

RECEIVED

May 07 2024

S.C. SUPREME COURT

STATE OF SOUTH CAROLINA
IN THE SUPREME COURT

On Petition for Writ of Certiorari from Richland County
DeAndrea G. Benjamin, Trial Judge
Michael S. Holt, Post-Conviction Relief Judge

Appellate Case No. 2023-001269

EMMANUEL B. ELLEBY, #275057,

Respondent,

v.

STATE OF SOUTH CAROLINA,

Petitioner.

SUPPLEMENTAL APPENDIX

ALAN WILSON
Attorney General

D. RUSSELL BARLOW, II
Assistant Attorney General
S.C. Bar No. 105228

Office of the Attorney General
Post Office Box 11549
Columbia, SC 29211
(803) 734-3737

ATTORNEYS FOR PETITIONER

JONATHAN D. WALLER.

Angell Molony, LLC
210 Newberry Street, NW
Aiken, SC 29801
(803) 335-1449

ATTORNEY FOR RESPONDENT

INDEX

MEDICAL RECORDS	1
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*****AUTO**3-DIGIT 292
 109 9 AT 1.805
 WALLER LAW GROUP
 JONATHAN D WALKER
 1116 BLANDING ST STE 2B

000109

Received

May 3, 2019

COLUMBIA, SC 29201-2840

50pgs



0050000109K0Z



ATTENTION

Confidential Information enclosed.
 To be viewed by authorized persons only.

If you have questions regarding any information you have requested,
 please call the phone number on the enclosed invoice.

To Whom It Concern:

CIOX has provided to you protected health information that may contain information that falls under the 42 C.F.R. Part 2. The federal rules prohibit you from making any further disclosure of information in this record that identifies a patient as having or having had a substance use disorder either directly, by reference to publically available information, or through verification of such identification by another person unless further disclosure is expressly permitted by written consent of the individual whose information is being disclosed or as otherwise permitted by 42 CFR part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose (see 42 CFR §2.31). The federal rules restrict any use of the information to investigate or prosecute with regard to a crime any patient with a substance use disorder, except as provided at 42 CFR §§ 2.112(c)(5) and 2.65.

If the enclosed record pertains to HIV/AIDs, it has been disclosed to you from records whose confidentiality is protected by federal and perhaps, state law, which prohibits you from making any further disclosure of such information without the specific consent of the person to whom such information pertains or as otherwise permitted by state law. A general authorization for this release of health or other information is not sufficient for this purpose.

If the information requested is from a facility located within the Washington State area then this information will fall under the RCW 70.02.300 which states that this information has been disclosed to you from records who confidentiality may be protected by state law. State law prohibits you from making any further disclosure of it without the specific written authorization of the person to whom it pertains, or as otherwise permitted by state law. A general authorization for the release of this protected information is not sufficient for this purpose.



215910464



April 17, 2019

Prisma Health Baptist Hospital
Health Information Management
Taylor at Marion St.
Columbia, SC 29220

Re: State of South Carolina vs. Emmanuel Bashan Elleby
C/A No.: 2018-CP-40-0591

To Whom It May Concern:

Enclosed is a Subpoena Duces Tecum in the above-referenced matter, which I hereby serve upon you. As you will note, the Subpoena is requesting **any and all documents** in your possession as listed in the attachment. If you will comply with this request for records before the date and time indicated on the subpoena, there may be no need for anyone to appear at my office for a deposition. Copies of the requested documents are acceptable; however, please notify me in advance if the cost of providing the records exceeds \$100.00. As you may be aware, under SCRCP 45, a Subpoena must be responded to appropriately or a Motion to Quash must be filed.

Under the regulations issued pursuant to HIPAA, a covered entity may disclose protected health information in the course of any judicial or administrative proceeding in response to a subpoena upon receiving satisfactory assurance from the party seeking the information that reasonable efforts have been made by such party to ensure that the individual who is the subject of the protected health information that has been requested has been given notice of the request. 45 CFR §164.512(e)

I am also enclosing an Affidavit of Custodian of Records for you to sign and have notarized to return along with the requested records. If you have another form of affidavit that you use for this matter, please feel free to use the same, as long as it is signed and notarized.

By copy of this letter I am serving same on opposing counsel.

If you have any questions, please do not hesitate to ask. My telephone number is 803-520-7278.

Sincerely,

Jonathan D. Waller

Waller Law Group
1116 Blanding Street, Suite 2B
Columbia, SC 29201

803-520-7278
www.wallerlawgroup.com
jonathan@wallerlawgroupsc.com

BY: _____

STATE OF SOUTH CAROLINA

ISSUED BY THE COMMON PLEAS COURT IN THE COUNTY OF RICHLAND

Emmanuel Bashan Elleby, Plaintiff

v.

SUBPOENA IN A CIVIL CASE

State of South Carolina, Defendant

Case Number: 2018-CP-40-0591

Pending in RICHLAND County

TO: Prisma Health Baptist Hospital, Health Information Management

☐ YOU ARE COMMANDED to appear in the above named court at the place, and time specified below to testify in the above case.

PLACE OF TESTIMONY

COURTROOM

DATE AND TIME , AM

☐ YOU ARE COMMANDED to appear at the place, date, and time specified below to testify at the taking of a deposition in the above case.

PLACE OF DEPOSITION

DATE AND TIME , AM

☒ YOU ARE COMMANDED to produce and permit inspection and copying of the following documents or objects in your possession, custody or control at the place, date and time specified below (list documents or objects:

Any and all records of treatment for Emmanuel Bashan Elleby [REDACTED] from admittance on or about September 14, 2015 until discharge. This includes but is not limited to treatment notes, evaluations, admittance/discharge documents, prescription documents, etc.

PLACE

Waller Law Group, 1116 Blanding Street, Suite 2B
Columbia, SC 29201

DATE AND TIME May 24, 2019, 10:00 AM

☐ YOU ARE COMMANDED to permit inspection of the following premises at the date and time specified below.

PREMISES

DATE AND TIME , AM

ANY SUBPOENAED ORGANIZATION NOT A PARTY TO THIS IS HEREBY DIRECTED TO RULE 30(b)(6), SOUTH CAROLINA RULES OF CIVIL PROCEDURE, TO FILE A DESIGNATION WITH THE COURT SPECIFYING ONE OR MORE OFFICERS, DIRECTORS, OR MANAGING AGENTS, OR OTHER PERSONS WHO CONSENT TO TESTIFY ON ITS BEHALF, SHALL SET FORTH, FOR EACH PERSON DESIGNATED, THE MATTERS ON WHICH HE WILL TESTIFY OR PRODUCE DOCUMENTS OR THINGS. THE PERSON SO DESIGNATED TESTIFY AS TO MATTERS KNOWN OR REASONABLY AVAILABLE TO THE ORGANIZATION

I CERTIFY THAT THE SUBPOENA IS ISSUED IN COMPLIANCE WITH RULE 45(c)(1), AND THAT NOTICE AS REQUIRED BY RULE 45(b)(1) HAS BEEN GIVEN TO ALL PARTIES.

Attorney/Issuing Officer's Signature

4/23/2019

Jonathan D. Waller

Date

Print Name

Attorney for Plaintiff

Attorney's Address and Telephone Number : 803-520-7278

Jonathan D. Waller, 1116 Blanding Street, Suite 2B, Columbia, SC 29201

Clerk of Court/Issuing Officer's Signature

Date

Print Name

Pro Se Litigant's Name, Address and Telephone Number :

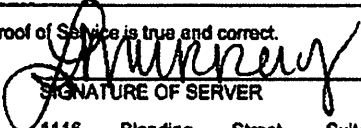
PROOF OF SERVICE

SERVED	DATE 4/23/2019	FEES AND MILEAGE TO BE TENDERED TO WITNESS UPON DAILY ARRIVAL ☐ YES ☒ NO AMOUNT \$
	PLACE Waller Law Group, 1116 Blanding Street, Suite 2B Columbia, SC 29201	
SERVED ON Prisma Health Baptist Hospital, Health Information Management		MANNER OF SERVICE USPS
SERVED BY Lyndsay Murray		TITLE Assistant

DECLARATION OF SERVER

I certify that the foregoing information contained in the Proof of Service is true and correct.

Executed on 4/23/2019


SIGNATURE OF SERVER

1116 Blanding Street, Suite 2B, Columbia, SC 29201
ADDRESS OF SERVER

Rule 45, South Carolina Rules of Civil Procedures, Parts (c) and (d):

(c) Protection of Persons Subject to Subpoenas.

(1) A party or an attorney responsible for the issuance and service of a subpoena shall take reasonable steps to avoid imposing undue burden or expense on a person subject to that subpoena. The court on behalf of which the subpoena was issued shall enforce this duty and impose upon the party or attorney in breach of this duty an appropriate sanction, which may include, but is not limited to, lost earnings and a reasonable attorney's fee.

(2)(A) A person commanded to produce and permit inspection and copying of designated electronically stored information, books, papers, documents or tangible things, or inspection of premises need not appear in person at the place of production or inspection unless commanded to appear for deposition, hearing or trial. A party or an attorney responsible for the issuance and service of a subpoena for production of books, papers and documents without a deposition shall provide to another party copies of documents so produced upon written request. The party requesting copies shall pay the reasonable costs of reproduction.

(B) Subject to paragraph (d)(2) of this rule, a person commanded to produce and permit inspection and copying may, within 14 days after service of the subpoena or before the time specified for compliance if such time is less than 14 days after service, serve upon the party or attorney designated in the subpoena written objection to inspection or copying of any or all of the designated materials or of the premises—or to producing electronically stored information in the form or forms requested. If objection is made, the party serving the subpoena shall not be entitled to inspect and copy the materials or inspect the premises except pursuant to an order of the court by which the subpoena was issued. If objection has been made, the party serving the subpoena may, upon notice to the person commanded to produce, move at any time in the court that issued the subpoena for an order to compel the production. Such an order to compel production shall protect any person who is not a party or an officer of a party from significant expense resulting from the inspection and copying commanded.

(3)(A) On timely motion, the court by which a subpoena was issued, or regarding a subpoena commanding appearance at a deposition, or production or inspection directed to a non-party, the court in the county where the non-party resides, is employed or regularly transacts business in person, shall quash or modify the subpoena if it:

(i) fails to allow reasonable time for compliance; or

(ii) requires a person who is not a party nor an officer, director or managing agent of a party, nor a general partner of a partnership that is a party, to travel more than 50 miles from the county where that person resides, is employed or regularly transacts business in person, except that, subject to the provisions of clause (c)(3)(B)(iii) of this rule, such a person may in order to attend trial be commanded to travel from any such place within the state in which the trial is held; or

(iii) requires disclosure of privileged or otherwise protected matter and no exception or waiver applies; or

(iv) subjects a person to undue burden.

(B) If a subpoena:

(i) requires disclosure of a trade secret or other confidential research, development, or commercial information, or

(ii) requires disclosure of an unretained expert's opinion or information not describing specific events or occurrences in dispute and resulting from the expert's study made not at the request of any party, or

(fii) requires a person who is not a party nor an officer, director or managing agent of a party, nor a general partner of a partnership that is a party, to incur substantial expense to travel from the county where that person resides, is employed or regularly transacts business in person, the court may, to protect a person subject to or affected by the subpoena, quash or modify the subpoena or, if the party in whose behalf the subpoena is issued shows a substantial need for the testimony or material that cannot be otherwise met without undue hardship and assures that the person to whom the subpoena is addressed will be reasonably compensated, the court may order appearance or production only upon specified conditions.

(d) Duties in Responding to Subpoena.

(1)(A) A person responding to a subpoena to produce documents shall produce them as they are kept in the usual course of business or shall organize and label them to correspond with the categories in the demand.

(B) If a subpoena does not specify the form or forms for producing electronically stored information, a person responding to a subpoena must produce the information in a form or forms in which it is ordinarily maintained or in a reasonably usable form or forms.

(C) A person responding to a subpoena need not produce the same electronically stored information in more than one form.

(D) A person responding to a subpoena need not provide discovery of electronically stored information from sources that the person identifies as not reasonably accessible because of undue burden or cost. On motion to compel discovery or to quash, the person from whom discovery is sought must show that the information sought is not reasonably accessible because of undue burden or cost. If that showing is made, the court may nonetheless order discovery from such sources if the requesting party shows good cause, considering the limitations of Rule 26(b)(6)(B). The court may specify conditions for the discovery.

(2)(A) When information subject to a subpoena is withheld on a claim that it is privileged or subject to protection as trial preparation materials, the claim shall be made expressly and shall be supported by a description of the nature of the documents, communications, or things not produced that is sufficient to enable the demanding party to contest the claim.

(B) If information produced in response to a subpoena is subject to a claim of privilege or of protection as trial preparation material, the person making the claim may notify any party that received the information of the claim and the basis for it. After being notified, a party must promptly return, sequester, or destroy the specified information and any copies it has and may not use or disclose the information until the claim is resolved. A receiving party may promptly present the information to the court under seal for a determination of the claim. If the receiving party disclosed the information before being notified, the receiving party must take reasonable steps to retrieve the information. The person who produced the information must preserve the information until the claim is resolved.

DEC
11

BY:



BUSINESS RECORDS CERTIFICATION

I, Brenda Hamlin as a copy representative employed by CIOX Health, the health information management service used by Prisma Health Baptist Hospital in Columbia, SC hereby certify that the enclosed photographic copy of medical records has been compared with the original records for patient Emanuel Elleby [REDACTED] and is an accurate duplicate of such records of there visits from 09-14-2015.

- A. The attached records are made at or near the time of the occurrence of the matters set forth in the documents;
- B. The attached records were made by a person with knowledge of those matters, or from information transmitted by a person with knowledge of those matters;
- C. The attached records were made and kept in the course of regularly conducted business activity; and
- D. The attached records were made and kept by the business as a regular practice.

Number of pages: 41

Date: 04-29-2019

A handwritten signature in black ink, appearing to read "B. Hamlin", written over a horizontal line.

Signature of representative
CIOX Health

Kristin Hardy 4/29/19
SEAL

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Facesheet

Patient Name ELLEBY, EMANUEL BASHAN
Birth Date 9/27/1980

Patient MRN B000325789; R006253343
Financial Number B1525702802

* Auth (Verified) *

PALMETTO HEALTH
BAPTIST

EMERGENCY DEPARTMENT RECORD

UNIT RECORD	DATE	TIME	BIRTH DATE	AGE	MOTHER'S MAIDEN NAME	SEX	WOMAN STATUS	RACE	PATIENT TYPE	PATIENT NO.
	09/14/2015	13:29		34Y		M	S	81	EOB	
RESPONSIBLE PARTY			SOCIAL SECURITY NUMBER		FINANCIAL		ACCOUNT			
ELLEBY, EMMANUEL BASHAN										
COLUMBIA SC 29201			PHONE		REFERRING PHYSICIAN		ADMITTING PHYSICIAN			
ELLEBY, EMMANUEL BASHAN							999 EMS, EMS			
COLUMBIA SC 29201			RELATIONSHIP		MODE OF ARRIVAL		EMS			
			PHONE		VALUABLES		YES NO WHERE?			
			(803) 661-6415		BELONGINGS		NONE WITH PATIENT OTHER			
CHIEF COMPLAINT			SEIZURE		DATE OF LAST VISIT		10/28/2013		LAST TETANUS	
VITAL SIGNS			TEMP. 99.4		ORAL PULSE 88		RESP. 16		BLOOD PRESS. 142/80	
VITAL SIGNS			TEMP.		ORAL PULSE		RESP.		BLOOD PRESS.	
HISTORY:			NO RESISTANT DRUG		Shared Care Physician					
RDS.					REST OF RUS.					
FH			SH							
PMH / MEDS:										
PHYSICAL:										
CLINICAL IMPRESSION:										
TREATMENT:										
Procedure			Informed Consent Discussed prior to procedure if indicated		Yes ☐ No ☐		Date		Time	
DISPOSITION/SPECIAL PATIENT INSTRUCTIONS										
CONDITION OF EXCHANGE			ADMIT ROOM:		TIME SEEN BY MD.		MEETS PRUDENT LAYPERSON: ☐ YES ☐ NO			
EXPLAIN							ATTENDING SIGNATURE			

7004100 (1102)



Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Crucea 3 MD, Steven L

Admitting Physician: Crucea 3 MD, Steven L

Facesheet

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Nursing Documentation

DOCUMENT NAME: Triage PHED
SERVICE DATE/TIME: 9/14/2015 13:34 EDT
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Brantley RN, Stephanie A (9/14/2015 13:34 EDT)
ELECTRONICALLY SIGNED BY: Brantley RN, Stephanie A (9/14/2015 13:34 EDT)

Triage PHED Entered On: 09/14/2015 13:36
Performed On: 09/14/2015 13:34 by Brantley RN, Stephanie A

Chief Complaint

Mode of Arrival 2.0 : Ambulance-No Tx
ED Chief Complaint : Seizure
Chief Complaint : per EMS, bystanders at courthouse state pt had a seizure. pt eyes open, not answering questions
Temperature Oral : 99.4 DegF
Peripheral Pulse Rate : 98 bpm
Resp. Rate : 16 br/min
Systolic : 147 mmHg
Diastolic : 80 mmHg
Pulse Ox Sat : 94 %
NIBP Mean Calculated : 102 mmHg
Height in feet : 5 ft
Height in : 6 inch
Height cm Calculated : 167.64 cm

Brantley RN, Stephanie A - 09/14/2015 13:34

DCP GENERIC CODE

ED Tracking Acuity : 3
ED Tracking Group : B Tracking Group

Brantley RN, Stephanie A - 09/14/2015 13:34

ED Triage Nurse : Brantley RN, Stephanie A

Brantley RN, Stephanie A - 09/14/2015 13:34

Oxygen Modality-ED

Oxygen Modality : Room Air

Brantley RN, Stephanie A - 09/14/2015 13:34

Nursing Direct Charting

Vital Signs

Procedure	Units	Reference Range	Recorded Time	Recorded By	Recorded Date
			14:48 EDT	Oliver RN, Gerald	9/14/2015
Clinical Height cm	cm		-	Brantley RN, Stephanie A	9/14/2015
Temperature Oral	DegF	[96-102]	99.0		
Heart Rate Monitored	bpm	[60-100]	77		
Peripheral Pulse Rate	bpm	[60-100]	-		
Respiratory Rate	br/min	[12-20]	16		
Pulse Ox Sat	%		95		
Oxygen Modality			Room Air		

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Nursing Direct Charting

Vital Signs

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date	Recorded Time Recorded By Recorded Date
			14:48 EDT Oliver RN, Gerald 9/14/2015	13:34 EDT Brantley RN, Stephanie A 9/14/2015
NIBP Systolic	mmHg		142	147
NIBP Diastolic	mmHg		80	80
NIBP Mean Calculated	mmHg		100	102
NIBP Cuff Site			Right arm	-
NIBP Position			Lying	-
NIBP Equipment			Automatic	-
Pulse Ox Monitoring			Continuous	-

Invasive Lines

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date
			14:22 EDT Oliver RN, Gerald 9/14/2015
# of Attempts			1
Gold			x 1, Sent To Lab
Over the needle 20 gauge Left 09/14/2015 Jerry RN			
Peripheral IV Activity:			Inserted, Flushed
Peripheral IV Drainage Description:			None
Peripheral IV Site Condition:			No Redness or Edema
Peripheral IV Patency:			Patent, Blood return
Peripheral IV Dressing:			Dry, Intact
Peripheral IV Interventions:			See Below ¹¹

Textual Results

T1: 9/14/2015 14:22 EDT (Peripheral IV Interventions):
Secured with tape. Secured with transparent dressing

Neuro

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date
			13:38 EDT Oliver RN, Gerald 9/14/2015
Orientation-LOC			Disoriented, Drowsy, Lethargic
Symmetry of Face			Symmetrical
Swallowing Difficulty			None
Verbal Communication			Clear
Neurological Symptoms			Decreased LOC, Weakness
Neuro Interventions			Seizure precautions
PERRLA			Yes
Right Pupil Size	mm		3
Left Pupil Size	mm		3
Right Pupil Reaction			Equal, Reactive, Brisk
Left Pupil Reaction			Equal, Reactive, Brisk
Right Pupil Description			Regular, Round
Left Pupil Description			Regular, Round
Neurological Documentation			Neuro Documentation

Facility Info: Prisma Health Baptist Hospital

Patient Info: ELLEBY, EMANUEL BASHAN

TAYLOR AT MARION
COLUMBIA, SC 29220-

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Nursing Direct Charting

Behavioral

		Recorded Time:	13:36 EDT
		Recorded By:	Oliver RN, Gerald
		Recorded Date:	9/14/2015
Procedure	Units	Reference Range	
Behavior Documentation			Behavior WNL

EENT View

		Recorded Time:	13:36 EDT
		Recorded By:	Oliver RN, Gerald
		Recorded Date:	9/14/2015
Procedure	Units	Reference Range	
EENT Documentation			EENT System WNL

Respiratory

		Recorded Time:	13:36 EDT
		Recorded By:	Oliver RN, Gerald
		Recorded Date:	9/14/2015
Procedure	Units	Reference Range	
All Lobes			Clear
Upper Lobes-Bilateral			Clear
Lower Lobes-Bilateral			Clear
LUL			Clear
LLL			Clear
RUL			Clear
RML			Clear
RLL			Clear
Respiratory Pattern			Regular, Unlabored
Cough Description			Absent
Chest Expansion			Equal Bilaterally
Respiratory Documentation			Respiratory Documentation

Cardiovascular

		Recorded Time:	14:48 EDT	13:36 EDT
		Recorded By:	Oliver RN, Gerald	Oliver RN, Gerald
		Recorded Date:	9/14/2015	9/14/2015
Procedure	Units	Reference Range		
Patient is Monitored			-	Yes
Monitor Lead			-	Lead II
Jugular Vein Distention			-	JVD Absent
Carotid Pulse-Left			-	2+ Normal
Carotid Pulse-Right			-	2+ Normal
Brachial Pulse-Left			-	2+ Normal
Brachial Pulse-Right			-	2+ Normal
Radial Pulse-Left			-	2+ Normal
Radial Pulse-Right			-	2+ Normal
Dorsalis Pedis Pulse-Left			-	2+ Normal
Dorsalis Pedis Pulse-Right			-	2+ Normal
Posttibial Pulse-Left			-	2+ Normal
Posttibial Pulse-Right			-	2+ Normal

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

MRN: [REDACTED]

FIN: [REDACTED]

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

CMRN: [REDACTED]

Nursing Direct Charting

Cardiovascular

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date	14:48 EDT Oliver RN, Gerald 9/14/2015	13:36 EDT Oliver RN, Gerald 9/14/2015
Heart Sounds				-	Soft
Cardiovascular Documentation				-	Cardiovascular Documentation
Capillary Refill Left Hand				-	2 Seconds
Capillary Refill Right Hand				-	2 Seconds
Capillary Refill Left Foot				-	2 Seconds
Capillary Refill Right Foot				-	2 Seconds
Rhythm Status				Normal Sinus	Normal Sinus
Chest Discomfort				-	Absent

Gastrointestinal

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date	13:36 EDT Oliver RN, Gerald 9/14/2015
Gastrointestinal Documentation				Gastrointestinal Syst WNL

Renal-Urinary

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date	13:38 EDT Oliver RN, Gerald 9/14/2015
Renal-Urinary Documentation				Renal/Urinary System WNL

Reproductive

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date	13:36 EDT Oliver RN, Gerald 9/14/2015
Reproductive Documentation				Reproductive System WNL

Musculoskeletal System

Procedure	Units	Reference Range	Recorded Time Recorded By Recorded Date	13:36 EDT Oliver RN, Gerald 9/14/2015
Musculoskeletal Documentation				Musculoskeletal Syst WNL

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Crucea 3 MD, Steven L

Admitting Physician: Crucea 3 MD, Steven L

Nursing Direct Charting

Risk Precautions

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Safety			See Below T2
History of Fall in Last 3 Months Morse			No
Presence of Secondary Diagnosis Morse			No
Use of Ambulatory Aid Morse			None, bedrest, wheelchair, nurse
IV/INT Fall Risk Morse			Yes
Gait Weak or Impaired Fall Risk Morse			Normal, bedrest, immobile
Mental Status Fall Risk Morse			Oriented to own ability
Morse Fall Risk Score			20
Participative in Fall Prevention			No

Textual Results

T2: 9/14/2015 13:36 EDT (Safety)

Adequate day/night lighting, Family/Sitter at Bedside, ID Band Checked, ID Band on, Instruct to Call, Non-skid socks/shoes with non-skid soles, Phone within Reach, Pt/Family Able to Use, Siderails up x2

Valuables-Belongings

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Valuables or Belongings Collected			None Collected

Intra-Aortic Balloon Pump

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Capillary Refill Left Foot			2 Seconds
Capillary Refill Right Foot			2 Seconds

ED Behavioral View

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Behavior Documentation			Behavior WNL

General Information - ED

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Pregnant			N/A
Implantable Devices			None
Communicable Disease Exposure			None

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Nursing Direct Charting

General Information - ED

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Immunizations UTD			No
Communication Barriers			None

Primary Breathing Evaluation

		Recorded Time	14:48 EDT	13:36 EDT	13:34 EDT
		Recorded By	Oliver RN, Gerald	Oliver RN, Gerald	Brantley RN, Stephanie A
		Recorded Date	9/14/2015	9/14/2015	9/14/2015
Procedure	Units	Reference Range			
All Lobes			-	Clear	-
Upper Lobes-Bilateral			-	Clear	-
Lower Lobes-Bilateral			-	Clear	-
LUL			-	Clear	-
LLL			-	Clear	-
RUL			-	Clear	-
RML			-	Clear	-
RLL			-	Clear	-
Respiratory Rate	br/min [12-20]		16	-	16
Respiratory Pattern			-	Regular, Unlabored	-

Primary Disability

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
PERRLA			Yes

Psych Behavior View

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Behavior Documentation			Behavior WNL

Risk Precautions Psych

		Recorded Time	13:36 EDT
		Recorded By	Oliver RN, Gerald
		Recorded Date	9/14/2015
Procedure	Units	Reference Range	
Safety			See Below ¹⁷

Textual Results

T2: 9/14/2015 13:36 EDT (Safety)

Adequate day/night lighting, Family/Sitter at Bedside, ID Band Checked, ID Band on, Instruct to Call, Non-skid socks/shoes with non-skid soles, Phone within Reach, P/Family Able to Use, Siderails up x2

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Direct Charting IView

General Information

Recorded By	Recorded Date/Time	Procedure Units Reference Range	Mode of Arrival 2.0	Chief Complaint	ED Chief Complaint	Acuity
Brantley RN, Stephanie A	9/14/2015 13:34 EDT		Ambulance-No Tx	See Below ¹³	Seizure	3

Textual Results

T3: 9/14/2015 13:34 EDT (Chief Complaint)
per EMS, bystanders at courthouse state pt had a seizure. pt eyes open, not answering questions

OB General Info

Recorded By	Recorded Date/Time	Procedure Units Reference Range	Communication Barriers
Oliver RN, Gerald	9/14/2015 13:36 EDT		None

OB Subjective Data

Recorded By	Recorded Date/Time	Procedure Units Reference Range	Chief Complaint
Brantley RN, Stephanie A	9/14/2015 13:34 EDT		See Below ¹³

Textual Results

T3: 9/14/2015 13:34 EDT (Chief Complaint)
per EMS, bystanders at courthouse state pt had a seizure. pt eyes open, not answering questions

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

DOCUMENT NAME: Triage PHED
SERVICE DATE/TIME: 9/14/2015 13:34 EDT
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Brantley RN, Stephanie A (9/14/2015 13:34 EDT)
ELECTRONICALLY SIGNED BY: Brantley RN, Stephanie A (9/14/2015 13:34 EDT)

Triage PHED Entered On: 09/14/2015 13:36
Performed On: 09/14/2015 13:34 by Brantley RN, Stephanie A

Chief Complaint

Mode of Arrival 2.0 : Ambulance-No Tx
ED Chief Complaint : Seizure
Chief Complaint : per EMS, bystanders at courthouse state pt had a seizure. pt eyes open, not answering questions
Temperature Oral : 99.4 DegF
Peripheral Pulse Rate : 98 bpm
Resp. Rate : 16 br/min
Systolic : 147 mmHg
Diastolic : 80 mmHg
Pulse Ox Sat : 94 %
NIBP Mean Calculated : 102 mmHg
Height in feet : 5 ft
Height in : 6 inch
Height cm Calculated : 167.64 cm

Brantley RN, Stephanie A - 09/14/2015 13:34

DCP GENERIC CODE

ED Tracking Acuity : 3
ED Tracking Group : B Tracking Group

Brantley RN, Stephanie A - 09/14/2015 13:34

ED Triage Nurse : Brantley RN, Stephanie A

Brantley RN, Stephanie A - 09/14/2015 13:34

Oxygen Modality-ED

Oxygen Modality : Room Air

Brantley RN, Stephanie A - 09/14/2015 13:34

DOCUMENT NAME: Emergency Dept
SERVICE DATE/TIME: 9/14/2015 17:37 EDT
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Cruea MD, Steven L (9/14/2015 17:37 EDT)
ELECTRONICALLY SIGNED BY: Cruea MD, Steven L (9/17/2015 09:33 EDT)

Emergency Dept

CHIEF COMPLAINT: Seizure.

HISTORY OF PRESENT ILLNESS: This is a 34-year-old who presents today for evaluation of a seizure. He was brought in by EMS and the only information I got out of it was that he might have had a seizure. When he arrived, he was looking around but was

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruca 3 MD, Steven L

Admitting Physician: Cruca 3 MD, Steven L

ED Documentation

nonverbal. He became verbal after ammonia was placed under his nose. His attorney later showed up, who reported that he saw what almost looked like he was having a panic attack in the office. He walked down the hall, went to the ground and then had reported seizure-like activity. The patient is now talking and he reports that he just aches all over, but has no other complaints.

REVIEW OF SYSTEMS: He denies headache, neck pain, neck stiffness, chest pain, shortness of breath, abdominal pain, rest of review of systems has been reviewed is negative.

FAMILY HISTORY: Noncontributory to today's presentation.

SOCIAL HISTORY: Positive for tobacco.

PAST MEDICAL HISTORY: Asthma.

MEDICATIONS: Albuterol.

ALLERGIES: No known medication allergies.

PHYSICAL EXAMINATION: Vital Signs: Reviewed. Refer to nurse's notes. General: Awake, alert, nontoxic, in no distress. HEENT: Pupils equal, round, reactive. Extraocular movements are intact. Oropharynx clear. Neck: Supple. No meningismus. Cardiovascular: Regular rhythm. Normal rate. Perfusion intact distally. Respiratory: Respirations clear equal, unlabored. Gastrointestinal: Soft, not tender or distended. Normoactive bowel sounds. Musculoskeletal: Full range of motion all joints. No edema. Skin: Warm and dry without rash. Neurological: Cranial nerves II through XII intact. Normal speech. No deficits.

MEDICAL DECISION MAKING: A 34-year-old presents today with the above presentation. Evaluation for new onset seizure was obtained. His EKG reveals a normal sinus rhythm. The CT of his head revealed no mass or hemorrhage. Mild mucosal thickening of the left ethmoid and maxillary sinus. Drug screen negative. Alcohol level was negative. CBC, BMP unremarkable. He has not acidotic. He has a normal white count.

EMERGENCY DEPARTMENT COURSE: Seen and evaluated in room 10. He was observed for several hours. He apparently has elected to leave AWOL at this time. This was prior to my ability to reassess him ambulating or provide any follow up instructions.

CLINICAL IMPRESSION:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

1. Altered mental status, -resolved.
2. Possible new onset seizure.
3. Patient absent without leave.

DISPOSITION: As above.

D: 09/14/2015 17:29 T: 09/14/2015 17:37 TID: 90653

Job #: 10613 Doc #: 20791336

cc: Steven Cruea, MD

*Electronically Signed & Verified on 09/17/2015 09:33
by Cruea MD, Steven L*

ED Discharge Summary

DOCUMENT NAME: Discharge Summary PHED
SERVICE DATE/TIME: 9/14/2015 17:27 EDT
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Reardon RN, Caitlin A (9/14/2015 17:27 EDT)
ELECTRONICALLY SIGNED BY:

Discharge Summary PHED
09/14/15 17:27 EDT Performed by Reardon RN, Caitlin A
Entered on 09/14/15 17:28 EDT

Discharge Summary PHED

Patient Disposition AWOL
Reassessment of Chief Complaint-ED Against Medical Advice
Current Pain-Yes-No N/A
IV/INT Discontinued Yes, Catheter Intact
Valuable-Belonging Return-ED None taken
Comments-ED Discharge Pt left AWOL. Nurse at front removed
IV. Ambulated from ER in NAD

ED Documentation

DOCUMENT NAME: Clinical Summary ED
SERVICE DATE/TIME: 9/14/2015 17:28 EDT
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Reardon RN, Caitlin A (9/14/2015 17:28 EDT)
SIGN INFORMATION: Reardon RN, Caitlin A (9/14/2015 17:28 EDT)

Clinical Summary ED

Palmetto Health Emergency Department Depart Summary

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

PERSON INFORMATION

Name ELLEBY, EMMANUEL BASHAN a	Age 34 Years	DOB [REDACTED]
Sex Male	Language English	PCP Referral, No
Marital Status Single	Phone [REDACTED]	
MRN [REDACTED]	Visit Id	Acct# [REDACTED]
Visit Reason SEIZURE	Specialty	
Enc Type ERB-Emergency Room	Med Service Emergency Services	Referred by
Track Group B Tracking Group	Discharge	
Tracking Id [REDACTED]	Checkout 9/14/2015 5:28 PM	
Checkin 9/14/2015 1:29 PM	Acuity 3	Dispo Type
Arrival 9/14/2015 1:29 PM	Reg Status	[REDACTED]
Address:		
B/A T COLUMBIA SC 29201		

POWERFORMS

Discharge Summary PHED

09/14/15 05:27 pm Performed by Reardon RN, Caitlin A

Entered on 09/14/15 05:28 pm

Discharge Summary PHED

Patient Disposition: AWOL

Reassessment of Chief Complaint-ED: Against Medical Advice

Current Pain-Yes-No: N/A

IV/INT Discontinued: Yes, Catheter Intact

Valuable-Belonging Return-ED: None taken

Comments-ED Discharge: Pt left AWOL. Nurse at front removed IV. Ambulated from ER in NAD

SCHEDULING

PHYS DOC NOTES

DEPART REASON INCOMPLETE INFORMATION

PROVIDER INFORMATION

Provider	Role	Assigned	Unassigned
Cruea MD, Steven L	ED Physician	9/14/2015 1:35 PM	
Oliver RN, Gerald	ED RN/LPN	9/14/2015 1:38 PM	

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

VITALS INFORMATION

Vital Sign	Triage	Latest
Job		
Involve Family		
Contact		
Pain Onset		
Temp Intravascular		
Pulse Rate		
Respiratory Rate		
Blood Pressure	147 mmHg / 80 mmHg	142 mmHg / 80 mmHg

EVENTS INFORMATION

Event Name	Event Status	Request Date/Time	Start Date/Time	Complete Date/Time
Arrival	Complete	9/14/2015 1:29 PM	9/14/2015 1:29 PM	9/14/2015 1:29 PM
DON'T REMOVE CHARGES	Request	9/14/2015 1:29 PM		
MDXam	Complete	9/14/2015 1:29 PM	9/14/2015 1:40 PM	9/14/2015 1:40 PM
Med Hx	Complete	9/14/2015 1:29 PM	9/14/2015 4:01 PM	9/14/2015 4:01 PM
Nurse Exam	Complete	9/14/2015 1:29 PM	9/14/2015 1:38 PM	9/14/2015 1:38 PM
Triage	Complete	9/14/2015 1:29 PM	9/14/2015 1:36 PM	9/14/2015 1:36 PM
Reg Loc Change	Request	9/14/2015 1:34 PM		
ED Bed Assign	Complete	9/14/2015 1:34 PM	9/14/2015 1:34 PM	9/14/2015 1:34 PM
Registration	Complete	9/14/2015 1:40 PM	9/14/2015 1:48 PM	9/14/2015 1:48 PM
Radiology	Complete	9/14/2015 1:41 PM	9/14/2015 2:51 PM	9/14/2015 2:51 PM
EKG	Complete	9/14/2015 1:41 PM	9/14/2015 2:38 PM	9/14/2015 2:38 PM
Lab	Complete	9/14/2015 1:41 PM	9/14/2015 2:22 PM	9/14/2015 2:22 PM
Urine	Complete	9/14/2015 1:41 PM	9/14/2015 2:22 PM	9/14/2015 2:22 PM
Lab	Complete	9/14/2015 2:21 PM	9/14/2015 2:22 PM	9/14/2015 2:22 PM
Rdy for Transport	Complete	9/14/2015 2:22 PM	9/14/2015 2:51 PM	9/14/2015 2:51 PM
Lab	Complete	9/14/2015 2:46 PM	9/14/2015 2:46 PM	9/14/2015 2:51 PM

LOCATION INFORMATION

Arrival	Nurse Unit	Room	Bed
9/14/2015 1:29 PM	B ED	WR	
9/14/2015 1:34 PM	B ED	Gld	10
9/14/2015 5:20 PM	B ED	Gld	DLG

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

9/14/2015 5:28 PM B ED

Check Out

ORDERS INFORMATION

Start Time	Order	Type	Status	Stop Time	Provider
9/14/2015 2:22 PM	Alcohol/Ethanol Level	Laboratory	Completed	9/14/2015 3:14 PM	Cruea MD, Steven L
9/14/2015 1:40 PM	CT Head W/O IV Contrast	Radiology	Ordered	9/14/2015 1:40 PM	Cruea MD, Steven L
9/14/2015 1:40 PM	EK EKG 12 Lead	Radiology	Ordered	9/14/2015 1:40 PM	Cruea MD, Steven L
9/14/2015 2:18 PM	CBC	Laboratory	Completed	9/14/2015 2:30 PM	Cruea MD, Steven L
9/14/2015 2:18 PM	Basic Metabolic Panel	Laboratory	Completed	9/14/2015 2:46 PM	Cruea MD, Steven L
9/14/2015 2:22 PM	Drugs of Abuse Screen, Urine	Laboratory	Completed	9/14/2015 3:04 PM	Cruea MD, Steven L
9/14/2015 3:55 PM	PO Fluids	Patient Care	Ordered	9/14/2015 3:55 PM	Cruea MD, Steven L
9/14/2015 1:40 PM	Glomerular Filtration Rate	Laboratory	Completed	9/14/2015 2:46 PM	Cruea MD, Steven L

MEDICAL INFORMATION

Allergy Info:
Tomatoes
Prescriptions Given

DISCHARGE INFORMATION

Discharge Disposition:
Discharge Location:

PATIENT EDUCATION INFORMATION

Instructions:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

Follow up:

DIAGNOSIS

DOCUMENT NAME:
SERVICE DATE/TIME:
RESULT STATUS:
PERFORM INFORMATION:
SIGN INFORMATION:

ED Pat Edu
9/14/2015 17:28 EDT
Auth (Verified)
Reardon RN, Caitlin A (9/14/2015 17:28 EDT)
Reardon RN, Caitlin A (9/14/2015 17:28 EDT)

ED Pat Edu

Physician's Discharge Summary

Name: EMMANUEL ELLEBY

DOB: [REDACTED]

Visit Date: 09/14/15 13:29:00

Current Date: 09/14/15 17:28:20

Primary Care Provider:

Name: Referral, No, PH10 CPOE Physician **Phone:**

Palmetto Health would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your injury/illness.

I understand that the emergency care which I received is not intended to be complete and definitive medical care and treatment. I acknowledge that I have been instructed to contact the above physician immediately for continued and complete medical diagnosis, care and treatment. EKG's, X-rays, and lab studies will be reviewed by appropriate specialists and I will be notified of significant discrepancies. I also understand that my signature authorizes this Medical Center to release all or and part of my medical record (including, if applicable, information pertaining to AIDS and/or HIV testing, mental health records, and drug and/or alcohol treatment) to the referred physician listed above.

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation

Follow-Up Instructions

EMMANUEL ELLEBY has been given the following patient education materials:

Prescriptions

EMMANUEL ELLEBY has been given the following prescriptions:
No prescriptions were provided.

Patient Visit Summary

EMMANUEL ELLEBY has been given the following list of patient education materials, prescriptions and follow-up instructions:

Patient Education Materials:

Prescriptions:

Home Meds:

Follow-Up Instructions:

Read and follow instructions provided.
Take medications as directed.
Return to the ER for new or worse problems.

No follow up information was provided.

I, EMMANUEL ELLEBY, have received the Physician's Discharge Summary, my patient education materials, and have verbalized understanding:

Patient Signature

Date

Provider Signature

Date

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

ED Documentation



Allergies

Substance	Updated Date/Time	Updated By	Allergy Type	Allergy Category	Severity	Recorded On	Reaction Status	Reaction Symptom	Reaction Information Source	Estimated Onset	Reviewed Date/Time	Reviewed By	Data Source
egg-containing compound	10/9/2015 08:04 EDT	Baker BSN, RN, Elizabeth B	Allergy	Food Allergy		Baker BSN, RN, Elizabeth B	Active				10/16/2015 10:58 EDT	Lucas RN, Erin C	
NKA	12/15/2014 09:19 EST	Woodward RN, Raquel L	Allergy	Drug Allergy		Clark RN, Wendi A	Canceled				10/16/2015 10:58 EDT	Lucas RN, Erin C	

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruca 3 MD, Steven L

Admitting Physician: Cruca 3 MD, Steven L

Allergies

Substance	Updated Date/Time	Updated By	Allergy Type	Allergy Category	Severity	Recorded On Behalf Of	Reaction Status	Reaction Symptom	Information Source	Estimated Onset	Reviewed Date/Time	Reviewed By	Data Source
penicillin ^{C1}	10/13/2015 17:07 EDT	Howland RN, Barbara A	Allergy	Drug Allergy		Howland RN, Barbara A	Active				10/16/2015 10:58 EDT	Lucas RN, Erin C	
Tomatoes	12/15/2014 09:19 EST	Woodward RN, Raquel L	Allergy	Food Allergy		Woodward RN, Raquel L	Active				10/16/2015 10:58 EDT	Lucas RN, Erin C	
Tylenol	10/13/2015 17:08 EDT	Howland RN, Barbara A	Allergy	Drug Allergy		Howland RN, Barbara A	Active				10/16/2015 10:58 EDT	Lucas RN, Erin C	

C1: 10/13/2015 17:07 EDT; Howland RN, Barbara A; rash

Allergy History

Substance: egg-containing compound	Recorded Date/Time	Recorded By	Allergy Type; Recorded On Behalf Of; Reaction Status; Active; Information Source; ; Reviewed Date/Time; 10/16/2015 10:58 EDT; Reviewed By: Lucas RN, Erin C; Category Food Allergy;
	10/9/2015 08:04 EDT	Baker BSN, RN, Elizabeth B	
Substance: NKA	Recorded Date/Time	Recorded By	Allergy Type; Recorded On Behalf Of; Reaction Status; Canceled; Information Source; ; Reviewed Date/Time; 10/16/2015 10:58 EDT; Reviewed By: Lucas RN, Erin C; Category Drug Allergy;
	12/15/2014 09:19 EST	Woodward RN, Raquel L	
	8/4/2006 13:14 EDT	Clark RN, Wendi A	Allergy Type; Recorded On Behalf Of; Reaction Status; Active; Information Source; ; Reviewed Date/Time; 12/14/2014 23:23 EST; Reviewed By: Wyndham RN, Kathryn E; Category Drug Allergy;
Substance: penicillin	Recorded Date/Time	Recorded By	Allergy Type; Recorded On Behalf Of; Reaction Status; Active; Information Source; ; Reviewed Date/Time; 10/16/2015 10:58 EDT; Reviewed By: Lucas RN, Erin C; Category Drug Allergy;
	10/13/2015 17:07 EDT ^{C1}	Howland RN, Barbara A	

C1: 10/13/2015 17:07 EDT; Howland RN, Barbara A; rash

Substance: Tomatoes	Recorded Date/Time	Recorded By	Allergy Type; Recorded On Behalf Of; Reaction Status; Active; Information Source; ; Reviewed Date/Time; 10/16/2015 10:58 EDT; Reviewed By: Lucas RN, Erin C; Category Food Allergy;
	12/15/2014 09:19 EST	Woodward RN, Raquel L	
Substance: Tylenol	Recorded Date/Time	Recorded By	Allergy Type; Recorded On Behalf Of; Reaction Status; Active; Information Source; ; Reviewed Date/Time; 10/16/2015 10:58 EDT; Reviewed By: Lucas RN, Erin C; Category Drug Allergy;
	10/13/2015 17:08 EDT	Howland RN, Barbara A	

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruca 3 MD, Steven L

Admitting Physician: Cruca 3 MD, Steven L

Non Medication Orders

Order: Glomerular Filtration Rate

Order Start Date/Time: 9/14/2015 13:40 EDT

Order Date/Time: 9/14/2015 14:46 EDT

Order Status: Completed

Department Status: Completed

Catalog Type: Laboratory

Activity Type: General Lab

End-state Date/Time: 9/14/2015 14:46 EDT

End-state Reason:

Ordered and Electronically Signed By: Cruca MD, Steven L

Consulting Physician:

Entered By: SYSTEM, SYSTEM on 9/14/2015 14:46 EDT

Order Details: 9/14/15 1:40:00 PM EDT, Stat, OT ST - Stat, 1, occurrences, Specimen: Blood, 14693967.000000, 09/14/15 13:40:00, 9/14/15 2:46:59 PM EDT

Order Comment:

Action Type: Order

Action Date/Time: 9/14/2015 14:46 EDT

Action Personnel: SYSTEM, SYSTEM

Responsible Provider: Cruca MD, Steven L

Supervising Provider:

Communication Type: Discern Expert

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 14693967.000000, 09/14/15 13:40:00, 09/14/15 13:40:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:46 EDT

Action Personnel: SYSTEM, SYSTEM

Responsible Provider: Cruca MD, Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 14693967.000000, 09/14/15 13:40:00, 09/14/15 13:40:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Complete

Action Date/Time: 9/14/2015 14:46 EDT

Action Personnel: SYSTEM, SYSTEM

Responsible Provider: Cruca MD, Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 14693967.000000, 09/14/15 13:40:00, 09/14/15 13:40:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruca 3 MD,Steven L

Admitting Physician: Cruca 3 MD,Steven L

Non Medication Orders

Order: Alcohol/Ethanol Level

Order Start Date/Time: 9/14/2015 14:22 EDT

Order Date/Time: 9/14/2015 14:21 EDT

Order Status: Completed

Department Status: Completed

Catalog Type: Laboratory

Activity Type: General Lab

End-state Date/Time: 9/14/2015 15:14 EDT

End-state Reason:

Ordered and Electronically Signed By: Cruca MD,Steven L

Consulting Physician:

Entered By: Cruca MD,Steven L on 9/14/2015 14:21 EDT

Order Details: 9/14/15 2:22:00 PM EDT, Stat, OT ST - Stat, 1, occurrences, Specimen: Blood, 09/14/15 14:21:00, 9/14/15 3:14:35 PM EDT, Print Label

Order Comment:

Action Type: Order

Action Date/Time: 9/14/2015 14:21 EDT

Action Personnel: Cruca MD,Steven L

Responsible Provider: Cruca MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 14:21:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 14:21:00, 09/14/15 14:21:00, Print Label

Review Information:

Nurse Review: Electronically Signed, Oliver RN,Gerald on 9/14/2015 14:48 EDT

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:25 EDT

Action Personnel: Killingsworth, Porche S

Responsible Provider: Cruca MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 14:21:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 14:21:00, 09/14/15 14:21:00, Print Label

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:25 EDT

Action Personnel: Killingsworth, Porche S

Responsible Provider: Cruca MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 14:21:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 14:21:00, 09/14/15 14:21:00, Print Label

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Complete

Action Date/Time: 9/14/2015 15:14 EDT

Action Personnel: Baiter, Dale L

Responsible Provider: Cruca MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 14:21:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 14:21:00, 09/14/15 14:21:00, Print Label

Review Information:

Doctor Cosign: Not Required

Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD,Steven L

Admitting Physician: Cruea 3 MD,Steven L

Non Medication Orders

Order: Basic Metabolic Panel

Order Start Date/Time: 9/14/2015 14:18 EDT

Order Date/Time: 9/14/2015 13:40 EDT

Order Status: Completed

Department Status: Completed

Catalog Type: Laboratory

Activity Type: General Lab

End-state Date/Time: 9/14/2015 14:46 EDT

End-state Reason:

Ordered and Electronically Signed By: Cruea MD,Steven L

Consulting Physician:

Entered By: Cruea MD,Steven L on 9/14/2015 13:40 EDT

Order Details: 9/14/15 2:18:00 PM EDT, Stat, OT ST - Stat, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 9/14/15 2:46:56 PM EDT, Print Label

Order Comment:

Action Type: Order

Action Date/Time: 9/14/2015 13:41 EDT

Action Personnel: Cruea MD,Steven L

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label

Review Information:

Nurse Review: Electronically Signed, Oliver RN,Gerald on 9/14/2015 14:48 EDT

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:24 EDT

Action Personnel: Killingsworth,Porche S

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:24 EDT

Action Personnel: Killingsworth,Porche S

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Complete

Action Date/Time: 9/14/2015 14:46 EDT

Action Personnel: SYSTEM,SYSTEM

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label

Review Information:

Doctor Cosign: Not Required

Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD,Steven L

Admitting Physician: Cruea 3 MD,Steven L

Non Medication Orders

Order: CBC
Order Start Date/Time: 9/14/2015 14:18 EDT
Order Date/Time: 9/14/2015 13:40 EDT
Order Status: Completed Department Status: Completed Catalog Type: Laboratory Activity Type: General Lab
End-state Date/Time: 9/14/2015 14:30 EDT End-state Reason:
Ordered and Electronically Signed By: Cruea MD,Steven L Consulting Physician:
Entered By: Cruea MD,Steven L on 9/14/2015 13:40 EDT
Order Details: 9/14/15 2:18:00 PM EDT, Stat, OT ST - Stat, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 2:30:16 PM EDT, Print Label
Order Comment:
Action Type: Order Action Date/Time: 9/14/2015 13:41 EDT Action Personnel: Cruea MD,Steven L
Responsible Provider: Cruea MD,Steven L Supervising Provider: Communication Type: CPOE
Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label
Review Information:
Nurse Review: Electronically Signed, Oliver RN,Gerald on 9/14/2015 14:48 EDT
Doctor Cosign: Not Required
Order Comment:
Action Type: Status Change Action Date/Time: 9/14/2015 14:24 EDT Action Personnel: Killingsworth,Porsche S
Responsible Provider: Cruea MD,Steven L Supervising Provider: Communication Type:
Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label
Review Information:
Doctor Cosign: Not Required
Order Comment:
Action Type: Status Change Action Date/Time: 9/14/2015 14:24 EDT Action Personnel: Killingsworth,Porsche S
Responsible Provider: Cruea MD,Steven L Supervising Provider: Communication Type:
Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label
Review Information:
Doctor Cosign: Not Required
Order Comment:
Action Type: Complete Action Date/Time: 9/14/2015 14:30 EDT Action Personnel: SYSTEM,SYSTEM
Responsible Provider: Cruea MD,Steven L Supervising Provider: Communication Type:
Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Blood, 09/14/15 13:40:00, 09/14/15 13:41:00, Print Label
Review Information:
Doctor Cosign: Not Required
Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD,Steven L

Admitting Physician: Cruea 3 MD,Steven L

Non Medication Orders

Order: CT Head W/O IV Contrast

Order Start Date/Time: 9/14/2015 13:40 EDT

Order Date/Time: 9/14/2015 13:40 EDT

Order Status: Completed

Department Status: Completed

Catalog Type: Radiology

Activity Type: Radiology

End-state Date/Time: 9/14/2015 19:14 EDT

End-state Reason:

Ordered and Electronically Signed By: Cruea MD,Steven L

Consulting Physician:

Entered By: Cruea MD,Steven L on 9/14/2015 13:40 EDT

Order Details: 9/14/15 1:40:00 PM EDT, Stat, Reason: new onset sz, Transport: Stretcher

Order Comment:

Action Type: Order

Action Date/Time: 9/14/2015 13:41 EDT

Action Personnel: Cruea MD,Steven L

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Reason: new onset sz, Transport: Stretcher

Review Information:

Nurse Review: Electronically Signed, Sellers RN,Shea A on 9/14/2015 15:22 EDT

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:32 EDT

Action Personnel: Hiers,Amanda M

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Reason: new onset sz, Transport: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 15:03 EDT

Action Personnel: Morgan,Kelly

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Reason: new onset sz, Transport: Stretcher

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Complete

Action Date/Time: 9/14/2015 19:14 EDT

Action Personnel: Lough MD,Lawrence Ren

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Reason: new onset sz, Transport: Stretcher

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM,SYSTEM on 9/28/2015 23:06 EDT

Doctor Cosign: Not Required

Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Crucea 3 MD,Steven L

Admitting Physician: Crucea 3 MD,Steven L

Non Medication Orders

Order: Drugs of Abuse Screen,Urine

Order Start Date/Time: 9/14/2015 14:22 EDT

Order Date/Time: 9/14/2015 13:40 EDT

Order Status: Completed

Department Status: Completed

Catalog Type: Laboratory

Activity Type: General Lab

End-state Date/Time: 9/14/2015 15:04 EDT

End-state Reason:

Ordered and Electronically Signed By: Crucea MD,Steven L

Consulting Physician:

Entered By: Crucea MD,Steven L on 9/14/2015 13:40 EDT

Order Details: 9/14/15 2:22:00 PM EDT, Stat, OT ST - Stat, 1, occurrences, Specimen: Urine, 09/14/15 13:40:00, Nurse To Collect, 9/14/15 3:04:25 PM EDT

Order Comment:

Action Type: Order

Action Date/Time: 9/14/2015 13:41 EDT

Action Personnel: Crucea MD,Steven L

Responsible Provider: Crucea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Urine, 09/14/15 13:40:00, Nurse To Collect, 09/14/15 13:41:00

Review Information:

Nurse Review: Electronically Signed, Oliver RN,Gerald on 9/14/2015 14:48 EDT

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:25 EDT

Action Personnel: Killingsworth,Porche S

Responsible Provider: Crucea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Urine, 09/14/15 13:40:00, Nurse To Collect, 09/14/15 13:41:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 14:25 EDT

Action Personnel: Killingsworth,Porche S

Responsible Provider: Crucea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Urine, 09/14/15 13:40:00, Nurse To Collect, 09/14/15 13:41:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Complete

Action Date/Time: 9/14/2015 15:04 EDT

Action Personnel: Boiler,Dale L

Responsible Provider: Crucea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 13:40:00, Stat, ST - Stat OT, 1, occurrences, Specimen: Urine, 09/14/15 13:40:00, Nurse To Collect, 09/14/15 13:41:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD,Steven L

Admitting Physician: Cruea 3 MD,Steven L

Non Medication Orders

Order: EK EKG 12 Lead (EKG 12 Lead EK)

Order Start Date/Time: 9/14/2015 13:40 EDT

Order Date/Time: 9/14/2015 13:40 EDT

Order Status: Completed

Department Status: Exam Completed Catalog Type: Radiology

Activity Type: Radiology

End-state Date/Time: 9/29/2015 10:04 EDT

End-state Reason:

Ordered and Electronically Signed By: Cruea MD,Steven L

Consulting Physician:

Entered By: Cruea MD,Steven L on 9/14/2015 13:40 EDT

Order Details: 9/14/15 1:40:00 PM EDT, Stat, Seizures, OT, Harrison MD, Rodney V, Stop 9/29/15 10:04:16 AM EDT, 780.39, Seizures

Order Comment:

Action Type: Order

Action Date/Time: 9/14/2015 13:41 EDT

Action Personnel: Cruea MD,Steven L

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Seizures, OT, Stop 09/14/15 13:40:00

Review Information:

Nurse Review: Electronically Signed, Oliver RN,Gerald on 9/14/2015 14:49 EDT

Doctor Cosign: Not Required

Order Comment:

Action Type: Modify

Action Date/Time: 9/14/2015 16:25 EDT

Action Personnel: Longwood,Pamela

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Seizures, Seizures, OT, Harrison MD, Rodney V, Stop 09/14/15 13:40:00, 780.39

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 9/14/2015 16:25 EDT

Action Personnel: Longwood,Pamela

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Seizures, Seizures, OT, Harrison MD, Rodney V, Stop 09/14/15 13:40:00, 780.39

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Complete

Action Date/Time: 9/29/2015 10:04 EDT

Action Personnel: SYSTEM,SYSTEM

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 13:40:00, Stat, Seizures, Seizures, OT, Harrison MD, Rodney V, Stop 09/14/15 13:40:00, 780.39

Review Information:

Doctor Cosign: Not Required

Order Comment:

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD,Steven L

Admitting Physician: Cruea 3 MD,Steven L

Non Medication Orders

Order: PO Fluids

Order Start Date/Time: 9/14/2015 15:55 EDT

Order Date/Time: 9/14/2015 15:55 EDT

Order Status: Discontinued

Department Status: Discontinued

Catalog Type: Patient Care

Activity Type: Patient Care

End-state Date/Time: 9/15/2015 03:26 EDT

End-state Reason:

Ordered and Electronically Signed By: Cruea MD,Steven L

Consulting Physician:

Entered By: Cruea MD,Steven L on 9/14/2015 15:55 EDT

Order Details: 9/14/15 3:55:00 PM EDT, OT, Stop 9/15/15 3:26:17 AM EDT

Order Comment: PO challenge--Inform Dr. Cruea of results

Action Type: Order

Action Date/Time: 9/14/2015 15:55 EDT

Action Personnel: Cruea MD,Steven L

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type: CPOE

Order Details: 09/14/15 15:55:00, OT, Stop 09/14/15 15:55:00

Review Information:

Nurse Review: Electronically Signed, Oliver RN,Gerald on 9/14/2015 16:46 EDT

Doctor Cosign: Not Required

Order Comment: PO challenge--Inform Dr. Cruea of results

Action Type: Discontinue

Action Date/Time: 9/15/2015 03:26 EDT

Action Personnel: SYSTEM,SYSTEM

Responsible Provider: Cruea MD,Steven L

Supervising Provider:

Communication Type:

Order Details: 09/14/15 15:55:00, OT, Stop 09/14/15 15:55:00

Review Information:

Doctor Cosign: Not Required

Order Comment:

Immunizations

Vaccine:

influenz virus vaccine,inactivated ⁰¹

Date Given:

Not given (Allergy to Eggs (disorder)) on
10/14/2015 01:33 EDT

Age:

35 years

Data Source:

PowerChart

Order Comments

01: influenza virus vaccine, inactivated

Order created based on documented indication for influenza vaccine approved by MEC

Vaccine:

pneumococcal 23-valent vaccine ⁰²

Date Given:

10/14/2015 15:20 EDT

Age:

35 years

Admin Person:

Howland RN,Barbara A

Data Source:

PowerChart

Site:

Right Deltoid

Route:

IM

Amount:

0.5mL

Manufacturer:

*PHR Pharmacy

Expiration Date:

2/10/2017

Lot Number:

017265

Order Comments

02: pneumococcal 23-valent vaccine

Order created based on documented indication for pneumococcal vaccine approved by MEC

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Radioiology

ACCESSION	EXAM DATE/TIME	PROCEDURE	ORDERING PROVIDER	STATUS
CT-15-0064663	9/14/2015 15:03 EDT	CT Head W/O IV Contrast	Cruea MD, Steven L	Auth (Verified)

Reason For Exam
(CT Head W/O IV Contrast) new onset sz

Findings:
NONCONTRAST HEAD CT

INDICATION: New onset seizures.

TECHNIQUE: Axial scans were obtained through the brain without IV contrast administration.

FINDINGS: Cerebral sulci and ventricles are of normal size. No cortical infarct or intracranial hemorrhage. There is some mild mucosal thickening involving the left maxillary sinus with some mucosal thickening involving the anterior ethmoid air cells on the left. Otherwise, visualized portions of the facial sinuses are clear.

IMPRESSION: Negative noncontrast head CT other than some mild mucosal thickening involving the left anterior ethmoid and left maxillary sinus.

*** Final ***

Trans On: 09/14/2015 15:18 by: LAA

Read by: Lough MD, Lawrence Ren

Released By: Lough MD, Lawrence Ren

Released on: 09/14/2015 19:14

Technologist: Morgan, Kelly, Smith, Brandee S, Brig

Cardiac Services

Patient Name ELLEBY EMANUEL BASHAN

* Auth (Verified) *

ELLEBY, EMMANUEL (BASHAN)

34 Years

Male

9/14/2015 2:23:55 PM

PALMETTO HEALTH-BAPTIST (101)

Baptist (B)

(3)

Operator: DBP

Rate 80 SINUS RHYTHM.....normal P axis, V-rate 50-99
 PR 204 BORDERLINE AV CONDUCTION DELAY.....PR >200, V-rate 50-90
 QRS 76 RSR' IN V1 OR V2, RIGHT VCD OR RVE.....QRS area positive & R' V1/V2
 QT 360
 QTc 416 ELLEBY, EMMANUEL BASHAN

--AXIS--

P 61

QRS 31

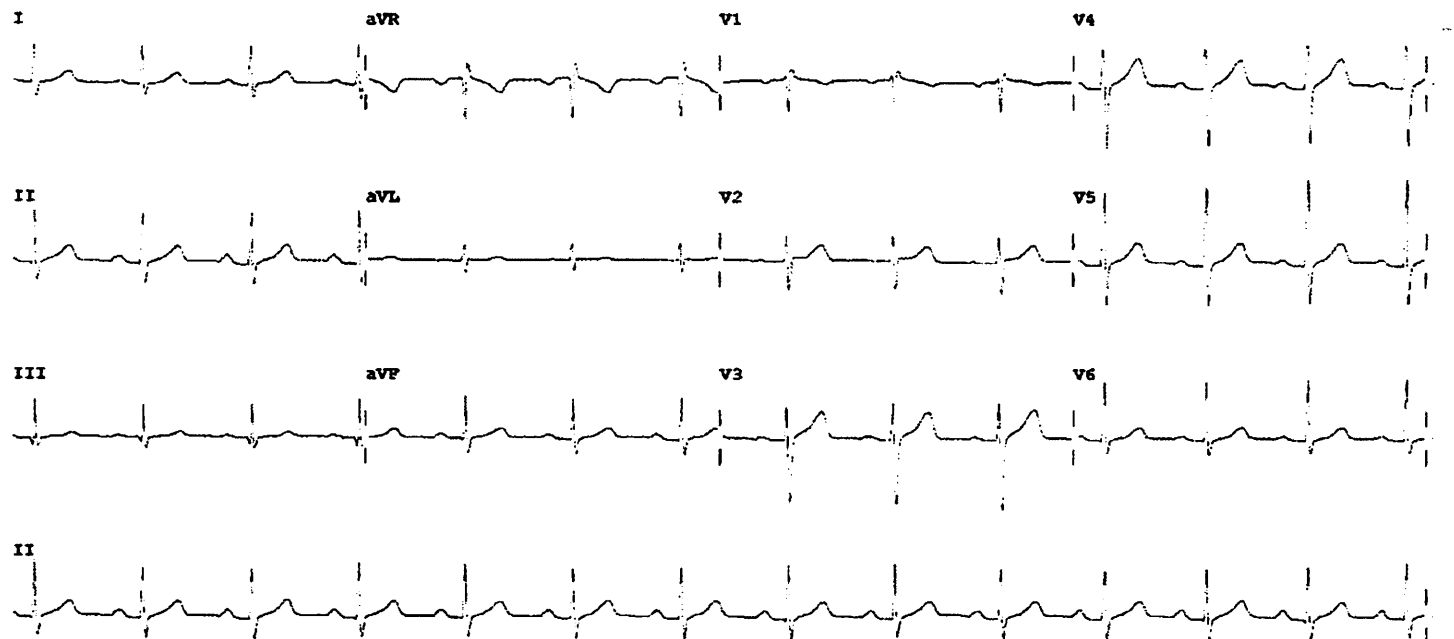
T 46

- BORDERLINE ECG -

ACCOUNT #

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: TC70-6 Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.50-150 Hz W PH090A L P?

Patient Name ELLEBY, EMMANUEL BASHAN

Name: ELLEBY, EMMANUEL BASHAN

Age: 34 Yrs

Gender: Male Race: Unknown Date: 09/14/2015 14:23:55

Height: Unknown

Weight: Unknown

PR: 204

P Axis: 61

QRS Dur: 76

QRS Axis: 31

QT: 360

T Axis: 46

QTc: 416

HR: 80

QT Disp: 56

SP:

Requested By:

Taken By: DBP

Account #:

PACS ID: 12600338

Location: ER

Diagnosis: SEIZURES

DX:

RX:

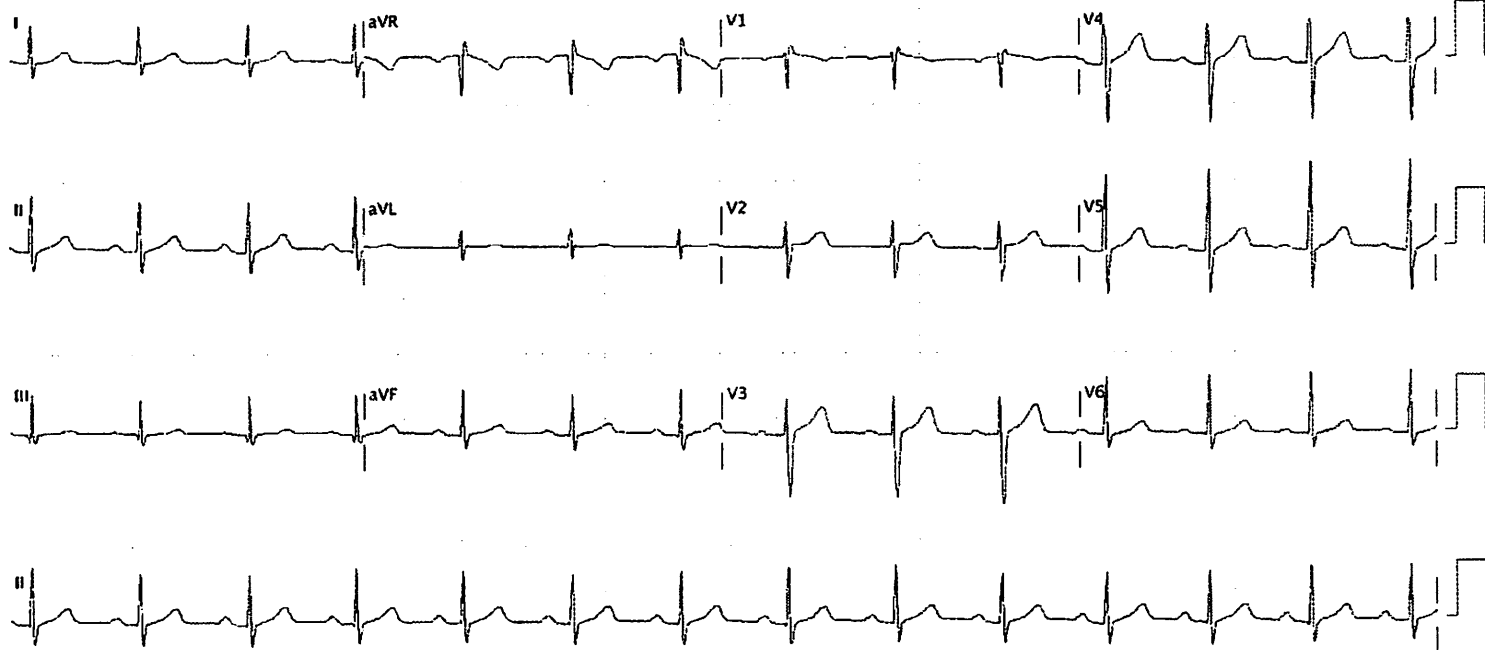
SINUS RHYTHM

BORDERLINE AV CONDUCTION DELAY

RSR' IN V1 OR V2, RIGHT VCD OR RVH

Borderline ECG

PRELIMINARY REPORT - MD MUST REVIEW



Palmetto Health Alliance - PHB - ER

F 60~ 0.05 - 150 Hz 25 mm/sec 10 mm/mV (TC70)

Patient Name ELLEBY, EMANUEL BASHAN

* Auth (Verified) *

Name: ELLEBY, EMMANUEL BASHAN

Age: 34 Yrs

Gender: Male Race: Unknown Date: 09/14/2015 14:23:55

Height: Unknown

Weight: Unknown

PR: 204

P Axis: 61

QRS Dur: 76

QRS Axis: 31

QT: 360

T Axis: 46

QTc: 416

HR: 80

QT Disp: 56

BP:

Requested By: CRUEA MD, STEVEN

Taken By: DBP/PL

Location: ER

Diagnosis: SEIZURES

DX:

RX:

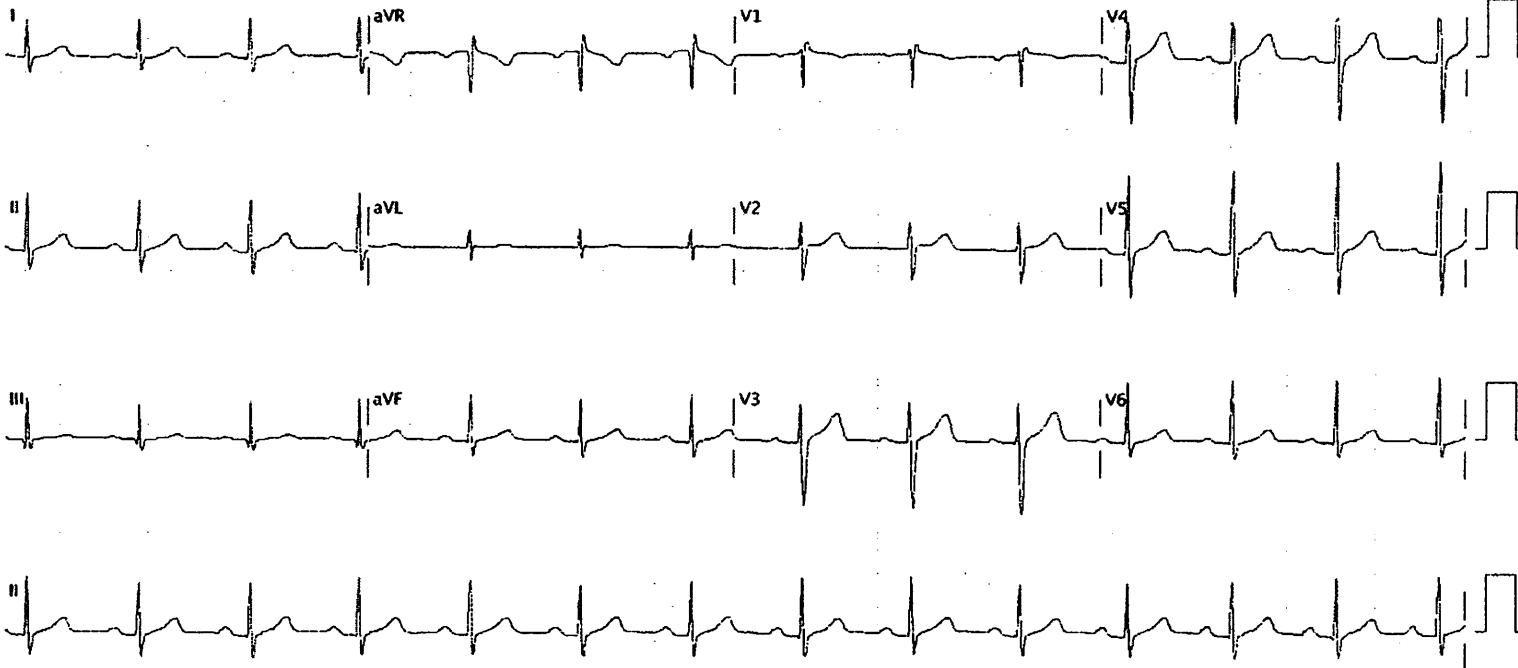
SINUS RHYTHM

BORDERLINE AV CONDUCTION DELAY

RSR' IN V1 OR V2, RIGHT VCD OR RVH

Borderline ECG

Electronically signed by Guillermo E Pineda, MD - 09/14/2015 18:48:03



Palmetto Health Alliance - PHB - ER

F 60~ 0.05 - 150 Hz 25 mm/sec 10 mm/mV (TC70)

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruca 3 MD, Steven L

Admitting Physician: Cruca 3 MD, Steven L

Cardiac Services

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Administrative

Patient Name ELLEBY, EMANUEL BASHAN

DOB: 02/10/86

* Transcribed *



ELLEBY, EMANUEL BASHAN



PALMETTO HEALTH
- ED Hospital Release -

Leaving Prior to Discharge

Date: 9/14/15 Time: 1700

I understand that I have presented to Palmetto Health for evaluation and treatment. I have been advised that it is necessary for me to stay for that treatment. I am leaving the hospital:

- ☐ (LPTT) Prior to medical screening by the medical provider.
- ☒ (AWOL) After medical screening, prior to the medical provider explaining the medical risks of the patient leaving.
- ☐ (AMA) Medical provider explained the medical risks of the patient leaving.

I am therefore releasing the hospital, attending physicians and any other persons caring for me from all responsibility for the consequences of my refusal of treatment or my leaving prior to being seen by a physician or receiving treatment. I also realize that I may have encountered hospital charges for the services I have received.

Signed: _____

Address: _____

Patient refuses to sign:

Witness 1: _____

Witness 2: _____

Revised 8/13

Patient Name ELLEBY, EMANUEL BASHAN

* Auth (Verified) *

Palmetto Health General Consent

ELLEBY, EMMANUEL BASHAN

All Patients I consent to and authorize Palmetto Health to perform as applicable:

Blood Draws	Medications	Tissues Disposal/Donation
Examinations	Procedures	Treatments
Lab Tests	Therapy	Transportation

These activities may be performed by authorized Palmetto Health or affiliated physicians and/or clinicians, including appropriately supervised students and residents.

DO YOU WANT TO DESIGNATE A FAMILY MEMBER OR OTHER INDIVIDUAL WITH WHOM THE PROVIDER MAY DISCUSS YOUR MEDICAL CONDITION? ELLEBY, THERESA (803)661-6415

My photograph may be taken for identification purposes and is the property of Palmetto Health unless I withdraw my consent in writing. If I have provided my e-mail address, I am requesting the ability to access my medical information through the Palmetto Health on-line Patient Portal.

I give permission to share my electronic medical record among my health providers and obtain medication history through a Provider Health Information Exchange (HIE). Palmetto Health will follow state and federal laws regarding the access by medical providers of any sensitive information such as behavioral health, substance abuse treatment, sexual abuse, genetic test results, HIV/AIDS status and adoption records. I MAY OPT OUT OF THE HIE BY COMPLETING THE OPT-OUT FORM AND CONTINUE TO RECEIVE CARE.

I provided the following information:

I have requested to not be listed in the Palmetto Health Patient Directory	YES DIRECTORY
I am an organ donor	N
I have an Advance Directive	
I would like information about Advance Directives	N
I was given a Privacy Practices Notice on	20150914

Hospital Patients Only

If I signed a general consent form at my physician's office today, it is not necessary to sign another copy.

I understand video cameras may be used in some hospital rooms for observation purposes and additional photographs may be taken for medical purposes.

If I bring money and valuables to the hospital, I am responsible for any loss or damage for items not sent home or deposited with Palmetto Health.

I was shown/provided a copy of the Lewis Blackman Hospital Patient Safety Act Letter. I understand that the Patient Bill of Rights notice is posted in the public lobbies, printed in Patient Guides and available through the hospital's website @ www.PalmettoHealth.org.

If applicable, I consent to the disposal by Palmetto Health authorities of any tissue or body part which may be removed during the course of my treatment. I further understand if my tissue is used rather than destroyed, it will not be linked to my name or any other identifier that could be traced to me. To protect myself and others, I also give permission to have blood drawn and tested for infectious diseases including, but not limited to, HIV (AIDS virus) and Hepatitis. I further understand that certain circumstances require mandatory disclosure to organizations such as the state health department.

Patient or Patient Designee Representative

Date

Time

Witness Signature

Patient Name ELLEBY, EMANUEL BASHAN

* Auth (Verified) *

ELLEBY, EMMANUEL BASHAN

GUARANTY AND ASSIGNMENT OF INSURANCE BENEFITS

I hereby guaranty payment to Palmetto Health d/b/a Palmetto Health Richland, d/b/a Palmetto Health Baptist, d/b/a Palmetto Health Easley, d/b/a Palmetto Health Baptist Parkridge and my attending and consulting physician(s) (including, but not limited to, pathologists, radiologists and anesthesiologists), for all charges and services incurred for the account(s) of the patient from date of admission until discharge. I do hereby assign to Palmetto Health and/or my attending and consulting physician(s) (including, but not limited to, pathologists, radiologists, and anesthesiologists), any and all medical insurance, health benefits, hospital benefits, sick benefits, injury benefits and settlement proceeds due or payable because of liability of a third party, payable by any party, organization or insurance company, or other sources of payment, unless I pay the account(s) in full upon discharge, (the "Assignment").

If I fail to pay all charges when due I agree to pay all costs of collection, including attorneys fees, collection costs and court costs.

I hereby authorize and request Palmetto Health and/or my attending and consulting physician(s) (including, but not limited to, pathologists, radiologists and anesthesiologists) to release and furnish medical information, necessary to support claims submitted, to any entities for payment, pursuant to the above Assignment.

In the event the undersigned is entitled to health care or medical benefits of any type whatsoever, arising out of any policy of insurance insuring the patient or any party liable to the patient, said benefits are hereby assigned to Palmetto Health and/or my attending and consulting physician(s) (including, but not limited to, pathologists, radiologists, and anesthesiologists), for application to the patient account(s) for services rendered.

I do hereby appoint and assign to Palmetto Health and/or my attending and consulting physician(s) (including, but not limited to, pathologists, radiologists, and anesthesiologists) as my true and lawful attorneys in fact, to act on my behalf, with the full power and authority to collect any and all charges incurred for the benefit of the patient pursuant to the assignment of benefits set forth above.

If I have provided my cell phone number, I hereby consent to Palmetto Health contacting me on my cellular phone, to discuss the collection of all debts arising out of this hospital treatment.

ACKNOWLEDGEMENT OF RECEIPT OF MEDICARE/TRICARE MEDICAL INFORMATION

I, the undersigned acknowledge that if I am a Medicare/TRICARE beneficiary, I have been provided with a notice from Medicare/TRICARE regarding my rights as a Medicare/TRICARE patient and the rights form has not been altered.

I authorize a copy of this assignment to be used in place of the original.

Date: 9/14/15

Patient (Parent or Guardian in case of minor)

Witness: [Signature]

Spouse or Insured if other than Patient

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220-

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Administrative

Facility Info: Prisma Health Baptist Hospital
TAYLOR AT MARION
COLUMBIA, SC 29220

Patient Info: ELLEBY, EMANUEL BASHAN

Attending Physician: Cruea 3 MD, Steven L

Admitting Physician: Cruea 3 MD, Steven L

Laboratory Results

Hematology

Collected Date/Time
9/14/2015 14:18 EDT

Procedure	Result	Reference Range	Units
WBC Count	4.1 ^u	[3.7-10.9]	Ku/L
RBC Count	4.38 ^u	[3.71-5.77]	Mu/L
Hemoglobin	14.7 ^u	[13.7-17.5]	g/dL
Hematocrit	42.1 ^u	[40.1-51.0]	%
MCV	96.1 ^u	[79.0-96.2]	fL
MCH	33.6 ^u	[25.7-32.2]	pg
MCHC	34.9 ^u	[32.2-36.5]	g/dL
RDW-SD	43.6 ^u	[35.1-43.9]	fL
RDW-CV	12.4 ^u	[11.6-14.4]	%
Platelet Count	219 ^u	[150-400]	Ku/L
MPV	9.0 ^u	[9.4-12.4]	fL
Auto Nucleated RBC's	0.0 ^u	[0.0-0.0]	/100WBC

Chemistry

Collected Date/Time
9/14/2015 14:18 EDT

Procedure	Result	Reference Range	Units
GFR Non-African American	86 ^u	[>=60]	mL/min/1.73 sq meter
GFR African American	104 ^u	[>=60]	mL/min/1.73 sq meter

Interpretive Data

^1: GFR African American, GFR Non-African American
Interpret with caution, quantification of eGFR values below 60 mL/min/1.73 m2 has more clinical implications for classification of kidney function than values above this level.

Collected Date/Time
9/14/2015 14:22 EDT

Procedure	Result	Reference Range	Units
Ethyl Alcohol	<3 ^u	[<=3]	mg/dL
ETOH (g%)	<0.003 ^u	[<=0.079]	g%

Interpretive Data

^2: ETOH (g%)
For Medical Purposes Only

Collected Date/Time
9/14/2015 14:18 EDT

Procedure	Result	Reference Range	Units
Sodium	138 ^u	[136-145]	mmol/L
Potassium	4.3 ^u	[3.5-5.1]	mmol/L
Chloride	108 ^u	[98-107]	mmol/L
CO2	23 ^u	[21-32]	mmol/L
Anion Gap	7 ^u	[5-15]	
Glucose Level	93 ^u	[70-99]	mg/dL

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Chemistry

Collected Date/Time

9/14/2015 14:18 EDT

Procedure	Result	Reference Range	Units
BUN	11 ¹	[7-18]	mg/dL
Creatinine	1.0 ¹	[0.6-1.3]	mg/dL
Calcium	8.9 ¹	[8.5-10.1]	mg/dL

Interpretive Data

¹³: Glucose Level
Fasting: 70-99
Impaired Fasting: 100-125
Random: 70-139

Toxicology

Collected Date/Time

9/14/2015 14:22 EDT

Procedure	Result	Reference Range	Units
Amphetamines, Qual	Negative ¹	[Negative]	
Barbiturates, Qual	Negative ¹	[Negative]	
Benzodiazepines, Qual	Negative ¹	[Negative]	
Cannabinoids, Qual	Negative ¹	[Negative]	
Cocaine Metabolites, Qual	Negative ¹	[Negative]	
Methadone, Qual	Negative ¹	[Negative]	
Opiates, Qual	Negative ¹	[Negative]	
Phencyclidine, Qual	Negative ¹	[Negative]	
Drug Scr Msg	See Comment ¹⁵		
Drug Scr Crea U	32.0 ¹		mg/dL

Interpretive Data

¹⁴: Opiates, Qual
Due to the cutoff for Opiates (2000 ng/mL) Oxycodone may not be detected. If Oxycodone is suspected please order an Oxycodone level.

¹⁵: Drug Scr Msg
FOR MEDICAL PURPOSES ONLY
This Drug Screen is only a preliminary screening test.
A more specific method must be used for confirmation of results.
The submitted urine specimen was screened at the listed cutoffs:

Drug Class	Initial Test Level
Amphetamines	500 ng/mL
Barbiturates	200 ng/mL
Benzodiazepines	200 ng/mL
Cannabinoids	50 ng/mL
Cocaine Metabolites	150 ng/mL
Opiates	2000 ng/mL
Methadone	300 ng/mL
Phencyclidine	25 ng/mL

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Laboratory Results

Performing Locations

*1: This test was performed at:
Prisma Health Baptist Laboratory, Geoffrey P. Turner, MD, PhD - Medical Director, Taylor at Marion St, Columbia, SC, 29220-

Social History

Tobacco

Detail: Former smoker, Started age 13.0 Years. Stopped age 35 Years. Ready to change: Yes. Household tobacco concerns: No. (Last Update: 10/13/2015 17:11 EDT by Howland RN, Barbara A)

Family History

Last Update: 10/13/2015 17:14 EDT by Howland RN, Barbara A

Mother (teresa): Alive

Condition	Age of Onset	Life Cycle	Severity
Diabetes mellitus type 2	Positive		

Father (Ronald): Deceased at age: 37 Years

Condition	Age of Onset	Life Cycle	Severity
Cardiac arrest	Positive		