

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM LANCASTER COUNTY
Court of Common Pleas

Daniel D. Hall., Circuit Court Judge

Appellate Case No. 2015-002653

Johnnie Mae Reed, as the Personal Representative of
The Estate of Sandra Gilbert,

Appellant,

vs.

CareNet, Inc. of Lancaster and Nimal A. Perera. M.D.

Respondents.

SUPPLEMENTAL RECORD ON APPEAL

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Attorney for the Appellant

July 6, 2016
Columbia, South Carolina

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SC Court of Appeals

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SPRINGS MEMORIAL HOSPITAL
800 West Meeting Street
Lancaster, SC 29720
803-286-1658

DISCHARGE SUMMARY

PATIENT NAME:	GILBERT, SANDRA	AGE:	51
DATE OF BIRTH:	redacted	SEX:	F
PT STATUS:	DIS IN	RM NUMBER:	629-1
UNIT NUMBER:	M000477504	ADM DATE:	08/29/10
ACCT NUMBER:	D006188590	D/C DATE:	08/30/10

Dictated Report By: Samuel Johnson, MD
Attending Physician: Badalamenti, Vito M.D.
Family Physician: NO FAMILY PHYSICIAN
Primary Care Physician: NO FAMILY PHYSICIAN

PROBLEM LIST:

1. Diabetes mellitus new onset with hyperglycemia in the 300s. No evidence of HONK or DKA.
2. Dehydration.
3. Hypokalemia.
4. Hypertension.
5. Tubal ligation.
6. Hysterectomy.

HOSPITAL COURSE: The patient is actually an extremely pleasant 51-year-old female who has got a past medical history most notable for hypertension, and she does follow with Dr. Perera over at CareNet. She came in to the emergency room because of a lot of weakness, at the time she also mentioned she has been thirsty, she can never get enough to drink. In the ER, she was noted to have a glucose of 474. She had a potassium of 2.6. The rest of her lab work was relatively unremarkable, pH was 7.5. She was started on some insulin and some metformin here. During the course of the next 24 hours, we had a diabetic educator meet with her and show her how to check her own blood sugars. We had them explain to her, a diabetic diet and the importance of weight loss to try to keep her keep her off insulin. At the time of discharge, we got her blood sugars down under 300, and felt that she was stable to go home and follow up closely with Dr. Perera.

DISCHARGE MEDICATIONS: We did discontinue her hydrochlorothiazide while here.

1. Diovan 80 daily.
2. Metformin 1 g b.i.d.
3. Glucotrol-XL 10 mg daily.

FOLLOWUP: Dr. Perera within the next 5 days.
discharge time 35 min

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Print CC:
Dr. Perera CareNet

Fax CC:

S Job #: SMH17929243
D Job #: 5040066
MT: 82741

PHYSICIAN: Samuel Johnson, MD
ELECTRONICALLY SIGNED

JOHS :
REPORT #: 0831-0053
DATE/TIME DICTATED: 08/30/10 - 1133
DATE/TIME TRANSCRIBED: 08/31/10 - 1256
DATE/TIME ELECTRONICALLY SIGNED: 09/01/10 - 1443

CC:

Discharge Summaries

Printed On Sep 04, 2012

LOCAL TITLE: Discharge Summary
ADMIN DATE: OCT 20, 2011 DISCH. DATE: NOV 03, 2011
STANDARD TITLE: DISCHARGE SUMMARY
DICT DATE: NOV 08, 2011 ENTRY DATE: NOV 09, 2011@10:00:59
DICTATED BY: HILL, STEVEN T ATTENDING: KIM, SYLVIA S
URGENCY: STATUS: COMPLETED

*** Discharge Summary Has ADDENDA ***

DATE OF ADMISSION: 10/20/2011
DATE OF DISCHARGE: 11/03/2011

LOUD TALKING IN BACKGROUND

ADMITTING DIAGNOSES:

1. Rectal bleeding.
2. Diabetes.
3. Hypertension.
4. Hyperlipidemia.
5. Anemia.

DISCHARGE DIAGNOSES:

1. Rectal bleeding.
2. Diabetes.
3. Hypertension.
4. Hyperlipidemia.
5. Anemia.
6. Colon cancer.

BRIEF HISTORY OF PRESENT ILLNESS: For full details please see admission H&P from 10/20/2011 and surgery consult note from 10/20/2011.

Briefly, this 53-year-old African American female who presented to the ER on 10/20/2011 with chief complaint of dark red bleeding from bowels since the night prior to admission. The patient was admitted for work up. She underwent a colonoscopy on 10/24/2011 which revealed a large circumferential obstructing mass lesion at the splenic flexure and proximal descending colon.

PROCEDURES:

1. Colonoscopy 10/24/2011.

On 10/28/2011:

1. Laparoscopic lysis of adhesions
2. Laparoscopic left hemicolectomy.

PATIENT NAME AND ADDRESS (Mechanical Imprinting, if available)

GILBERT, SANDRA W

redacted

VISTA Electronic Medical Documentation

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Dorn VA 50

Discharge Summaries

Printed On Sep 04, 2012

3. Primary anastomosis

HOSPITAL COURSE: As noted above, the patient was initially admitted for work up of rectal bleeding and a circumferential colonic mass noted. The patient was transferred to the surgery service preoperatively. On 10/26/2011 the patient underwent a hemicolectomy. On 10/28/2011 she was observed in the SICU postoperatively.

On 10/31/2011 the patient was tolerating clears awaiting bowel function. Bowel function returned by 11/03/2011 and the patient doing well and was stable for discharge.

DISCHARGE MEDICATIONS: Please see discharge medication reconciliation.

RECOMMENDATION FOR FOLLOWUP: The patient will continue all prior appointments. The patient is to follow up in the general surgery clinic 2 weeks after discharge.

341729/180737 gxc D: 11/08/2011 T: 11/08/2011 19:52 CT

/es/ SYLVIA S KIM
MD

Signed: 11/10/2011 13:33
for STEVEN T HILL

/es/ SYLVIA S KIM
MD

Cosigned: 11/10/2011 13:33

11/03/2011 ADDENDUM

STATUS: COMPLETED

PRINCIPAL DIAGNOSIS: Invasive moderately differentiated adenocarcinoma of the proximal descending colon with metastasis to pericolic lymph nodes.

ADDITIONAL DIAGNOSES:

1. Rectal bleeding secondary to adenocarcinoma of the descending colon.
2. Colon polyps.
3. Iron-deficiency anemia.
4. Family history of hypertension and diabetes.
5. History of hysterectomy.

ADDITIONAL PROCEDURES:

1. Computerized tomography scan of the thorax, abdomen, and pelvis 10/24/11.
2. Esophagogastroduodenoscopy 10/21/11.

PATIENT NAME AND ADDRESS (Mechanical Imprinting, if available)

GILBERT, SANDRA W
redacted

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Discharge Summaries

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- 3. Colonoscopy with polypectomy 10/24/11.
- 4. Transfusions of packed red blood cells.

/es/ SYLVIA S KIM

MD

Signed: 11/16/2011 09:43

PATIENT NAME AND ADDRESS (Mechanical Imprinting, if available)

GILBERT, SANDRA W

redacted

VISTA Electronic Medical Documentation

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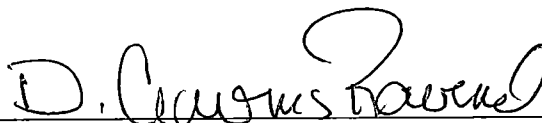
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CERTIFICATE OF COUNSEL

Pursuant to Rule 210(g), SCACR the undersigned hereby certifies that the Supplemental Record on Appeal contains all material proposed to be included by any of the parties and does not contain any other material.



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