spine, facial, mand, CT neck & face

I/M - (1) (2) Mandibular Ramus Fx 2° to #2.

(3) GSW - low Velocity (L) Face Probably 220 cal

Plan - (1) Admit  $\rightarrow$  OMS.

(2) IV Abx & Fluid Hydration

(3) w/u Facial Bone Injuries. 30.37

(4) pt to OR for Sx Repair Facial Fract. 1/63



Date, Time and Title

Physicians: start notes at solid vertical line; All others: start at dotted line

1/20/90

Ng 2P. Ordered from pharmacy. Pt suctioned  
from own oral cavity & small amts of  
blood & mucous returns. Precautions  
taken to protect pt from unauthorized  
visitors by security - R. K. & R. K.

Dental Resident

5:20 PM

27 yo H <sup>♀</sup> 5/10 GSW close range - small caliber (22?) handgun  
No LOC pt shot one time to L face - Angiogram from  
Harlem Hospital

Pt allergic to PEN, pt taking Vancomycin 500 mg IVSS q10  
Dose not unknown dosage at Harlem Hosp.

- Pt Hospitalized in 1987 for G6+62 Hemibulbar Paresis
- (+) L Infraorbital GSW entrance (+) L infraorbital swelling
- (+) L occipital exit GSW (+) L periorbital edema
- (+) Diplopia (+) PERRLA (+) Hypesthesia of V2 - (+) paresthesia of V3
- (-) nasal occlusion (-) nose deviated to the right - (+) paresthesia of L tongue

Continue antibiotics, NPO. Melvin Morrison 4923

7/20/90 7:29 pm

On bed; HOB + 30°; awake alert  
moving all extremities; L face  
swollen + ecchymotic; resp unobscured  
resp suction done; no acute  
resp distress; 10g D<sub>5</sub> 1/2 NS  
infusing - 75 ml/hr  
Security officer by the door  
for protection

qR

10:55

To Xray via stretcher to  
security officer 2511 bc  
Returned from Xray via stretcher  
Alert oriented x3; complained  
of pain; indicated a order T



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CONSULTATION REQUEST AND REPORT

FROM: PHYSICIAN H. Cho

SERVICE \_\_\_\_\_

TO: PHYSICIAN \_\_\_\_\_

SERVICE EMG (Rehabilitation)

In patient  Out patient

Date of OPD Appointment Tues 7/31

PERSONAL LTN

NO 1075091 5/DEN 6L10P

PTH. GARY J., DDS

AD-2044308 F/ 26 B

TEAM- 07-19-90 LCA

REASON FOR REFERRAL

Gun shot wound on left cheek that left her with complete left facial paralysis

Date of Request

7/30 for EMG

SIGNATURE OF REFERRING PHYSICIAN

H. Cho

M D

CONSULTANT'S REPORT:

This 26 y/o F. with history of SLP gun shot wound. at close range on 7/17/90, entrance wound

① cheek and left wound. ① posterior neck.

On 7/22/90 she underwent maxillomandibular fixation application of maxilla mandibular arch bar for unminimized fr. ① condyle of ramus, unminimized fr. mandible.

Patient has ① facial weakness (peripheral)

PH - S/P MVA 1987 @ C6-C7 herniated Disc.

PE - she is alert & cooperative. There is sever.

① peripheral facial weakness. 7 mm ① lagophthalmos

she is unable to raise ① eyebrow, whistle.

Bullet wound noted at ① cheek. ① lower ~~leg~~ 2/3

of her face. swollen. ① hemifacial sensory

deficit (sever partial sensory deficit)

Nerve conduction studies.

268.1

① facial nerve - nasalis muscle - Distal latency 3.56 ms

Amplitude 1.88 mV

① facial nerve - nasalis muscle - Distal latency 3.50 ms

Amplitude 870 uV

Please record time and date of this consultation in the progress notes.

Time \_\_\_\_\_

SIGNATURE OF CONSULTANT

M D Date \_\_\_\_\_

IF NECESSARY PLEASE USE SECOND SHEET

CONSULTATION