Patient

Kaiser Permanente Disclosure of Patient Medical Information

Kaiser Permanente documents patient medical record information in a Federally certified electronic medical record.

The output contained in this file is one or more of the following:

- A true and accurate copy of the requested patient medical record information for the timeframe requested as authorized by the patient or allowed by law or regulation
- If a medical certification form was requested, we may have substituted relevant medical records in lieu of form completion
- We may have also substituted a standardized electronic form, generated from our certified electronic medical record in lieu of form completion

State and federal law permit the use of electronic signatures (e-signatures) and electronic records in connection with transactions between parties.

- Medical certification forms and electronic records that are signed using electronic signatures can be audited and validated to prevent fraud
- The relevant laws provide that electronic signatures are as legally valid and as legally acceptable as wet signatures

This record output was generated on $\frac{1/12/24}{1/12/24}$ and certified by Kaiser Permanente Release of Medical Information

Demographics

Name: Lawson B Hawkir Address: 2626 S COCHF	-	GELES CA 90016-2618			
		Sex: Male		Gender identity: Male Language: English	
		Race: Black/African			
Email: berg.hawkins@pr Mobile: 323-297-3432	otonmail.com	Home phone: 323-2 KPNS ONLY TEXT		Work phone: 323-297	′-3432 x00000
Relationships					
Name		F	Relation to Patient	Phone Number	
Irene Hawkins		S	Sister	—	
Beth Wolfson		F	riend	—	
asic Information					
Date Of Birth 5/25/1955	Legal Sex Male	Race Black/African American	Ethnic Group American/United States	Preferred Spoken Language English	Preferred Written Language English
Date Of Birth	Male	Black/African	American/United	Language	Language
Date Of Birth 5/25/1955	Male	Black/African American	American/United States	Language English Iten Language	Language
Date Of Birth 5/25/1955 Patient Preferred Langu	Male ages Spoken La English	Black/African American	American/United States Writ	Language English Iten Language	Language

Printed on 1/12/24 5:33 PM

KAISER PERMANENTE

Hawkins, Lawson B MRN: 000017508205, DOB: 5/25/1955, Sex: M

		Patient (continue	ed)		
Active Coverages (continued) as	s of 12/31/2011				
Plan: KPSA SOLD TO-SOUT TO-SOUTH [100006881] Effective from: 8/1/2014		Group: 000500600-0000-0003 Subscriber: HAWKINS,LAWS		Member: xxxxx Subscriber ID: :	
Guarantor: HAWKINS,LAWS	ON B				
Care Team					
Active					
	elationship	Specialty	Phone		Duration
(M.D.), M.D.	CP - General	_	833-574	4-2273	01/04/2023 - Present
Talag, Emelita Borja P (M.D.), M.D.	CP - Psychiatry-	1 —	—		06/12/2017 - Present
Problem List					
Problems last reviewed by Vu, ACQUIRED DEFORMITY OF), O.D. on 1/8/2024 1411			
Diagnosis: ACQUIRED DEFC RIGHT ANKLE ICD-10-CM: M21.961	DRMITY OF	Noted on: 09/03/2009		Chronic: No	
CHOLELITHIASIS					
Diagnosis: CHOLELITHIASIS ICD-10-CM: K80.20	i	Noted on: 07/28/2009		Chronic: Yes	
Overview Note					
7/09 Screening utz for me	d wt loss pro	ogram shows 1 gallston	e		
COLON POLYP					
Diagnosis: COLON POLYP ICD-10-CM: K63.5		Noted on: 05/21/2008		Chronic: No	
Overview Note					
OB neg 2006, 3/10, 6/11,	7/12, 6/13; c	colo 7/14 polyps, hyperį	plastic on pa	ath, f/u colo 5	5 yrs per colo report
DECLINES STATINS					
Diagnosis: DECLINES STATI ICD-10-CM: Z53.20	NS	Noted on: 10/24/2017		Chronic: No	

DM 2

Diagnosis: DM 2Noted on: 02/25/2021Chronic: YesICD-10-CM: E11.9

DM 2 W CATARACT

Diagnosis: DM 2 W CATARACT	Noted on: 01/09/2022	Chronic: Yes	
ICD-10-CM: E11.36			

DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED

Diagnosis: DM 2 W MIXED	Noted on: 12/14/2007	Chronic: Yes
HYPERLIPIDEMIA		
ICD-10-CM: E11.69, E78.2		
Overview Note		

Patient (co	ontinued)
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Problem List (continued)

3/16 declines statin

Diagnosis: HTN (HYPERTENSION) ICD-10-CM: I10	Noted on: 09/11/2019	Chronic: Yes	
DBESITY, BMI 30-34.9, ADULT			
Diagnosis: OBESITY, BMI 30-34.9, ADULT ICD-10-CM: E66.9	Noted on: 11/05/2013	Chronic: No	
16D-10-6101. E00.9			
	IFORT MEASURES		
POLST FORM ON FILE FOR DNR/DNI, COM Diagnosis: POLST FORM ON FILE FOR DNR/DNI, COMFORT MEASURES ICD-10-CM: Z78.9	IFORT MEASURES Noted on: 04/07/2020	Chronic: Yes	

Patient emailed copy of Advanced Directive and POLST, under MEDIA tab 4/7/20, will bring copy in when safe to do so

RESUSCITATION STATUS COUNSELING

Diagnosis: RESUSCITATION STATUS COUNSELING	Noted on: 03/12/2020	Chronic: No
ICD-10-CM: Z71.89		
Overview Note		

Per patient email 3/2020:

I wish to make clear to you that under no circumstances am I to be intubated should I be hospitalized and should my lungs or other organs fail. No "heroic" measures, please.

Thank you, Berg Hawkins

Diagnosis: SCHIZOAFFECTIVE	Noted on: 09/21/2006	Priority: 2-HIGH	
DISORDER, UNSPECIFIED TYPE			
Chronic: Yes	ICD-10-CM: F25.9		
SUSPECTED ELDER ABUSE MANDATOR	YREPORT		
Diagnosis: SUSPECTED ELDER ABUSE MANDATORY REPORT ICD-10-CM: ADMIN CODE	Noted on: 08/10/2023	Chronic: No	
THROMBOCYTOPENIA, UNSPECIFIED.			
Diagnosis: THROMBOCYTOPENIA,	Noted on: 03/15/2017	Chronic: No	
UNSPECIFIED.			
ICD-10-CM: D69.6			
Overview Note			

Problem List (continued)

Intermittent, very mild

Allergies

Allergies last reviewed by Bonilla, Guadalupe J (M.A.), M.A. on 1/11/2024 0800 NO KNOWN DRUG ALLERGIES

Noted on: 08/08/2007

SNOMED-CT: 409137002

Immunizations

unizations		
nmunizations last reviewed by Hernandez, C		0956
OVID-19 mRNA LNP-S, PF, XBB 1.5 12YF	RS-Adult(Pfizer), 30mcg/0.3mL	
Administered by: Celi, Andrew D (L.V.N.), L.V.N.	Administered on: 10/27/2023 1206	Dose: 0.3 mL
Site: LEFT ARM CVX code: 309	Route: Intramuscular VIS date: 10/19/2023	NDC: 00069-2362-10
Product: Comirnaty 2023-24 (12y up)(PF) Expiration date: 11/30/2024	Manufacturer: Pfizer, Inc	Lot number: HG2649
Questionnaire		
Question	Answer	
Vaccine Information Statement given vaccine?	prior to administration of Yes	
OVID-19 mRNA LNP-S, bivalent PF 12yrs	-adult (Pfizer), 30mcg/0.3mL	
Administered by: Bamba, Mark (R.N.), R.N.	Administered on: 9/19/2022 0905	Dose: 0.3 mL
Site: Right Deltoid	Route: Intramuscular	NDC: 59267-0304-01
CVX code: 300 Product: Pfizer COVID Bival(12y up)(PF)	VIS date: NA Manufacturer: Pfizer, Inc	Lot number: GH9702
Expiration date: 6/30/2023		Lot number. Gria/02
Questionnaire		
Question	Answer	
Emergency Use Authorization fact she administration of vaccine? COVID-19 mRNA, LNP-S, PF (Pfizer-BioNT		
Administered by: Brooks, Hana (L.V.N.), L.V.N.	Administered on: 2/22/2021 0935	Dose: 0.3 mL
Site: Left Deltoid CVX code: 208	Route: Intramuscular VIS date: 12/11/20	NDC: 59267-1000-01
Product: Pfizer COVID-19 Vaccine (EUA) Expiration date: 6/30/2021	Manufacturer: Pfizer, Inc	Lot number: EN6203
Questionnaire		
Question	Answer	
Emergency Use Authorization fact she administration of vaccine? COVID-19 mRNA, LNP-S, PF (Pfizer-BioNT		
Administered by: Zelaya-Miranda, Dina (L.V.N.), L.V.N.	Administered on: 3/18/2021	Dose: 0.3 mL
Site: Left Deltoid CVX code: 208	Route: Intramuscular VIS date: NA	NDC: 59267-1000-01
Product: Pfizer COVID-19 Vaccine (EUA)	Manufacturer: Pfizer, Inc	Lot number: EN6207

Expiration date: 7/31/2021

Patient (continued) Immunizations (continued) Question Answer Emergency Use Authorization fact sheet given prior to Yes administration of vaccine? COVID-19 mRNA, LNP-S, PF (Pfizer-BioNTech) PURPLE CAP Administered by: Ware, Diane (L.V.N.), Administered on: 12/7/2021 0909 Dose: 0.3 mL L.V.N. Site: Left Deltoid Route: Intramuscular NDC: 59267-1000-01 CVX code: 208 VIS date: NA Product: Pfizer COVID-19 Vaccine (EUA) Manufacturer: Pfizer, Inc Lot number: 33026BD Expiration date: 5/31/2022 Questionnaire Question Answer Emergency Use Authorization fact sheet given prior to Yes administration of vaccine? HBV adult (Hepatitis B) Administered by: Landa, Lizeth (L.V.N.) Administered on: 12/5/2013 1202 Dose: 1mL Site: Left Deltoid Route: Intramuscular NDC: 58160-0821-52 VIS date: 2/2/2012 Product: Energix-B Manufacturer: GlaxoSmithKline Lot number: HE297 Expiration date: 5/11/2015 HBV adult (Hepatitis B) Administered by: Landa, Lizeth (L.V.N.) Administered on: 11/19/2014 0929 Dose: 1mL Site: Left Deltoid Route: Intramuscular NDC: 58160-0821-52 VIS date: 2/2/2012 Product: Energix-B Adult (HepB vaccine) Manufacturer: GlaxoSmithKline Lot number: 45SJ2 Expiration date: 2/17/2017 HBV adult (Hepatitis B) Administered by: Porter, Pamela S (L.V.N.), Administered on: 3/17/2016 Dose: 1 mL L.V.N. Site: Left Deltoid Route: Intramuscular NDC: 58160-0821-43 VIS date: 2/2/2012 Manufacturer: GlaxoSmithKline Lot number: T54GG Expiration date: 4/14/2018 INF H1N1-09 standard dose (Influenza H1N1-09). Dose: 00.50 Administered by: Salas, Nancy (L.V.N.) Administered on: 4/2/2010 0000 VIS date: H1N1FLUINACT10/02/2009 Site: Left Deltoid Route: Intramuscular Manufacturer: Sanofi Pasteur Lot number: UP067AA External: Kaiser Current Location: 1983^^305 Comment: INFs (Influenza split virus). Administered by: Martinez, Karen M (L.V.N.) Administered on: 12/20/2010 Dose: 00.50 Site: Left Deltoid Route: Intramuscular VIS date: INFLUENZA08/10/2010 Manufacturer: Sanofi Pasteur Lot number: UH183AB External: Kaiser Current Location: 1983^^305 Comment: INFs (Influenza split virus). Administered by: Zuniga, Pearl (L.V.N.) Administered on: 10/14/2011 Dose: 00.50 Site: Left Deltoid Route: Intramuscular VIS date: INFLUENZA07/26/2011 Manufacturer: Novartis Pharmaceutical Lot number: 1101801 External: Kaiser Current Corporation Location: 1983^^305 Comment:

Patient (continued) Immunizations (continued) INFs (Influenza split virus). Administered by: Zuniga, Pearl (L.V.N.) Dose: 00.50 Administered on: 9/29/2012 0000 Site: Left Deltoid Route: Intramuscular VIS date: INFLUENZA07/02/2012 Manufacturer: Sanofi Pasteur Lot number: UH718AB External: Kaiser Current Location: 1983^^305 Comment: FLU VACCINE SCREENING COMPLETED, DOSE GIVEN PER PROTOCOL. INFs 3yrs and over (FLUZONE) (Influenza) Administered by: Pickett, Brandy (L.V.N.), Administered on: 11/18/2015 Dose: 0.5 mL L.V.N. NDC: 49281-0396-15 Site: Left Deltoid Route: Intramuscular VIS date: 8/7/2015 Manufacturer: Sanofi Pasteur Lot number: UI455AA Expiration date: 6/30/2016 Comment: Administered by Edison Bautista, LVN Questionnaire Question Answer VIS Given? Yes INFs 4yrs and over (FLUVIRIN) (Influenza) Administered by: Landa, Lizeth (L.V.N.) Administered on: 12/5/2013 1202 Dose: 0.5mL Route: Intramuscular Site: Right Deltoid NDC: 66521-0116-10 VIS date: 7/26/2013 Product: Fluvirin MDV Manufacturer: Novartis Pharmaceutical Lot number: 1308901 Corporation Expiration date: 4/30/2014 Comment: NDC given: 66521-116-11 Questionnaire Question Answer VIS Given? Yes INFs 4yrs and over (FLUVIRIN) (Influenza) Administered by: Landa, Lizeth (L.V.N.) Administered on: 10/9/2014 1354 Dose: 0.5mL Route: Intramuscular Site: Left Deltoid NDC: 66521-0117-10 VIS date: 8/19/2014 Manufacturer: Novartis Pharmaceutical Lot number: 1412601 Product: Fluvirin MDV 4yrs+ Corporation Expiration date: 6/30/2015 Questionnaire Question Answer VIS Given? Yes PPSV23 (Pneumococcal polysaccharide) Administered by: Howell, Susan (L.V.N.) Administered on: 8/25/2009 Dose: 00.50 Site: Left Deltoid Route: Intramuscular VIS date: PNU PS07/29/1997 Manufacturer: Merck and Co., Inc. Lot number: 1296X External: Kaiser Current Location: 1983^^305 Comment: [pending] PPSV23 (Pneumococcal polysaccharide) The documentation on this immunization is incomplete. Dose: 0.5 mL Route: Intramuscular VIS date: 10/30/19 Manufacturer: Merck and Co., Inc. Tdap (ADACEL) (Tetanus, diphtheria, acellular pertussis)

	Patient (continued)	
unizations (continued)		
Administered by: Thompson, Biko (L.V.N.) Site: Left Deltoid Manufacturer: Sanofi Pasteur Location: 1983^305	Administered on: 5/21/2008 Route: Intramuscular Lot number: C2824AA	Dose: 00.50 VIS date: TDAP07/12/2006 External: Kaiser Current
pending] Tdap (ADACEL) (Tetanus, diphth The documentation on this immunization is	· · ·	
Dose: 0.5 mL Manufacturer: Sanofi Pasteur	Route: Intramuscular	VIS date: 4/1/2020
OS (Zostervirus live, shingles)		
Administered by: Porter, Pamela S (L.V.N.), L.V.N.	Administered on: 3/17/2016	Dose: 0.65 mL
Site: LEFT ARM VIS date: 10/6/2009	Route: Subcutaneous	NDC: 00006-4963-41
Manufacturer: Merck and Co., Inc.	Lot number: L020482	Expiration date: 9/1/2016
d 7yrs-adult (tetanus, diphtheria), adsorbe	d	
Administered by: Jideofor, Clementina Anulika (L.V.N.), L.V.N.	Administered on: 9/26/2018	Dose: 0.5 mL
Site: Left Deltoid Scanned barcode: 1353313100	Route: Intramuscular VIS date: 04/11/2017	NDC: 13533-0131-00
Manufacturer: Massachusetts Biologic Laboratories	Lot number: A105A	Expiration date: 3/8/2020
Questionnaire		
Question	Answer	
vaccine? ent Medications //edications	nonce only. The noticet should not	
instructions regarding medicat		follow medication instructions within. For accur isult their physician or after visit summary.
Current Medications		
Permethrin (ACTICIN/ELIMITE) 5 %	•	
Instructions: Apply from head to soles Authorized by: Goldsmith, Oliver A (M Start date: 11/10/2023 Quantity: 60 g	I.D.), M.D. Ordered o End date:	. Wash off after 8 to 14 hours. Repeat in 7 days n: 11/10/2023 11/9/2025 refills remaining
Naproxen (NAPROSYN) 375 mg Ora	l Tab	
	times a day as needed for pain. Take	

Instructions: Take 1 tablet by mouth 2 times a day as needed for pain . Take with foodAuthorized by: Karimian, Ali Reza (M.D.), M.D.Ordered on: 9/4/2023Start date: 9/4/2023End date: 9/3/2025Action: Patient not takingQuantity: 30 tabletRefill: No refills remainingRefill: No refills remaining

Ondansetron (ONDANSETRON) 4 mg Oral Rap Dis Tab

Instructions: Dissolve 1 tablet on the tongue every 8 hours as needed for nausea or vomiting
Authorized by: Karimian, Ali Reza (M.D.), M.D.Ordered on: 9/4/2023
End date: 3/2/2024
Quantity: 30 tabletAction: Patient not taking
Refill: No refills remainingQuantity: 30 tablet

blood sugar diagnostic (ONETOUCH VERIO TEST STRIPS) Misc Strips

Current Medications (continued)

Instructions: Check your blood sugar 2 times a day (Every morn	ing before breakfast and every evening before dinner)
Authorized by: Siegel, Jeffrey David (M.D.), M.D.	Ordered on: 8/22/2023
Start date: 8/22/2023	End date: 8/21/2025
Action: Patient not taking	Quantity: 100 Strip
Refill: No refills remaining	

Clobetasol (TEMOVATE) 0.05 % Top Crea

Instructions: Apply to affected area(s) 2 times a day Apply to area of paronychia.Authorized by: Siegel, Jeffrey David (M.D.), M.D.Ordered on: 8/20/2023Start date: 8/20/2023End date: 8/19/2025Quantity: 45 gRefill: 2 refills remaining

Permethrin (ACTICIN/ELIMITE) 5 % Top Crea

Instructions: Apply from neck to soles of feet. Wash off after 8 to 14 hours. Repeat in 7 daysAuthorized by: Beroukhim, Kourosh (M.D.), M.D.Ordered on: 8/5/2023Start date: 8/5/2023End date: 8/4/2025Action: Patient not takingQuantity: 60 gRefill: 1 refill remainingContended on the second sec

Mupirocin (CENTANY) 2 % Top Oint

Instructions: Apply to affected area(s) 2 times a day Authorized by: Beroukhim, Kourosh (M.D.), M.D. Start date: 8/5/2023 Action: Patient not taking Refill: No refills remaining

Cetirizine (ZYRTEC) 10 mg Oral Tab

Instructions: Take 1 tablet by mouth daily Authorized by: Goldsmith, Oliver A (M.D.), M.D. Start date: 7/31/2023 Action: Patient not taking Refill: No refills remaining

Ordered on: 7/31/2023 End date: 7/30/2027 Quantity: 100 tablet

Ordered on: 8/5/2023

End date: 8/4/2025

Quantity: 22 g

Capsaicin (ZOSTRIX) 0.025 % Top Crea

Instructions: Apply to affected area(s) 3 to 4 times a day as needed for aches and pain. Unless treating hands, wash hands thoroughly with soap and water immediately after use Authorized by: Kahen, Pedram (Dpm), DPM Ordered on: 5/10/2023 Start date: 5/10/2023 End date: 5/9/2027 Action: Patient not taking Quantity: 57 g Refill: No refills remaining

Acetaminophen (8 HOUR PAIN RELIEVER) 650 mg Oral SR Tab

Instructions: Take 1 tablet by mouth every 8 hours as needed for pain . Do not exceed 3 tablets in 24 hoursAuthorized by: Balayan, Konstantin Walter (P.A.), P.A.Ordered on: 4/22/2023Start date: 4/22/2023End date: 4/21/2025Action: Patient not takingQuantity: 100 tabletRefill: No refills remainingOrdered on: 4/22/2023

Diclofenac Sodium (ARTHRITIS PAIN, DICLOFENAC,) 1 % Top Gel

Instructions: Apply 4 Grams to affected area(s) 2 times a day as needed for pain . Do not exceed 32 Grams in 24 hoursAuthorized by: Balayan, Konstantin Walter (P.A.), P.A.Ordered on: 4/22/2023Start date: 4/22/2023End date: 4/21/2027Quantity: 200 gRefill: 1 refill remaining

Tacrolimus (PROTOPIC) 0.1 % Top Oint

Instructions: Apply to affected area(s) 2 times a day Authorized by: Zaghi, Daniel (M.D.), M.D. Start date: 3/15/2023 Quantity: 60 g Renn: Trenn remaining

Ordered on: 3/15/2023 End date: 3/14/2025 Refill: 3 refills remaining

Current Medications (continued)

lancets (ONETOUCH DELICA PLUS LANCET) 30 gauge Misc Misc

Instructions: Use 2 times a day as directed to test blood sugar.For use with Delica Plus lancing deviceAuthorized by: Bergman, Julie A, D.O.Ordered on: 9/1/2021Start date: 9/1/2021End date: 8/24/2025Quantity: 200 EachRefill: 3 refills remaining

Container (SHARPS CONTAINER) Misc Misc

Instructions: Use for sharps disposal as directed Authorized by: Bergman, Julie A, D.O. Start date: 9/1/2021 Quantity: 1 Each

Ordered on: 9/1/2021 End date: 8/24/2025 Refill: No refills remaining

Albuterol (PROAIR/PROVENTIL/VENTOLIN) 90 mcg/actuation Inhl HFAA

Instructions: Inhale 2 Puffs by mouth every 4 hours as needed for shortness of breath, wheezing or cough . 100 days supply forAsthma is 1 canister (18 G). Use with spacer device if prescribed. Shake well before useAuthorized by: Bergman, Julie A, D.O.Start date: 10/1/2020Start date: 10/1/2020Action: Patient not takingRefill: No refills remaining

Medication Comment

Mims, Latricia M (R.N.) on 8/9/2007 0023

On fungal medication for genital area but does not the name.

History as of 12/31/2011

Medical History

Past	Medical	History
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Diagnosis	Date	Comments	Source
ELEVATED TRANSAMINASE [R74.01]	12/14/2007	Hep b/c neg, ~same on statin (mild)	Provider
GERD (GASTROESOPHAGEAL REFLUX DISEASE) [K21.9]	—	_	Provider
SCHIZOAFFECTIVE DISORDER, UNSPECIFIED TYPE [F25.9]		remote high fall/suicide attempt	Provider

Surgical History

Past Surgical History					
Procedure	Laterality	Date	Comments	Source	
PAST SURGICAL HISTORY, OTHER [202768]	—	back broken, metal plate	_	Provider	
COLONOSCOPY, DIAGNOSTIC FLEXIBLE [45378A]	—	7/23/2014	_	_	
COLONOSCOPY, DIAGNOSTIC FLEXIBLE [45378A]	_	2/9/2021	_	_	

Family History

Family History as of 1/12/	024	
Father		
Relationship: Father Name: —		

History (continued) as of 12/31/2011

Status: Deceased
Death Age: 94
Genetic Sex: Male
Gender Identity: -
Father: —
Mother: —
Linked with: —
Comment: pna
Adoption Status: —
Adoptive Parent 1: -
Adoptive Parent 2: -
Fertility Status: -
Fertility Comment: -

Mother

Relationship: Mother			
Name: —			
Status: —			
Age: —			
Genetic Sex: Female			
Gender Identity: —			
Father: —			
Mother: —			
Linked with: —			
Comment: —			
Adoption Status: —			
Adoptive Parent 1: —			
Adoptive Parent 2: —			
Fertility Status: —			
Fertility Comment: —			
Condition	Age of Onset	Comment	

Diabetes

Substance & Sexuality History

Tobacco Use

Tobacco Use last reviewed by Flores, Sandra E. (M.A.), M.A. on 1/8/2024

Smoking Status	Smoking Start Date	Quit Date	Smoking Frequency
Former	_	7/21/2008	0.50 packs/day for 20.00 years (10.00 ttl pk-yrs)
Passive Exposure			
Past			
Smokeless Status	Smokeless Type	Smokeless Quit Date	
Never	_		
Tobacco Comments			
PER PATIENT: REMA	INS NON SMOKER SINC	E QUIT DATE.	
Source			
Provider			

Alcohol Use

Alcohol Use	Drinks/Week	Alcohol/Week	Comments	Source
Yes	0 Standard drinks or equivalent	0.0 oz	Rarely alcohol.	Provider

History (continued) as of 12/31/2011

No Sexual Activity Sexually Act				Frequency		Comments		Source
		—		—		—		Provider
Sexually Act								
	ive	Birth Contro	ol	Partners		Comments		Source
Not Asked		_		—		_		Provider
ioeconomic His:	tory							
Socioeconomic								
Marital Status	Spouse Name	Number of Children	Years Education	Education Level	Preferred Language	Ethnicity	Race	Source
Single/Neve r Married	_	0	_	_	English	American/U nited States	Black/Africa n American	Provider
ial Documentati	ion History							
	-	•						
Lives in LA,	self employe	d now on perma	anent disability	, works parttim	ie fixing PCs, v	vriting software	and teaching.	Exercise-bicy
riding. Sing	le, no childrei	n.						
Source: Provider								
o Caro Planning	1							
e Care Planning	3							
ce Care Planning]							
n								
n Patient Capacity	/	v. There is no hi	istory of patien	t status change	A.			
n Patient Capacity	/	y. There is no hi	istory of patien	it status change	e.			
n Patient Capacity The patient ha	/ s full capacity	y. There is no hi	istory of patien	it status change	9.			
n Patient Capacity The patient ha Current Code St	/ s full capacity tatus					r	Co	ntext
n Patient Capacity The patient ha	/ s full capacity tatus	y. There is no hi de Status Ord		it status change ments	e. Use	r	Сог	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior	/ s full capacity tatus Cor	de Status Ord				r	Co	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Co	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord	ler ID Com			r	Co	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Co	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Co	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a Contacts ient Contacts Name	y s full capacity tatus Cor are Decision active Health	de Status Ord Makers Care Decision M	ler ID Com	ments	Use	r	Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a Contacts ient Contacts Name COLETTE WALC	y s full capacity tatus Cor are Decision active Health	de Status Ord Makers Care Decision M Care Decision M Friend	ler ID Com	ments	Use		Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a Contacts ient Contacts Name	y s full capacity tatus Cor are Decision active Health	de Status Ord Makers Care Decision M	ler ID Com	ments	Use		Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a Contacts ient Contacts Name COLETTE WALC	y s full capacity tatus Cor are Decision active Health	de Status Ord Makers Care Decision M Care Decision M Friend	ler ID Com	ments	Use		Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a Contacts ient Contacts Name COLETTE WALC Irene Hawkins	y s full capacity tatus Cor are Decision active Health	de Status Ord Makers Care Decision M Care Decision M Friend Sister	ler ID Com	ments	Use		Со	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca There are no a Contacts ient Contacts Name COLETTE WALC Irene Hawkins	y s full capacity tatus Con are Decision active Health	de Status Ord Makers Care Decision M Care Decision M Friend Sister	ler ID Com	ments	Use		Co	ntext
n Patient Capacity The patient ha Current Code St Date Active Prior Active Health Ca	y s full capacity tatus Com are Decision	de Status Ord Makers	ler ID Com			r	Co	

Date Туре Location Department Specialty Provider Ancillary Orders 07/26/2006 DOWNEY PHARMACY Pharmacy SERVICE CENTRAL REFILL CNTR 09/16/2006 Ancillary DOWNEY PHARMACY Pharmacy _

Visit List (continued) as	of 12/31/2011
Date	Туре

Date	Туре	Location	Department	Specialty	Provider
	Orders	SERVICE CNTR	CENTRAL REFILL		
09/21/2006	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE GREEN2	Internal Medicine	Elseby, Susan (M.D.)
Description: PHYS SCHIZOAFFECTI GERD	SICAL EXAMINATION, VE DISORDER;	COMPLETE OR	PARTIAL (Primary I	Dx);	
12/12/2006	Ancillary Orders	DOWNEY SERVICE CNTR	PHARMACY CENTRAL REFILL	Pharmacy	_
03/23/2007	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Lawless, Dorothy Lee (N.P.)
Description: INTEI PAIN IN SHOULD	RNAL HEMORRHOID; ER.				
03/30/2007 Description: SMOI	Office Visit	WEST LA MEDICAL CENTER U	PHYSICAL MEDICINE	Physical Medicine	Hyams, David (M.D.)
03/30/2007	Diagnostic Imaging	WEST LA MEDICAL CENTER	HOV GENERAL (X-RAY)	Radiology	Lawless, Dorothy Lee (N.P.)
04/10/2007	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	PHYSICAL THERAPY	Physical Therapy	Nicolaisen, Rachael Wiley (P.T.)
04/24/2007	Ancillary Orders	DOWNEY SERVICE CNTR	PHARMACY CENTRAL REFILL	Pharmacy	_
04/24/2007	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	PHYSICAL THERAPY	Physical Therapy	Nicolaisen, Rachael Wiley (P.T.)
05/15/2007	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	PHYSICAL THERAPY	Physical Therapy	Nicolaisen, Rachael Wiley (P.T.)
05/25/2007	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN1	Internal Medicine	Katz, Jonathan (M.D.)
06/20/2007	AIN NECK, MUSCLE (P Ancillary Orders	DOWNEY SERVICE CNTR	PHARMACY CENTRAL REFILL	Pharmacy	_
06/22/2007	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
Description: HYPE HEALTH CHECK					
07/14/2007	Ancillary Orders	DOWNEY SERVICE CNTR	PHARMACY CENTRAL REFILL	Pharmacy	_
08/09/2007	ED	WEST LA MEDICAL CENTER	WLED	Emergency Medicine	Venne, Chad M (M.D.)
08/22/2007 Description: SMOI		WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
PHARYNGITIS, C 09/12/2007	HRONIC Ancillary Orders	DOWNEY SERVICE CNTR	PHARMACY CENTRAL REFILL	Pharmacy	_

Visit List (continued) as of 12/31/2011

Date	Туре	Location	Department	Specialty	Provider
09/12/2007 Description: GERD THROAT PAIN;		WEST LA MEDICAL CENTER U	HEAD & NECK SURGERY	Otolaryngology	Economou, Tasia Stephanie (M.D.)
	SMOKING CESSATIO				
12/10/2007	Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD	_	_
12/12/2007	Lab	WEST LA MEDICAL CENTER	HOV LABORATORY	Laboratory	Hooks, Sarah Elizabeth (M.D.)
01/08/2008	Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD		_
03/21/2008	Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD		_
05/21/2008	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
HYPERLIPIDEMIA PREDIABETES; SMOKER; SCREENING FOR GERD;	CA, COLON; SAMINASE MEASURE		ninary Dx),		
05/22/2008	Office Visit	W. LOS ANGELES VISION SERVICES U	OPTOMETRY	Optometry	Kanda, James Y (O.D.)
Description: MYOP	IA;				
ASTIGMATISM 06/04/2008	Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD	_	_
06/04/2008 Description: VERR		VENICE MEDICAL OFFICES U	DERMATOLOG Y VENICE A 4TH FLOOR	Dermatology	Bernstein, Leslie Erin (M.D.)
SKIN TAG	UCA VULGARIS,				
07/02/2008	Ancillary Orders	VENICE MEDICAL OFFICES U	DERMATOLOG Y VENICE A 4TH FLOOR	Dermatology	Bernstein, Leslie Erin (M.D.)
07/02/2008	Office Visit	VENICE MEDICAL OFFICES U	DERMATOLOG Y VENICE A 4TH FLOOR	Dermatology	Bernstein, Leslie Erin (M.D.)
Description: TINEA INTERTRIGO; VERRUCA VULGA	·				
07/04/2008	Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD		
07/23/2008	Office Visit	WEST LA MEDICAL CENTER U	HEAD & NECK SURGERY	Otolaryngology	Economou, Tasia Stephanie (M.D.)
Description: CERV	ICALGIA (Primary Dx)				
07/28/2008	Diagnostic Imaging	WEST LA MEDICAL	HOV GENERAL (X-RAY)	Radiology	Economou, Tasia Stephanie (M.D.)

Type Office Visit S; Ancillary Orders Office Visit ULGARIS; Ancillary Orders Office Visit	Location CENTER VENICE MEDICAL OFFICES U PASADENA MEDICAL OFFICES U VENICE MEDICAL OFFICES U PASADENA MEDICAL OFFICES U VENICE MEDICAL	Department DERMATOLOG Y VENICE A 4TH FLOOR PASADENA MORD DERMATOLOG Y VENICE A 4TH FLOOR PASADENA MORD DERMATOLOG DERMATOLOG	Specialty Dermatology Dermatology	Provider Bernstein, Leslie Erin (M.D.) — Bernstein, Leslie Erin (M.D.)
S; Ancillary Orders Office Visit ULGARIS; Ancillary Orders Office Visit	MEDICAL OFFICES U PASADENA MEDICAL OFFICES U VENICE PASADENA MEDICAL OFFICES U VENICE	Y VENICE A 4TH FLOOR PASADENA MORD DERMATOLOG Y VENICE A 4TH FLOOR PASADENA MORD	_	Erin (M.D.) — Bernstein, Leslie
Orders Office Visit ULGARIS; Ancillary Orders Office Visit	MEDICAL OFFICES U WEDICAL OFFICES U PASADENA MEDICAL OFFICES U VENICE	MORD DERMATOLOG Y VENICE A 4TH FLOOR PASADENA MORD	— Dermatology —	
Orders Office Visit ULGARIS; Ancillary Orders Office Visit	MEDICAL OFFICES U WEDICAL OFFICES U PASADENA MEDICAL OFFICES U VENICE	MORD DERMATOLOG Y VENICE A 4TH FLOOR PASADENA MORD	— Dermatology —	
ULGARIS; Ancillary Orders Office Visit	PASADENA MEDICAL OFFICES U VENICE	Y VENICE A 4TH FLOOR PASADENA MORD	Dermatology —	
Ancillary Orders Office Visit	MEDICAL OFFICES U VENICE	MORD	_	_
Orders Office Visit	MEDICAL OFFICES U VENICE	MORD	_	_
	OFFICES U	Y VENICE A 4TH FLOOR	Dermatology	Bernstein, Leslie Erin (M.D.)
ULGARIS (Prima			_	
Ancillary Orders	WEST LA MEDICAL CENTER	EMERGENCY AREA	Emergency Medicine	Hsiai, Tzung Keith (M.D.)
Office Visit FOR CA, SKIN;	VENICE MEDICAL OFFICES U	DERMATOLOG Y VENICE A 4TH FLOOR	Dermatology	Adigwe-Mozia, Martha N (N.P.)
Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
OLON; ULT; ION FOR CA, PF	ROSTATE			
Lab	WEST LA MEDICAL CENTER	HOV LABORATORY	Laboratory	Hooks, Sarah Elizabeth (M.D.)
EMIA				
Diagnostic Imaging	WEST LA MEDICAL CENTER	HOV GENERAL (X-RAY)	Radiology	Hooks, Sarah Elizabeth (M.D.)
Office Visit	WEST LA MEDICAL CENTER U	URGENT CARE - WEST LA	Urgent Care	Firooz, Nazanin (M.D.)
IS (Primary Dx)				
Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD	_	_
Office Visit	WEST LA MEDICAL CENTER U	PHYSICAL MEDICINE	Physical Medicine	Hyams, David (M.D.)
Primary Dx)				Hooks, Sarah
	Orders Office Visit FOR CA, SKIN; Office Visit OLON; JLT; ON FOR CA, PF Lab EMIA Diagnostic Imaging Office Visit S (Primary Dx) Ancillary Orders Office Visit	Orders MEDICAL CENTER Office Visit VENICE MEDICAL OFFICES U FOR CA, SKIN; Office Visit WEST LA MEDICAL CENTER U DLON; JLT; ON FOR CA, PROSTATE Lab WEST LA MEDICAL CENTER EMIA Diagnostic WEST LA Imaging MEDICAL CENTER EMIA Diagnostic WEST LA Imaging MEDICAL CENTER Office Visit WEST LA MEDICAL CENTER U S (Primary Dx) Ancillary PASADENA Orders MEDICAL OFFICES U Office Visit WEST LA MEDICAL CENTER U	Orders MEDICAL CENTER AREA Office Visit VENICE MEDICAL OFFICES U FOR CA, SKIN; Office Visit WEST LA MEDICAL CENTER U DLON; JLT; ON FOR CA, PROSTATE Lab WEST LA MEDICAL CENTER HOV LABORATORY CENTER Diagnostic WEST LA Imaging MEDICAL CENTER Diagnostic WEST LA Imaging MEDICAL CENTER Diagnostic WEST LA Imaging MEDICAL CENTER Office Visit WEST LA MEDICAL CENTER Office Visit WEST LA MEDICAL CENTER Office Visit WEST LA MEDICAL CENTER U S (Primary Dx) Ancillary Office Visit WEST LA MEDICAL CENTER U Ancillary Office Visit WEST LA MEDICAL CENTER U Ancillary Office Visit WEST LA MEDICAL CENTER U Ancillary Office Visit WEST LA MEDICAL CENTER U Ancillary OFFICES U Office Visit WEST LA MEDICAL CENTER U PHYSICAL MEDICAL CENTER U PHYSICAL MEDICAL CENTER U	Orders MEDICAL CENTER AREA Medicine Office Visit VENICE MEDICAL OFFICES U DERMATOLOG Y VENICE A 4TH FLOOR Dermatology Y VENICE A 4TH FLOOR FOR CA, SKIN; WEST LA MEDICAL CENTER U INTERNAL MEDICINE RAIN2 Internal Medicine Office Visit WEST LA MEDICAL CENTER U INTERNAL MEDICINE RAIN2 Internal Medicine DLON; JLT; ON FOR CA, PROSTATE Internal MEDICAL CENTER Internal Medicine Lab WEST LA MEDICAL CENTER HOV LABORATORY Laboratory EMIA WEST LA MEDICAL CENTER HOV GENERAL ABORATORY Radiology Office Visit WEST LA MEDICAL CENTER HOV GENERAL CENTER Radiology Office Visit WEST LA MEDICAL CENTER U URGENT CARE - WEST LA MEDICAL CENTER U Urgent Care - WEST LA MORD Office Visit WEST LA MEDICAL CENTER U PASADENA MORD — Office Visit WEST LA MEDICAL CENTER U PHYSICAL MEDICINE Physical Medicine Office Visit WEST LA MEDICAL CENTER U PHYSICAL MEDICINE Physical Medicine

Date	Туре	Location	Department	Specialty	Provider
		MEDICAL OFFICE U	CARE MANAGEMENT	Management	Elizabeth (M.D.)
04/25/2009	Ancillary Orders	PASADENA MEDICAL OFFICES U	PASADENA MORD	_	_
05/27/2009 Description: VERRUC		VENICE MEDICAL OFFICES U	DERMATOLOG Y VENICE A 4TH FLOOR	Dermatology	Adigwe-Mozia, Martha N (N.P.)
TINEA CRURIS	A FLANA,				
06/08/2009	Orders Only	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
07/23/2009	Diagnostic Imaging	WEST LA MEDICAL CENTER	HOV GENERAL (X-RAY)	Radiology	_
07/28/2009	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
Description: CHOLELI OBESITY; HYPERLIPIDEMIA; PREDIABETES; ELEVATED BLOOD P SCREENING FOR CA ELEVATED TRANSAN	RESSURE READI		SIS OF HTN;		
08/04/2009	Lab	WEST LA MEDICAL	HOV LABORATORY	Laboratory	Hooks, Sarah Elizabeth (M.D.)
		CENTER	Liborariora		
Description: OBESITY		CENTER		F arananan i	
Description: OBESITY 08/05/2009	Ancillary Orders	-	EMERGENCY	Emergency Medicine	Ghadishah, Delaram (M.D.)
08/05/2009 08/05/2009 - 08/07/2009	Ancillary Orders ED to Hosp- Admission (Discharged)	CENTER WEST LA MEDICAL	EMERGENCY		Ghadishah, Delaram
08/05/2009 08/05/2009 - 08/07/2009 Description: DM 2, UN	Ancillary Orders ED to Hosp- Admission (Discharged) ICONTROLLED.	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER	EMERGENCY AREA 5B2		Ghadishah, Delaram (M.D.) Ta, Tuan (M.D.)
08/05/2009 08/05/2009 - 08/07/2009	Ancillary Orders ED to Hosp- Admission (Discharged)	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL	EMERGENCY AREA		Ghadishah, Delaram (M.D.)
08/05/2009 08/05/2009 - 08/07/2009 Description: DM 2, UN	Ancillary Orders ED to Hosp- Admission (Discharged) ICONTROLLED. Ancillary	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL	EMERGENCY AREA 5B2		Ghadishah, Delaram (M.D.) Ta, Tuan (M.D.) Kim, Injib John
08/05/2009 08/05/2009 - 08/07/2009 Description: DM 2, UN 08/09/2009	Ancillary Orders ED to Hosp- Admission (Discharged) ICONTROLLED. Ancillary Orders	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL	EMERGENCY AREA 5B2 IP INTERNAL MEDICINE IP INTERNAL		Ghadishah, Delaram (M.D.) Ta, Tuan (M.D.) Kim, Injib John (M.D.) Kim, Injib John (M.D.)
08/05/2009 08/05/2009 - 08/07/2009 Description: DM 2, UN 08/09/2009 08/09/2009 08/13/2009	Ancillary Orders ED to Hosp- Admission (Discharged) ICONTROLLED. Ancillary Orders Orders Only Ancillary Orders Office Visit	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER PASADENA MEDICAL	EMERGENCY AREA 5B2 IP INTERNAL MEDICINE IP INTERNAL MEDICINE PASADENA		Ghadishah, Delaram (M.D.) Ta, Tuan (M.D.) Kim, Injib John (M.D.) Kim, Injib John
08/05/2009 08/05/2009 - 08/07/2009 Description: DM 2, UN 08/09/2009 08/09/2009	Ancillary Orders ED to Hosp- Admission (Discharged) ICONTROLLED. Ancillary Orders Orders Only Ancillary Orders Office Visit	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER PASADENA MEDICAL OFFICES U WEST LA MEDICAL CENTER U	EMERGENCY AREA 5B2 IP INTERNAL MEDICINE IP INTERNAL MEDICINE PASADENA MORD INTERNAL MEDICINE	Medicine	Ghadishah, Delaram (M.D.) Ta, Tuan (M.D.) Kim, Injib John (M.D.) Kim, Injib John (M.D.) — Hooks, Sarah
08/05/2009 08/05/2009 - 08/07/2009 Description: DM 2, UN 08/09/2009 08/09/2009 08/13/2009 08/13/2009 Description: OBESITY DM 2, UNCONTROLL	Ancillary Orders ED to Hosp- Admission (Discharged) ICONTROLLED. Ancillary Orders Orders Only Ancillary Orders Office Visit	CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER WEST LA MEDICAL CENTER PASADENA MEDICAL OFFICES U WEST LA MEDICAL CENTER U	EMERGENCY AREA 5B2 IP INTERNAL MEDICINE IP INTERNAL MEDICINE PASADENA MORD INTERNAL MEDICINE	Medicine	Ghadishah, Delaram (M.D.) Ta, Tuan (M.D.) Kim, Injib John (M.D.) Kim, Injib John (M.D.) — Hooks, Sarah

Visit List (continued) as of 12/31/2011

Date	Туре	Location	Department	Specialty	Provider
CHOLELITHIASIS	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	20041011	Dopartinont	opoolaity	
09/02/2009	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
09/03/2009 Description: SCREENING	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
DM 2 W DIABETIC HYPI DEFORMITY OF ANKLE	ERLIPIDEMIA, M	IXED;			
09/10/2009	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	OPHTHALMOL OGY	Ophthalmology	Mc Cray, Constance D
09/20/2009	Released Future/Standin g Orders	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
Description: DM 2, UNCO DM 2 W DIABETIC HYPI OBESITY		IXED;			
09/22/2009	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	PHYSICAL THERAPY	Physical Therapy	Kohout, Marcus Eugene (P.T.)
Description: PHYSICAL DIFFICULTY WALKING					
10/02/2009	Lab	WEST LA MEDICAL CENTER	HOV LABORATORY	Laboratory	Hooks, Sarah Elizabeth (M.D.)
Description: CHOLELITH					
10/09/2009	Office Visit	W. LOS ANGELES VISION SERVICES U	OPTOMETRY	Optometry	Ghoo, Melissa (O.D.)
Description: MYOPIA; ASTIGMATISM; PRESBYOPIA					
10/13/2009	Office Visit	WEST LA MEDICAL CENTER U	FAMILY PRACTICE PERDIEM	Family Practice	Katz, Jonathan (M.D.)
Description: ACUTE BRC					
10/13/2009	Diagnostic Imaging	WEST LA MEDICAL CENTER	HOV GENERAL (X-RAY)	Radiology	Katz, Jonathan (M.D.)
10/14/2009	Orders Only	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
11/16/2009	Allied Health/Nurse Visit	VENICE MEDICAL OFFICES U	MEMBER HEALTH EDUCATION	Health Education	McMillan, Yolanda Yvette (R.N.)
11/19/2009	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
11/19/2009	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
11/25/2009	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
11/25/2009	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
12/03/2009	Orders Only	WEST LA	INTERNAL	Internal	Hooks, Sarah

KAISER PERMANENTE

Patient (continued)

Visit List (continued) as of 12/31/2011

Date	Туре	Location	Department	Specialty	Provider
		MEDICAL CENTER U	MEDICINE RAIN2	Medicine	Elizabeth (M.D.)
2/10/2009	Ancillary Orders		_	_	_
1/05/2010	Diagnostic Imaging	WEST LA MEDICAL CENTER	HOV GENERAL (X-RAY)	Radiology	_
1/11/2010	Ancillary Orders		—		_
2/17/2010	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
2/17/2010	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
2/17/2010 Description: SCHIZO	ALLIED HEALTH/NUR SE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	White, Elizabeth Boehning (Lcsw)
2/17/2010	OFFICE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
Description: SCHIZO					
2/24/2010	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
2/24/2010	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
3/16/2010	OFFICE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
Description: SCHIZO					
3/26/2010	Office Visit	WEST LA MEDICAL CENTER U	PLASTIC SURGERY	Plastic Surgery	Ozersky, David (M.D.)
Description: SCREEN SCHIZOAFFECTIVE DM 2, UNCONTROLI SKIN TAG	DISORDER;	DN (Primary Dx);			
4/02/2010	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
Description: SCREEN GERD; DM 2 W DIABETIC H					
OBESITY; SCHIZOAFFECTIVE CHOLELITHIASIS; DIARRHEA; TREMOR, ESSENTI PROPHYLACTIC VA CHEST PAIN, ATYPI	DISORDER; AL; CCINE;				
4/26/2010	Office Visit	WEST LA MEDICAL CENTER U	PLASTIC SURGERY	Plastic Surgery	Ozersky, David (M.D.)
Description: SKIN TA	G (Primary Dx)	_			
5/17/2010	Allied Health/Nurse	VENICE MEDICAL	MEMBER HEALTH	Health Education	Chapmon, Catherine A. (R.D)

Date	Туре	Location	Department	Specialty	Provider
	ARY SURVEILLANCE A		-	opecially	
05/18/2010	OFFICE VISIT - MH/BH ZOAFFECTIVE DISORI	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
05/19/2010	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
05/19/2010	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
06/14/2010	Lab	WEST LA MEDICAL CENTER	HOV LABORATORY	Laboratory	Hooks, Sarah Elizabeth (M.D.)
Description: SCRE				D	
07/20/2010	OFFICE VISIT - MH/BH ZOAFFECTIVE DISORI	WATERIDGE MEDICAL OFFICE U DER (Primary Dx)	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
07/27/2010	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
TOE PAIN; ABRASION; OBESITY;	I, FOOT, DIABETIC (Pri CHYPERLIPIDEMIA, M				
08/18/2010	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
08/18/2010	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
08/20/2010	OFFICE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
	ZOAFFECTIVE DISORE	DER (Primary Dx)			
09/10/2010	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	OPHTHALMOL OGY	Ophthalmology	Mc Cray, Constance D
10/20/2010	OFFICE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
	ZOAFFECTIVE DISORE				
11/17/2010	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
11/17/2010	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
12/15/2010	Lab	WEST LA MEDICAL CENTER	HOV LABORATORY	Laboratory	Talag, Emelita Borja (M.D.)
	ZOAFFECTIVE DISORE			-	
12/20/2010		WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2 (Primany Dx):	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
DEFORMITY OF A	PHYLACTIC VACCINE F ANKLE OR FOOT, ACQ	UIRED;			
12/20/2010	Diagnostic	WEST LA	HOV GENERAL	Radiology	_

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KAISER PERMANENTE

t List (continued) as	s of 12/31/2011		ent (continued)		
Date	Туре	Location	Department	Specialty	Provider
	Imaging	MEDICAL CENTER	(X-RAY)		
12/21/2010	OFFICE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
	OAFFECTIVE DISORE	• • •			
12/22/2010	Office Visit OARTHRITIS OF ANKI	CULVER MARINA MEDICAL OFFICES U	PODIATRY MODULE A	Podiatry	Guimet, Moises Frank (Dpm)
DM 2, CONTROLL EXAM, FOOT, DIA	ED;		nary Dx),		
02/23/2011	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
02/23/2011	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
05/18/2011	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
05/18/2011	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
05/25/2011	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
05/25/2011	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
06/16/2011	OFFICE VISIT - MH/BH	WATERIDGE MEDICAL OFFICE U	PSYCHIATRY	Psychiatry	Talag, Emelita Borja (M.D.)
	OAFFECTIVE DISORE	· · · ·			
08/17/2011	Orders Only	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
08/17/2011	Released Future/Standin g Orders	4950 SUNSET MEDICAL OFFICE U	POPULATION CARE MANAGEMENT	Population Care Management	Hooks, Sarah Elizabeth (M.D.)
09/26/2011	Allied Health/Nurse Visit	WEST LA MEDICAL CENTER U	OPHTHALMOL OGY	Ophthalmology	Mc Cray, Constance D
Description: SCRE	ENING, DIABETIC RET	INOPATHY IN RO	OUTINE EYE EXA	M (Primary Dx)	
10/14/2011	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE RAIN2	Internal Medicine	Hooks, Sarah Elizabeth (M.D.)
			(Primary Dx);		
10/18/2011	Office Visit	CULVER MARINA MEDICAL OFFICES U	PODIATRY MODULE A	Podiatry	Lee, Suzette (Dpm)

Visit List (continued) as of 12/31/2011

Date	Туре	Location	Department	Specialty	Provider
EXAM, FOOT, DIAE	,				
DEFORMITY OF A	NKLE OR FOOT, AC	QUIRED			
11/03/2011	Office Visit	CULVER MARINA MEDICAL OFFICES U	PODIATRY MODULE A	Podiatry	Lee, Suzette (Dpm)
Description: INGRO	WN NAIL (Primary D)x)			
11/14/2011	Office Visit	WEST LA MEDICAL CENTER U	INTERNAL MEDICINE GREEN2	Internal Medicine	Thomas, Elizabeth Desmond (N.P.)
Description: DERM	ATITIS (Primary Dx)				
11/18/2011	Office Visit	CULVER MARINA MEDICAL OFFICES U	PODIATRY MODULE A	Podiatry	Lee, Suzette (Dpm)
Description: AFTER	CARE, SURGERY C	OF MUSCULOSKE	LETAL SYSTEM ((Primary Dx)	

07/26/2006 - Ancillary Orders in PHARMACY CENTRAL REFILL

Visit Information

Department			
Name	Address	Phone	
PHARMACY CENTRAL REFILL	9521 DALEN ST Downey CA 90242-4847	866-206-2983	

Other Orders

dications		
ABILIFY 20 MG ORAL TAB [43179085] (Discontinued)		
Electronically signed by: Interface, Scal_ Pharmacy on 07/2	6/06 0000	Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 07/26/06 0000	Authorized by: NON-KP PROVIDER	
Ordering mode: Standard	-	
Frequency: 07/26/06 - 12/12/06	Discontinued by: Interface, Scal_ Pha	armacy 12/12/06 2006
	[Replaced by Pharmacy]	
Provider Details		
Provider	NPI	
Interface, Scal_ Pharmacy	_	
NON-KP PROVIDER		

END OF ENCOUNTER

09/16/2006 - Ancillary Orders in PHARMACY CENTRAL REFILL

Visit Information

Department

Name	
PHARMACY CENTRAL REFILL	

Address 9521 DALEN ST Downey CA 90242-4847 Phone 866-206-2983

Other Orders

Medications

09/16/2006 - Ancillary Orders in PHARMACY CENTRAL REFILL (continued)

Other Orders (continued)

BENZTROPINE 1 MG ORAL TAB TAB [46052805] (Discontinu	ued)
Electronically signed by: Interface, Scal_ Pharmacy on 09/16/	06 0000 Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000	Authorized by: NON-KP PROVIDER
Ordering mode: Standard	
Frequency: 09/16/06 - 08/22/07	Discontinued by: Hooks, Sarah Elizabeth (M.D.) 08/22/07 1035
Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	—
NON-KP PROVIDER	—
ABILIFY 20 MG ORAL TAB [46052794] (Discontinued)	
Electronically signed by: Interface, Scal_ Pharmacy on 09/16/	06 0000 Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000	Authorized by: NON-KP PROVIDER
Ordering mode: Standard	
Frequency: 09/16/06 - 12/12/06	Discontinued by: Interface, Scal_ Pharmacy 12/12/06 2006
	[Replaced by Pharmacy]
Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	—
NON-KP PROVIDER	—
RISPERDAL 1 MG ORAL TAB [46052804] (Discontinued)	
Electronically signed by: Interface, Scal_ Pharmacy on 09/16/	
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000	06 0000 Status: Discontinue Authorized by: NON-KP PROVIDER
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000 Ordering mode: Standard	Authorized by: NON-KP PROVIDER
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000	Authorized by: NON-KP PROVIDER Discontinued by: Interface, Scal_ Pharmacy 12/12/06 2007
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000 Ordering mode: Standard	Authorized by: NON-KP PROVIDER
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000 Ordering mode: Standard Frequency: 09/16/06 - 12/12/06 Provider Details	Authorized by: NON-KP PROVIDER Discontinued by: Interface, Scal_ Pharmacy 12/12/06 2007 [Replaced by Pharmacy]
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000 Ordering mode: Standard Frequency: 09/16/06 - 12/12/06 Provider Details Provider	Authorized by: NON-KP PROVIDER Discontinued by: Interface, Scal_ Pharmacy 12/12/06 2007
Ordering user: Interface, Scal_ Pharmacy 09/16/06 0000 Ordering mode: Standard Frequency: 09/16/06 - 12/12/06 Provider Details	Authorized by: NON-KP PROVIDER Discontinued by: Interface, Scal_ Pharmacy 12/12/06 2007 [Replaced by Pharmacy]

END OF ENCOUNTER

09/21/2006 - Office Visit in INTERNAL MEDICINE GREEN2

Visit Information

Provider Information

Encounter Provider

Elseby, Susan (M.D.)

Department

Name	Address	Phone
INTERNAL MEDICINE GREEN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273

Follow-up and Dispositions

• Return if symptoms worsen or fail to improve.

Reason for Visit

Chief Complaint

PHYSICAL EXAMINATION

Visit Diagnoses

- PHYSICAL EXAMINATION, COMPLETE OR PARTIAL (primary) [V70.0]
- SCHIZOAFFECTIVE DISORDER [295.70]
- GERD [530.81]

Vitals

Vital Signs				Most recent update: 9/21/2006 8:54 AM
BP 141/81	Pulse 81	Temp 97 °F (36.1 °C) (Tympanic)	Ht 5' 6" (1.676 m)	Wt 216 lb (98 kg)

BMI 34.86 kg/m²

Clinical Notes

Nursing Note

at 9/21/2006 0900

Author: —	Service: —	Author Type: —
Filed:	Encounter Date: 9/21/2006	Creation Time: 9/21/2006 9:00 AM
Status: Signed		

>> ESTRADA, ANA 9/21/2006 9:01 am Dr elseby pt its taking this meds For phichiatry reason lansoprazole 30 mg go over with pt

Progress Notes

Elseby, Susan (M.D.) at 9/21/2006 0907

Author: Elseby, Susan (M.D.) Filed: 9/21/2006 9:15 AM Status: Signed

Service: — Encounter Date: 9/21/2006 Editor: Elseby, Susan (M.D.) (Physician) Author Type: Physician Creation Time: 9/21/2006 9:07 AM

SUBJECTIVE:

Lawson B Hawkins is a 51 year old male with h/o schizoaffective disorder, GERD presents for physical.

SOCIAL HX: Social History	
Marital Status:	Spouse Name:
Years of Education:	Number of children: 0

Social History Main Topics Tobacco Use: Yes Packs/Day: .75 Years: 20 Alcohol Use: Yes Comment: Rare alcohol. Social History Narrative Lives in LA, self employed now on permanent disability, works parttime fixing PCs, writing software and teaching. Exercise-bicycle riding. Single, no children.

Clinical Notes (continued)

TAKE 1 TABLET ORALLY EVERY Disp: 30 MORNING	Rfl: 1
TAKE 1 TABLET ORALLY EVERY Disp: 30 NIGHT AT BEDTIME	Rfl: 1
TAKE 1 TABLET ORALLY EVERY Disp: 30 NIGHT AT BEDTIME	Rfl: 1
TAKE 1 TABLET ORALLY EVERY Disp: 30 MORNING	Rfl: 2
	MORNING TAKE 1 TABLET ORALLY EVERY Disp: 30 NIGHT AT BEDTIME TAKE 1 TABLET ORALLY EVERY Disp: 30 NIGHT AT BEDTIME TAKE 1 TABLET ORALLY EVERY Disp: 30

FAMILY HX: Family History Diabetes

Mother

SURGICAL HX: No past surgical history on file. MEDICAL HX: Past Medical History SCHIZOAFFECTIVE DISORDER GERD

ROS: Non-contributory

During this past month, have you often been bothered by feeling down, depressed or hopeless? no

During the past month have you often been bothered by little interest or pleasure in doing things? no

OBJECTIVE:

GENERAL ASSESSMENT: Alert, oriented, no acute distress

EYES: normal and PERRLA

EARS: bilateral TM's and external ear canals normal

NOSE: normal and patent, no erythema, discharge or polyps

MOUTH: mucous membranes moist, pharynx normal without lesions

NECK: supple, no adenopathy

LUNGS: clear to auscultation, no wheezes or rales and unlabored breathing

HEART: regular rate and rhythm, no murmurs

ABDOMEN: soft, nontender, nondistended, no masses or organomegaly

KAISER PERMANENTE

09/21/2006 - Office Visit in INTERNAL MEDICINE GREEN2 (continued)

Clinical Notes (continued)

GENITALIA/PROSTATE : no penile lesions or discharge, no testicular masses or tenderness, no hernias

RECTAL: negative without mass, lesions or tenderness

NEUROLOGICAL EXAM: alert, oriented, normal speech, no focal findings or movement disorder noted

EXTREMITIES: peripheral pulses normal, no pedal edema, no clubbing or cyanosis

SKIN EXAM: well hydrated, no lesions

A/P: Baseline labs, flex sig referral, FOB Rx omeprazole F/u psychiatry F/u and repeat BP next visit

Electronically signed by Elseby, Susan (M.D.) at 9/21/2006 9:15 AM

Labs

CREATININE, S	ERUM [46312654] (Discontinu	ed)	
	gned by: Elseby, Susan (M.D.)		Status: Discontinued
Ordering user: I Ordering mode:	Elseby, Susan (M.D.) 09/21/06 0 Standard	908	Authorized by: Elseby, Susan (M.D.)
	utine 09/21/06 -		Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 07/22/07 1556 [Other (Order Expired (> 90 days))]
Provider De	tails		1 (
Provider			NPI
Elseby, Sus	an (M.D.)		_
Specimen Ir	nformation		
ID	Туре	Source	Collected By
—	_	BLOOD	_
GLUCOSE, FAS	TING [46312655] (Discontinue	ed)	
	gned by: Elseby, Susan (M.D.)		Status: Discontinued
	Elseby, Susan (M.D.) 09/21/06 0	908	Authorized by: Elseby, Susan (M.D.)
Ordering mode: Frequency: Rou			Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 07/22/07 1556 [Other (Order
,			Expired (> 90 days))]
Provider De	tails		
Provider			NPI
Elseby, Sus	an (M.D.)		—
Specimen Ir	nformation		
ID	Туре	Source	Collected By
_	—	BLOOD	_
ALT, SERUM [4	6312656] (Discontinued)		
	gned by: Elseby, Susan (M.D.)	on 09/21/06 0908	Status: Discontinued
	grica by. Liseby, Susari (W.D.)	011 03/2 1/00 0300	otatus. Discontinueu

s (continued)			
Ordering user:	Elseby, Susan (M.D.) 09/21/06 0908		Authorized by: Elseby, Susan (M.D.)
Ordering mode	e: Standard		
	outine 09/21/06 -		Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 07/22/07 1556 [Other (Order
Provider De	otaile		Expired (> 90 days))]
			NDI
Provider Elseby, Su	non (M.D.)		NPI
Elseby, Su	San (M.D.)		—
Specimen I	Information		
ID	Туре	Source	Collected By
—	—	BLOOD	—
IPID PANEL [46312657] (Discontinued)		
	signed by: Elseby, Susan (M.D.) on 09	/21/06 0908	Status: Discontinu
Ordering user: Ordering mode	Elseby, Susan (M.D.) 09/21/06 0908		Authorized by: Elseby, Susan (M.D.)
	outine 09/21/06 -		Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 07/22/07 1556 [Other (Ord
5			Expired (> 90 days))]
Provider De	etails		
Provider			NPI
Elseby, Su	isan (M.D.)		—
Specimen I	Information		
ID	Туре	Source	Collected By
_	_	BLOOD	_
Electronically s	[46312658] (Discontinued) signed by: Elseby, Susan (M.D.) on 09	/21/06 0908	Status: Discontinu
Ordering user: Ordering mode	Elseby, Susan (M.D.) 09/21/06 0908		Authorized by: Elseby, Susan (M.D.)
	e. Standard outine 09/21/06 -		Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 07/22/07 1556 [Other (Ord
Quantity. 1			Expired (> 90 days))]
Provider De	etails		
Provider			NPI
Elseby, Su	san (M.D.)		_
Snaoiman I	Information		
ID	Туре	Source	Collected By
		BLOOD	
		DLOOD	
-)] (Discontinued)		
	signed by: Elseby, Susan (M.D.) on 09	/21/06 0908	Status: Discontinu
	Elseby, Susan (M.D.) 09/21/06 0908		Authorized by: Elseby, Susan (M.D.)
Ordering mode			Closes Normal
	outine 09/21/06 -		Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 07/22/07 1556 [Other (Ord Expired (> 90 days))]
Provider De	etails		(, , , , , , , , , , , , , , , , ,
Provider			NPI
Elseby, Su	Isan (M.D.)		_
Elseby, Su	isan (M.D.)		—
Questionna	aire		
Questionna	aire		

(continued)						
Question			Answe	er		
Is the patient on thyroid m	nedication? Enter Y - Yes;	N - No	Ν			
Specimen Information						
ID Typ	0	Source			Collected	By
<u>тур</u> — —	6	BLOOD				Бу
	D					
SA [46314208] (Discontinu	-					
electronically signed by: Els Ordering user: Elseby, Susa		/21/06 0911	Authori	ized by: Elseb	Cucon (M	Status: Discontinu
Ordering mode: Standard	II (IM.D.) 09/21/00 0911		Aution		y, Susan (ivi	
requency: Routine 09/21/0	06 -			Normal		
Quantity: 1						_Lab 07/22/07 1417 [Other (Ord
Provider Details			Expired	d (> 90 days))]	
			NDI			
Provider Elseby, Susan (M.D.)			NPI			
Liscoy, Susan (m.D.)			—			
Specimen Information						
ID Typ	e	Source			Collected	Ву
		BLOOD			—	
requency: Routine 09/21/0 Quantity: 1 Provider Details				Normal atus: Final resu	ult	
Provider			NPI			
Elseby, Susan (M.D.)			_			
Specimen Information						
	•	Source			Collected	By (
ID Typ 391172796 —	e	STOOL			LAB 11/21/	-
		0.001				
OCCULT BLOOD, STOC	DL [46312659]			Res	ulted: 11/21	/06 1026, Result status: Final re
Order status: Completed				on: 11/21/06 1		
Collected by: LAB 11/21	/06 1020		Resul	ting lab: WLA	MEDICAL	CENTER LABORATORY
Components						
Component		Value	Refer	ence Range	Flag	Lab
OCCULT BLOOD 1,	STOOL	NEG	NEG		_	305
OCCULT BLOOD 2,		NEG	NEG			305
OCCULT BLOOD 3,	STOOL	NEG	NEG		_	305
Reviewed by						
	D (M.D.) on 12/13/12 165	55				
	D (M.D.) on 12/13/12 165					
Testing Performed By						
Lab - Abbreviation	Name	Director		Address		Valid Date Range
321 - 305	WLA MEDICAL	S.R. McLare	en, D.O.	6041 Cadillad		09/01/05 0850 - 05/23/17 0009
	CENTER			LOS ANGEL	ES CA	

90034

Labs (continued)

LABORATORY

OCCULT BLOOD, STOOL [46312659]

Order status: Completed Collected by: LAB 11/21/06 1020 Resulted: 11/21/06 1020, Result status: In process Filed on: 11/21/06 1020 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Saccone, Gregory D (M.D.) on 12/13/12 1655 Saccone, Gregory D (M.D.) on 12/13/12 1655

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

All Reviewers List

Saccone, Gregory D (M.D.) on 12/13/2012 16:55 Saccone, Gregory D (M.D.) on 12/13/2012 16:55

Other Orders

Medications

OMEPRAZOLE 20 MG ORAL CPDR SR CAP [46312788] (Ex	pired)	
Electronically signed by: Elseby, Susan (M.D.) on 09/21/06 0	Status: Expired	
Ordering user: Elseby, Susan (M.D.) 09/21/06 0910	Authorized by: Elseby, Susan (M.D.)	-
Ordering mode: Standard		
Frequency: Routine 09/21/06 - 12/17/07	Class: Fill Now	
Provider Details		
Provider	NPI	
Elseby, Susan (M.D.)	—	

Admin instructions: Do not chew or crush

END OF ENCOUNTER

12/12/2006 - Ancillary Orders in PHARMACY CENTRAL REFILL

Visit Information

Department				
	Name	Address	Phone	
	PHARMACY CENTRAL REFILL	9521 DALEN ST Downey CA 90242-4847	866-206-2983	

Other Orders

Medications

ABILIFY 20 MG ORAL TAB [51583239] (Discontinued)

 Electronically signed by: Interface, Scal_ Pharmacy on 12/12/06 0000
 Status: Discontinued

 Ordering user: Interface, Scal_ Pharmacy 12/12/06 0000
 Authorized by: NON-KP PROVIDER

12/12/2006 - Ancillary Orders in PHARMACY CENTRAL REFILL (continued)

Other Orders (continued)

Ordering mode: Standard Frequency: 12/12/06 - 04/24/07

Discontinued by: Interface, Scal_ Pharmacy 04/24/07 0723 [Duplicate Therapy]

Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	—
NON-KP PROVIDER	_

RISPERDAL 1 MG ORAL TAB [51583240] (Discontinued)

Electronically signed by: Interface, Scal_ Pharmacy on 12/12/06	0000 Status: Discontinued
Ordering user: Interface, Scal_ Pharmacy 12/12/06 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	
Frequency: 12/12/06 - 12/10/07	Discontinued by: Interface, Scal_ Pharmacy 12/10/07 2204
	[Duplicate Therapy]
Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	_

END OF ENCOUNTER

03/23/2007 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

SCAL PROVIDER

Lawless, Dorothy Lee (N.P.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273	

Reason for Visit

Chief Complaints

- SHOULDER PAIN (left side)
- ANAL PAIN (sharpe, dull)
- NECK PAIN (with sore throat.)

Visit Diagnoses

Name	Code	Chronic?
INTERNAL HEMORRHOID	455.0	Yes
PAIN IN SHOULDER.	719.41	No
left		

Vitals

KAISER PERMANENTE

03/23/2007 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Vita	ls (continued)				
	Vital Signs			Most recent	update: 3/23/2007 8:33 AM
	BP 125/79	Pulse 61	Temp 95.3 °F (35.2 °C)	Wt 225 lb 6.4 oz (102.2 kg)	BMI 36.38 kg/m²

Clinical Notes

Procedures	
Filed on 3/23/2007 0000	
Procedure Orders	

1. XR SHOULDER, LEFT, 2 OR MORE VIEWS [58449567] ordered by Lawless, Dorothy Lee (N.P.) at 03/23/07 0910

No significant abnormality noted.

Electronically signed by Rezvanpour, Ataolah (M.D.) at 4/4/2007 1:42 PM

Progress Notes

Lawless, Dorothy Lee (N.P.) at 3/23/2007 0908			
Author: Lawless, Dorothy Lee (N.P.)	Service: —	Author Type: NURSE PRACTITIONER	
		(N.P.)	
Filed: 3/26/2007 12:58 PM	Encounter Date: 3/23/2007	Creation Time: 3/23/2007 9:08 AM	
Status: Signed	Editor: Lawless, Dorothy Lee (N.P	P.) (NURSE PRACTITIONER (N.P.))	
additional complaints of chronoccasionally has had stool same	s a smoker and concernic recurring rectal mples recent and the	rned about cancer. Also, he has pain with blood on TP	

OBJECTIVE:Left shoulder: some mild GC joint tenderness, some discomfort external rotation. Rectal: Negative Anoscopy: Multiple blue/purple areas ASSESSMENT: PLAN:

Orders Placed This Encounter

XR SHOULDER, LEFT, 2 OR MORE VIEWS THROAT CULTURE HYDROCORTISONE ACETATE 25 MG RECT SUPP Routine Sigmoid and referral to physical medicine

Electronically signed by Lawless, Dorothy Lee (N.P.) at 3/26/2007 12:58 PM

Labs

THROAT CULTURE [58449568] (Final result)

Electronically signed by: Lawless, Dorothy Lee (N.P.) on 03/23/07 0910 Ordering user: Lawless, Dorothy Lee (N.P.) 03/23/07 0910 Authorized by: Lawless, Dorothy Lee (N.P.) Ordering mode: Standard Frequency: Routine 03/23/07 -Class: Clinic Collected Quantity: 1 Lab status: Final result

Status: Completed

Lawless, Dorothy Lee (N.P.) 1568510469 Questionnaire Answer Us the patient taking antibiotics? Enter Y - Yes; N - No N Specimen Information ID Type Source Collected By 39698207 - THROAT LAB 03/23/07 1230 THROAT CULTURE [58449568] Resulted: 03/25/07 0335, Result status; Final Order status; Completed Filed on: 03/25/07 0335 Collected by: LAB 03/23/07 1230 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Narrative: IS PATIENT ON ANTBIOTICS: NO Components Ecomponent Components - Contract: FINAL REPORT - Comment: FINAL REPORT - Comment: No Group A beta streptococci isolated. Reviewed by Lab - Abbreviation Name Value Address Value NoRTH HOLLYWOOD CA 91605 Contract: Completed SHERMAN WAY REGIONAL REGIONAL REGIONAL REGIONAL REGIONAL REGIONAL REGIONAL LABORATORY Order status: Completed Collected by: LAB 03/23/07 1230 Filed on: 03/23/07 1230 Corder status: Completed Collected by: LAB 03/23/07 1230 Filed on: 03/23/07 1230 Testing Performed By Resulting lab: SHERMAN WAY Resoluting lab: SHERMAN WAY REGIONAL LABORATORY Corder status: Completed Collected by:						
Question Answer Question Answer N New Source Collected By Jage Source Collected By 396982207 — THROAT LAB 03/23/07 1230 THROAT CULTURE [58/49568] Resulted: 03/25/07 0335, Result status: Final Order status: Completed Collected by: LAB 03/23/07 1230 Components Components Comment: FINAL REPORT THROAT — — 956 Comment: FINAL REPORT THROAT — — — 956 Comment: FINAL REPORT THROAT — — — — — — — — © Comment: FINAL REPORT THROAT — — <	Provider					
Question Answer Is the patient taking antibiotics? Enter Y - Yes; N - No N Specimen Information Type Source Collected By 396982207 — THROAT LAB 03/23/07 1230 THROAT CULTURE [58449568] Resulted: 03/25/07 0335, Result status: Final Order status: Completed Collected by: Source Collected by: LAB 03/23/07 1230 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Narrative: IS PATIENT ON ANTBIOTICS: NO Reference Range Flag Lab SPECIMEN SOURCE THROAT — — 956 CultTURE STATUS — — — 956 Comment: FINAL REPORT — — — 956 Comment: No Group A beta streptococcl isolated. — — 956 Reviewed by	Lawless, Dolotily Lee (IN	I.F. <i>)</i>		1506510409		
Is the patient taking antibiotics? Enter Y - Yes; N - No N Specimen Information ID Type Source Collected By 396982207 — THROAT LAB 03/23/07 1230 THROAT CULTURE [54449568] Resulted: 03/25/07 0335, Result status: Final Order status: Completed Collected by: LAB 03/23/07 1230 Components Components Components Components Components Value Reference Range Flag Lab SPECIMEN SOURCE THROAT — 956 CULTURE STATUS — — — — 956 CULTURE STATUS — — — 956 CULTURE STATUS — — — 956 CULTURE STATUS — — — — 956 CULTURE STATUS — — — 956 CULTURE STATUS — — — 956 CULTURE STATUS — — — — 956 COMPARENT — — — 956 CULTURE STATUS — — — — 956 COMPARENT — 03/28/07 1508 THROAT CULTURE STATUS — — — — — 956 COMPARENT — 03/28/07 1230 Critered by Lab -Abbreviation Name Director Address Valid Date Range Coder status: Completed Collected by: LAB 03/23/07 1230 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Resulting lab: SHERMAN WAY REGIONAL LABORATORY Collected by: LAB 03/23/07 1230 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Resulting lab: SHERMAN WAY REGIONAL LABORATORY REGIONAL LABORATORY Lab -Abbreviati	Questionnaire					
Specimen Information ID Type Source Collected By 39698207 Collected By 39698207 Collected By THROAT LAB 03/23/07 1230 Resultion colspan="2">Component Filed on: 03/25/07 0335, Result status: Final Component SPECIMEN SOURCE: NO Component Value Reference Range Filag Lab SPECIMEN SOURCE: THROAT — — 956 Comment: FINAL REPORT — — 956 Comment: No Group A beta streptococci isolated. Reviewed by Lab Abbreviation Name Name Nan M. Vannier, Nago and Sizer Nogo and Sizer Nogo and Size				Answer		
ID Type Source Collected By 39698207 - THROAT LAB 03/23/07 1230 THROAT CULTURE [58449568] Resulted: 03/25/07 0335 Resulted: 03/25/07 0335 Order status: Completed Filed on: 03/25/07 0335 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Narrative: IS PATIENT ON ANTBIOTICS: NO Filed on: 03/25/07 0335 Resulting lab: SHERMAN WAY REGIONAL LABORATORY SPECIMEN SOURCE THROAT - - 956 CULTURE STATUS - - - 956 Comment: FINAL REPORT - - 956 THROAT CULTURE SCREEN - - - 956 Comment: No Group A beta streptococci isolated. NORTH HOLLYWOOD 08/30/05 1817 - 09/01/10 0C Residing Performed By Lab - Abbreviation Name <td>Is the patient taking antik</td> <td>piotics? Enter Y - Yes; N</td> <td>I - No I</td> <td>Ν</td> <td></td> <td></td>	Is the patient taking antik	piotics? Enter Y - Yes; N	I - No I	Ν		
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	VIEWS [58449567] (F	inal result)	
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Electronically signed by: Lawless, D Ordering user: Lawless, Dorothy Lee		Authorized by: Lawless,	Status: Comple
Ordering mode: Standard	(IN.F.) 03/23/07 0910	Authonized by: Lawless,	Dorotity Lee (N.F.)
Frequency: Routine 03/23/07 -		Class: Normal	
Quantity: 1		Lab status: Final result	
Provider Details			
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Lawless, Dorothy Lee (N.P.)		1568510469	
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AP, LAT Special View?->NONE			
-			
Type Diagnostic imaging	ID 20802950	Date and Time 4/4/2007 1:42 PM	Dictating Provider Rezvanpour, Ataolah (M.D
Diagnostic imaging	20802950 blah (M.D.), MEDICAL I		
Diagnostic imaging Signed by Rezvanpour, Atac	20802950 blah (M.D.), MEDICAL I	4/4/2007 1:42 PM	
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by	20802950 olah (M.D.), MEDICAL I ed.	4/4/2007 1:42 PM	
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note	20802950 olah (M.D.), MEDICAL I ed.	4/4/2007 1:42 PM	
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342	
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted:	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO Order status: Completed Accession number: 20802950 Narrative:	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted:	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO Order status: Completed Accession number: 20802950	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted:	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO Order status: Completed Accession number: 20802950 Narrative:	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted:	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO Order status: Completed Accession number: 20802950 Narrative:	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted:	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO Order status: Completed Accession number: 20802950 Narrative: AP, LAT Special View?->NONE	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted:	Rezvanpour, Ataolah (M.D
Diagnostic imaging Signed by Rezvanpour, Atac No significant abnormality note Reviewed by Lawless, Dorothy Lee (N.P XR SHOULDER, LEFT, 2 OR MO Order status: Completed Accession number: 20802950 Narrative: AP, LAT Special View?->NONE Transcription	20802950 olah (M.D.), MEDICAL I ed. .) on 04/05/07 1726 RE VIEWS [58449567	4/4/2007 1:42 PM DOCTOR on 04/04/07 at 1342] Resulted: Filed on: 03/30/07 104:	Rezvanpour, Ataolah (M.D : 03/30/07 1043, Result status: In prod

Reviewed by

Imaging (continued)

Lawless, Dorothy Lee (N.P.) on 04/05/07 1726

All Reviewers List

Lawless, Dorothy Lee (N.P.) on 4/5/2007 17:26

Other Orders

Medications

HYDROCORTISONE ACETATE 25 MG RECT SUPP [58449566] (Discontinued)
Electronically signed by: Lawless, Dorothy Lee (N.P.) on 03/23/0	7 0910 Status: Discontinued
Ordering user: Lawless, Dorothy Lee (N.P.) 03/23/07 0910	Authorized by: Lawless, Dorothy Lee (N.P.)
Ordering mode: Standard	
Frequency: Routine 03/23/07 - 08/22/07	Class: Fill Now
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 08/22/07 1035	
Provider Details	
Provider	NPI
Lawless, Dorothy Lee (N.P.)	1568510469

Patient Instructions

Get password at www.kp.org Referral has been made to Physical Medicine for your shoulder pain Call Smoker's Hotline1 888 883 stop (7867)

Electronically signed by Lawless, Dorothy Lee (N.P.) at 3/23/2007 9:13 AM

END OF ENCOUNTER

03/30/2007 - Office Visit in PHYSICAL MEDICINE

t Information			
Provider Information			
Encounter Provider			
Hyams, David (M.D.)			
Department			
Name	Address	Phone	
PHYSICAL MEDICINE	6041 CADILLAC AVE	323-857-2476	
	Los Angeles CA 90034-1702		
Follow-up and Dispositions			
 Return in about 2 months (arou 	ind 5/30/2007)		

Return in about 2 months (around 5/30/2007).

Reason for Visit

Visi

Chief Complaint

• SHOULDER PROBLEM (con)

Printed on 1/12/24 5:33 PM

03/30/2007 - Office Visit in PHYSICAL MEDICINE (continued)

Reason for Visit (continued)

Name	Code	Chronic?
SMOKER (primary)	305.1	Yes
tals		
Vital Signs		Most recent update: 3/30/2007 9:37 AM
BP	Pulse	
119/74	73	

Clinical Notes

Ρ

ogress Notes			
Hyams, David (M.D.) at 3/30/2007 0929			
Author: Hyams, David (M.D.) Filed: 3/30/2007 10:03 AM Status: Signed	Service: — Encounter Date: 3/30/2007 Editor: Hyams, David (M.D.) (Physician)	Author Type: Physician Creation Time: 3/30/2007 9:29 AM	

CC: L Shoulder pain

HPI: Lawson B Hawkins is a 51 year old male with a 8 month history of left shoulder pain. Pain is intermittent and described as aching. Located deep within the shoulder joint. Patient reports symptoms 2-3 times per week. Inciting event/trauma denied. Pain is exacerbated with sleeping on the affected side. Alleviated by massage. Neurologic symptoms of weakness/tingling denied. Instability denied. Neck pain denied. Denies unexpected weight loss, fevers, or night sweats. Previous treatments include none.PMH: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A]

ALL: No Known Allergies. MEDS: Current outpatient prescriptions: INSERT 1 SUPP PR Disp: 24 Rfl: 1 HYDROCORTISONE ACETATE 25 MG RECT BID SUPP ABILIFY 20 MG ORAL TAKE 1 TABLET Disp: 60 Rfl: 1 TAB ORALLY EVERY MORNING RISPERDAL 1 MG ORAL TAKE 1 TABLET Disp: 60 Rfl: 1 ORALLY EVERY NIGHT TAB AT BEDTIME OMEPRAZOLE 20 MG ORAL1 CAP PO DAILY Disp: 100Rfl: 3 CPDR SR CAP

KAISER PERMANENTE

03/30/2007 - Office Visit in PHYSICAL MEDICINE (continued) **Clinical Notes (continued)** BENZTROPINE 1 MG ORALTAKE 1 TABLET Disp: 30 Rfl: 1 TAB TAB ORALLY EVERY NIGHT AT BEDTIME Social Hx: Occupation: fixes personal computers Smoker: yes PHYSICAL EXAM: LEFT SHOULDER: Inspection: symmetric musculature without atrophy Tenderness to palpation: Mildly lateral subacromial ROM: Flexion: 160 degrees. Abduction: 160 degrees. Extension: 40 degrees. Crossed Adduction: 30 degrees. Internal Rotation: 80 degrees. External Rotation: 90 degrees. Special Testing: Jobes/Empty Can: negative Drop Arm test: negative Pain with resisted internal rotation: negative Pain with resisted external rotation: negative Hawkins test: negative Neers Impingement test: negative Apprehension/Relocation test: negative Load and Shift test: negative Sulcus sign: negative Motor strength: 5/5 motor strength Sensory: within normal limits including axillary distribution Spurlings: negative Assessment: 1. Subacromial Inflammation/RTC Tendonitis 2. Smoker Recommendations/Plan: -Physical Therapy to restore range of motion, with progression to scapular stabilization/RTC strengthening. Use of modalities as indicated (ultrasound, iontophoresis, estim) and instruction on home exercise program. -OTC tylenol as needed for pain -regular exercise discussed

KAISER PERMANENTE

03/30/2007 - Office Visit in PHYSICAL MEDICINE (continued)

Clinical Notes (continued)

-smoking cessation discussed -RTC in 2 months

Electronically signed by Hyams, David (M.D.) at 3/30/2007 10:03 AM

Patient Instructions

- 1. Therapy will contact you regarding your appointment.
- 2. Use heat on shoulder as needed for pain.
- 3. Use tylenol, or ibuprofen as needed for pain.
- 4. Exercise for 30 minutes 3 times per week.
- 5. Continue to try and reduce/quit smoking.
- 6. Go to radiology to get Xrays.

Electronically signed by Hyams, David (M.D.) at 3/30/2007 9:54 AM

END OF ENCOUNTER

04/10/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY

Visit Information

Provider Information

Encounter Provider

Nicolaisen, Rachael Wiley (P.T.)

Department

Name	Address	Phone
PHYSICAL THERAPY	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2476

Follow-up and Dispositions

Reason for Visit

Chief Complaints

- SHOULDER PAIN (left)
- CARE PLAN (Physical Therapy)

Vitals

04/10/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Vital Sidne		Most roos	nt update: 4/10/2007 11:32
Vital Signs	Pulse		ni upuale. 4/10/2007 11:32
117/80	66		
Pain Information (Last	Filed)		
Score	Location	Comments	Edu?
6 (scale 0-10)	SHOULDER	left (2/10- 6/10)	Yes
nical Notes			
Progress Notes			
Nicolaisen, Rachae	el Wiley (P.T.) at 4/10/2007	7 1117	
Author: Nicolaise Filed: 4/10/2007 Status: Signed	en, Rachael Wiley (P.T.) 12:01 PM		THERAPIST, PHYSICAL e: 4/10/2007 11:17 AM IYSICAL)
5 min)			
BJECTIVE:			
e body chart.		old male who procents today with	complaints of
wson B Hawkins ft shoulder pa e: 51	_	old male who presents today with	complaints of
	computers, wri	te software	
ercise: none	compacers, wrr		
tient rates pa	ain at 2-6/10.		
		neck with elbow out to side (from	n 2/10 to 3/10)
sing factors:	sleep on the r	ight	
_	increases and	decreases in pain are spontaneous	5.
hour:			
Sleep: ok			
AM: ok			
PM: same			
	nctional limita		atmos these
veled off late		radually. Got worse around Chris	stillas, then
ecial Question	-		
		izoaffective disorder, reflux	
	u .	months secondary to eating more	
Meds: see r		monor becomany to catting more	
	nticoagulants: :	none	
Cord Signs:	-		
Vertebral A			
Cough/Sneez	_		
	ze: ok		
Bowel/Blado			

04/10/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Clinical Notes (continued)

SCHIZOAFFECTIVE DISORDER GERD **OBJECTIVE:** OBS: forward head, moderate rounded shoulders, bilateral scapula abducted AROM Shoulder: WNL, **pain with EOR FL, ABD, HBB limited to L4 left **pain, L1 right Cervical: WNL, no pain reproduction Elbow: WNL, no pain reproduction PROM FL: WNL AB: 95deg **pain EOR, right 105 no pain ER: WNL IR: 70deg **pain EOR RSC (no pain) AB: 5/5 ER: 4+/5 IR: 5/5 Elbow FL: 5/5 Elbow EX: 5/5 JOINT MOBILITY: Quadrant: stiff EOR throughout, but ROM is equal to right Lock: Stiff, limited ROM compared to right Today's Treatment: Manual Therapy(10 min): Lock mob for IR/ABD Gr III 3x30sec Therapeutic exercise (10min): Inst in HEP for HBB towel stretch, monitor Aggs/Eases, and use Ice/heat for pain control ASSESSMENT Lawson B Hawkins is a 51 year old male who presents with left shoulder pain. Impairments identified at this time are decreased PROM, pain with AROM, postural abnormalities, glenohumeral hypomobility which limit his ability to raise arm without pain. Plan of care discussed, patient agrees. Rehab Potential is good. Goals 1. Independent with home exercise program - 1 week. 2. Full Active Range-of-motion without pain at EOR- 2 weeks.

3. Full PROM without pain, Strength 5/5 - 4-6 weeks.

ABD with minimal pain, FL wihtout pain, and HBB with minimal pain and up to L1

KAISER PERMANENTE

04/10/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Clinical Notes (continued)

after mobs. Needs increased joint mobility, generalized strengthening, and posture.

PLAN

1x/week for 6total visits to include therapeutic exercise, manual therapy, neuromuscular re-education, and HEP.

Next Rx: Monitor ROM, Continue with manuals, initiate postural education Rachael Wiley, DPT, CSCS

Electronically signed by Nicolaisen, Rachael Wiley (P.T.) at 4/10/2007 12:01 PM

Hyams, David (M.D.) at 4/11/2007 1532

Author: Hyams, David (M.D.) Filed: 4/11/2007 3:32 PM Status: Addendum

Service: — Encounter Date: 4/10/2007 Editor: Hyams, David (M.D.) (Physician) Author Type: Physician Creation Time: 4/11/2007 3:32 PM

I have reviewed and agree with plan.

Electronically signed by Hyams, David (M.D.) at 4/11/2007 3:32 PM

Other Orders

PHYSICAL THERAPY EVALUATION [59680588] (Active)		
Electronically signed by: Nicolaisen, Rachael Wiley (P.T.) on 04	/10/07 1201	Status: Activ
Ordering user: Nicolaisen, Rachael Wiley (P.T.) 04/10/07 1201	Authorized by: Nicolaisen, Rachael Wiley (P.T.)	
Ordering mode: Standard		
Frequency: Routine 04/10/07 -	Class: Back Office	
Quantity: 1		
Provider Details		
Provider	NPI	
Nicolaisen, Rachael Wiley (P.T.)	1700949344	

Therapy

MANUAL THERAPY TECHNIQUES, EACH 15 MINUTES [59680589] (Active)			
Electronically signed by: Nicolaisen, Rachael Wiley (P.T.) on 04	/10/07 1201	Status: Active	
Ordering user: Nicolaisen, Rachael Wiley (P.T.) 04/10/07 1201	Authorized by: Nicolaisen, Rachael Wiley (P.T.)		
Ordering mode: Standard			
Frequency: Routine 04/10/07 -	Class: Back Office		
Quantity: 1			
Provider Details			

04/10/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Other Orders (continued)

Provider

Nicolaisen, Rachael Wiley (P.T.)

NPI 1700949344

END OF ENCOUNTER

04/24/2007 - Ancillary Orders in PHARMACY CENTRAL REFILL

Visit Information

De	Department			
	Name	Address	Phone	
	PHARMACY CENTRAL REFILL	9521 DALEN ST Downey CA 90242-4847	866-206-2983	

Other Orders

dications		
RISPERDAL 2 MG ORAL TAB [61049403] (Discontinued)		
Electronically signed by: Interface, Scal_ Pharmacy on 04/24	/07 0000	Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 04/24/07 0000 Ordering mode: Standard	Authorized by: NON-KP PROVIDER	
Frequency: 04/24/07 - 06/20/07	Discontinued by: Interface, Scal_ Pharm [Duplicate Therapy]	nacy 06/20/07 1124
Provider Details		
Provider	NPI	
Interface, Scal_ Pharmacy		
NON-KP PROVIDER	_	
ABILIFY 20 MG ORAL TAB [61049356] (Discontinued) Electronically signed by: Interface, Scal_ Pharmacy on 04/24.	/07 0000	Status: Discontinu
Ordering user: Interface, Scal_ Pharmacy 04/24/07 0000 Ordering mode: Standard	Authorized by: NON-KP PROVIDER	
Frequency: 04/24/07 - 06/20/07	Discontinued by: Interface, Scal_ Pharm [Duplicate Therapy]	nacy 06/20/07 1121

Provider Details

Provider	NPI
Interface, Scal_ Pharmacy	_
NON-KP PROVIDER	_

END OF ENCOUNTER

04/24/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY

Visit Information

Provider Information

Encounter Provider

Nicolaisen, Rachael Wiley (P.T.)

04/24/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Visit Information (continued)

Department			
	Name	Address	Phone
-	PHYSICAL THERAPY	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2476

Reason for Visit

Chief Complaint

• SHOULDER PAIN (left)

Clinical Notes

Progress Notes		
Nicolaisen, Rachael Wiley (P.T.) at 4/24/200	7 0737	
Author: Nicolaisen, Rachael Wiley (P.T.) Filed: 4/24/2007 7:53 AM Status: Signed	Service: — Encounter Date: 4/24/2007 Editor: Nicolaisen, Rachael Wiley (P.T.) (Th	Author Type: THERAPIST, PHYSICAL Creation Time: 4/24/2007 7:37 AM HERAPIST, PHYSICAL)
SUBJECTIVE: no pains except of	casionally if sleeping or	n the left. Change
happened since last time he wa	s here. Has been doing t	the stretches, but with
decreased volume.		
OBJECTIVE:		
ROM: FL, ABD Full, no pai	.n	
ER 80deg, IR 70deg		
HBB <1inch difference	e to right	
Quadrant: Equal to right		
Lock: Stiff/painful compared	to right	
Rx today: Lock GR III 3x30 se	ec, reviewed HEP	
ASSESSMENT:		
Doing well. Needs normalizati PLAN:	on of joint motion, return	rn of strength for ER.
Continue with joint mobility, Rachael Wiley, DPT, CSCS	initiate ER strength. 1-	-2x more.

Electronically signed by Nicolaisen, Rachael Wiley (P.T.) at 4/24/2007 7:53 AM

Other Orders

MANUAL THERAPY TECHNIQUES, EACH 15 MINUTES [61052	690] (Active)	
Electronically signed by: Nicolaisen, Rachael Wiley (P.T.) on 04	/24/07 0753	Status: Active
Ordering user: Nicolaisen, Rachael Wiley (P.T.) 04/24/07 0753	Authorized by: Nicolaisen, Rachael Wiley (P.T.)	
Ordering mode: Standard		
Frequency: Routine 04/24/07 -	Class: Back Office	
Quantity: 1		
Provider Details		
Provider	NPI	
Nicolaisen, Rachael Wiley (P.T.)	1700949344	

04/24/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Other Orders (continued)

THERAPEUTIC EXERCISE [61052691] (Active)		
Electronically signed by: Nicolaisen, Rachael Wiley (P.T.) on 04/24/07 0753		
Ordering user: Nicolaisen, Rachael Wiley (P.T.) 04/24/07 0753	Authorized by: Nicolaisen, Rachael Wiley (P.T.)	
Ordering mode: Standard		
Frequency: Routine 04/24/07 -	Class: Back Office	
Quantity: 1		
Provider Details		
Provider	NPI	
Nicolaisen, Rachael Wiley (P.T.)	1700949344	

END OF ENCOUNTER

05/15/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY

Visit Information

Provider Information

Encounter Provider

Nicolaisen, Rachael Wiley (P.T.)

Department

Name	Address	Phone
PHYSICAL THERAPY	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2476

Reason for Visit

Chief Complaint

• SHOULDER PAIN (left)

Clinical Notes

Progress Notes

Nicolaisen, Rachael Wiley (P.T.) at 5/15/2007 1417

Author: Nicolaisen, Rachael Wiley (P.T.) Filed: 5/15/2007 2:17 PM Status: Signed	Service: — Encounter Date: 5/15/2007 Editor: Nicolaisen, Rachael Wiley (P.T.) (1	Author Type: THERAPIST, PHYSICAL Creation Time: 5/15/2007 2:17 PM THERAPIST, PHYSICAL)
SUBJECTIVE: Almost no pain since last rx. lot for work). OBJECTIVE: ROM: FL full, AB full (pain 1 right with mild pain MMT: 5/5 except ER 4/5, no pa Rx today: instructed in revers Attempted hands and elbows top ASSESSMENT:	Sometimes feels it whil EOR), Reach to AC equal t ain se wall slides (hands tou	e he's driving (drives a o right, HBB equal to aching)
Doing well. Needs increased s	trength and improved SHR	during abduction. Mild

KAISER PERMANENTE

05/15/2007 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Clinical Notes (continued)

pain with reverse wall slide with elbow and hand touching. PLAN: Pt to return in 3-4 weeks if Sx not completely resolved, otherwise DC. Rachael Wiley, DPT, CSCS

Electronically signed by Nicolaisen, Rachael Wiley (P.T.) at 5/15/2007 2:17 PM

Other Orders

Therapy		
THERAPEUTIC EXERCISE [63080274] (Active)		
Electronically signed by: Nicolaisen, Rachael Wiley (P.T.) on 0	5/15/07 1417	Status: Active
Ordering user: Nicolaisen, Rachael Wiley (P.T.) 05/15/07 1417	Authorized by: Nicolaisen, Rachael Wiley (P.T.)	
Ordering mode: Standard		
Frequency: Routine 05/15/07 -	Class: Normal	
Quantity: 1		
Provider Details		
Provider	NPI	
Nicolaisen, Rachael Wiley (P.T.)	1700949344	

END OF ENCOUNTER

05/25/2007 - Office Visit in INTERNAL MEDICINE RAIN1

Visit Information

Provider Information

Encounter Provider

Katz, Jonathan (M.D.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN1	6041 CADILLAC AVE	833-574-2273	
	Los Angeles CA 90034-1702		

Reason for Visit

Chief Complaint

NECK PAIN

Visit Diagnosis

• STRAIN NECK, MUSCLE (primary) [847.0]

Vitals

Vital Signs				Most recent update: 5/25/2007 2:27 PM
BP 112/69	Pulse 89	Temp 97 °F (36.1 °C) (Tympanic)	Ht 5' 6.5" (1.689 m)	Wt 223 lb (101.2 kg)
BMI				

35.45 kg/m²

Clinical Notes

Progress Notes

Katz, Jonathan (M.D.) at 5/25/2007 1511

Author: Katz, Jonathan (M.D.)	Service: —	Author Type: Physician
Filed: 5/25/2007 3:11 PM	Encounter Date: 5/25/2007	Creation Time: 5/25/2007 3:11 PM
Status: Signed	Editor: Katz, Jonathan (M.D.) (Physician)	

PROGRESS NOTE - Jonathan Katz, M.D., 5/25/2007

S/ 52 year-old man C/O vague, mild pain or soreness in upper anterior neck over or just medial to SCM muscle, bilaterally. The pain seemed to begin about 6 months ago after he had a sore throat that lasted for awhile (? Few weeks). Now, no pain on swallowing, but feels soreness anteriorly when he extends neck backward or touches his neck just below jaw between trachea and SCM muscle, both sides. No known injuries or unusual activities that would strain anterior neck muscles.

O/ neck: normal appearance, normal ROM without pain or stiffness. No lymphadenopathy, goiter, or other neck mass. No tenderness to palpation over areas that feel sore sometimes.

A/ Mild, vague, anterior neck pain probably due to muscle strain.

P/ -reassured
 -Ibuprofen 400mg p.o. q4h p.r.n. pain
 -return p.r.n.

Electronically signed by Katz, Jonathan (M.D.) at 5/25/2007 3:11 PM

END OF ENCOUNTER

06/20/2007 - Ancillary Orders in PHARMACY CENTRAL REFILL

Visit Information

D	е	р	а	rt	n	n	e	n	t

Name	Address	Phone
PHARMACY CENTRAL REFILL	9521 DALEN ST	866-206-2983

Printed on 1/12/24 5:33 PM

06/20/2007 - Ancillary Orders in PHARMACY CENTRAL REFILL (continued)

Visit Information (continued)

Downey CA 90242-4847

Other Orders

000 Status: Discontinued Authorized by: NON-KP PROVIDER Discontinued by: Hooks, Sarah Elizabeth (M.D.) 05/21/08 0842 NPI —
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 05/21/08 0842
NPI
NPI —
<u> </u>
—
_

Discontinued by: Interface, Scal_ Pharmacy 09/12/07 0717 [Duplicate Therapy]

Provider Details

Frequency: 06/20/07 - 09/12/07

Provider	NPI
Interface, Scal_ Pharmacy	—
NON-KP PROVIDER	_

END OF ENCOUNTER

06/22/2007 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE	833-574-2273	
	Los Angeles CA 90034-1702		

Follow-up and Dispositions

• Return in about 2 months (around 8/22/2007) for f/u.

Reason for Visit

Chief Complaint

NECK PAIN

Visit Diagnoses

HYPERHIDROSIS [780.8]

Printed on 1/12/24 5:33 PM

Reason for Visit (continued)

Vitals

Vital Signs				Most recent update: 6/22/2007 3:56 PM
BP 115/75	Pulse 75	Temp 96.9 °F (36.1 °C) (Tympanic)	Ht 5' 6.5" (1.689 m)	Wt 225 lb (102.1 kg)
BMI 35.77 kg/m²				
inical Notes				

Progress Notes		
Hooks, Sarah Elizabeth (M.D.) at 6/22/2007	7 1651	
Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 6/22/2007 5:42 PM	Encounter Date: 6/22/2007	Creation Time: 6/22/2007 4:51 PM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.E	D.) (Physician)

S: night sweats, head only (pillow is moist and feels moisture on face and scalp) x6 mo intermittent, Worried about lymphoma, normally sweats during day, saw dr buts wants sec opinion, no fever, no wt loss; no change in hygiene products nor linens, no HAs

-neck pains, ant and submandibular, one or both sides, occ sore throat, x6 mo intermittently

O: alert and appropriate, NAD OP clear RRR CTA No LAD neck/clavicular/axillary Abd soft NT no mass No edema

A/P:

*reassurance no e/o disease by history nor exam - check basic labs for further reassurance

RHM - psa (DRE next exam), sigmoid referral

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 6/22/2007 5:42 PM

Labs

CBC W DIFFERENTIAL, AUTO [66652117] (Discontinued)	
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 06/22/07	7 1651 Status: Discontinued
Ordering user: Hooks, Sarah Elizabeth (M.D.) 06/22/07 1651	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	
Frequency: Routine 06/22/07 -	Class: Normal
Quantity: 1	Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did
	not present for lab)]
Provider Details	

Printed on 1/12/24 5:33 PM

Provider

(continued)			
Hooks, Sarah	n Elizabeth (M.D.)	1.	497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_	—	BLOOD	_
REATININE, SI	ERUM [66652118] (Disconti	nued)	
	gned by: Hooks, Sarah Eliza Hooks, Sarah Elizabeth (M.D. Standard		651 Status: Discontinu uthorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Rou		C	lass: Normal
Quantity: 1			iscontinued by: Interface, Scal_Lab 09/24/07 1652 [Other (Pt. opt present for lab)]
Provider Det	tails		
Provider			NPI
Hooks, Sara	ah Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_	_	BLOOD	_
Quantity: 1	ttine 06/22/07 -	Di	lass: Normal iscontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. o ot present for lab)]
Provider		l	NPI
Hooks, Sara	ah Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source BLOOD	Collected By
Electronically sig	TING [66652120] (Discontin gned by: Hooks, Sarah Eliza Hooks, Sarah Elizabeth (M.D.	beth (M.D.) on 06/22/07 1	651 Status: Discontinu uthorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering user: P Ordering mode: Frequency: Rou Quantity: 1	Standard	, CI Di	lass: Normal iscontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. o ot present for lab)]
Provider Det	tails		
Provider			NPI
	ah Elizabeth (M.D.)		1497814131
Specimen In			
ID	Туре	Source	Collected By
—	_	BLOOD	—
IPID PANEL [6	6652121] (Discontinued)		
Electronically sig	gned by: Hooks, Sarah Eliza		
Jraering user: F	Hooks, Sarah Elizabeth (M.D.) UD/22/U7 1651 AI	uthorized by: Hooks, Sarah Elizabeth (M.D.)

Ordering mode: Standard		
Ordering mode: Standard Frequency: Routine 06/22/07 -		Class: Normal
Quantity: 1		Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)]
Provider Details		· ~
Provider		NPI
Hooks, Sarah Elizabeth (M.D.)		1497814131
Specimen Information		
ID Type	Source	Collected By
	BLOOD	—
IVER FUNCTION PANEL (T BILI, A	LT, ALKP) [66652123] (Discor	ntinued)
Electronically signed by: Hooks, Sara		
Ordering user: Hooks, Sarah Elizabe Ordering mode: Standard	h (M.D.) 06/22/07 1651	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 06/22/07 -		Class: Normal
Quantity: 1		Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did
		not present for lab)]
Provider Details		
Provider		NPI
Hooks, Sarah Elizabeth (M.D.)		1497814131
Specimen Information		
ID Type	Source	Collected By
	BLOOD	_
Electronically signed by: Hooks, Sar a Ordering user: Hooks, Sarah Elizabe t	ah Elizabeth (M.D.) on 06/22/0	
Electronically signed by: Hooks, Sar Ordering user: Hooks, Sarah Elizaber Ordering mode: Standard	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizaber Ordering mode: Standard Frequency: Routine 06/22/07 -	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal
Electronically signed by: Hooks, Sar Ordering user: Hooks, Sarah Elizaber Ordering mode: Standard	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizaber Ordering mode: Standard Frequency: Routine 06/22/07 -	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)]
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider	ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)]
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question	ah Elizabeth (M.D.) on 06/22/0 h (M.D.) 06/22/07 1651	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire	ah Elizabeth (M.D.) on 06/22/0 h (M.D.) 06/22/07 1651	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information ID Type 	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source BLOOD ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N Collected By —
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information ID Type 	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source BLOOD ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N Collected By — T 1651 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.)
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information ID Type 	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source BLOOD ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N Collected By Collected By Collected By Collected by Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did
Electronically signed by: Hooks, Sara Ordering user: Hooks, Sarah Elizabet Ordering mode: Standard Frequency: Routine 06/22/07 - Quantity: 1 Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Questionnaire Question Is the patient on thyroid medication Specimen Information ID Type 	ah Elizabeth (M.D.) on 06/22/0 th (M.D.) 06/22/07 1651 on? Enter Y - Yes; N - No Source BLOOD ah Elizabeth (M.D.) on 06/22/0	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 09/24/07 1652 [Other (Pt. did not present for lab)] NPI 1497814131 Answer N Collected By — T 1651 Authorized by: Hooks, Sarah Elizabeth (M.D.)

	06/22/2007 -	Office Visit in INTERNA	AL MEDICINE RAIN2 (continued)	
s (continued)				
Hooks, Sarah Elizabeth (M.D.)		1497814131		
Specimen Information				
ID	Туре	Source	Collected By	
_	_	BLOOD	_	
		END OF ENG	COUNTER	
	07/14/200	7 - Ancillary Orders in F	PHARMACY CENTRAL REFILL	
Information				
Department				
Name		Address	Phone	
PHARMACY	CENTRAL REFILL	9521 DALEN ST Downey CA 90242-4847	866-206-2983	
•				
er Orders Medications				
	2 MG ORAL TAB (687	08918] (Discontinued)		
		Scal_ Pharmacy on 07/14/07	0000	Status: Discontinu
Ordering us	ser: Interface, Scal_ Pha ode: Standard		Authorized by: NON-KP PROVIDER	
	07/14/07 - 08/22/07		Discontinued by: Hooks, Sarah Elizabeth	n (M.D.) 08/22/07 1034
Provider	Details			
Provide			NPI	
	e, Scal_ Pharmacy			
NON-K	P PROVIDER		—	
ABILIFY 20	MG ORAL TAB [68708	919] (Discontinued)		
Ordering us	er: Interface, Scal_ Pha	Scal_ Pharmacy on 07/14/07 rmacy 07/14/07 0000	0000 Authorized by: NON-KP PROVIDER	Status: Discontinu
	ode: Standard		Discontinued by Healts Careb Elizabeth	
Prequency: Provider	07/14/07 - 08/22/07 Details		Discontinued by: Hooks, Sarah Elizabeth	i (ivi.D.) 06/22/07 1035
Provide			NPI	
	e, Scal_ Pharmacy			
	P PROVIDER			

END OF ENCOUNTER

08/22/2007 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Authorizing Provider

Hooks, Sarah Elizabeth (M.D.)

Department				
Name	Address	Pho	one	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-170		-574-2273	
Follow-up and Dispositions				
Return in about 6 months (around 2	2/22/2008) for f/u.			
Level of Service				
Level of Service				
OUTPT EST LEVEL 3				
son for Visit				
Chief Complaint				
NECK PROBLEM (throat pain.)				
Visit Diagnoses				
Name	Code		Chronic?	
SMOKER	305.1		Yes	
PHARYNGITIS, CHRONIC	472.1		Yes	
Hospital Account			-	
Name	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2161310356	Outpatient	Closed	Restricted coverage
Guarantor Account (for Hospital Accou				
N	Relation to	Service Area		
Name	D+		Active?	Acct Type
Name Hawkins, Lawson B	Pt Self		Active?	Acct Type Personal/Family
Name Hawkins, Lawson B Address	Pt Self Phone	SCAL	Active? Yes	Acct Type Personal/Family
Hawkins, Lawson B Address	Self Phone	SCAL		
Hawkins, Lawson B	Self	SCAL 2(H)		
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618	Self Phone 323-297-3432 323-297-3432	SCAL 2(H)		
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc	Self Phone 323-297-3432 323-297-3432	SCAL 2(H)		Personal/Family
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618	Self Phone 323-297-3432 323-297-3432 count #2161310356)	SCAL 2(H) 2 x00000(O)	Yes	
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan	Self Phone 323-297-3432 323-297-3432 count #2161310356)	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber Hawkins, Lawson B	Self Phone 323-297-3432 323-297-3432 count #2161310356) DS PLAN SCR KPSA SPECIA	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family Precert #
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber	Self Phone 323-297-3432 323-297-3432 count #2161310356)	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family Precert # Subscriber #
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber Hawkins, Lawson B	Self Phone 323-297-3432 323-297-3432 count #2161310356) DS PLAN SCR KPSA SPECIA	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family Precert # Subscriber #
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber Hawkins, Lawson B	Self Phone 323-297-3432 323-297-3432 count #2161310356) DS PLAN SCR KPSA SPECIA	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family Precert # Subscriber #
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber Hawkins, Lawson B Address	Self Phone 323-297-3432 323-297-3432 count #2161310356) DS PLAN SCR KPSA SPECIA	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family Precert # Subscriber # xxxxxx8205
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber Hawkins, Lawson B Address National Statement State	Self Phone 323-297-3432 323-297-3432 count #2161310356) DS PLAN SCR KPSA SPECIA Phone	SCAL 2(H) 2 x00000(O)	Yes SCR Most recei	Personal/Family Precert # Subscriber #
Hawkins, Lawson B Address 2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618 Coverage Information (for Hospital Acc F/O Payor/Plan KP MEDICARE/KPSA SPECIAL NEE Subscriber Hawkins, Lawson B	Self Phone 323-297-3432 323-297-3432 count #2161310356) DS PLAN SCR KPSA SPECIA	SCAL 2(H) 2 x00000(O)	Yes	Personal/Family Precert # Subscriber # xxxxxx8205 nt update: 8/22/2007 10:16 /

BMI

34.61 kg/m²

Clinical Notes

Nurs	sing Note		
	at 8/22/2007 1020		
-	Author: — Filed: Status: Signed	Service: — Encounter Date: 8/22/2007	Author Type: — Creation Time: 8/22/2007 10:20 AM
	IKO THOMPSON LVN iven smoker helpline	Wed Aug 22, 2007 10:20 AM #	

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 8/22/2007 1054

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 8/22/2007 10:56 AM	Encounter Date: 8/22/2007	Creation Time: 8/22/2007 10:54 AM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.D.)	(Physician)

<u>HPI</u>

Occ bilat numbness of fingers at noc, 10mo mild throat pain, alt L and R, worried, still sweats alot

<u>Review of Systems</u> HENT: Reports sore throat. Neurological: Reports tingling.

PE Text: Not Used

Physical Exam Vitals reviewed. Constitutional: He is oriented. HENT: Head: Normocephalic. Mouth/Throat: Oropharynx is clear and moist. Cardiovascular: Normal rate and regular rhythm. Neurological: He is alert and oriented. Skin: Skin is warm. Psychiatric: He displays normal affect.

A/P: Patient Active Problem List: SMOKER [305.1ZA] - stop Possible CTS - noc splints, labs Throat pain - ENT referral for exam PT referral for shoulder f/u

RHM - declines DRE (reports nl few mo ago), sigm pending

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 8/22/2007 10:56 AM

END OF ENCOUNTER

09/12/2007 - Ancillary Orders in PHARMACY CENTRAL REFILL

Visit Information

Department				
I	Name	Address	Phone	
	PHARMACY CENTRAL REFILL	9521 DALEN ST Downey CA 90242-4847	866-206-2983	

Other Orders

lications		
RISPERDAL 2 MG ORAL TAB [74776653] (Discontinued)		
Electronically signed by: Interface, Scal_ Pharmacy on 09/12	2/07 0000	Status: Discontinued
Ordering user: Interface, Scal_ Pharmacy 09/12/07 0000	Authorized by: NON-KP PROVIDER	
Ordering mode: Standard		
Frequency: 09/12/07 - 05/21/08	Discontinued by: Hooks, Sarah Elizabe	th (M.D.) 05/21/08 0842
Provider Details		
Provider	NPI	
Interface, Scal_ Pharmacy	—	
NON-KP PROVIDER	_	
ABILIFY 20 MG ORAL TAB [74776654] (Discontinued)	007.0000	
Electronically signed by: Interface, Scal_ Pharmacy on 09/12		Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 09/12/07 0000	Authorized by: SCAL PROVIDER	
Ordering mode: Standard	Discontinued by: Hooka, Sarah Elizaba	th (MD) 05/21/08 08/2
Frequency: 09/12/07 - 05/21/08	Discontinued by: Hooks, Sarah Elizabe	un (IVI.D.) 05/21/06 0642
Provider Details		
Provider	NPI	

END OF ENCOUNTER

09/12/2007 - Office Visit in HEAD & NECK SURGERY

Visit Information

Provider Information

Encounter Provider

SCAL PROVIDER

Economou, Tasia Stephanie (M.D.)

Department

Name	Address	Phone	
HEAD & NECK SURGERY	6041 CADILLAC AVE	323-857-5505	
	Los Angeles CA 90034-1702		

Follow-up and Dispositions

• Return if symptoms worsen or fail to improve.

Reason for Visit

09/12/2007 - Office Visit in HEAD & NECK SURGERY (continued)

Reason for Visit (continued)

Chief Complaint

THROAT PAIN

Visit Diagnoses

- GERD [530.81]
- THROAT PAIN [784.1]
- COUNSELING ON SMOKING CESSATION [V65.42]

Clinical Notes

Progress Notes

Economou, Tasia Stephanie (M.D.) at 9/12/2007 0739			
Author: Economou, Tasia Stephanie	Service: —	Author Type: Physician	
(M.D.)			
Filed: 9/12/2007 7:39 AM	Encounter Date: 9/12/2007	Creation Time: 9/12/2007 7:39 AM	
Status: Signed	Editor: Economou, Tasia Stephanie (N	M.D.) (Physician)	

Pt c/o sore throat intermittantly. Smokes approx 6 cigarettes/day down from 1 ppd.

E--Nose sprayed with 1%neosynephrine and Lidocaine. Once anesthetized, a fiberoptic scope was passed and systematic review of nose, NP, OP, hypopharynx, and larynx was normal with the exception of mild erythema of arytenoids. Neck-neg

I--GERD

P--pt is on Prilosec, but still with some erythema Change to Pepcid 40mg BID Call if tho better

Electronically signed by Economou, Tasia Stephanie (M.D.) at 9/12/2007 7:39 AM

Procedures

FLEXIBLE FIBEROPTIC LARYNGOSCOPY DIAGNOSTIC [747763	52] (Active)	
Electronically signed by: Economou, Tasia Stephanie (M.D.) on 0 Ordering user: Economou, Tasia Stephanie (M.D.) 09/12/07 0708	9/12/07 0708 Authorized by: Economou, Tasia Stephanie (M.D.)	Status: Active
Ordering mode: Standard Frequency: Routine 09/12/07 -	Class: Normal	
Quantity: 1 Diagnoses GERD (GASTROESOPHAGEAL REFLUX DISEASE) [530.81 (ICD-	.9-CM)]	
THROAT PAIN [784.1 (ICD-9-CM)] Provider Details		
	NDI	
Provider Economou, Tasia Stephanie (M.D.)	NPI 1811045891	
Indications		
GERD [530.81 (ICD-9-CM)] Throat Pain [784.1 (ICD-9-CM)]		
Other Orders		
Medications		
FAMOTIDINE 40 MG ORAL TAB [74776351] (Discontinued)		
Electronically signed by: Economou, Tasia Stephanie (M.D.) o	on 09/12/07 0708 Status:	Discontinued

09/12/2007 - Office Visit in HEAD & NECK SURGERY (continued)

Other Orders (continued)

Ordering user: Economou, Tasia Stephanie (M.D.) 09/12/07	0708 Authorized by: Economou, Tasia Stephanie (M.D.)
Ordering mode: Standard Frequency: Routine 09/12/07 - 12/17/08	Class: Fill Now
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 12/17/08 09	22 [Continue Therapy]
Diagnoses	
GERD (GASTROESOPHAGEAL REFLUX DISEASE) [530.8 THROAT PAIN [784.1 (ICD-9-CM)]	;1 (ICD-9-CM)]
Provider Details	
Provider	NPI
Economou, Tasia Stephanie (M.D.)	1811045891
Indications	
GERD [530.81 (ICD-9-CM)]	
Throat Pain [784.1 (ICD-9-CM)]	
Nursing	
COUNSELING, SMOKING CESSATION [74776353] (Activ	e)
Electronically signed by: Economou, Tasia Stenhanie (M	D) on 09/12/07 0708 Status: Active

Electronically signed by: Economou, Tasia Stephanie (M.D.) on 09/12/07 0708 Status: Active Ordering user: Economou, Tasia Stephanie (M.D.) 09/12/07 0708 Authorized by: Economou, Tasia Stephanie (M.D.) Ordering mode: Standard Frequency: Routine 09/12/07 -Class: Normal Quantity: 1 Diagnoses GERD (GASTROESOPHAGEAL REFLUX DISEASE) [530.81 (ICD-9-CM)] THROAT PAIN [784.1 (ICD-9-CM)] SMOKING CESSATION COUNSELING [V65.42 (ICD-9-CM)] **Provider Details**

Provider Economou, Tasia Stephanie (M.D.) NPI 1811045891

Indications

GERD [530.81 (ICD-9-CM)] Throat Pain [784.1 (ICD-9-CM)] COUNSELING ON SMOKING CESSATION [V65.42 (ICD-9-CM)]

END OF ENCOUNTER

12/10/2007 - Ancillary Orders in PASADENA MORD

Visit Information

Department	
Name	
PASADENA MORD	

Address 450 N LAKE AVE Pasadena CA 91101-1216 Phone 626-440-0036

Other Orders

Medications

ABILIFY 5 MG ORAL TAB [85331821] (Discontinued)

Electronically signed by: Interface, Scal Pharmacy on 12/10/07 0000 Status: Discontinued Ordering user: Interface, Scal_ Pharmacy 12/10/07 0000 Authorized by: SCAL PROVIDER

12/10/2007 - Ancillary Orders in PASADENA MORD (continued)

Other Orders (continued)

Ordering mode: Standard Frequency: 12/10/07 - 03/21/08

Discontinued by: Interface, Scal_ Pharmacy 03/21/08 1045 [Duplicate Therapy]

Provider Details

Provider	NPI
Interface, Scal_ Pharmacy	_
SCAL PROVIDER	—

RISPERDAL 1 MG ORAL TAB [85331822] (Discontinued)

Electronically signed by: Interface, Scal_ Pharmacy on 12/10/0	7 0000 Status: Discontinued
Ordering user: Interface, Scal_ Pharmacy 12/10/07 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	
Frequency: 12/10/07 - 05/21/08	Discontinued by: Hooks, Sarah Elizabeth (M.D.) 05/21/08 0842
Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	_
SCAL PROVIDER	_

END OF ENCOUNTER

01/08/2008 - Ancillary Orders in PASADENA MORD

Visit Information

epartment			
Name	Address	Phone	
PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-	626-440-0036 1216	
r Orders			
ABILIFY 5 MG ORAL TAB [8	8272275] (Discontinued)		
Electronically signed by: Inter	face, Scal_ Pharmacy on 01/08	3/08 0000	Status: Discontinue
Ordering user: Interface, Scal	_ Pharmacy 01/08/08 0000	Authorized by: SCAL PROVIDER	
Ordering mode: Standard			
Frequency: 01/08/08 - 05/21	/08	Discontinued by: Hooks, Sarah Elizat	beth (M.D.) 05/21/08 0842
Provider Details			

Provider Details Provider NPI Interface, Scal_Pharmacy — SCAL PROVIDER —

END OF ENCOUNTER

03/21/2008 - Ancillary Orders in PASADENA MORD

Visit Information

Department

03/21/2008 - Ancillary Orders in PASADENA MORD (continued)

Visit Information (continued)

Name	Address	Phone	
PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-1216	626-440-0036	

Other Orders

edications		
ABILIFY 5 MG ORAL TAB [97544151] (Discontinued)		
Electronically signed by: Interface, Scal_ Pharmacy on 03/2	1/08 0000	Status: Discontinued
Ordering user: Interface, Scal_ Pharmacy 03/21/08 0000	Authorized by: SCAL PROVIDER	
Ordering mode: Standard	-	
Frequency: 03/21/08 - 10/20/08	Discontinued by: Interface, Scal_ Ph	armacy 10/20/08 0146
	[Duplicate Therapy]	
Provider Details		
Provider	NPI	
Interface, Scal_ Pharmacy	_	
SCAL PROVIDER	<u> </u>	

END OF ENCOUNTER

05/21/2008 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information			
Encounter Provider	Au	thorizing Provider	
Hooks, Sarah Elizabeth (M.D.)	Но	oks, Sarah Elizabeth (M.D.)	
Department			
Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273	
Follow-up and Dispositions			
Return in about 6 months (around	11/21/2008) for f/u.		
Level of Service			

Level of Service OUTPT EST LEVEL 4

Reason for Visit

Chief Complaint

NECK PAIN

Visit Diagnoses

Code	Chronic?	
V65.42	No	
272.4	Yes	
790.29	Yes	
305.1	Yes	
	V65.42 272.4 790.29	V65.42 No 272.4 Yes 790.29 Yes

Reason for Visit (continued)

SCREENING FOR CA, COLON	V76.51	No
GERD	530.81	No
ELEVATED TRANSAMINASE MEASUREMENT	790.4	No
PROPHYLACTIC VACCINE	V05.9	No

Vitals

Vital Signs				Most recent update: 5/21/2008 8:18 AM
BP 126/81	Pulse 71	Temp 97 °F (36.1 °C) (Tympanic)	Ht 5' 6" (1.676 m)	Wt 223 lb (101.2 kg)

BMI 35.99 kg/m²

Clinical Notes

Nursing Note		
at 5/21/2008 0830		
Author: — Filed: Status: Signed	Service: — Encounter Date: 5/21/2008	Author Type: — Creation Time: 5/21/2008 8:30 AM

>> BIKO THOMPSON LVN Wed May 21, 2008 9:18 AM After obtaining consent, and per orders of MD, injection of TDAP 0.5ml IM injection in LD. Patient instructed to remain in clinic for 20 minutes afterwards, and to report any adverse reaction to me immediately.

>> GWENDOLYN SPRAGGINS LVN Wed May 21, 2008 8:26 AM
In addition to current medication list, patient states also taking:
"a cold medicine to help me sleep", unsure of the name of it.
Colon cancer screening:
Colonoscopy:never per pt
Simoidoscopy: never per pt
FOBT:11/06 per electronic record
Fecal globin pended, pls review/add/delete sign accordingly.
Gwendolyn Spraggins LVN II

Progress Notes

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 5/21/2008 9:02 AM	Encounter Date: 5/21/2008	Creation Time: 5/21/2008 8:38 AM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.	D.) (Physician)
istory:		
nger wart xvrs, wants removal		
•		
inger wart xyrs, wants removal spots on forearms and back ags in armpits and face		
• •		
spots on forearms and back ags in armpits and face shol check	haqia, no throat pain, x months	
spots on forearms and back ags in armpits and face		is not consistently good, difficulty falling asle

History Reviewed:

Clinical Notes (continued)

I have reviewed the Medical/Surgical, Family and Social history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

ROS

PE Text: Not Used

Physical Exam Vitals reviewed. Constitutional: He is developed, nourished, and not distressed. HENT: Mouth/Throat: Oropharynx is clear and moist. No oropharyngeal exudate. Eyes: Pupils are equal, round, and reactive to light. Neck: No thyromegaly present. Cardiovascular: Normal rate and regular rhythm. Pulmonary/Chest: Effort normal and breath sounds normal. Lymphadenopathy: He has no cervical adenopathy. Neurological: He is alert. Skin: Skin is warm and dry. Multiple sm skin tags bilat upper/lower lids, axilla skin tags, few normal moles on forearms and back, thick papule R finger without obvious verrucous surface

Psychiatric: Affect normal.

A/P:

Throat pain - can f/u with ENT if desired, no red flags Derm for eyelid skin tags Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] - per Psych Insomnia - pt will d/w Psych at f/u visit GERD [530.81A] - on pepcid no c/o SMOKER [305.1ZA] - advised to quit HYPERLIPIDEMIA [272.4C] - check lipids PREDIABETES [790.29C] - glu ELEVATED TRANSAMINASE MEASUREMENT [790.4B] - repeat with f/u labs SCREENING FOR CA, COLON [V76.51A] - OB due

RHM - dtap, PSA 12/07

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 5/21/2008 9:02 AM

Labs

 Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 05/21/08 0845
 Status: Discontinued

 Ordering user: Hooks, Sarah Elizabeth (M.D.) 05/21/08 0845
 Authorized by: Hooks, Sarah Elizabeth (M.D.)

 Ordering mode: Standard
 Frequency: Routine 05/21/08 Class: Normal

 Quantity: 1
 Released by: Hooks, Sarah Elizabeth (M.D.) 05/21/08 0845

 Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. did not present for lab)]
 Other (Pt. did not present for lab)]

(continued)			
Provider De	etails		
Provider			NPI
Hooks, Sar	ah Elizabeth (M.D.)		1497814131
LUCOSE, FAS	STING [105056993] (Disconti	nued)	
lectronically s	igned by: Hooks, Sarah Eliza	beth (M.D.) on 05/21/0	08 0845 Status: Discontinu
Ordering user:	Hooks, Sarah Elizabeth (M.D.)) 05/21/08 0845	Authorized by: Hooks, Sarah Elizabeth (M.D.)
rdering mode	: Standard utine 05/21/08 -		Class: Normal
luantity: 1	duine 03/21/08 -		Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt.)
			not present for lab)]
Provider De	etails		
Provider			NPI
Hooks, Sar	ah Elizabeth (M.D.)		1497814131
Specimen lı	nformation		
ID	Туре	Source	Collected By
	—	BLOOD	—
PID PANEL [1	105056994] (Discontinued)		
	igned by: Hooks, Sarah Eliza	beth (M.D.) on 05/21/0	08 0845 Status: Discontin
rdering user:	Hooks, Sarah Elizabeth (M.D.)		Authorized by: Hooks, Sarah Elizabeth (M.D.)
rdering mode			
equency: Roi uantity: 1	utine 05/21/08 -		Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt.
			not present for lab)]
Provider De	etails		
Provider			NPI
Hooks, Sar	ah Elizabeth (M.D.)		1497814131
Specimen lı	nformation		
ID	Туре	Source	Collected By
—	—	BLOOD	_
BC W DIFFER	ENTIAL, AUTO [105056995]	(Discontinued)	
	igned by: Hooks, Sarah Eliza	· · · · · · · · · · · · · · · · · · ·	08 0845 Status: Discontinu
rdering user:	Hooks, Sarah Elizabeth (M.D.)		Authorized by: Hooks, Sarah Elizabeth (M.D.)
rdering mode			
equency: Roi uantity: 1	utine 05/21/08 -		Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. /
Ganaty. I			not present for lab)]
Provider De	etails		
Provider			NPI
Hooks, Sar	ah Elizabeth (M.D.)		1497814131
C			
Specimen li		2	
ID	Туре	Source	Collected By
—	—	BLOOD	—
T, SERUM [1	05056996] (Discontinued)		
	igned by: Hooks, Sarah Eliza		08 0845 Status: Discontinu
rdering user:	Hooks, Sarah Elizabeth (M.D.)		Authorized by: Hooks, Sarah Elizabeth (M.D.)
rdering mode			Close: Normal
equency: Ko	utine 05/21/08 -		Class: Normal

(continued)			
luantity: 1			Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)]
Provider Det	tails		
Provider			NPI
Hooks, Sara	ah Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_	_	BLOOD	_
	05056997] (Discontinued)		
	gned by: Hooks, Sarah Eli : Hooks, Sarah Elizabeth (M.I Standard		8 0845 Status: Discontine Authorized by: Hooks, Sarah Elizabeth (M.D.)
	itine 05/21/08 -		Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)]
Provider Det	tails		
Provider			NPI
Hooks, Sara	ah Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_		BLOOD	
lectronically sig	998] (Discontinued) gned by: Hooks, Sarah Eli		
lectronically signation	gned by: Hooks, Sarah Eli Hooks, Sarah Elizabeth (M.I		8 0845 Status: Discontine Authorized by: Hooks, Sarah Elizabeth (M.D.)
lectronically signature ordering user: H	gned by: Hooks, Sarah Eli Hooks, Sarah Elizabeth (M.I		
lectronically signature ordering user: H	gned by: Hooks, Sarah Eli Hooks, Sarah Elizabeth (M.I Standard		Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt.
lectronically signation ordering user: Hordering mode: requency: Rou	gned by: Hooks, Sarah Eli Hooks, Sarah Elizabeth (M.I Standard Itine 05/21/08 -		Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal
lectronically sign ordering user: H ordering mode: requency: Rou Quantity: 1 Provider Det	gned by: Hooks, Sarah Eli Hooks, Sarah Elizabeth (M.I Standard Itine 05/21/08 -		Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)]
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lectronically sig ordering user: H ordering mode: requency: Rou Quantity: 1 Provider Def Provider Hooks, Sara	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard Itine 05/21/08 - tails ah Elizabeth (M.D.)		Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131
lectronically sig ordering user: H ordering mode: requency: Rou Quantity: 1 Provider Det Provider Hooks, Sara Specimen In	gned by: Hooks, Sarah Eli Hooks, Sarah Elizabeth (M.I Standard Itine 05/21/08 - tails	D.) 05/21/08 0845	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)]
lectronically sig ordering user: H ordering mode: requency: Rou Quantity: 1 Provider Det Provider Hooks, Sara Specimen In ID —	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard Itine 05/21/08 - tails ah Elizabeth (M.D.) Iformation Type —	D.) 05/21/08 0845 Source BLOOD	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131
lectronically sign ordering user: F ordering mode: requency: Rou Quantity: 1 Provider Det Provider Det Hooks, Sara Specimen In ID — EPATITIS C AI	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard titine 05/21/08 - tails ah Elizabeth (M.D.) formation Type — NTIBODY [105056999] (Dis	D.) 05/21/08 0845 Source BLOOD scontinued)	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By —
lectronically sig ordering user: F ordering mode: requency: Rou Quantity: 1 Provider Det Provider Det Provider Det Hooks, Sara Specimen In ID EPATITIS C AI lectronically sig	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard titine 05/21/08 - tails ah Elizabeth (M.D.) formation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By —
Iectronically sign ordering user: Fordering mode: requency: Rou Quantity: 1 Provider Def Provider Def Hooks, Sara Specimen In ID EPATITIS C AI Iectronically sign ordering user: Fordering mode:	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard titine 05/21/08 - tails ah Elizabeth (M.D.) formation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By — 8 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal
Iectronically sign ordering user: Fordering mode: requency: Rou Quantity: 1 Provider Def Provider Def Hooks, Sara Specimen In ID EPATITIS C AI Iectronically sign ordering user: Fordering mode: requency: Rou	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard Ittine 05/21/08 - tails ah Elizabeth (M.D.) Iformation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard Ittine 05/21/08 -	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By 8 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt.
Iectronically signed and a second sec	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard titine 05/21/08 - tails ah Elizabeth (M.D.) formation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I Standard titine 05/21/08 - tails	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By 8 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt.
Iectronically signed and a second sec	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard Ittine 05/21/08 - tails ah Elizabeth (M.D.) Iformation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard Ittine 05/21/08 -	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By 8 0845 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)]
Iectronically signed and a second sec	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard titine 05/21/08 - tails ah Elizabeth (M.D.) formation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard titine 05/21/08 - tails ah Elizabeth (M.D.)	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By 8 0845 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI
lectronically sign ordering user: H ordering mode: requency: Rou Quantity: 1 Provider Det Provider Det Hooks, Sara Specimen In ID 	gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard titine 05/21/08 - tails ah Elizabeth (M.D.) formation Type — NTIBODY [105056999] (Dis gned by: Hooks, Sarah Eliz Hooks, Sarah Elizabeth (M.I. Standard titine 05/21/08 - tails ah Elizabeth (M.D.)	D.) 05/21/08 0845 Source BLOOD scontinued) zabeth (M.D.) on 05/21/08	Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI 1497814131 Collected By 8 0845 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. not present for lab)] NPI

Labs (continued)

ectronically s	igned by: Hooks, Sarah Elizak	oeth (M.D.) on 05/21/08	0858 Stat	tus: Discontinue
ordering user: Hooks, Sarah Elizabeth (M.D.) 05/21/08 0858		Authorized by: Hooks, Sarah Elizabeth (M.D.)		
dering mode				
requency: Routine 05/21/08 - Quantity: 1		Class: Normal Discontinued by: Interface, Scal_ Lab 08/20/08 0519 [Other (Pt. did		
Provider De	etails			
Provider			NPI	
Hooks, Sar	ah Elizabeth (M.D.)		1497814131	
Specimen l	nformation			
ID	Туре	Source	Collected By	
	<u> </u>	BLOOD		
Orders nunization/li	njection			
nunization/l	•		0560021 (Activo)	
nunization/I	THERIA, TETANUS, ACELLU			
nunization/In VACC DIPH Electronica	THERIA, TETANUS, ACELLU	izabeth (M.D.) on 05/2	1/08 0845	Status: Activ
nunization/In VACC DIPH Electronica Ordering us	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M	izabeth (M.D.) on 05/2		Status: Activ
nunization/In VACC DIPH Electronica Ordering us Ordering m	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.)	Status: Activ
NUNIZATION/IN VACC DIPH Electronica Ordering us Ordering m Frequency:	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M	izabeth (M.D.) on 05/2	1/08 0845	Status: Activ
nunization/In VACC DIPH Electronica Ordering us Ordering m	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.)	Status: Activ
NUNIZATION/IN VACC DIPH Electronica Ordering us Ordering m Frequency: Quantity: 1 Diagnoses	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.)	Status: Activ
nunization/li VACC DIPH Electronica Ordering us Ordering m Frequency: Quantity: 1 Diagnoses VACCINAT	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard Routine 05/21/08 -	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.)	Status: Activ
nunization/li VACC DIPH Electronica Ordering us Ordering m Frequency: Quantity: 1 Diagnoses VACCINAT	ITHERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard Routine 05/21/08 - TION [V05.9 (ICD-9-CM)] r Details	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.)	Status: Activ
nunization/I VACC DIPH Electronica Ordering us Ordering m Frequency: Quantity: 1 Diagnoses VACCINAT Provide	ITHERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard Routine 05/21/08 - TION [V05.9 (ICD-9-CM)] r Details	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office	Status: Activ
nunization/I VACC DIPH Electronica Ordering us Ordering m Frequency: Quantity: 1 Diagnoses VACCINAT Provide	ITHERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard Routine 05/21/08 - TION [V05.9 (ICD-9-CM)] r Details er Sarah Elizabeth (M.D.)	izabeth (M.D.) on 05/2	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office NPI	Status: Activ
nunization/I VACC DIPH Electronica Ordering us Ordering m Frequency: Quantity: 1 Diagnoses VACCINAT Provide Hooks,	THERIA, TETANUS, ACELLU Ily signed by: Hooks, Sarah El ser: Hooks, Sarah Elizabeth (M ode: Standard Routine 05/21/08 - TON [V05.9 (ICD-9-CM)] r Details er Sarah Elizabeth (M.D.) ments: Dose 0.5mL Ro	izabeth (M.D.) on 05/2 D.) 05/21/08 0845	1/08 0845 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office NPI	Status: Activ

Patient Instructions

Smoking: According to our records, you have a history of smoking or tobacco use. Quitting smoking/tobacco use greatly reduces your chances of developing serious health conditions. If you are ready to stop smoking/tobacco use, please talk with your health care team, or call 888-883-stop (7867). Calling this number will connect you with our smoker's helpline. They can provide group based or telephone based support and medication.

Letters

Letter by Hooks, Sarah Elizabeth (M.D.) on 6/20/2008

Status: Sent Letter body:



Letters (continued)

6/20/2008

MR# 000017508205

Lawson B Hawkins 2630 S. Garth Ave. Apt #1 Los Angeles, CA 90034-2151

Dear Mr. Hawkins,

Our records show that your physician has ordered lab tests that you have not yet done. Please go to a Kaiser lab for a fasting blood test at your convenience. Do not eat or drink for 12 hours prior to the lab tests. You may take your medications with water. The lab test orders will be waiting for you in the lab.

Your doctor has ordered a stool test you have not yet done. This test checks for hidden blood in your stool (you can pick up collection kit from lab anytime).

If you have already done the test(s) recently, please disregard this notice.

Sincerely,

ERICA RODRIQUEZ LVN on behalf of SARAH ELIZABETH HOOKS MD, MEDICAL DOCTOR 6041 Cadillac Ave Los Angeles, CA 90034 323-857-2000

END OF ENCOUNTER

05/22/2008 - Office Visit in OPTOMETRY

Visit Information

Provider Information

Printed on 1/12/24 5:33 PM

05/22/2008 - Office Visit in OPTOMETRY (continued)

Visit Information (continued)

Encounter Provider	Authorizing Provider	
Kanda, James Y (O.D.)	Kanda, James Y (O.D.)	

Department

Name	Address	Phone	
OPTOMETRY	1843 S LA CIENEGA BLVD Los Angeles CA 90035-4603	833-574-2273	

Level of Service

Level of Service	
WELL CARE NEW 1 TO 4 YRS	

Reason for Visit

Chief Complaint

BLURRED VISION (d cc)

Visit Diagnoses

- MYOPIA [367.1]
- ASTIGMATISM [367.20]

Clinical Notes

Nursing Note at 5/22/2008 1420 Author: ---Service: -Author Type: -Filed: Encounter Date: 5/22/2008 Creation Time: 5/22/2008 2:20 PM Status: Signed >> MADELYN S ARAGON Thu May 22, 2008 2:30 PM VISUAL ACUITY: (CC) OD: 20 / 40 OS: 20/ 40-1 Thu May 22, 2008 2:27 PM >> MADELYN S ARAGON PMHx : DM (-) HTN (-) Hyperlipedemia (+) Smoke :yes LAST EXAM: OPT: 2 yrs (outside kp EYE: ? EYE MEDICATION: none OCULAR HISTORY: Nothing reported FAMILY OCULAR HISTORY: Nothing reported TONOMETRY: NCT , OD 15 ,OS 15 , at 2:26 PM

Progress Notes

Kanda, James Y (O.D.) at 5/22/2008 1435	
Author: Kanda, James Y (O.D.)	Service: —
Filed: 5/22/2008 2:48 PM	Encounter Date: 5/22/2008

Service: — Author Type: OPTOMETRIST (O.D.) Encounter Date: 5/22/2008 Creation Time: 5/22/2008 2:35 PM Editor: Kanda, James Y (O.D.) (OPTOMETRIST (O.D.))

History

Status: Signed

05/22/2008 - Office Visit in OPTOMETRY (continued)

Clinical Notes (continued)

ROS

PE Text: Not Used

Physical Exam

Nursing Notes:

>> MADELYN S ARAGON Thu May 22, 2008 2:30 PM VISUAL ACUITY:(CC) OD: 20 / 40 OS: 20/ 40-1 >> MADELYN S ARAGON Thu May 22, 2008 2:27 PM PMHx : DM (-) HTN (-) Hyperlipedemia (+) Smoke :yes

LAST EXAM: OPT: 2 yrs (outside kp EYE: ? EYE MEDICATION: none OCULAR HISTORY: Nothing reported FAMILY OCULAR HISTORY: Nothing reported

TONOMETRY: NCT , OD 15 , OS 15 , at 2:26 PM

Reason for visit: blurred distance vision, especially at night; reads at near without glasses

Lensometry: OD: -2.75 -0.25 x 049 OS: -2.75 -0.50 x 088

Autorefraction: OD: -3.75 -0.25 x 065 OS: -3.25 -0.75 x 088

Subjective: OD: -3.75 -0.50 x 060 20/20 OS: -3.25 -1.00 x 090 +1.75 add

20/20 OU: 20/20

Pupils: no APD

Slit lamp exam: lids & lashes: normal OU conjunctiva: normal OU anterior chamber: clear OU cornea: normal OU lens: clear OU

Fundus exam:

KAISER PERMANENTE

05/22/2008 - Office Visit in OPTOMETRY (continued)

Clinical Notes (continued)

C/D: OD:.5 OS:.5 disc, macula, vessels: normal OU

Assessment: see diagnosis

Plan: Rx per subjective refraction

Spectacle Prescription:

OD: -3.75 -0.50 x 060 OS: -3.25 -1.00 x 090

Expires: 2 years

Electronically signed by Kanda, James Y (O.D.) at 5/22/2008 2:48 PM

END OF ENCOUNTER

06/04/2008 - Ancillary Orders in PASADENA MORD

Visit Information

Department

Name PASADENA MORD Address 450 N LAKE AVE Pasadena CA 91101-1216 Phone 626-440-0036

Other Orders

Medications

DIPHENHYDRAMINE HCL 50 MG ORAL CAP [106596034] (Discontinued)

Electronically signed by: Interface, Scal_ Pharmacy on 06/04/08 0000 Ordering user: Interface, Scal_ Pharmacy 06/04/08 0000 Auth Ordering mode: Standard Frequency: 06/04/08 - 07/28/09 Disc

Authorized by: SCAL PROVIDER

Status: Discontinued

Discontinued by: Hooks, Sarah Elizabeth (M.D.) 07/28/09 1030

Provider Details

06/04/2008 - Ancillary Orders in PASADENA MORD (continued)

Other Orders (continued)

Provider	NPI
Interface, Scal_ Pharmacy	_
SCAL PROVIDER	_

ABILIFY 5 MG ORAL TAB [106596033] (Discontinued)

Electronically signed by: Interface, Scal_ Pharmacy on 06/04/08	3 0000 Status: Discontinued	
Ordering user: Interface, Scal_ Pharmacy 06/04/08 0000	Authorized by: SCAL PROVIDER	
Ordering mode: Standard		
Frequency: 06/04/08 - 10/20/08	Discontinued by: Interface, Scal_ Pharmacy 10/20/08 0146	
	[Duplicate Therapy]	
Provider Details		
Provider	NPI	
Interface, Scal_ Pharmacy	—	
SCAL PROVIDER	_	

END OF ENCOUNTER

06/04/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information		
Encounter Provider	Authorizing Provider	
Bernstein, Leslie Erin (M.D.)	Bernstein, Leslie Erin (M.D.)	

Department

Name	Address	Phone	
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273	

Follow-up and Dispositions

• Return in about 4 weeks (around 7/2/2008).

Level of Service

Level of Service	
LOS NOT REQUIRED	

Reason for Visit

Chief Complaint

SKIN LESION

Visit Diagnoses

- VERRUCA VULGARIS [078.10]
- SKIN TAG [701.9]

Vitals

06/04/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Vitals (continued)		
Vital Signs		Most recent update: 6/4/2008 9:11 AM
BP 105/66	Pulse 68	
Clinical Notes		
Nursing Note		
at 6/4/2008 0915		
Author: — Filed: Status: Signed	Service: — Encounter Date: 6/4/2008	Author Type: — Creation Time: 6/4/2008 9:15 AM
>> ERICA A RODRIGUEZ MA Gave pt. Number for smoking	Wed Jun 4, 2008 9:11 AM g hotline. 1(888)883-STOP(786	57)
Center: WEST LOS ANGELES Appointment Type: CON Appos Provider Assigned: Bernstes Date Created By	Wed Jun 4, 2008 9:08 AM alist: null,null Department; intment Priority: ROUTINE Boo in, MD,Leslie Appointment Da lids, wants removal, also 1 f	oking Priority: null ate: 06/04/2008

Progress Notes

Author: Bernstein, Leslie Erin (M.D.)	Service: —	Author Type: Physician
Filed: 6/4/2008 9:21 AM	Encounter Date: 6/4/2008	Creation Time: 6/4/2008 9:15 AM
Status: Signed	Editor: Bernstein, Leslie Erin (M.D.) (Physician)

History:

CC wart on R 2nd finger x few yrs

Never tx'd. Also skin tags for many yrs under arms and on face that don't itch/bleed/bother pt.

ROS

PE Text: Not Used

Physical Exam Skin: Lesion (R 2nd digit papule; B eyelids and axillary papules) noted.

A/P

R 2nd digit wart v other-cryo today. F/u 4 wk

Eyelid/axillary tags v. Other-plastic surgery cosmetic clinic handout given for pt to schedule appt

Pt agrees w/above

KAISER PERMANENTE

06/04/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Clinical Notes (continued)

Electronically signed by Bernstein, Leslie Erin (M.D.) at 6/4/2008 9:21 AM

Procedures

CRYOTHERAPY OF SKIN LESION W LIQUID NITROGEN. [106611527] (Active)	
Electronically signed by: Bernstein, Leslie Erin (M.D.) on 06	6/04/08 0922	Status: Active
Ordering user: Bernstein, Leslie Erin (M.D.) 06/04/08 0922	Authorized by: Bernstein, Leslie Erin (M.D.)	
Ordering mode: Standard		
Frequency: Routine 06/04/08 -	Class: Normal	
Quantity: 1		
Diagnoses		
VERRUCA VULGARIS [078.10 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Bernstein, Leslie Erin (M.D.)	1104048776	
Indications		

VERRUCA VULGARIS [078.10 (ICD-9-CM)]

Patient Instructions

A total body skin exam (cancer screening) is recommended. You may schedule this appointment with dermatology.

Recommended Sun Protection Regimen:

Wear a wide-brimmed hat outdoors.

Reapply sunscreen several times daily.

Recommended sunscreen: Vanicream SPF 60(www.coolibar.com)

Electronically signed by Bernstein, Leslie Erin (M.D.) at 6/4/2008 9:22 AM

END OF ENCOUNTER

07/02/2008 - Ancillary Orders in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information

Encounter Provider

Bernstein, Leslie Erin (M.D.)

Department

Name

Address

Phone

07/02/2008 - Ancillary Orders in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Visit Information (continued)

DERMATOLOGY VENICE A 4TH FLOOR

5971 VENICE BLVD Los Angeles CA 90034-1713 833-574-2273

Other Orders

dications	
CLOTRIMAZOLE 1 % TOP CREA [109869241] (Discontinue	d)
Electronically signed by: Interface, Scal_ Pharmacy on 07/02	2/08 0000 Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 07/02/08 0000 Ordering mode: Standard	Authorized by: Bernstein, Leslie Erin (M.D.)
Frequency: 07/02/08 - 07/28/09	Discontinued by: Hooks, Sarah Elizabeth (M.D.) 07/28/09 1030
Provider Details	
Provider	NPI
Bernstein, Leslie Erin (M.D.)	1104048776
Interface, Scal_ Pharmacy	_

END OF ENCOUNTER

07/02/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information . . .

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ł	Provider Information	
I	Encounter Provider	Authorizing Provider
1	Bernstein, Leslie Erin (M.D.)	Bernstein, Leslie Erin (M.D.)

Department

Name	Address	Phone
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273

Follow-up and Dispositions

Return in about 6 weeks (around 8/13/2008). ٠

Level of Service

Level of Service	
LOS NOT REQUIRED	

Reason for Visit

Chief Complaint

FOLLOW UP EXAM

Visit Diagnoses

- TINEA PEDIS [110.4] ٠
- INTERTRIGO [695.89] ٠
- VERRUCA VULGARIS [078.10] •

Vitals

07/02/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Vitals (continued)		
Vital Signs		Most recent update: 7/2/2008 9:13 AM
BP 123/78	Pulse 62	
Clinical Notes		
Nursing Note		
at 7/2/2008 0930		
Author: — Filed: Status: Signed	Service: — Encounter Date: 7/2/2008	Author Type: — Creation Time: 7/2/2008 9:30 AM
<pre>>> ERICA A RODRIGUEZ 1.Patient encouraged 2.STRATEGIES TO HELP Getting ready to s to patient. Tobacco impacts f 1. Skin aging 2. Psoriasis 3. Pustular Psor</pre>	to stop smokin PATIENT: stop smoking brochure &1-88 for skin:	13 AM 8-883 STOP tear off sheet given
4. Premature hai 5. Premature gre	ey hair	
6. Yellow finger	ſS	

Progress Notes

Author: Bernstein, Leslie Erin (M.D.)	Service: —	Author Type: Physician
Filed: 7/2/2008 9:32 AM	Encounter Date: 7/2/2008	Creation Time: 7/2/2008 9:32 AM
Status: Signed	Editor: Bernstein, Leslie Erin (M.D.)	(Physician)

History: CC R 2nd finger wart better after freezing

Peeled off. Also buttock and feet rash better w/clotrimazole-pt used a little and ran out.

ROS

PE Text: Not Used

Physical Exam Skin: Lesion (R 2nd digit papule; sacral scaly, erythematous plaque; B toeweb scale/maceration) noted.

A/P

R 2nd digit wart v other-cryo

Sacral intertrigo-clotrimazole

07/02/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Clinical Notes (continued)

Tinea pedis-clotrimazole

F/u 6 wk

Electronically signed by Bernstein, Leslie Erin (M.D.) at 7/2/2008 9:32 AM

Procedures

RYOTHERAPY OF SKIN LESION W LIQUID NITROGEN. [1098		
lectronically signed by: Bernstein, Leslie Erin (M.D.) on 07/02/		Status: Activ
rdering user: Bernstein, Leslie Erin (M.D.) 07/02/08 0933 rdering mode: Standard	Authorized by: Bernstein, Leslie Erin (M.D.)	
requency: Routine 07/02/08 -	Class: Normal	
uantity: 1	Class. Normal	
iagnoses		
ERRUCA VULGARIS [078.10 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Bernstein, Leslie Erin (M.D.)	1104048776	
Indications		
VERRUCA VULGARIS [078.10 (ICD-9-CM)]		
Orders		
Orders edications		
	rd)	
edications	•	us: Discontinuec
edications CLOTRIMAZOLE 1 % TOP CREA [109866484] (Discontinue Electronically signed by: Bernstein, Leslie Erin (M.D.) on 07 Ordering user: Bernstein, Leslie Erin (M.D.) 07/02/08 0933	•	us: Discontinuec
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END OF ENCOUNTER

07/04/2008 - Ancillary Orders in PASADENA MORD

07/04/2008 - Ancillary Orders in PASADENA MORD (continued)

Visit Information

Department				
Name	Address	Phone		
PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-1216	626-440-0036		

Other Orders

edications				
ABILIFY 5 MG ORAL TAB [110138377] (Discontinued)				
Electronically signed by: Interface, Scal_ Pharmacy on 07/04	I/08 0000 Status: Discontinued			
Ordering user: Interface, Scal_ Pharmacy 07/04/08 0000	Authorized by: SCAL PROVIDER			
Ordering mode: Standard				
Frequency: 07/04/08 - 10/20/08	Discontinued by: Interface, Scal_ Pharmacy 10/20/08 0146			
	[Duplicate Therapy]			
Provider Details				
Provider	NPI			
Interface, Scal_ Pharmacy	_			
SCAL PROVIDER	_			

END OF ENCOUNTER

07/23/2008 - Office Visit in HEAD & NECK SURGERY

Visit Information

Provider Information		
Encounter Provider	Authorizing Provider	
Economou, Tasia Stephanie (M.D.)	Economou, Tasia Stephanie (M.D.)	

Department

Name	Address	Phone	
HEAD & NECK SURGERY	6041 CADILLAC AVE	323-857-5505	
	Los Angeles CA 90034-1702		

Follow-up and Dispositions

• Return callf or results.

Level of Service

Level of Service	
OUTPT EST LEVEL 3	

Reason for Visit

Chief Complaint

• FOLLOW UP CARE (NECK PAIN)

Visit Diagnosis

• CERVICALGIA (primary) [723.1]

Vitals

07/23/2008 - Office Visit in HEAD & NECK SURGERY (continued) Vitals (continued) Vital Signs Most recent update: 7/23/2008 8:16 AM ΒP BMI Pulse Ht Wt 120/69 72 5' 7" (1.702 m) 220 lb (99.8 kg) 34.46 kg/m² **Clinical Notes Nursing Note** at 7/23/2008 0830 Author: -Service: -Author Type: — Encounter Date: 7/23/2008 Creation Time: 7/23/2008 8:30 AM Filed: Status: Signed >> SONYA MILLSTEIN RN Wed Jul 23, 2008 8:18 AM PROACTIVE CARE ACTIONS Proactive Office Encounter Actions: Current smoker: Tobacco/Smoking Counseling V-code and Patient Instructions for AVS staged Patient presents with: FOLLOW UP CARE - NECK PAIN Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] SMOKER [305.1ZA] HYPERLIPIDEMIA [272.4C] PREDIABETES [790.29C] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A] BP 120/69 | Pulse 72 | Ht 5' 7" (1.702 m) | Wt 220 lb (99.791 kg) Last Pap Smear : none found Last Mammogram Test: none found No results found for this basename: HGA1C No Known Drug Aller* Pt states stop smoking 7-21-08 SONYA MILLSTEIN RN **Procedures** Filed on 7/23/2008 0000

Procedure Orders 1. CT SOFT TISSUE OF NECK, W CONTRAST [112426362] ordered by Economou, Tasia Stephanie (M.D.) at 07/23/08 0900

CT NECK WITH CONTRAST -TECHNIQUE: Contiguous axial 5 mm images were obtained from the skull base to the lung apices. Coronal and sagittal reformatted images were performed. There were no comparison studies at present. The study demonstrates the airway to be patent. No acute fracture or dislocation is identified within the cervical spine. Mild

Clinical Notes (continued)

degenerative changes are seen in the lower cervical spine with anterior osteophyte formation and intervertebral disc space narrowing. The lung apices are clear. No enhancing mass lesions are identified in the neck. Incidental note is made of a polypoid area of mucosal thickening in the floor of the left maxillary sinus measuring approximately 1.5 cm in greatest transverse dimension. Differential diagnosis includes possible mucus retention cyst vs polyp. No other significant abnormality is identified at this time. No explanation for left sided neck pain is noted. IMPRESSION: 1. Incidental 1.5 cm left maxillary sinus mucus retention

cyst vs polyp. Otherwise essentially unremarkable post contrast CT scan of the neck. No acute pathology is identified. No explanation for left sided neck pain is noted. No enhancing mass lesions are seen.

Electronically signed by Hsu, Christopher Ta-Wei (M.D.) at 7/29/2008 4:05 PM

Progress Notes

Economou, Tasia Stephanie (M.D.) at 7/23/2008 1311		
Author: Economou, Tasia Stephanie (M.D.)	Service: —	Author Type: Physician
Filed: 7/23/2008 1:15 PM Status: Signed	Encounter Date: 7/23/2008 Editor: Economou, Tasia Stephanie	Creation Time: 7/23/2008 1:11 PM (M.D.) (Physician)

History:

Pt c/o sore throat intermittantly. He points to left JD area He quit tobacco 2 days ago Had GERD but takes meds and doesn't think that's it

History Reviewed:

I have reviewed the Medical/Surgical and Social history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Constitutional: Negative for fever. HENT: There is no stridor.

PE Text BP 120/69 | Pulse 72 | Ht 1.702 m (5' 7") | Wt 99.791 kg (220 lb) Tobacco Use: Quit Packs/Day: 0.50 Years: 20 Quit date: 07/21/2008 Comment: 8 cigarettes per day

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) SMOKER (305.1ZA) HYPERLIPIDEMIA (272.4C)

Printed on 1/12/24 5:33 PM

Clinical Notes (continued)

PREDIABETES (790.29C) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A)

Current outpatient prescriptions : ABILIFY 5 MG ORAL TAB, TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME, Disp: 120, Rfl: 2; CLOTRIMAZOLE 1 % TOP CREA, APPLY TO AFFECTED AREA BID, Disp: 60, Rfl: 1; CLOTRIMAZOLE 1 % TOP CREA, APPLY TO AFFECTED AREA 2 TIMES DAILY, Disp: 30, Rfl: 0; ABILIFY 5 MG ORAL TAB, TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME, Disp: 120, Rfl: 1 DIPHENHYDRAMINE HCL 50 MG ORAL CAP, TAKE 1 CAPSULE ORALLY EVERY NIGHT AT BEDTIME AS NEEDED, Disp: 30, Rfl: 1; ABILIFY 5 MG ORAL TAB, TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME AS NEEDED, Disp: 30, Rfl: 1; ABILIFY 5 MG ORAL TAB, TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME, Disp: 120, Rfl: 2; SIMVASTATIN 40 MG ORAL TAB, 1 TAB PO DAILY AT BEDTIME, Disp: 90, Rfl: 3; FAMOTIDINE 40 MG ORAL TAB, 1 TAB PO BID, Disp: 200, Rfl: 3

E---Physical Exam---(fiberoptic scope used with topical anesthesia applied after verbal permission obtained)) NAD, able to communicate without difficulty Head/face: normocephalic, atraumatic Cranial nerves II-XII grosssly intact Parotid glands--no masses palpated Submandibular glands--soft and without lesion No sinus tenderness on palpation Eves-- PERRL. EOM full Nose-- anterior rhinoscopy revealed moist mucosa, no masses or lesions seen septum midline turbinates normal Nasopharynx--mucosa moist ET--clear of lesion Oral cavity--Mucosa moist Lips without lesions No masses/lesions in oral cavity FOM --soft and without lesion Palate without lesion and nl elevation Tongue--soft and without masses Tonsils--normal Neck--adenopathy--none, but stocky neck Thyroid--normal size and soft without nodules No masses IL---larynx--true vocal cords mobile and clear False vocal cords clear of lesion Pyriform sinuses open and without mucosal lesion Arytenoids--clear of lesion but with erythema

Physical Exam

I/P---I so not see any abnormality but pt is certain of his pain, so we will get a CT Do not restart smoking Call or e-mail me after study is finished to discuss results.

Tasia S Economou, MD Department of Head and Neck Surgery

Clinical Notes (continued)

Electronically signed by Economou, Tasia Stephanie (M.D.) at 7/23/2008 1:15 PM

Imaging

Imaging CT SOFT TISSUE OF NECK, W CONTRAST [112426362] (Final result) Electronically signed by: Economou, Tasia Stephanie (M.D.) on 07/23/08 0900 This order may be acted on in another encounter. Ordering user: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Authorized by: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Ordering user: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Authorized by: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Ordering mode: Standard Frequency: Routine 07/23/08 - Quantity: 1 Diagnoses CERVICALGIA. [723.1 (ICD-9-CM)] Provider Details Provider Details Questionnaire Questionnaire Question Answer DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE? No Scheduling instructions Patient must be able to lie flat and be cooperative. Order comments: Reason:pt c/o pain left neck along carotid sheath Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST Order status: Completed Accession number: 28587059 Filed on: 07/29/08 1605 Accession number: 28587059 Filed on: 07/29/08 1605 Accession number: 28587059 Filed on: 07/29/08	Status: Completed (M.D.)
Electronically signed by: Economou, Tasia Stephanie (M.D.) on 07/23/08 0900 This order may be acted on in another encounter. Ordering user: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Authorized by: Economou, Tasia Stephanie (Ordering mode: Standard Frequency: Routine 07/23/08 - Quantity: 1 Diagnoses CERVICALGIA. [723.1 (ICD-9-CM)] Provider Details Provider Details Questionnaire Questionnaire Questionnaire Questionnaire Questionnaire DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE? Scheduling instructions Patient must be able to lie flat and be cooperative. Order comments: Reason:pt c/o pain left neck along carotid sheath Exam normal Please check for abnormality CT SOFT TISSUE OF NECK, W CONTRAST [112426362] Order status: Completed Accession number: 28587059 Narrative: Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST	
This order may be acted on in another encounter. Ordering user: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Authorized by: Economou, Tasia Stephanie (Ordering mode: Standard Frequency: Routine 07/23/08 - Quantity: 1 Diagnoses CERVICALGIA. [723.1 (ICD-9-CM)] Provider Details Provider Details Questionnaire Questionnaire Questionnaire Question Answer DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE? Scheduling instructions Patient must be able to lie flat and be cooperative. Order comments: Reason:pt c/o pain left neck along carotid sheath Exam normal Please check for abnormality CT SOFT TISSUE OF NECK, W CONTRAST [112426362] Order status: Completed Accession number: 28587059 Narrative: Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST	
Frequency: Routine 07/23/08 - Class: Normal Lab status: Final result Quantity: 1 Lab status: Final result Diagnoses CERVICALGIA. [723.1 (ICD-9-CM)] Provider Details Provider Details Questionnaire NPI Questionnaire Questionnaire Question Answer DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE? No Scheduling instructions Patient must be able to lie flat and be cooperative. No Order comments: Reason:pt c/o pain left neck along carotid sheath Exam normal Please check for abnormality of CT SOFT TISSUE OF NECK, W CONTRAST [112426362] Resulted: 07/29/08 2113, Resulted: 07/29/08 2113, Resulted: 07/29/08 2113, Resulted: 07/29/08 1605 Order status: Completed Accession number: 28587059 Narrative: Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST	
Quantity: 1 Lab status: Final result Diagnoses CERVICALGIA. [723.1 (ICD-9-CM)] Provider Details Provider Details Provider Details NPI Economou, Tasia Stephanie (M.D.) 1811045891 Questionnaire Answer DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE? No Scheduling instructions Patient must be able to lie flat and be cooperative. No Order status: Completed Accession number: 28587059 Narrative: Filed on: 07/29/08 1605 Accession number: 28587059 Narrative: Filed on: 07/29/08 1605	
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Accession number: 28587059 Narrative: Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST	
ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE?->No Transcription	
Type ID Date and Time Dictating	Provider
	stopher Ta-Wei

Imaging (continued)

IMPRESSION:

1. Incidental 1.5 cm left maxillary sinus mucus retention cyst vs polyp. Otherwise essentially unremarkable post contrast CT scan of the neck. No acute pathology is identified. No explanation for left sided neck pain is noted. No enhancing mass lesions are seen.

Reviewed by

Economou, Tasia Stephanie (M.D.) on 11/26/08 1342 Economou, Tasia Stephanie (M.D.) on 07/29/08 2043

CT SOFT TISSUE OF NECK, W CONTRAST [112426362]

Resulted: 07/28/08 2114, Result status: In process

Order status: Completed Filed on: 07/28/08 2114 Accession number: 28587059 Resulting lab: SCAL RADIOLOGY INTERFACE Narrative: Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE?->No

Transcription

Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	28587059	7/29/2008 3:07 PM	Hsu, Christopher Ta-Wei (M.D.)

Signed by Hsu, Christopher Ta-Wei (M.D.), MEDICAL DOCTOR on 07/29/08 at 1605

CT NECK WITH CONTRAST -

TECHNIQUE: Contiguous axial 5 mm images were obtained from the skull base to the lung apices. Coronal and sagittal reformatted images were performed. There were no comparison studies at present. The study demonstrates the airway to be patent. No acute fracture or dislocation is identified within the cervical spine. Mild degenerative changes are seen in the lower cervical spine with anterior osteophyte formation and intervertebral disc space narrowing. The lung apices are clear. No enhancing mass lesions are identified in the neck. Incidental note is made of a polypoid area of mucosal thickening in the floor of the left maxillary sinus measuring approximately 1.5 cm in greatest transverse dimension. Differential diagnosis includes possible mucus retention cyst vs polyp. No other significant abnormality is identified at this time. No explanation for left sided neck pain is noted. IMPRESSION:

1. Incidental 1.5 cm left maxillary sinus mucus retention cyst vs polyp. Otherwise essentially unremarkable post contrast CT scan of the neck. No acute pathology is identified. No explanation for left sided neck pain is noted. No enhancing mass lesions are seen.

Imaging (continued)

Economou, Tasia Stephanie (M.D.) on 11/26/08 1342 Economou, Tasia Stephanie (M.D.) on 07/29/08 2043

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present
ndications				
Cervicalgia (723.1 (ICI	D-9-CM)]			
Cervicalgia [723.1 (ICI	D-9-CM)]			
	D-9-CM)]			
All Reviewers List	D-9-CM)] phanie (M.D.) on 11/26/	2008 13:42		
All Reviewers List Economou, Tasia Step				
All Reviewers List Economou, Tasia Step	ohanie (M.D.) on 11/26/2			
All Reviewers List Economou, Tasia Step	ohanie (M.D.) on 11/26/2			
All Reviewers List Economou, Tasia Step	ohanie (M.D.) on 11/26/2			

Procedures

FLEXIBLE FIBEROPTIC LARYNGOSCOPY DIAGNOSTIC [112426363] (Active)			
Electronically signed by: Economou, Tasia Stephanie (M.D.) on 0	7/23/08 0900	Status: Active	
Ordering user: Economou, Tasia Stephanie (M.D.) 07/23/08 0900 Ordering mode: Standard	Authorized by: Economou, Tasia Stephanie (M.D.)		
Frequency: Routine 07/23/08 - Quantity: 1	Class: Normal		
Diagnoses CERVICALGIA. [723.1 (ICD-9-CM)]			
Provider Details			
Provider	NPI		
Economou, Tasia Stephanie (M.D.)	1811045891		
Indications			
Cervicalgia [723.1 (ICD-9-CM)]			

END OF ENCOUNTER

08/06/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information		
Encounter Provider	Authorizing Provider	
Bernstein, Leslie Erin (M.D.)	Bernstein, Leslie Erin (M.D.)	

Department

Name	Address	Phone	
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273	

Follow-up and Dispositions

• Return in about 6 weeks (around 9/17/2008).

Level of Service

Visit Information (continued)

Level of Service LOS NOT REQUIRED

Reason for Visit

Chief Complaints

- WART
- FUNGAL INFECTION, SKIN

Visit Diagnoses

- TINEA PEDIS [110.4]
- VERRUCA VULGARIS [078.10]
- KNUCKLE PADS [728.79]

Vitals

Vital Signs		Most recent update: 8/6/2008 9:19 AM
BP	Pulse	
127/83	69	

Clinical Notes (group 1 of 2)

Nursing Note at 8/6/2008 0900 Author: — Author Type: — Filed: Encounter Date: 8/6/2008 Creation Time: 8/6/2008 9:00 AM Status: Signed Wed Nug. 6 2008 9:24 AM

>> JAMES L SKINNER MA Wed Aug 6, 2008 9:24 AM Member allergies and medication was reviewed.

Clinical Notes (group 2 of 2)

Progress Notes

Bernstein, Leslie Erin (M.D.) at 8/6/2008 0920

Author: Bernstein, Leslie Erin (M.D.) Filed: 8/6/2008 9:20 AM Status: Signed Service: — Author Type: Physician Encounter Date: 8/6/2008 Creation Time: 8/6/2008 9:20 AM Editor: Bernstein, Leslie Erin (M.D.) (Physician)

History:

CC wart and rash on feet/buttock better w/tx

ROS

PE Text: Not Used

Physical Exam

Skin: Lesion (R 2nd digit papule; no buttock/perianal lesion apparent; slight toeweb scale; I 2nd and 3rd digit PIP plaques) noted.

A/P

Wart-r 2nd digit-cryo today

L 2nd/3rd digit knuckle pads v. Other-carmol cream. If not better in 2-3 m w/tx, bx-pt agrees

Tinea pedis-cont clotrimazole

F/u 6 wk

Electronically signed by Bernstein, Leslie Erin (M.D.) at 8/6/2008 9:20 AM

Procedures

CRYOTHERAPY OF SKIN LESION W LIQUID NITROGEN. [114144712] (Active)			
Electronically signed by: Bernstein, Leslie Erin (M.D.) on 08/06	6/08 0922	Status: Active	
Ordering user: Bernstein, Leslie Erin (M.D.) 08/06/08 0922	Authorized by: Bernstein, Leslie Erin (M.D.)		
Ordering mode: Standard			
Frequency: Routine 08/06/08 -	Class: Normal		
Quantity: 1			
Diagnoses			
VERRUCA VULGARIS [078.10 (ICD-9-CM)]			
Provider Details			
Provider	NPI		
Bernstein, Leslie Erin (M.D.)	1104048776		
Indications			

Procedures (continued)

VERRUCA VULGARIS [078.10 (ICD-9-CM)]

Other Orders

Medications CARMOL 20 20 % TOP CREA [114144681] (Discontinued) Electronically signed by: Bernstein, Leslie Erin (M.D.) on 08/06/08 0921 Status: Discontinued Ordering user: Bernstein, Leslie Erin (M.D.) 08/06/08 0921 Authorized by: Bernstein, Leslie Erin (M.D.) Ordering mode: Standard Frequency: Routine 08/06/08 - 04/25/12 Class: Fill Now Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1002 Diagnoses KNUCKLE PADS. [728.79 (ICD-9-CM)] **Provider Details** Provider NPI Bernstein, Leslie Erin (M.D.) 1104048776 Indications

KNUCKLE PADS [728.79 (ICD-9-CM)]

END OF ENCOUNTER

08/12/2008 - Ancillary Orders in PASADENA MORD Visit Information Department Address Name Phone PASADENA MORD 450 N LAKE AVE 626-440-0036 Pasadena CA 91101-1216 Other Orders Medications

ABILIFY 5 MG ORAL TAB [114788558] (Discontinued)		
Electronically signed by: Interface, Scal_ Pharmacy on 08/12/	08 0000	Status: Discontinued
Ordering user: Interface, Scal_ Pharmacy 08/12/08 0000	Authorized by: SCAL PROVIDER	
Ordering mode: Standard		
Frequency: 08/12/08 - 10/20/08	Discontinued by: Interface, Scal_ Pha	rmacy 10/20/08 0146
	[Duplicate Therapy]	
Provider Details		
Provider	NPI	
FIONDE		
Interface, Scal_ Pharmacy	_	
SCAL PROVIDER	_	

END OF ENCOUNTER

09/17/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information	

Encounter Provider Bernstein, Leslie Erin (M.D.)

.

Department

Name	Address	Phone
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273

Authorizing Provider

Bernstein, Leslie Erin (M.D.)

Follow-up and Dispositions

• Return in about 4 weeks (around 10/17/2008).

Level of Service

Level of Service	•	
LOS NOT REQU	IIRED	

Reason for Visit

Chief Complaint

• FOLLOW UP EXAM (f/u R 2nd finger wart, feet and I hand)

Visit Diagnoses

- VERRUCA VULGARIS [078.10]
- TINEA PEDIS [110.4]
- KNUCKLE PADS [728.79]

Vitals

Vital Signs		Most recent update: 9/17/2008 9:40 AM
BP 117/80	Pulse 75	

Clinical Notes

Progress Notes Bernstein, Leslie Erin (M.D.) at 9/17/2008 1016 Author: Bernstein, Leslie Erin (M.D.) Service: — Author Type: Physician

Author: Bernstein, Leslie Erin (M.D.)	Service: —	Author Type: Physician
Filed: 9/17/2008 10:17 AM	Encounter Date: 9/17/2008	Creation Time: 9/17/2008 10:16 AM
Status: Signed	Editor: Bernstein, Leslie Erin (M.D.)	(Physician)

History:

CC f/u r 2nd digit wart-better w/cryo

L hand knuckle pads unchanged but not bothering pt

Feet better w/cream

Pt wants only these skin lesions/issues examined today.

Clinical Notes (continued)

PE Text: Not Used

Physical Exam

Skin: Lesion (r 2nd digit papule; I 2nd/3rd digit plaques; feet scaliness) noted.

A/P

R 2nd digit wart-cryo today. F/u 1 m

Feet tinea-con't clotrimazole-pt agrees. F/u 1 m

L hand knuckle pads v other-offered bx-pt to consider-he will email Dr. Bernstein if he decides to do this or if lesions change, will f/u for bx

Electronically signed by Bernstein, Leslie Erin (M.D.) at 9/17/2008 10:17 AM

Procedures

CRYOTHERAPY, FLAT WARTS, UP TO 14 [119172573] (Active)		
Electronically signed by: Bernstein, Leslie Erin (M.D.) on 09/17/08	1018	Status: Active
Ordering user: Bernstein, Leslie Erin (M.D.) 09/17/08 1018	Authorized by: Bernstein, Leslie Erin (M.D.)	
Ordering mode: Standard		
Frequency: Routine 09/17/08 -	Class: Back Office	
Quantity: 1		
Diagnoses		
VERRUCA VULGARIS [078.10 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Bernstein, Leslie Erin (M.D.)	1104048776	
Indications		

Indications

VERRUCA VULGARIS [078.10 (ICD-9-CM)]

END OF ENCOUNTER

10/20/2008 - Ancillary Orders in PASADENA MORD

Visit Information

Department			
Name	Address	Phone	
PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-1216	626-440-0036	

Other Orders

10/20/2008 - Ancillary Orders in PASADENA MORD (continued)

Other Orders (continued)

cations	
USPIRONE 5 MG ORAL TAB [123115543] (Discontinued)	
Electronically signed by: Interface, Scal_ Pharmacy on 10/20/	
Ordering user: Interface, Scal_ Pharmacy 10/20/08 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	Discontinued by To Type (M.D.) 00/00/00 0017 Med List
Frequency: 10/20/08 - 08/06/09	Discontinued by: Ta, Tuan (M.D.) 08/06/09 0017 [Med List Cleanup (MD Only)]
Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	_
SCAL PROVIDER	_
BILIFY 5 MG ORAL TAB [123115487] (Discontinued)	
Electronically signed by: Interface, Scal_ Pharmacy on 10/20/	08 0000 Status: Discontine
Ordering user: Interface, Scal_ Pharmacy 10/20/08 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	
Frequency: 10/20/08 - 10/20/08	Discontinued by: Interface, Scal_ Pharmacy 12/01/08 1616
	[Duplicate Therapy]
Provider Details	
Provider	NPI
Interface, Scal_ Pharmacy	
SCAL PROVIDER	_
SOMETROVIDER	
BILIFY 5 MG ORAL TAB [128581998] (Discontinued)	
Electronically signed by: Bunag, Marvin on 10/20/08 0000	Status: Discontinu
Ordering user: Bunag, Marvin 10/20/08 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	Autorized by. Concerned upen
Frequency: 10/20/08 - 02/23/09	Discontinued by: Interface, Scal_ Pharmacy 02/23/09 0928
······································	[Duplicate Therapy]
Provider Details	
Provider Details Provider	NPI
	NPI

END OF ENCOUNTER

10/30/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information

Encounter Provider

Bernstein, Leslie Erin (M.D.)

Authorizing Provider Bernstein, Leslie Erin (M.D.)

Department

Name	Address	Phone
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273

Follow-up and Dispositions

• Return in about 4 weeks (around 11/30/2008).

Visit Information (continued)

Level of Service

Level of Service

LOS NOT REQUIRED

Reason for Visit

Chief Complaint

WART (p/pt.states he is here for f/u on wart on hand.) ٠

Visit Diagnosis

VERRUCA VULGARIS (primary) [078.10]

Vitals

Vital Signs		Most recent update: 10/30/2008 9:33 AM
BP	Pulse	
135/89	109	

Clinical Notes

Nursing Note at 10/30/2008 0945 Author: ----Service: -Author Type: -Filed: Encounter Date: 10/30/2008 Creation Time: 10/30/2008 9:45 AM Status: Signed >> ERICA A RODRIGUEZ MA Thu Oct 30, 2008 10:27 AM

Offered patient flu shot and patient declined.

Progress Notes

Bernstein, Leslie Erin (M.D.) at 10/30/2008 1006

Author: Bernstein, Leslie Erin (M.D.) Filed: 10/30/2008 10:07 AM Status: Signed

Service: -Author Type: Physician Encounter Date: 10/30/2008 Creation Time: 10/30/2008 10:06 AM Editor: Bernstein, Leslie Erin (M.D.) (Physician)

History:

CC f/u R 2nd digit wart

Gone. Also feet fungus gone after tx. Pt wants only wart examined today-no other areas.

ROS

PE Text: Not Used

Physical Exam Skin: Lesion (R 2nd digit papule) noted.

A/P

Clinical Notes (continued)

R 2nd digit wart-resolving-cryo and f/u 1 m

Electronically signed by Bernstein, Leslie Erin (M.D.) at 10/30/2008 10:07 AM

Procedures

DESTRUCTION, FLAT WARTS, MOLLUSCUM CONTAGIOSUM, MILIA 14 OR FEWER LESIONS [124527084] (Active)			
Electronically signed by: Bernstein, Leslie Erin (M.D.) on 10/30/08 1008			
Authorized by: Bernstein, Leslie Erin (M.D.)			
Class: Normal			
NPI			
1104048776			
	08 1008 Authorized by: Bernstein, Leslie Erin (M.D.) Class: Normal		

END OF ENCOUNTER

11/30/2008 - Ancillary Orders in EMERGENCY AREA

Visit Information

Provider Information

Encounter Provider

Hsiai, Tzung Keith (M.D.)

Department

Name	Address	Phone	
EMERGENCY AREA	6041 CADILLAC AVE	323-857-2000	
	Los Angeles CA 90034-1702		

Other Orders

dications	
METHYLPREDNISOLONE 4 MG ORAL DOSE PK TAB [1284	432467] (Discontinued)
Electronically signed by: Interface, Scal_ Pharmacy on 11/30	D/08 0000 Status: Discontinued
Ordering user: Interface, Scal_ Pharmacy 11/30/08 0000 Ordering mode: Standard	Authorized by: Hsiai, Tzung Keith (M.D.)
Frequency: 11/30/08 - 11/30/08	Discontinued by: Interface, Scal_ Pharmacy 11/30/08 0542 [Order Entry Error]
Provider Details	
Provider	NPI
Hsiai, Tzung Keith (M.D.)	1508067489

Drintod	on	1/12/2/	5:33 PM
FIIIICEU	UL1	1/12/24	J.JJ F IVI

11/30/2008 - Ancillary Orders in EMERGENCY AREA (continued)

Other Orders (continued)

Interface, Scal_ Pharmacy

END OF ENCOUNTER

12/17/2008 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information

Encounter Provider

Adigwe-Mozia, Martha N (N.P.)

Department

Name	Address	Phone	
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273	

Authorizing Provider

Adigwe-Mozia, Martha N (N.P.)

Level of Service

Level of Service OUTPT EST LEVEL 2

Reason for Visit

Chief Complaints

- WART (F/U, Pt TX by MD Bernstein)
- SPOTS ON SKIN ((Head) of penis x2 mons. No pain, itching.)

Visit Diagnoses

- SCREENING FOR CA, SKIN [V76.43]
- NEVUS, ATYPICAL [216.9]
- VERRUCA PLANA [078.19]
- WART, GENITAL [078.11]

Vitals

Vital Signs		Most recent update: 12/17/2008 8:14 AM
BP	Pulse	
135/83	77	

Clinical Notes

Nursing Note			
at 12/17/2008 0830			
Author: — Filed: Status: Signed	Service: — Encounter Dat	te: 12/17/2008	Author Type: — Creation Time: 12/17/2008 8:30 AM
>> EVELYN Q ROCA Pt offered flushot	Wed Dec 17, 2008 but declined.	8:19 AM	

Clinical Notes (continued)

4	Adigwe-Mozia, Martha N (N.P.) at 12/17/2008 0835				
_	Author: Adigwe-Mozia, Martha N (N.P.)	Service: —	Author Type: NURSE PRACTITIONER (N.P.)		
	Filed: 12/17/2008 6:02 PM Status: Signed	Encounter Date: 12/17/2008 Editor: Adigwe-Mozia, Martha N (N.P.) (NI	Creation Time: 12/17/2008 8:35 AM JRSE PRACTITIONER (N.P.))		

History:

Patient presents with: WART - F/U, Pt TX by MD Bernstein SPOTS ON SKIN - (Head) of penis x2 mons. No pain, itching.

Reports discoloration on shaft of penis since over 5yrs and no change in size. However new lesions on penis head. Not sexually active for over 20yrs.

ROS

PE Text: Not Used

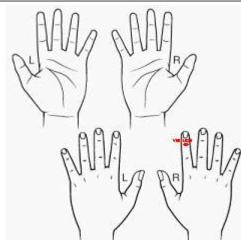
Physical Exam

Constitutional: He is oriented and developed, nourished, and not distressed.

6. 6 41

Cardiovascular: Normal rate and regular rhythm. Musculoskeletal:

Clinical Notes (continued)



Hands: Neurological: He is alert and oriented. SUBJECTIVE:

OBJECTIVE:

Lawson B Hawkins is a 53 year old male. Posterior penis shaft with 11/2 irregular brownish discoloration and anterior penis head with multiple pin size to 2mm brownish papules lesion

ASSESSMENT: V76.43A SCREENING FOR CA, SKIN 216.9Q NEVUS, ATYPICAL 078.19E VERRUCA PLANA

PLAN:Genital warts. Discussed contagion with patient. Explained need for female partners to see GYN for PAP to check for cervical cancer.Return 4-6 weeks if persist.

Orders Placed This Encounter

DESTRUCTION PREMALIGNANT LESION, FIRST LESION DESTRUCTION PREMALIGNANT LESION, SECOND THROUGH FOURTEENTH LESIONS, EACH

Electronically signed by Adigwe-Mozia, Martha N (N.P.) at 12/17/2008 6:02 PM

Procedures

Electronically signed by: Adigwe-Mozia, Martha N (N.P.) on 12/1	7/08 0829	Status: Active
Ordering user: Adigwe-Mozia, Martha N (N.P.) 12/17/08 0829	Authorized by: Adigwe-Mozia, Martha N (N.P.)	
Ordering mode: Standard		
Frequency: Routine 12/17/08 -	Class: Back Office	
Quantity: 1		
Diagnoses		
VERRUCA PLANA [078.19 (ICD-9-CM)]		
NEVUS, ATYPICAL. [216.9 (ICD-9-CM)]		
GENITAL WART [078.11 (ICD-9-CM)]		
Provider Details		

Procedures (continued)

Provider	NPI	
Adigwe-Mozia, Martha N (N.P.)	1225186133	
Indications		
VERRUCA PLANA [078.19 (ICD-9-CM)]		
NEVUS, ATYPICAL [216.9 (ICD-9-CM)]		
WART, GENITAL [078.11 (ICD-9-CM)]		
DESTRUCTION PREMALIGNANT LESION, SECOND THROUGH	FOURTEENTH LESIONS, EACH [130919769] (Activ	ve)
Electronically signed by: Adigwe-Mozia, Martha N (N.P.) on 12/17	/08 0829	Status: Active
Ordering user: Adigwe-Mozia, Martha N (N.P.) 12/17/08 0829	Authorized by: Adigwe-Mozia, Martha N (N.P.)	
Ordering mode: Standard		
Frequency: Routine 12/17/08 -	Class: Back Office	
Quantity: 1		
Diagnoses VERRUCA PLANA [078.19 (ICD-9-CM)]		
NEVUS, ATYPICAL. [216.9 (ICD-9-CM)]		
GENITAL WART [078.11 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Adigwe-Mozia, Martha N (N.P.)	1225186133	
Indications		
VERRUCA PLANA [078.19 (ICD-9-CM)]		
NEVUS, ATYPICAL [216.9 (ICD-9-CM)]		
WART, GENITAL [078.11 (ICD-9-CM)]		

Other Orders

Medications

LDARA 5 % TOP PACK [130920373] (Discontinued)	
Electronically signed by: Adigwe-Mozia, Martha N (N.P.) or	n 12/17/08 0837 Status: Discontinue
Ordering user: Adigwe-Mozia, Martha N (N.P.) 12/17/08 083	37 Authorized by: Adigwe-Mozia, Martha N (N.P.)
Ordering mode: Standard	
Frequency: Routine 12/17/08 - 08/06/09	Class: Fill Now
Discontinued by: Ta, Tuan (M.D.) 08/06/09 0017 [Med List C	Cleanup (MD Only)]
Diagnoses	
VERRUCA PLANA [078.19 (ICD-9-CM)]	
GENITAL WART [078.11 (ICD-9-CM)]	
Provider Details	
Provider	NPI
Adigwe-Mozia, Martha N (N.P.)	1225186133
Indications	
VERRUCA PLANA [078.19 (ICD-9-CM)]	
WART, GENITAL [078.11 (ICD-9-CM)]	

END OF ENCOUNTER

12/17/2008 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Printed on 1/12/24 5:33 PM

Visit Information (continued)

Provider Information

Encounter Provider Authorizing Provider

Hooks, Sarah Elizabeth (M.D.)

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273

Follow-up and Dispositions

• Return if symptoms worsen or fail to improve.

Level of Service

Level of Service OUTPT EST LEVEL 4

Reason for Visit

Chief Complaint

LAB ORDER REQUEST

Visit Diagnoses

Name	Code	Chronic?
GERD	530.81	No
THROAT PAIN	784.1	No
SCREENING FOR CA, COLON	V76.51	No
HYPERLIPIDEMIA	272.4	Yes
HEALTH CHECK UP, ADULT	V70.0	No
SCREENING EXAMINATION FOR CA, PROSTATE	V76.44	No

Visit Account Information

Hospital Account					
	Name	Acct ID	Class	Status	Primary Coverage
	Hawkins, Lawson B	2161123387 7	Outpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21611233877)

Negative	Relation			• • • -
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	432 x00000(O)		

Coverage Information (for Hospital Account #21611233877)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL	NEEDS PLAN SCR KPSA SPECIAL NEEDS PLAN SC	R
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

				Most recent update: 12/17/2008 9:09
BP 127/83	Pulse 76	Temp 96.4 °F (35.8 °C) (Tympanic)	Ht 5' 7" (1.702 m)	Wt 244 lb (110.7 kg)
BMI 38.22 kg/m²				
ical Notes				
Nursing Note				
at 12/17/2008	0910			
Author: — Filed: Status: Sign	ied	Service: — Encounter Date:	12/17/2008	Author Type: — Creation Time: 12/17/2008 9:10 AM
Procedures				
Filed on 12/17/	2008 0000			
Procedu 1. XR Cl	re Orders ERVICAL SPINE, /	-		rah Elizabeth (M.D.) at 12/17/08 0921
Procedu 1. XR Cl Minimal osteoph posterio	re Orders ERVICAL SPINE, . loss of disc space yte formation whic	height at C5-C6 with some an h is also present at the C6-C7 onstrated. The remainder of th	terior level. No	rah Elizabeth (M.D.) at 12/17/08 0921
Procedu 1. XR Cl Minimal osteoph posterio	re Orders ERVICAL SPINE, loss of disc space yte formation whic r extension is dem tion is unremarkat	height at C5-C6 with some an h is also present at the C6-C7 onstrated. The remainder of th	terior level. No ne	rah Elizabeth (M.D.) at 12/17/08 0921
Procedu 1. XR Cl Minimal osteoph posterio examina IMPRES	re Orders ERVICAL SPINE, loss of disc space yte formation whic r extension is dem tion is unremarkat SSION: Mini	height at C5-C6 with some an h is also present at the C6-C7 onstrated. The remainder of th ble.	terior level. No ne described.	rah Elizabeth (M.D.) at 12/17/08 0921
Procedu 1. XR Cl Minimal osteoph posterio examina IMPRES	re Orders ERVICAL SPINE, loss of disc space yte formation whic r extension is dem tion is unremarkat SSION: Mini	height at C5-C6 with some an h is also present at the C6-C7 onstrated. The remainder of th ble. mal degenerative changes as	terior level. No ne described.	rah Elizabeth (M.D.) at 12/17/08 0921

History:

Still with ant/lat neck/throat pain, several mo, s/p ENT eval with CT neg, no post neck pain, hurts few times per wk at least, no dysphagia, full neck ROM, ROM does not start pain but may exacerbate it, sees dentist regularly

Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

History Reviewed:

I have reviewed the Medical/Surgical and Social history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

Status: Signed

Clinical Notes (continued)

<u>Review of Systems</u> Constitutional: Negative for fever. Neurological: Negative for sensory change.

PE Text: Not Used

Physical Exam Vitals reviewed. Constitutional: He is developed, nourished, and not distressed. HENT: Mouth/Throat: Oropharynx is clear and moist. No oropharyngeal exudate. Neck: Normal range of motion. Neck supple. No thyromegaly present. Cardiovascular: Normal rate and regular rhythm. Pulmonary/Chest: Effort normal and breath sounds normal. Lymphadenopathy: He has no cervical adenopathy. Neurological: He is alert. Skin: Skin is warm and dry. Psychiatric: Affect normal.

A/P:

Throat pain - GERD vs cerv OA - cerv xray GERD [530.81A] - change to PPI Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] SMOKER [305.1ZA] - has quit! HYPERLIPIDEMIA [272.4C] - labs today PREDIABETES [790.29C] - labs ELEVATED TRANSAMINASE MEASUREMENT [790.4B] - labs SCREENING FOR CA, COLON [V76.51A] - OB

RHM - PSA, declines flu shot

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 12/17/2008 9:34 AM

Hooks, Sarah Elizabeth (M.D.) at 12/22/2008 1213

Author: Hooks, Sarah Elizabeth (M.D.) Filed: 12/22/2008 12:13 PM Status: Addendum Quick Note: Service: — Author Type: Physician Encounter Date: 12/17/2008 Creation Time: 12/22/2008 12:13 PM Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

Neck xray shows mild arthritis, I placed referral for PMR dr Hyams to evaluate his neck pain, remind to submit stool OB, labs OK, same increased sugar but not diabetes, H Ed prediabetes class if hasn't been, get regular exercise

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 12/22/2008 12:13 PM

Clinical Notes (continued)

Spraggins, Gwendolyn (L.V.N.) at 12/22/2008 1439

Author: Spraggins, Gwendolyn (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 12/22/2008 2:39 PM	Encounter Date: 12/17/2008	Creation Time: 12/22/2008 2:39 PM
Status: Addendum	Editor: Spraggins, Gwendolyn (L.V.N.)	(LICENSED VOCATIONAL NURSE)
Quick Note:		· · · · · · · · · · · · · · · · · · ·

Call placed spoke with patient via H#, patient advised as per Dr.Hooks that his neck xray shows mild arthritis, she placed referral for PMR dr Hyams to evaluate his neck pain,

Reminded patient to submit stool OB, patient states he did not have one, was advised he can go directly into lab to receive. labs OK, same increased sugar but not diabetes, H Ed prediabetes class suggested with number to contact given, and, get regular exercise.

Patient verbalize clear understanding of the message, stated OK, and rushed off the phone not giving any indication of compliance.

Gwendolyn Spraggins LVN II

Electronically signed by Spraggins, Gwendolyn (L.V.N.) at 12/22/2008 2:39 PM

Labs

GLOBIN, FECAL [130925691] (Cancel Pend)	
Electronically signed by: Thompson, Biko (L.V.N.) on 12/17/08 (0910 Status: Cancel Pend
Ordering user: Thompson, Biko (L.V.N.) 12/17/08 0910	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 12/17/08 -	Class: Normal
Quantity: 1	Pended by: Thompson, Biko (L.V.N.) 12/17/08 0910
Canceled by: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0919	
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
Thompson, Biko (L.V.N.)	_
GLOBIN, FECAL [130928336] (Discontinued)	
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/1	7/08 0926 Status: Discontinued
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	Autionzed by. Hooks, Oaran Elizabeth (M.D.)
Frequency: Routine 12/17/08 -	Class: Normal
Quantity: 1	Discontinued by: Interface, Scal_ Lab 03/18/09 0518 [Other (Pt. did
Quantity. 1	not present for lab)]
Provider Details	not present for lab/]
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
ALT, SERUM [130928333] (Final result)	
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/1	7/08 0926 Status: Completed
This order may be acted on in another encounter.	·····
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	
Frequency: Routine 12/17/08 -	Class: Normal
Quantity: 1	Lab status: Final result
Diagnoses	

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

Labs (continued)

Provider			NPI		
Hooks, Sarah Elizab	eth (M.D.)		1497814131		
pecimen Informatio	on				
ID Type Source			Collected By		
426881288 — BLOOD				MN2 12/17	
	02221 (Abnormal)		Pos	ultod: 12/17	/08 2158, Result status: Final res
ALT, SERUM [130928333] (Abnormal) Order status: Completed		Filed on: 12/17/08 2		106 2156, Result Status. Final les	
Collected by: MN2 12					REGIONAL LABORATORY
2					
Components					
Component		Value	Reference Range	Flag	Lab
ALT		51	<41 units/L	Н^	956
	Elizabeth (M.D.) on 12/22/0 Elizabeth (M.D.) on 12/19/0	8 1024			
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	. ,	8 1024 8 1024 8 0953 8 0953 8 0855			
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0	8 1024 8 1024 8 0953 8 0953 8 0855 8 0855			
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Sesting Performed E Lab - Abbreviatio	Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0 By Dn Name	8 1024 8 1024 8 0953 8 0953 8 0855 8 0855 Director	Address		Valid Date Range
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0	8 1024 8 1024 8 0953 8 0953 8 0855 8 0855			Valid Date Range 08/30/05 1817 - 09/01/10 0000
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Testing Performed E Lab - Abbreviatio 240 - 956	Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0 By DN Name SHERMAN WAY REGIONAL LABORATORY	18 1024 18 1024 18 0953 18 0953 18 0855 18 0855 18 0855 Director Ann M. Vannie	er, 11668 Sherm NORTH HOL CA 91605	LYWOOD	
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Testing Performed E Lab - Abbreviatio	Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0 By on Name SHERMAN WAY REGIONAL LABORATORY 8333] Eted	18 1024 18 1024 18 0953 18 0953 18 0855 18 0855 18 0855 Director Ann M. Vannie	er, 11668 Sherm NORTH HOL CA 91605 Res Filed on: 12/17/08 1	LYWOOD sulted: 12/17	08/30/05 1817 - 09/01/10 0000
Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Eesting Performed E Lab - Abbreviatic 240 - 956 ALT, SERUM [13092 Order status: Comple Collected by: MN2 12 Reviewed by	Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0 By on Name SHERMAN WAY REGIONAL LABORATORY 8333] Eted	18 1024 18 1024 18 0953 18 0953 18 0855 18 0855 Director Ann M. Vannie M.D.	er, 11668 Sherm NORTH HOL CA 91605 Res Filed on: 12/17/08 1	LYWOOD sulted: 12/17	08/30/05 1817 - 09/01/10 0000 7/08 1040, Result status: In proce

Testing Performed By

_	Lab - Abbreviation	Name	Director	Address	Valid Date Range	
Printed	on 1/12/24 5:33 PM					Page 94

Labs (continued)

240 - 956

SHERMAN WAY REGIONAL LABORATORY

Ann M. Vannier, M.D. 11668 Sherman Way NORTH HOLLYWOOD CA 91605

08/30/05 1817 - 09/01/10 0000 D

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

AST, SERUM [130928334] (Final result)

ctronically signed by: Hooks, Sarah Elizabeth (M.D order may be acted on in another encounter.	.) on 12/17/0	8 0926		Status: Complete
ering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08	0926	Authorized by: Hooks	, Sarah Elizabeth (I	M.D.)
ering mode: Standard		5	,	
quency: Routine 12/17/08 -		Class: Normal		
intity: 1		Lab status: Final resu	llt	
gnoses				
PERLIPIDEMIA [272.4 (ICD-9-CM)]				
Provider Details				
Provider		NPI		
Hooks, Sarah Elizabeth (M.D.)		1497814131		
pecimen Information				
ID Туре	Source		Collected By	
426881307 —	BLOOD		MN2 12/17/08 102	D
ST, SERUM [130928334]		Resu	ulted: 12/17/08 2158	3, Result status: Final res
Order status: Completed		Filed on: 12/17/08 2	159	
Collected by: MN2 12/17/08 1020		Resulting lab: SHEF	RMAN WAY REGIO	NAL LABORATORY
Components				
Component	Value	Reference Range	Flag	Lab
AST	30	<37 units/L	_	956
Comment:				
The measured activity may vary by different m	ethod. This r	result was measured us	ing the Roche meth	nod.
Reviewed by				

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Labs (continued)

Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
AST, SERUM [130928334	ŋ		Resulted: 12/17	7/08 1040, Result status: In process

AST, SERUM [130928334]

Order status: Completed Collected by: MN2 12/17/08 1020

Filed on: 12/17/08 1041 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

CBC W DIFFERENTIAL, AUTO [130928335] (Final result)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/17/0	8 0926	Status:
This order may be acted on in another encounter.		
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard		
Frequency: Routine 12/17/08 -	Class: Normal	
Quantity: 1	Lab status: Final result	
Diagnoses		
GERD (GASTROESOPHAGEAL REFLUX DISEASE) [530.81 (ICD-	9-CM)]	
THROAT PAIN [784.1 (ICD-9-CM)]	,-	

Completed

PERLIPIDEMIA	[272.4 (ICD-9-CM)]				
Provider Detail					
Provider			NPI		
	Elizabeth (M.D.)		1497814131		
)				
Specimen Info	mation				
ID	Туре	Source		Collected By	
426881306	_	BLOOD		MN2 12/17/08 102	20
			5	1 40/47/00 44	
	ENTIAL, AUTO [130928335] (Ab	normal)			45, Result status: Final res
Order status: C			Filed on: 12/17/08 1		
Collected by: N	IN2 12/17/08 1020		Resulting lab: WLA	MEDICAL CENTE	R LABORATORY
Componen	·e				
Componer		Value	Reference Range	Flag	Lab
WBC'S AU		5.6	4.0 - 11.0		305
112007.0		0.0	thou/cumm		000
RBC, AUT)	4.82	4.7 - 6.1 mil/cumm	_	305
HGB		15.1	14.0 - 18.0 g/dL		305
HCT, AUTO)	44.7	42 - 52 %		305
MCV		92.7	80 - 94 fl	—	305
MCH		31.2	27 - 35 pg/cell	—	305
MCHC		33.7	32 - 37 g/dL	—	305
RDW, BLO		13.8	11.5 - 14.5 %	_	305
PLATELET	S, AUTOMATED COUNT	148	130 - 400	_	305
			thou/mcL		
MPV		10.8	7.4 - 10.4 fl	Н^	305
	HILS %, AUTOMATED COUNT	61.5	42 - 75 %		305
	YTES %, AUTOMATED COUNT	27.7	20 - 51 %		305
MONOS %	•	7.8	1 - 12 %		305
	ILS %, AUTOMATED COUNT	2.5	0 - 10 %		305
	S %, AUTOMATED COUNT	0.5	0 - 1 %		305
NEUTROP		3.5	1 - 7 thou/mcL		305
LYMPHOC		1.6	1 - 3 thou/mcL		305
MONOCYT	EQ	0.40	0.11 - 0.59 thou/mcL	—	305
EOSINOPH	IILS	0.10	0 - 10 thou/mcL		305
BASOPHIL		0.00	0.0 - 0.2 thou/mcL		305

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/17/08 1524

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
321 - 305	WLA MEDICAL CENTER	S.R. McLaren, D.O.	6041 Cadillac Ave. LOS ANGELES CA	09/01/05 0850 - 05/23/17 0009

Labs (continued)

LABORATORY 90034 CBC W DIFFERENTIAL, AUTO [130928335] Resulted: 12/17/08 1040, Result status: In process Order status: Completed Filed on: 12/17/08 1041 Collected by: MN2 12/17/08 1020 Filed on: SHERMAN WAY REGIONAL LABORATORY Reviewed by Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/17/08 1524

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

GERD [530.81 (ICD-9-CM)] Throat Pain [784.1 (ICD-9-CM)] HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks. Sarah Elizabeth (M.D.) on 12/17/2008 15:24

GLUCOSE, FASTING [130928337] (Final result)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/17 This order may be acted on in another encounter.	7/08 0926	Status: Completed
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926 Ordering mode: Standard	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Frequency: Routine 12/17/08 -	Class: Normal	
Quantity: 1	Lab status: Final result	
Diagnoses		
HYPERLIPIDEMIA [272.4 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	1497814131	

Labs (continued)

ID Ty					
- /	pe	Source		Collected	
426881307 —		BLOOD		MN2 12/17	/08 1020
GLUCOSE, FASTING [130928337] (Abnormal)		Resulted: 12/17/08 2158, Result status: Final re		
Order status: Complete Collected by: MN2 12/1			Filed on: 12/17/08 2 Resulting lab: SHE		REGIONAL LABORATORY
Components					
Component		Value	Reference Range	Flag	Lab
GLUCOSE, FASTIN	١G	116	70 - 99 mg/dL	н^	956
Reviewed by					
Hooks, Sarah Eli Hooks, Sarah Eli Hooks, Sarah Eli Hooks, Sarah Eli	zabeth (M.D.) on 12/19/0 zabeth (M.D.) on 12/19/0 zabeth (M.D.) on 12/19/0 zabeth (M.D.) on 12/19/0 zabeth (M.D.) on 12/18/0 zabeth (M.D.) on 12/18/0	8 1024 8 0953 8 0953 8 0953 8 0855			
Testing Performed By	Name	Director	Address		Valid Date Range
Testing Performed By Lab - Abbreviation 240 - 956	Name SHERMAN WAY REGIONAL LABORATORY	Director Ann M. Vannie M.D.	Address r, 11668 Sherm NORTH HOL CA 91605		Valid Date Range 08/30/05 1817 - 09/01/10 0000
Lab - Abbreviation	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannie	r, 11668 Sherm NORTH HOL CA 91605	LYWOOD	
Lab - Abbreviation 240 - 956	SHERMAN WAY REGIONAL LABORATORY 130928337] d	Ann M. Vannie	r, 11668 Sherm NORTH HOL CA 91605 Res Filed on: 12/17/08 1	LYWOOD sulted: 12/17	08/30/05 1817 - 09/01/10 0000
Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [' Order status: Complete	SHERMAN WAY REGIONAL LABORATORY 130928337] d	Ann M. Vannie	r, 11668 Sherm NORTH HOL CA 91605 Res Filed on: 12/17/08 1	LYWOOD sulted: 12/17	08/30/05 1817 - 09/01/10 0000 7/08 1040, Result status: In process

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

Labs (continued)

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

HBSAG [130928338] (Final result)

ils order may de aciec	d on in another encounter.	(M.D.) on 12/17/0	5 0920		Status: Completed
	Sarah Elizabeth (M.D.) 12/1	7/08 0926	Authorized by: Hooks	s Sarah Elizabeth (M	וחו
rdering mode: Standa		1100 0020	/ athonzoa by: Hook		
equency: Routine 12/			Class: Normal		
uantity: 1			Lab status: Final resu	ılt	
iagnoses					
	LTH CHECK UP EXAM [V7	'0.0 (ICD-9-CM)]			
Provider Details					
Provider			NPI		
Hooks, Sarah Elizab	peth (M.D.)		1497814131		
Specimen Informati	on				
ID	Туре	Source		Collected By	
426881307	—	BLOOD		MN2 12/17/08 1020	
HBSAG [130928338]		Res	ulted: 12/18/08 1338,	, Result status: Final result
Order status: Comp	leted		Filed on: 12/18/08 1	338	
Collected by: MN2 1	2/17/08 1020		Resulting lab: SHEI	RMAN WAY REGION	NAL LABORATORY
Components					
Components Component		Value	Reference Range	Flag	Lab
-	CE AG, EIA	Value NEGATIVE	Reference Range		Lab 956
Component HEP B SURFAC Reviewed by Spraggins, Gv Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	wendolyn (L.V.N.) on 12/22 Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/	NEGATIVE /08 1440 08 1213 08 1213 08 1209 08 1209	Reference Range		
Component HEP B SURFAC Reviewed by Spraggins, Gv Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	wendolyn (L.V.N.) on 12/22 Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/19/	NEGATIVE /08 1440 08 1213 08 1213 08 1209 08 1209 08 1024	Reference Range		
Component HEP B SURFAC Reviewed by Spraggins, Gv Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	wendolyn (L.V.N.) on 12/22 Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/19/ Elizabeth (M.D.) on 12/19/	NEGATIVE /08 1440 08 1213 08 1213 08 1209 08 1209 08 1209 08 1024 08 1024	Reference Range		
Component HEP B SURFAC Reviewed by Spraggins, Gv Hooks, Sarah Hooks, Sarah Hooks, Sarah	wendolyn (L.V.N.) on 12/22 Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/	NEGATIVE /08 1440 08 1213 08 1213 08 1209	Reference Range		
Component HEP B SURFAC Reviewed by Spraggins, Gv Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah Hooks, Sarah	wendolyn (L.V.N.) on 12/22 Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/22/ Elizabeth (M.D.) on 12/19/	NEGATIVE /08 1440 08 1213 08 1213 08 1209 08 1209 08 1024 08 1024 08 0953	Reference Range		

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

HBSAG [130928338]

Resulted: 12/17/08 1040, Result status: In process

Labs (continued)

Order status: Completed Collected by: MN2 12/17/08 1020 Filed on: 12/17/08 1041 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HEALTH CHECK UP, ADULT [V70.0 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53

HEPATITIS C ANTIBODY [130928339] (Final result)

	by: Hooks, Sarah Elizabe		8 0926	/08 0926 Status: Comp		
	ed on in another encounte Sarah Elizabeth (M.D.) 1 lard		Authorized by: Hooks,	Sarah Elizabeth	(M.D.)	
equency: Routine 1 antity: 1			Class: Normal Lab status: Final result			
agnoses			Lab status. I mai roodit			
0	ALTH CHECK UP EXAM	[V70.0 (ICD-9-CM)]				
Provider Details						
Dravidar			NPI			
Provider						
Hooks, Sarah Eliz	abeth (M.D.)		1497814131			
Hooks, Sarah Eliz Specimen Inform a	ition	Source	1497814131	Collected By		
Hooks, Sarah Eliz		Source BLOOD	1497814131 C	Collected By /N2 12/17/08 10/	20	
Hooks, Sarah Eliz Specimen Informa ID 426881307	ition		1497814131 C M	IN2 12/17/08 102	20 53, Result status: Final resul	
Hooks, Sarah Eliz Specimen Informa ID 426881307 HEPATITIS C ANT Order status: Corr	Type — IBODY [130928339] Ipleted		1497814131 C M Result Filed on: 12/18/08 155	/IN2 12/17/08 102 ted: 12/18/08 155 53	53, Result status: Final resul	
Hooks, Sarah Eliz Specimen Informa ID 426881307 HEPATITIS C ANT	Type — IBODY [130928339] Ipleted		1497814131 C M Result Filed on: 12/18/08 155	/IN2 12/17/08 102 ted: 12/18/08 155 53	-	
Hooks, Sarah Eliz Specimen Informa ID 426881307 HEPATITIS C ANT Order status: Corr	Type — IBODY [130928339] Ipleted		1497814131 C M Result Filed on: 12/18/08 155	/IN2 12/17/08 102 ted: 12/18/08 155 53	53, Result status: Final resul	

Labs (continued)

ור	FIA	ΔR	VIRUS	n n		HEDA
	EIA	AB.	VIRUS	50	\ 	HEPP

Comment:

NEGATIVE

956

A NON-REACTIVE TEST RESULT DOES NOT EXCLUDE THE POSSIBILITY OF EXPOSURE TO HEPATITIS C. LEVELS OF ANTI-HCV MAY BE UNDETECTABLE IN EARLY INFECTION.

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
HEPATITIS C ANTIBODY	[130928339]		Resulted: 12/17	7/08 1040, Result status: In process
Order status: Completed		File	ed on: 12/17/08 1041	

Collected by: MN2 12/17/08 1020

Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HEALTH CHECK UP, ADULT [V70.0 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53

Labs (continued)

	by: Hooks, Sarah Elizabet		08 0926		Status: Compl
order may be acted on in another encounter. ering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926 ering mode: Standard					
			Authorized by: Hooks, Sarah Elizabeth (M.D.)		
lering mode: Standard		Class: Normal			
antity: 1	quency: Routine 12/17/08 -		Lab status: Final resu	ult	
gnoses			Lab Status. Tindi 1650	11	
	272.4 (ICD-9-CM)]				
Provider Details					
Provider			NPI		
Hooks, Sarah Eli	zabeth (M.D.)		1497814131		
Specimen Inform	nation				
ID	Туре	Source		Collected By	У
426881307		BLOOD		MN2 12/17/0	8 1020
LIPID PANEL [13	0928340] (Abnormal)		Resu	ulted: 12/17/0	8 2158, Result status: Final r
Order status: Co	mpleted		Filed on: 12/17/08 2	159	
Order status: Co Collected by: MN					
Collected by: MN					REGIONAL LABORATORY
					REGIONAL LABORATORY
Collected by: MN Narrative:					REGIONAL LABORATORY
Collected by: MN Narrative: FASTING? YES					REGIONAL LABORATORY
Collected by: MN Narrative: FASTING? YES Components		Value	Resulting lab: SHEF	RMAN WAY F	REGIONAL LABORATORY
Collected by: MN Narrative: FASTING? YES	12 12/17/08 1020	Value 166			
Collected by: MN Narrative: FASTING? YES Components Component	12 12/17/08 1020		Resulting lab: SHEF	RMAN WAY F	Lab
Collected by: MN Narrative: FASTING? YES Components ChoLESTEF	12 12/17/08 1020	166	Resulting lab: SHEF Reference Range <200 mg/dL	RMAN WAY F	Lab 956
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER	12 12/17/08 1020 ROL IDE	166 202	Resulting lab: SHEF Reference Range <200 mg/dL <150 mg/dL	Flag — H^	Lab 956 956
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE	ROL ATED ROL/HIGH DENSITY	166 202 34	Resulting lab: SHEF Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL	Flag — H^ L ¥	Lab 956 956 956 956
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF	ROL ATED ROL/HIGH DENSITY	166 202 34 92 4.9	Resulting lab: SHEF Reference Range <200 mg/dL <150 mg/dL <150 mg/dL <100 mg/dL <5.0	Flag — H ^ L ~ — —	Lab 956 956 956 956 956 956
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment:	ROL IDE ATED ROL/HIGH DENSITY IN	166 202 34 92 4.9 Fasting (>/= 12	Resulting lab: SHEF Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 hrs)	Flag — H [^] L [·] —	Lab 956 956 956 956 956 956 CHOL TRIG
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: 	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C	166 202 34 92 4.9 Fasting (>/= 12	Reference Range <200 mg/dL	Flag — H [▲] L [♥] — 40 <100 N	Lab 956 956 956 956 956 956 CHOL TRIG EAR OPTIML:
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: 	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C DRDERLN HI: 200-239 150-	166 202 34 92 4.9 Fasting (>/= 12 OPTIN 199 130-159	Reference Range <200 mg/dL	Flag — H [▲] L [✓] — 40 <100 NI 0-499 16	Lab 956 956 956 956 956 956 CHOL TRIG EAR OPTIML: 0-189 VERY HIGH:
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: HDL-C LI 100-129 B0 >/=500	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C DRDERLN HI: 200-239 150- >/=190	166 202 34 92 4.9 Fasting (>/= 12 OPTIN -199 130-159	Resulting lab: SHEF <pre> Reference Range <200 mg/dL <150 mg/dL <150 mg/dL <100 mg/dL <5.0 hrs) </pre>	Flag — H [▲] L [✓] — 40 <100 NI 0-499 16 ascular diseas	Lab 956 956 956 956 956 956 CHOL TRIG 956 EAR OPTIML: 0-189 VERY HIGH: :e, diabetes mellitus, or chron
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: HDL-C LI 100-129 B0 >/=500 kidney dise	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C DRDERLN HI: 200-239 150- >/=190	166 202 34 92 4.9 Fasting (>/= 12 OPTIN -199 130-159	Resulting lab: SHEF <pre> Reference Range <200 mg/dL <150 mg/dL <150 mg/dL <100 mg/dL <5.0 hrs) </pre>	Flag — H [▲] L [✓] — 40 <100 NI 0-499 16 ascular diseas	Lab 956 956 956 956 956 956 CHOL TRIG 956 EAR OPTIML: 0-189 VERY HIGH: :e, diabetes mellitus, or chron
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: HDL-C LI 100-129 B0 >/=500 kidney dise	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C DRDERLN HI: 200-239 150- >/=190	166 202 34 92 4.9 Fasting (>/= 12 OPTIN -199 130-159	Resulting lab: SHEF <pre> Reference Range <200 mg/dL <150 mg/dL <150 mg/dL <100 mg/dL <5.0 hrs) </pre>	Flag — H [▲] L [✓] — 40 <100 NI 0-499 16 ascular diseas	Lab 956 956 956 956 956 956 CHOL TRIG 956 EAR OPTIML: 0-189 VERY HIGH: :e, diabetes mellitus, or chron
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: HDL-C LI 100-129 B0 >/=500 kidney dise "statin"/lipic	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C DRDERLN HI: 200-239 150- >/=190	166 202 34 92 4.9 Fasting (>/= 12 OPTIN -199 130-159	Resulting lab: SHEF <pre> Reference Range <200 mg/dL <150 mg/dL <150 mg/dL <100 mg/dL <5.0 hrs) </pre>	Flag — H [▲] L [✓] — 40 <100 NI 0-499 16 ascular diseas	Lab 956 956 956 956 956 956 CHOL TRIG 956 EAR OPTIML: 0-189 VERY HIGH: :e, diabetes mellitus, or chron
Collected by: MN Narrative: FASTING? YES Components CHOLESTEF TRIGLYCER HDL LDL CALCUI CHOLESTEF LIPOPROTE Comment: HDL-C LI 100-129 B0 >/=500 kidney dise	I2 12/17/08 1020 ROL IDE ATED ROL/HIGH DENSITY IN DL-C DRDERLN HI: 200-239 150- >/=190	166 202 34 92 4.9 Fasting (>/= 12 OPTIN -199 130-159	Resulting lab: SHEF <pre> Reference Range <200 mg/dL <150 mg/dL <150 mg/dL <100 mg/dL <5.0 hrs) </pre>	Flag — H [▲] L [✓] — 40 <100 NI 0-499 16 ascular diseas	Lab 956 956 956 956 956 956 CHOL TRIG 956 EAR OPTIML: 0-189 VERY HIGH: :e, diabetes mellitus, or chron

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD	08/30/05 1817 - 09/01/10 0000

Resulting lab: SHERMAN WAY REGIONAL LABORATORY

12/17/2008 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Labs (continued)

LABORATORY CA 91605 LIPID PANEL [130928340] Resulted: 12/17/08 1040, Result status: In process Order status: Completed Filed on: 12/17/08 1041

Order status: Completed Collected by: MN2 12/17/08 1020

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

PSA [130928341] (Final result)

Electronically signed	Status: Completed		
This order may be ac	ted on in another encounter.		
Ordering user: Hooks	s, Sarah Elizabeth (M.D.) 12/17/08 0926	Authorized by: Hooks, Sarah Eli	zabeth (M.D.)
Ordering mode: Stan			
Frequency: Routine	12/17/08 -	Class: Normal	
Quantity: 1		Lab status: Final result	
Diagnoses			
	FOR PROSTATE CANCER [V76.44 (ICI	D-9-CM)]	
	L (/-	
Provider Details			
Provider Details			
Provider Details Provider		NPI	
	zabeth (M.D.)	NPI 1497814131	
Provider	zabeth (M.D.)		
Provider			
Provider Hooks, Sarah Eliz		1497814131	By
Provider Hooks, Sarah Eliz Specimen Inform	ation	1497814131 Irce Collected	

Labs (continued)

PS

PSA [130928341]		Resu	ulted: 12/1	7/08 2228, Result status: Fi	nal resul
Order status: Completed		Filed on: 12/17/08 2	229		
Collected by: MN2 12/17/08 1020		Resulting lab: SHER	RMAN WA	Y REGIONAL LABORATO	۲Y
Components					
Component	Value	Reference Range	Flag	Lab	
PSA	0.53	< OR = 3.5 ng/mL	_	956	
Comment:		-			
AGE-RELATED PSA NORMAL	VALUES AGE	NORMAL VALUE (YEARS)	(ng/mL)	
	S THAN OP FOLIAL TO 2 P	50-50 IESST			1 5 5 5

LESS THAN OR EQUAL TO 2.5 50 - 59 LESS THAN OR EQUAL TO 3.5 60 - 69 LESS 49 OR LESS THAN OR EQUAL TO 4.5 70 OR GREATER LESS THAN OR EQUAL TO 6.5 THE DETERMINATION THAT THIS AGE-RELATED PSA IS EITHER NORMAL OR ABNORMAL IS VALID ONLY IF THIS PATIENT HAS NEVER BEEN TREATED FOR PROSTATE CANCER AND IS NOT ON ANY MEDICATION THAT WOULD CHANGE THE PSA VALUE. CLINICAL CORRELATION IS STRONGLY RECOMMENDED. THIS PSA ASSAY WAS PERFORMED USING THE ROCHE E170 MODULAR ANALYTIC SYSTEM, AN ELECTROCHEMILUMINESCENCE IMMUNOASSAY METHOD.

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
PSA [130928341]			Resulted: 12/17	7/08 1040, Result status: In process
Order status: Completed		File	d op: 12/17/08 10/1	

Order status: Completed Collected by: MN2 12/17/08 1020 Filed on: 12/17/08 1041 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD	08/30/05 1817 - 09/01/10 0000

CA 91605

Labs (continued)

LABORATORY

Indications

SCREENING EXAMINATION FOR CA, PROSTATE [V76.44 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

00 401 /E: . 143 т

H [130928342] (Final result)					
ectronically signe	ed by: Hooks, Sarah Eliz	8 0926	Status: Complete			
	acted on in another enco					
dering user: Hoo	oks, Sarah Elizabeth (M.D	D.) 12/17/08 0926	Authorized by: Hooks	s, Sarah Elizabeth (M.C).)	
rdering mode: St						
equency: Routin	e 12/17/08 -		Class: Normal			
uantity: 1			Lab status: Final rest	ılt		
agnoses						
	34.1 (ICD-9-CM)] \ [272.4 (ICD-9-CM)]					
Provider Detail	S					
Provider			NPI			
Hooks, Sarah E	Elizabeth (M.D.)		1497814131			
Specimen Infor	rmation					
ID	Туре	Source		Collected By		
426881307		BLOOD		MN2 12/17/08 1020		
TSH [13092834	-				Result status: Final resu	
Order status: C			Filed on: 12/17/08 2307			
Collected by: N	/N2 12/17/08 1020		Resulting lab: SHE	RMAN WAY REGIONA	L LABORATORY	
Component	ts					
Componer	nt	Value	Reference Range	Flag La	ab	
TSH		0.65	0.4 - 4.00 uIU/mL	- 95	56	
Reviewed b	y					
Spraggir	ns, Gwendolyn (L.V.N.) or	n 12/22/08 1440				
	Sarah Elizabeth (M.D.) on					
	Sarah Elizabeth (M.D.) on					
Hooks, S	Sarah Elizabeth (M.D.) on	12/22/08 1209				
Hooks, S	Sarah Elizabeth (M.D.) on	12/22/08 1209				
Hooks, S	Sarah Elizabeth (M.D.) on	12/19/08 1024				
Hooks, S	Sarah Elizabeth (M.D.) on	12/19/08 1024				
Hooks, S	Sarah Elizabeth (M.D.) on	12/19/08 0953				
	Sarah Elizabeth (M.D.) on					
Hooks, S	Sarah Elizabeth (M.D.) on	12/18/08 0855				

Labs (continued)

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 000
SH [130928342]			Resulted: 12/17	7/08 1040, Result status: In proc
Order status: Completed Collected by: MN2 12/17	/08 1020		ed on: 12/17/08 1041 sulting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
Spraggins, Gwend	olyn (L.V.N.) on 12/22/0	08 1440		
Hooks, Sarah Eliza	beth (M.D.) on 12/22/0	8 1213		
Hooks, Sarah Eliza	abeth (M.D.) on 12/22/0	8 1213		
Hooks, Sarah Eliza	abeth (M.D.) on 12/22/0	8 1209		
Hooks, Sarah Eliza	abeth (M.D.) on 12/22/0	8 1209		
	abeth (M.D.) on 12/19/0			
	abeth (M.D.) on 12/19/0			
Hooks, Sarah Eliza	abeth (M.D.) on 12/19/0	8 0953		
,	abeth (M.D.) on 12/19/0			
	abeth (M.D.) on 12/18/0			
Hooks, Sarah Eliza	abeth (M.D.) on 12/18/0	8 0855		
esting Performed By				
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY	Ann M. Vannier,	11668 Sherman Way	08/30/05 1817 - 09/01/10 000

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

Throat Pain [784.1 (ICD-9-CM)] HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

Imaging

Imaging

XR CERVICAL SPINE, AP AND LATERAL [130927301] (Final result)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/17/08 0921 This order may be acted on in another encounter. Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0921 Ordering mode: Standard Frequency: Routine 12/17/08 -Quantity: 1

Status: Completed

Authorized by: Hooks, Sarah Elizabeth (M.D.)

Class: Normal Lab status: Final result

12/17/2008 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Imaging (continued)

rovider Details	-CM)]		
Provider		NPI	
Hooks, Sarah Elizabeth (N	M.D.)	1497814131	
er comments: Reason: r/	0 OA		
XR CERVICAL SPINE, A	P AND LATERAL [130927301]	Resulted: 12/22	2/08 1113, Result status: Final r
Order status: Completed Accession number: 3094		Filed on: 12/22/08 1054	
Transcription			
Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	30944465	12/19/2008 11:44 AM	Allweiss, Kenneth David (M.D.)
Minimal loss of disc sp	Kenneth David (M.D.), MEDICAL D	erior	
	which is also present at the C6-C7 I demonstrated. The remainder of th arkable.		
	Minimal degenerative changes as o	described.	
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138		7/00 4440 Decultoria la com
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza KR CERVICAL SPINE, A	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301]	Resulted: 12/1	7/08 1113, Result status: In pro
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza KR CERVICAL SPINE, A Order status: Completed	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301]	Resulted: 12/1 Filed on: 12/17/08 1113	· · · · · · · · · · · · · · · · · · ·
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza KR CERVICAL SPINE, A Order status: Completed Accession number: 3094	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301]	Resulted: 12/1	· · · · · · · · · · · · · · · · · · ·
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza KR CERVICAL SPINE, A Order status: Completed Accession number: 3094	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301] 4465	Resulted: 12/1 Filed on: 12/17/08 1113 Resulting lab: SCAL RADIO	LOGY INTERFACE
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza XR CERVICAL SPINE, A Order status: Completed Accession number: 3094 Transcription Type	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301] 4465	Resulted: 12/1 Filed on: 12/17/08 1113 Resulting lab: SCAL RADIO Date and Time	LOGY INTERFACE Dictating Provider
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Noks, Sarah Eliza KR CERVICAL SPINE, A Order status: Completed Accession number: 3094 Transcription Type Diagnostic imaging	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301] 4465	Resulted: 12/1 Filed on: 12/17/08 1113 Resulting lab: SCAL RADIO Date and Time 12/19/2008 11:44 AM	LOGY INTERFACE
Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Noks, Sarah Eliza KR CERVICAL SPINE, A Order status: Completed Accession number: 3094 Transcription Type Diagnostic imaging Signed by Allweiss, Minimal loss of disc sp osteophyte formation	abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 P AND LATERAL [130927301] 4465 ID 30944465 Kenneth David (M.D.), MEDICAL D bace height at C5-C6 with some ant which is also present at the C6-C7 I demonstrated. The remainder of th	Resulted: 12/1 Filed on: 12/17/08 1113 Resulting lab: SCAL RADIO Date and Time 12/19/2008 11:44 AM OCTOR on 12/22/08 at 1054 erior evel. No	LOGY INTERFACE Dictating Provider Allweiss, Kenneth David

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1214

Imaging (continued)

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1142 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1142 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1138

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present
Indications				
Throat Pain [784.1 (ICI	D-9-CM)]			

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:14 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 11:42 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 11:42 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 11:38

Other Orders

GERD [530.81 (ICD-9-CM)] Throat Pain [784.1 (ICD-9-CM)]

END OF ENCOUNTER

01/20/2009 - Office Visit in URGENT CARE - WEST LA

Visit Information

Provider Information

Encounter Provider

Firooz, Nazanin (M.D.)

Authorizing Provider

Firooz, Nazanin (M.D.)

Department

Name

Address

Phone

01/20/2009 - Office Visit in URGENT CARE - WEST LA (continued)

Visit Information (continued) **URGENT CARE - WEST LA** 6041 CADILLAC AVE 833-574-2273 Los Angeles CA 90034-1702 Level of Service Level of Service **OUTPT EST LEVEL 3 Reason for Visit Chief Complaints** SORE THROAT • NECK PAIN MEDICATION ISSUES • Visit Diagnosis PHARYNGITIS (primary) [462] Vitals Vital Signs Most recent update: 1/20/2009 6:48 PM BP Pulse Temp Resp 98.4 °F (36.9 °C) (Oral) 135/92 90 16 Pain Information (Last Filed) Score Location Comments Edu? 1 (scale 0-10) None None None **Clinical Notes** Nursing Note at 1/20/2009 1945 Author: -Service: -Author Type: -Filed: Encounter Date: 1/20/2009 Creation Time: 1/20/2009 7:45 PM Status: Signed >> SILVIA AMADOR MA Tue Jan 20, 2009 6:48 PM PROACTIVE CARE ACTIONS Proactive Office Encounter Actions: Blood Pressure above goal, repeat blood pressure taken and documented **Progress Notes** Firooz, Nazanin (M.D.) at 1/20/2009 1956 Author: Firooz, Nazanin (M.D.) Author Type: Physician Service: -Filed: 1/20/2009 8:10 PM Encounter Date: 1/20/2009 Creation Time: 1/20/2009 7:56 PM Status: Signed Editor: Firooz, Nazanin (M.D.) (Physician)

History:

Lawson B Hawkins is a 53 year old male who reports difficulty swallowng yesterday, pain w/ swallowing solids, liquids or even air. Sxs have improved significantly today. Denies other URI sxs. Also reports longstanging neck problems and has had an extensive workup including laryngoscopy, neck CT and c-spine xrays. Awaiting PT for neck arthritis.

History Reviewed:

KAISER PERMANENTE

01/20/2009 - Office Visit in URGENT CARE - WEST LA (continued)

Clinical Notes (continued)

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Constitutional: Negative. HENT: Positive for sore throat. Negative for congestion. There is no stridor. Cardiovascular: Negative. Respiratory: Negative.

PE Text: Not Used

<u>Physical Exam</u>
Constitutional: He is developed, nourished, and not distressed.
HENT:
Head: Normocephalic and atraumatic.
Mouth/Throat: Oropharynx is clear and moist. No oropharyngeal exudate.
Neck: Normal range of motion. Neck supple.
Cardiovascular: Normal rate, regular rhythm and normal heart sounds.
Pulmonary/Chest: Effort normal and breath sounds normal.
Lymphadenopathy:
He has no cervical adenopathy.

Assessment: PHARYNGITIS (primary encounter diagnosis) Likely viral, improving. Pt reassured. RTC if sxs worsen or persist.

Electronically signed by Firooz, Nazanin (M.D.) at 1/20/2009 8:10 PM

END OF ENCOUNTER

02/23/2009 - Ancillary Orders in PASADENA MORD

Visit Information

Department			
Name	Address	Phone	
PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-1216	626-440-0036	

Other Orders

Medications

ABILIFY 5 MG ORAL TAB [139726534] (Discontinued)

Electronically signed by: **Zaragoza, Maria on 02/23/09 0000** Ordering user: **Zaragoza, Maria 02/23/09 0000**

Authorized by: SCAL PROVIDER

Status: Discontinued

Printed on 1/12/24 5:33 PM

02/23/2009 - Ancillary Orders in PASADENA MORD (continued)

Other Orders (continued)

Ordering mode: Standard Frequency: 02/23/09 - 07/28/09 Provider Details

Discontinued by: Hooks, Sarah Elizabeth (M.D.) 07/28/09 1030

Provider

SCAL PROVIDER Zaragoza, Maria

END OF ENCOUNTER

NPI

	02/23/2009 - Office Visit in PHYS	SICAL MEDICINE	
Visit Information			
Provider Information			
Encounter Provider	Autho	orizing Provider	Ξ.
Hyams, David (M.D.)	Hyam	ns, David (M.D.)	
Department			
Name	Address	Phone	[
PHYSICAL MEDICINE	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2476	
Follow-up and Dispositions			
Return in about 8 weeks (arou	ind 4/23/2009).		l
Level of Service			
Level of Service			
OUTPT NEW LEVEL 3			
Reason for Visit			_
Chief Complaint			
NECK PROBLEM			
Visit Diagnosis			
NECK PAIN (primary) [723.1]		ī
Vitals			
Vital Signs		Most recent update: 2/23/2009 9:38 AN	Λ
BP	Pulse		
134/91	79		
Clinical Notes			
Progress Notes			Ī
Hyams, David (M.D.) at 2/23/20	09 2304		1

02/23/2009 - Office Visit in PHYSICAL MEDICINE (continued)

Clinical Notes (continued)

<u>History</u>: Cc: neck pain

HPI: Lawson B Hawkins is a 53 year old male Duration/Inciting Event: years; no trauma Location: anterior, left side Severity/Quality: intermittent; can be moderate Radiation: denied down extremities Numbness: very intermittent hands bilateral Weakness: denied in arms/hands Exacerbating Factors: symptoms are intermitent Aleviating Factors/Treatments: unknown

ROS: Patient without bowel or bladder incontinence. Denies unexpected weight loss, fevers, or night sweats.

PMH: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) SMOKER (305.1ZA) HYPERLIPIDEMIA (272.4C) PREDIABETES (790.29C) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A]

ALL:

No Known Drug Aller* MEDS: Current outpatient prescriptions: ABILIFY 5 MG ORAL TAB, TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME, Disp: 120, Rfl: 2 ALDARA 5 % TOP PACK, APPLY THINLY TO WARTS NIGHTLY UNTIL DIRECTED, Disp: 12, Rfl: 5 OMEPRAZOLE 20 MG ORAL CPDR SR CAP, TAKE 1 CAPSULE ORALLY 2 TIMES DAILY, Disp: 200, Rfl: 3 BUSPIRONE 5 MG ORAL TAB, TAKE 1 TABLET ORALLY AT NIGHT FOR 5 DAYS THEN TAKE 1 TABLET 2 TIMES DAILY, Disp: 60, Rfl: 0 CARMOL 20 20 % TOP CREA, apply to I 2nd and 3rd digit areas BID , Disp: 45, Rfl: 3 CLOTRIMAZOLE 1 % TOP CREA, APPLY TO AFFECTED AREA 2 TIMES DAILY, Disp: 30, Rfl: 0 DIPHENHYDRAMINE HCL 50 MG ORAL CAP, TAKE 1 CAPSULE ORALLY EVERY NIGHT AT BEDTIME AS NEEDED, Disp: 30, Rfl: 1 SIMVASTATIN 40 MG ORAL TAB, 1 TAB PO DAILY AT BEDTIME, Disp: 90, Rfl: 3

Social Hx:

Smoker: yes

Physical Exam General: obesity Inspection: no scoliosis or spasm Posture: Head tilt posture Palpation: ttp L SCM ROM: full Spurlings: negative Paresthesias with hyperflexion: negative

Neurologic Exam Motor: normal tone, bulk, strength in all upper extremity muscles tested Sensory: intact to light touch/pin prick in upper extremities Reflexes: 2+ Hoffmans: negative Gait: nonspastic

Imaging

02/23/2009 - Office Visit in PHYSICAL MEDICINE (continued)

Clinical Notes (continued)

CT 2008

Incidental 1.5 cm left maxillary sinus mucus retention cyst vs polyp. Otherwise essentially unremarkable post contrast CT scan of the neck. No acute pathology is identified. No explanation for left sided neck pain is noted. No enhancing mass lesions are seen.

XX 2008

Minimal degenerative changes as described.

Assessment

L SCM Pain

Mild Cervical OA. Does not appear related to current symptoms

Plan

* go to physical therapy to schedule your appointment

* you will be contacted regarding your acupuncture referral. You are allowed 19 sessions over the next 12 months. Each year after that, you can have up to 12 sessions. Call 323-853-3373 if you need an extension.

* Heating Program

Heat reduces pain primarily by increasing blood flow and increasing muscle flexibility. Heat is best used prior to an exercise/stretching program or for treatment of muscle spasm and chronic pain. Avoid using heat for new injuries/pain. 1. Using a heating pad or hot water bottle, heat region of pain for 15 minutes.

2. Inspect skin regularly to avoid burns.

3. Repeat 3 times per day.

* Icing Program

Cold reduces pain primarily by reducing inflammation and should be used following an exercise/stretching program.

1. You may use ice placed in a zip lock bag, cold packs, or frozen peas with or without a towel covering your skin.

2. Apply cold to region of pain for 15 minutes.

3. Repeat 2-3 times per day or during times of pain.

* tylenol extra strength 500mg three times a day (1-2 tablets) for pain relief. Tylenol is a pain reliever that does not cause drowsiness or stomach irritation. It is not an antiinflammatory. Best used to treat chronic pain when taken on a regular schedule. Limit of 6 tablets per day. Over the counter medication.

* 30 min spent with patient

ROS

PE Text: Not Used

Physical Exam

Electronically signed by Hyams, David (M.D.) at 2/23/2009 11:12 PM

02/23/2009 - Office Visit in PHYSICAL MEDICINE (continued)

Patient Instructions

* go to physical therapy to schedule your appointment

* you will be contacted regarding your acupuncture referral. You are allowed 19 sessions over the next 12 months. Each year after that, you can have up to 12 sessions. Call 323-853-3373 if you need an extension.

* Heating Program

Heat reduces pain primarily by increasing blood flow and increasing muscle flexibility. Heat is best used prior to an exercise/stretching program or for treatment of muscle spasm and chronic pain. Avoid using heat for new injuries/pain.

1. Using a heating pad or hot water bottle, heat region of pain for 15 minutes.

2. Inspect skin regularly to avoid burns.

3. Repeat 3 times per day.

* Icing Program

Cold reduces pain primarily by reducing inflammation and should be used following an exercise/stretching program.

1. You may use ice placed in a zip lock bag, cold packs, or frozen peas with or without a towel covering your skin.

2. Apply cold to region of pain for 15 minutes.

3. Repeat 2-3 times per day or during times of pain.

* tylenol extra strength 500mg three times a day (1-2 tablets) for pain relief. Tylenol is a pain reliever that does not cause drowsiness or stomach irritation. It is not an antiinflammatory. Best used to treat chronic pain when taken on a regular schedule. Limit of 6 tablets per day. Over the counter medication.

END OF ENCOUNTER

02/25/2009 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887	
	Los Angeles CA 90027-5822		

Other Orders

Nursing

COMPLETE CARE IFOBT PROGRAM [140197988] (Active)		
Electronically signed by: Scal, Bulk Lab RN on 02/25/09 1835		Status: Active
Ordering user: Scal, Bulk Lab RN 02/25/09 1835	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard		
Frequency: Routine 02/25/09 -	Class: BULK	
Quantity: 1		
Provider Details		
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	1497814131	

END OF ENCOUNTER

02/25/2009 - Orders Only in POPULATION CARE MANAGEMENT (continued)

04/25/2009 - Ancillary Orders in PASADENA MORD

Visit Information

Department			
Name	Address	Phone	
PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-1216	626-440-0036	

Other Orders

lications	
ABILIFY 5 MG ORAL TAB [148358904] (Discontinued)	
Electronically signed by: Yu, Laptak (Rph) on 04/25/09 0000	Status: Discontinue
Ordering user: Yu, Laptak (Rph) 04/25/09 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	
Frequency: 04/25/09 - 08/13/09	Discontinued by: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1157
Provider Details	
Provider	NPI
SCAL PROVIDER	—
Yu, Laptak (Rph)	1225452394

END OF ENCOUNTER

05/27/2009 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR

Visit Information

Provider Information

F	ncou	nter	Prov	ider

Adigwe-Mozia, Martha N (N.P.)

Authorizing Provider Adigwe-Mozia, Martha N (N.P.)

Department

Name	Address	Phone
DERMATOLOGY VENICE A 4TH FLOOR	5971 VENICE BLVD Los Angeles CA 90034-1713	833-574-2273

Level of Service

Level of Service OUTPT EST LEVEL 2

Reason for Visit

Chief Complaints

- WART (RT index finger TX.)
- PRESCRIPTION REFILL REQUESTED (P/pt for fungal between toes & groin for Clotrimazole cream USP,1%)

Visit Diagnoses

- VERRUCA PLANA [078.19]
- TINEA CRURIS [110.3]

Vitals

05/27/2009 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Vitals (c	ontinued)	
Vital	Signs	Most recent update: 5/27/2009 7:53 AM
	BP 139/84	Pulse 67
	139/04	07

Clinical Notes

Adigwe-Mozia, Martha N (N.P.) at 5/27/2009 0801		
Author: Adigwe-Mozia, Martha N (N.P.)	Service: —	Author Type: NURSE PRACTITIONER
		(N.P.)
Filed: 5/27/2009 8:04 AM	Encounter Date: 5/27/2009	Creation Time: 5/27/2009 8:01 AM
Status: Signed	Editor: Adigwe-Mozia, Martha N (N.	P.) (NURSE PRACTITIONER (N.P.))

History:

Patient presents with:

WART - RT index finger TX.

PRESCRIPTION REFILL REQUESTED - P/pt for fungal between toes & groin for Clotrimazole cream USP,1%

ROS

PE Text: Not Used

<u>Physical Exam</u> Constitutional: He is oriented and well-developed, well-nourished, and in no distress. Cardiovascular: Normal rate and regular rhythm. Neurological: He is alert and oriented.

SUBJECTIVE:Patient presents with: WART - RT index finger TX. PRESCRIPTION REFILL REQUESTED - P/pt for fungal between toes & groin for Clotrimazole cream USP,1%

OBJECTIVE: Lawson B Hawkins is a 54 year old male. Verruca on right pointing finger resolved. And residual erythema groin.

ASSESSMENT: 078.19E VERRUCA PLANA 110.3B TINEA CRURIS

PLAN:

Orders Placed This Encounter CLOTRIMAZOLE 1 % TOP CREA

Electronically signed by Adigwe-Mozia, Martha N (N.P.) at 5/27/2009 8:04 AM

05/27/2009 - Office Visit in DERMATOLOGY VENICE A 4TH FLOOR (continued)

Clinical Notes (continued)

Other Orders

edications		
CLOTRIMAZOLE 1 % TOP CREA [152687632] (Discontinued)		
Electronically signed by: Adigwe-Mozia, Martha N (N.P.) on 05/2 Ordering user: Adigwe-Mozia, Martha N (N.P.) 05/27/09 0801	2 7/09 0801 Authorized by: Adigwe-Mozia, Martha N	Status: Discontinuec (N.P.)
Ordering mode: Standard Frequency: Routine 05/27/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1001 Diagnoses TINEA CRURIS [110.3 (ICD-9-CM)]	Class: Fill Now	
Provider Details		
Provider	NPI	
Adigwe-Mozia, Martha N (N.P.)	1225186133	
Indications		
Tinea Cruris [110.3 (ICD-9-CM)]		

Patient Instructions

Becoming More Active

Almost any activity that gets you moving and strengthens your muscles is good for your health and can help move you towards your weight goal. Forty-five minutes of brisk exercise burns 250 to 350 calories. If you haven't been exercising regularly, start slowly and gradually increase how long, how often, and how hard you exercise.

* Aim for at least 30 to 60 minutes of activity on most days. The activity should be hard enough that you feel the effort but not so hard that you become out of breath. Walking is a good choice for many people.

* Exercising for several short periods that add up to 30 minutes helps just as much as exercising for 30 minutes at a time. You don't have to do it all at once.

* "Choose to move" whenever you can. Take the stairs rather than the elevator; take a walk instead of a coffee break. These are easy ways to be more active.

* Make it fun! Vary your activities or team up with a friend to help keep you going. Pick an activity you enjoy.

You may have other ideas of your own about how to be more active. Almost any activity counts!

Electronically signed by Roca, Evelyn Q at 5/27/2009 7:54 AM

END OF ENCOUNTER

06/08/2009 - Orders Only in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Printed on 1/12/24 5:33 PM

06/08/2009 - Orders Only in INTERNAL MEDICINE RAIN2 (continued)

Visit Information (continued)

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	
INTERNAL MEDICINE	RAIN2

Address 6041 CADILLAC AVE Los Angeles CA 90034-1702 Phone 833-574-2273

Imaging

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 06/	08/09 0809 Status: Discontinue
Ordering user: Hooks, Sarah Elizabeth (M.D.) 06/08/09 0809 Ordering mode: Standard	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 06/08/09 -	Class: Normal
Quantity: 1	Discontinued by: Interface, Scal_Radiology 06/14/09 1448 [Othe (PATIENT CANCELED EXAM)]
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131

END OF ENCOUNTER

07/28/2009 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider Authorizing Provider Hooks, Sarah Elizabeth (M.D.) Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE	833-574-2273	
	Los Angeles CA 90034-1702		

Follow-up and Dispositions

Return in about 3 weeks (around 8/18/2009) for nurse bp check. ٠

Level of Service

Level of Service **OUTPT EST LEVEL 2**

Reason for Visit

Chief Complaint

ORDER TESTS (per pt for DM)

Reason for Visit (continued)

Name	Code	Chronic?	
CHOLELITHIASIS	574.20	Yes	
OBESITY	278.00	Yes	
HYPERLIPIDEMIA	272.4	Yes	
PREDIABETES	790.29	Yes	
ELEVATED BLOOD PRESSURE READING WO DIAGNOSIS OF HTN	796.2	No	
SCREENING FOR CA, COLON	V76.51	No	
ELEVATED TRANSAMINASE MEASUREMENT	790.4	No	

Visit Account Information

Hospital Account				
Name	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2161161896 8	Charge Router-Auto HAR	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21611618968)

	Relation	to		
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	3432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	3432 x00000(O)		

Coverage Information (for Hospital Account #21611618968)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEEDS PLAN S	SCR KPSA SPECIAL NEEDS PLAN SCR	
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Vitals

Vital Signs				Most recent update: 7/28/2009 10:12 AM
BP 151/81	Pulse 103	Temp 97.6 °F (36.4 °C) (Tympanic)	Ht 5' 7" (1.702 m)	Wt 232 lb 12.8 oz (105.6 kg)

BMI 36.46 kg/m²

Clinical Notes

Nursing Note		
at 7/28/2009 1010		
Author: — Filed: Status: Signed	Service: — Encounter Date: 7/28/2009	Author Type: — Creation Time: 7/28/2009 10:10 AM
>> ALTAI CHAKERKHAAN LVN A copy of After Visit sum Pt.at this time,who verbal .ALTAI CHAKERKHAAN LVN	mary was given and instr	ructions were explained to
>> ALTAI CHAKERKHAAN LVN Lawson B Hawkins exercises strenuous level. PROACTIVE CARE ACTIONS		
Proactive Office Encounter pressure taken and documen Vitals taken by.ALTAI CHAK	ted	e above goal, repeat blood

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 7/28/2009 1028	
	_

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 7/28/2009 10:33 AM	Encounter Date: 7/28/2009	Creation Time: 7/28/2009 10:28 AM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.D.) (Ph	ysician)

History:

Thirsty and drinking lots of water, throat dry, wants DM test; about to start med wt loss program

History Reviewed:

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

ROS

PE Text: Not used

<u>Physical Exam</u> Vitals reviewed. Constitutional: He is well-developed, well-nourished, and in no distress. Pulmonary/Chest: Effort normal. Neurological: He is alert. Psychiatric: Affect normal.

A/P: ELEVATED BLOOD PRESSURE READING - dash/na handouts, f/u 3 wks Patient Active Problem List:

Clinical Notes (continued)

SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] Not a current SMOKER [305.1ZA] HYPERLIPIDEMIA [272.4C] - not sure why not on statin but check panel PREDIABETES [790.29C] - glu ELEVATED TRANSAMINASE MEASUREMENT [790.4B] -f/u SCREENING FOR CA, COLON [V76.51A] - pt agrees to submit OB, declines colo CHOLELITHIASIS [574.20A] - informed pt, 1 gallstone OBESITY [278.00E] - await med wt loss program start

RHM - psa current

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 7/28/2009 10:33 AM

Labs

LIPID PANEL [10	61578720] (Discontinued)		
Electronically sig	gned by: Hooks, Sarah Eliza	abeth (M.D.) on 07/28/09	1028 Status: Discontinued
Ordering user: H	looks, Sarah Elizabeth (M.D) 07/28/09 1028	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode:			
Frequency: Rou	tine 07/28/09 -		Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 10/02/09 1254 [Other
			(DUPLICATE-RESULTS PENDING FOR ANOTHER ACTIVE
			ORDER)]
Provider Det	ails		
Provider			NPI
Hooks, Sara	h Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_		BLOOD	_
GLUCOSE, FAS	TING [161578721] (Discont	inued)	
Electronically sig	gned by: Hooks, Sarah Eliza	beth (M.D.) on 07/28/09	1028 Status: Discontinued
	looks, Sarah Elizabeth (M.D		Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode:		,	······································
Frequency: Rou			Class: Normal
Quantity: 1			Discontinued by: Interface, Scal_ Lab 10/02/09 1254 [Other
, ,			(DUPLICATE-RESULTS PENDING FOR ANOTHER ACTIVE
			ORDER)]
Provider Det	ails		
Provider			NPI
	h Elizabeth (M.D.)		1497814131
ricono, cara			
Specimen In	formation		
ID	Туре	Source	Collected By
		BLOOD	
		DLOOD	
GLOBIN, FECAL	_ [161578722] (Discontinue	d)	
	gned by: Hooks, Sarah Eliza	•	1028 Status: Discontinued
LICOULDINGUILY SIL	gnou by: noons, ourait clize		

(continued)				
ordering user: Hooks, Sarah Ordering mode: Standard		09 1028	Authorized by: Hooks, Sar	ah Elizabeth (M.D.)
requency: Routine 07/28/09) -		Class: Normal	
luantity: 1			Discontinued by: Interface not present for lab)]	, Scal_ Lab 10/27/09 0529 [Other (Pt. c
Provider Details			not present for lab)	
Provider			NPI	
Hooks, Sarah Elizabeth (I	M.D.)		1497814131	
6H [161578723] (Final resu	lt)			
lectronically signed by: Hoo		.D.) on 07/28/09	9 1028	Status: Complet
his order may be acted on ir		0.4000	A with a sime of law set la sheet O as	
Ordering user: Hooks, Sarah Ordering mode: Standard	Elizabeth (M.D.) 07/28/0	J9 1028	Authorized by: Hooks, Sar	an Elizabeth (M.D.)
requency: Routine 07/28/09) -		Class: Normal	
luantity: 1			Lab status: Final result	
lagnoses				
BESITY. [278.00 (ICD-9-CN				
IYPERLIPIDEMIA [272.4 (IC LEVATED TRANSAMINASI				
Provider Details				
Provider			NPI	
Hooks, Sarah Elizabeth (I	M.D.)		1497814131	
Specimen Information	,			
ID Type	!	Source	Coll	ected By
438383454 —		BLOOD		08/04/09 1550
TSH [161578723]			Resulted:	08/06/09 0314, Result status: Final res
Order status: Completed			Filed on: 08/06/09 0314	
Order status. Completed	19 1550			N WAY REGIONAL LABORATORY
Collected by: RB2 08/04/0	59 1550			
Collected by: RB2 08/04/0	59 1000			
·		Value	Reference Range Flag	g Lab
Components		Value 1.28	Reference RangeFlag0.4 - 4.00 ulU/mL—	9 Lab 956
Components Component TSH				
Components Component TSH Reviewed by		1.28		
Components Component TSH Reviewed by Hooks, Sarah Eliza	beth (M.D.) on 08/13/09	1.28		
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung-V	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09	1.28 1425 0813		
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung-V Wang, John Yung-V	beth (M.D.) on 08/13/09	1.28 1425 0813 0811		
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung-V Wang, John Yung-V	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	1.28 1425 0813 0811		
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung-	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	1.28 1425 0813 0811		
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung-V Wang, John Yung-V Wang, John Yung-V Wang, John Yung-V	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	1.28 1425 0813 0811 0811	0.4 - 4.00 ulU/mL —	956
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung-	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	1.28 1425 0813 0811 0811 Director	0.4 - 4.00 ulU/mL — Address	956 Valid Date Range
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- Wang, John Yung- Testing Performed By Lab - Abbreviation	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Nen (M.D.) on 08/06/09	1.28 1425 0813 0811 0811	0.4 - 4.00 ulU/mL — Address	956 Valid Date Range /ay 08/30/05 1817 - 09/01/10 0000
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- Testing Performed By Lab - Abbreviation	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Men (M.D.) on 08/06/09	1.28 01425 0813 0811 0811 Director Ann M. Vanni	0.4 - 4.00 ulU/mL — Address er, 11668 Sherman W NORTH HOLLYW CA 91605	956 Valid Date Range /ay 08/30/05 1817 - 09/01/10 0000 OOD
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung-V Wang, John Yung-V Wang, John Yung-V Wang, John Yung-V Testing Performed By Lab - Abbreviation 240 - 956 TSH [161578723] Order status: Completed	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Men (M.D.) on 08/06/09 Nen (M.D.) on 08/06/09 Ken (M.D.) on 08/06/09	1.28 01425 0813 0811 0811 Director Ann M. Vanni	0.4 - 4.00 ulU/mL — Address er, 11668 Sherman W NORTH HOLLYW CA 91605 Resulted Filed on: 08/04/09 1615	956 Valid Date Range /ay 08/30/05 1817 - 09/01/10 0000 OOD : 08/04/09 1615, Result status: In proce
Components Component TSH Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- Wang, John Yung- Wang, John Yung- Testing Performed By Lab - Abbreviation 240 - 956 TSH [161578723]	beth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Men (M.D.) on 08/06/09 Nen (M.D.) on 08/06/09 Ken (M.D.) on 08/06/09	1.28 01425 0813 0811 0811 Director Ann M. Vanni	0.4 - 4.00 ulU/mL — Address er, 11668 Sherman W NORTH HOLLYW CA 91605 Resulted Filed on: 08/04/09 1615	956 Valid Date Range /ay 08/30/05 1817 - 09/01/10 0000

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813

Labs (continued)

Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811

Testing Performed By

Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannie M.D.	er, 11668 Sherm NORTH HOL CA 91605		08/30/05 1817 - 09/01/10 0000
ndications					
OBESITY [278.00 (ICD HYPERLIPIDEMIA [272 ELEVATED TRANSAM	2.4 (ICD-9-CM)]	NT [790.4 (ICD-9	-CM)]		
All Reviewers List					
Hooks, Sarah Elizabeth Wang, John Yung-Wen Wang, John Yung-Wen Wang, John Yung-Wen	(M.D.) on 8/6/2009 08 (M.D.) on 8/6/2009 08	3:13 3:11			
, SERUM [161578724] (Fi	•				
ctronically signed by: Hool s order may be acted on in		M.D.) on 07/28/09	1028		Status: Complete
dering user: Hooks, Sarah I dering mode: Standard		/09 1028	Authorized by: Hooks	, Sarah Eliza	abeth (M.D.)
quency: Routine 07/28/09	-		Class: Normal		
antity: 1 gnoses			Lab status: Final resu	llt	
PERLIPIDEMIA [272.4 (ICI EDIABETES [790.29 (ICD- EVATED TRANSAMINASE Provider Details	·9-CM)]				
Provider			NPI		
Hooks, Sarah Elizabeth (N	1.D.)		1497814131		
Specimen Information		Source		Collected P	N/
ID Type 438383454 —		BLOOD		Collected B RB2 08/04/0	*
ALT, SERUM [161578724]			Resu		09 1524, Result status: Final res
Order status: Completed Collected by: RB2 08/04/0	9 1550		Filed on: 08/05/09 1 Resulting lab: SHEF	-	REGIONAL LABORATORY
Components Component		Value	Reference Range	Flag	Lab
ALT		39	<41 units/L		956
Comment:	ty may vary by differer			ing the Roch	

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621

Labs

Testing Performed By Lab - Abbreviation				
	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 000
ALT, SERUM [161578724]		Resulted: 08/04	/09 1615, Result status: In pro
Order status: Completed Collected by: RB2 08/04/0	09 1550		ed on: 08/04/09 1615 sulting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
Wang, John Yung-\ Wang, John Yung-\ Wang, John Yung-\	abeth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 (Wen (M.D.) on 08/06/09 (Wen (M.D.) on 08/06/09 (.) on 08/05/09 1621	0813 0811		
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 000
All Reviewers List Hooks, Sarah Elizabetl Wang, John Yung-Wer Wang, John Yung-Wer	/INASE MEASUREMEN h (M.D.) on 8/13/2009 14 n (M.D.) on 8/6/2009 08:1 n (M.D.) on 8/6/2009 08:1 n (M.D.) on 8/6/2009 08:1	:25 3 1]	
Mathur, Priya (M.D.) or 161578725] (Final result)	n 8/5/2009 16:21			
ctronically signed by: Hoo		D.) on 07/28/09 102	8	Status: Compl
	n another encounter.		norized by: Hooks, Sarah Eliz	· · · · ·
dering user: Hooks, Sarah		<u></u>	s: Normal	
dering user: Hooks, Sarah dering mode: Standard equency: Routine 07/28/09 antity: 1 agnoses			status: Final result	
dering user: Hooks, Sarah dering mode: Standard equency: Routine 07/28/09 antity: 1 agnoses PERLIPIDEMIA [272.4 (IC				
dering user: Hooks, Sarah dering mode: Standard equency: Routine 07/28/09 antity: 1 agnoses PERLIPIDEMIA [272.4 (IC Provider Details		Lab	status: Final result	
dering user: Hooks, Sarah dering mode: Standard equency: Routine 07/28/09 antity: 1 agnoses PERLIPIDEMIA [272.4 (IC	CD-9-CM)]	Lab	status: Final result	
dering user: Hooks, Sarah dering mode: Standard equency: Routine 07/28/09 antity: 1 agnoses PERLIPIDEMIA [272.4 (IC Provider Details Provider	CD-9-CM)]	Lab	status: Final result	

T3 [161578725]

Order status: Completed

Resulted: 08/06/09 0314, Result status: Final result Filed on: 08/06/09 0314

Labs (continued)

llected by: RB2 08/04/0	1000	F	Resulting lab: SHERMAN WAY REGIONAL LABORATORY			
Components						
Component			Reference Range	Flag	Lab	
Т3		107	58 - 159 ng/dL	—	956	
Reviewed by						
Wang, John Yung- Wang, John Yung-	abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	9 0813 9 0811				
sting Performed By						
Lab - Abbreviation	Name	Director	Address		Valid Date Range	
240 - 956	SHERMAN WAY REGIONAL	Ann M. Vannier, M.D.	11668 Shern NORTH HOL CA 91605		08/30/05 1817 - 09/01/10 0000	
	LABORATORY					
rder status: Completed			Res Filed on: 08/04/09 1	615	1/09 1615, Result status: In proce	
rder status: Completed bllected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza	09 1550 abeth (M.D.) on 08/13/0	9 1425	Res Filed on: 08/04/09 1	615	I/09 1615, Result status: In proce	
Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- sting Performed By	09 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	9 1425 9 0813 9 0811 9 0811	Res Filed on: 08/04/09 1 Resulting lab: SHE	615	REGIONAL LABORATORY	
rder status: Completed billected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- sting Performed By Lab - Abbreviation	09 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	9 1425 9 0813 9 0811 9 0811 9 0811 Director	Res Filed on: 08/04/09 1 Resulting lab: SHEF	I615 RMAN WAY	REGIONAL LABORATORY	
rder status: Completed bllected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- sting Performed By	09 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09	9 1425 9 0813 9 0811 9 0811	Res Filed on: 08/04/09 1 Resulting lab: SHEF	1615 RMAN WAY	REGIONAL LABORATORY	
rder status: Completed billected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- sting Performed By Lab - Abbreviation	09 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Men (M.D.) on 08/06/09	9 1425 9 0813 9 0811 9 0811 9 0811 Director Ann M. Vannier,	Res Filed on: 08/04/09 1 Resulting lab: SHEF Address 11668 Shern NORTH HOL	1615 RMAN WAY	REGIONAL LABORATORY	
Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- Wang, John Yung- Sting Performed By Lab - Abbreviation 240 - 956	09 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Men (M.D.) on 08/06/09 Men (M.D.) on 08/06/09	9 1425 9 0813 9 0811 9 0811 9 0811 Director Ann M. Vannier,	Res Filed on: 08/04/09 1 Resulting lab: SHEF Address 11668 Shern NORTH HOL	1615 RMAN WAY	REGIONAL LABORATORY	
Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- Wang, John Yung- Sting Performed By Lab - Abbreviation 240 - 956	09 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Men (M.D.) on 08/06/09 Men (M.D.) on 08/06/09	9 1425 9 0813 9 0811 9 0811 9 0811 Director Ann M. Vannier,	Res Filed on: 08/04/09 1 Resulting lab: SHEF Address 11668 Shern NORTH HOL	1615 RMAN WAY	REGIONAL LABORATORY	

CREATININE, SERUM [161578726] (Final result)

Ordering user: Hooks, Sarah Elizabeth (M.D.) 07/28/09 1028	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	
Frequency: Routine 07/28/09 -	Class: Normal
Quantity: 1	Lab status: Final result
Diagnoses	
CHOLELITHIASIS [574.20 (ICD-9-CM)]	
HYPERLIPIDEMIA [272.4 (ICD-9-CM)]	
PREDIABETES [790.29 (ICD-9-CM)]	
ELEVATED BP READING WO HTN DIAGNOSIS [796.2 (ICD-9-C	CM)]

Status: Completed

Labs (continued)

Provider			NPI		
looks, Sarah Elizabeth	(M.D.)		1497814131		
pecimen Information					
ID Typ	e	Source		Collected	Ву
438383454 —		BLOOD		RB2 08/04/	/09 1550
REATININE, SERUM [161578726]		Res	ulted: 08/05	/09 1524, Result status: Final res
	1		Filed on: 08/05/09 1	1504	
Order status: Completed	1		Flied on: 08/05/09	1524	
					REGIONAL LABORATORY
Order status: Completed Collected by: RB2 08/04					REGIONAL LABORATORY
					REGIONAL LABORATORY
Collected by: RB2 08/04		Value	Resulting lab: SHE	RMAN WAY	' REGIONAL LABORATORY
Collected by: RB2 08/04 Components		Value 1.3	Resulting lab: SHE	RMAN WAY	
Collected by: RB2 08/04 Components Component	/09 1550		Resulting lab: SHE	RMAN WAY	Lab
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim	/09 1550 FRATION RATE ated GFR is derived ar	1.3 58-NB nd reported per 1.7	Resulting lab: SHE Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface ar	RMAN WAY	Lab 956 956 ed from Foundations System:
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim "NB" non-black, "E	FRATION RATE ated GFR is derived ar black. GFR estimate	1.3 58-NB nd reported per 1.7 has been multiplie	Resulting lab: SHEI Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface arr ed by 1.21 if "B" is indi	RMAN WAY	Lab 956 956 ed from Foundations System: system. * GFR Ranges *
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim "NB" non-black, "E GFR >89 Normal	F/09 1550 FRATION RATE ated GFR is derived ar black. GFR estimate (or CKD1*) 60-89 M	1.3 58-NB nd reported per 1.7 has been multipli lildly reduced (CKI	Resulting lab: SHEI Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface arr ed by 1.21 if "B" is indi D2*) 30-59 Moderat	Flag 	Lab 956 956 ed from Foundations System: system. * GFR Ranges * (CKD3 if >3mos) 15-29
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim "NB" non-black, "E GFR >89 Normal Severely reduced	FRATION RATE ated GFR is derived ar black. GFR estimate (or CKD1*) 60-89 M (CKD4 if >3mos) GFR	1.3 58-NB nd reported per 1.7 has been multiplio lildly reduced (CKI <15 Kidney failur	Resulting lab: SHEI Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface arr ed by 1.21 if "B" is indi D2*) 30-59 Moderat re (CDK5 if >3mos) * G	Flag 	Lab 956 956 ed from Foundations System: system. * GFR Ranges * (CKD3 if >3mos) 15-29 not diagnostic of CKD 1 or 2
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim "NB" non-black, "E GFR >89 Normal Severely reduced unless another ma	F/09 1550 FRATION RATE ated GFR is derived ar black. GFR estimate (or CKD1*) 60-89 M (CKD4 if >3mos) GFR rker of kidney damage	1.3 58-NB nd reported per 1.7 has been multipli lildly reduced (CKI <15 Kidney failur is present (e.g. m	Resulting lab: SHEI Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface arr ed by 1.21 if "B" is indi D2*) 30-59 Moderat re (CDK5 if >3mos) * G icroalbumin or urine pr	Flag 	Lab 956 956 ed from Foundations System: system. * GFR Ranges * (CKD3 if >3mos) 15-29
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim "NB" non-black, "E GFR >89 Normal Severely reduced unless another ma	FRATION RATE ated GFR is derived ar black. GFR estimate (or CKD1*) 60-89 M (CKD4 if >3mos) GFR	1.3 58-NB nd reported per 1.7 has been multipli lildly reduced (CKI <15 Kidney failur is present (e.g. m	Resulting lab: SHEI Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface arr ed by 1.21 if "B" is indi D2*) 30-59 Moderat re (CDK5 if >3mos) * G icroalbumin or urine pr	Flag 	Lab 956 956 ed from Foundations System: system. * GFR Ranges * (CKD3 if >3mos) 15-29 not diagnostic of CKD 1 or 2
Collected by: RB2 08/04 Components CREATININE GLOMERULAR FILT Comment: Comments: Estim "NB" non-black, "E GFR >89 Normal Severely reduced unless another ma	F/09 1550 FRATION RATE ated GFR is derived ar black. GFR estimate (or CKD1*) 60-89 M (CKD4 if >3mos) GFR rker of kidney damage	1.3 58-NB nd reported per 1.7 has been multipli lildly reduced (CKI <15 Kidney failur is present (e.g. m	Resulting lab: SHEI Reference Range 0.7 - 1.3 mg/dL mL/min 73 m2 body surface arr ed by 1.21 if "B" is indi D2*) 30-59 Moderat re (CDK5 if >3mos) * G icroalbumin or urine pr	Flag 	Lab 956 956 ed from Foundations System: system. * GFR Ranges * (CKD3 if >3mos) 15-29 not diagnostic of CKD 1 or 2

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

CREATININE, SERUM [161578726]

Resulted: 08/04/09 1615, Result status: In process

Order status: Completed Collected by: RB2 08/04/09 1550 Filed on: 08/04/09 1615 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Labs (continued)

Indications					
HYPERLIPIDE	SIS [574.20 (ICD-9-CM) MIA [272.4 (ICD-9-CM)] 90.29 (ICD-9-CM)]				
Elevated Blood	Pressure Reading Wo ANSAMINASE MEASU				
All Reviewers Lis	t				
Wang, John Yu Wang, John Yu Wang, John Yu	Elizabeth (M.D.) on 8/13. Ing-Wen (M.D.) on 8/6/2 Ing-Wen (M.D.) on 8/6/2 Ing-Wen (M.D.) on 8/6/2 M.D.) on 8/5/2009 16:21	009 08:13 009 08:11 009 08:11			
CTROLYTES, SE	RUM [161578727] (Edit	ed)			
	by: Hooks, Sarah Eliza		9 1028		Status: Complete
	ted on in another encour , Sarah Elizabeth (M.D.) dard		Authorized by: Hook	ks, Sarah Eliz	zabeth (M.D.)
equency: Routine			Class: Normal		
antity: 1			Lab status: Edited		
Ignoses EVATED BP REAI	DING WO HTN DIAGNO	SIS [796 2 (ICD-9-CM)1		
Provider Details			/]		
Provider			NPI		
Hooks, Sarah Eliz	abeth (M.D.)		1497814131		
Specimen Inform	ation				
ID	Туре	Source		Collected	
438383454	—	BLOOD		RB2 08/04	/09 1550
ELECTROLYTES,	SERUM [161578727] (Abnormal)		Resulted: 0	08/05/09 1545, Result status: Edite
Order status: Con Collected by: RB2			Filed on: 08/05/09 Resulting lab: SHE		REGIONAL LABORATORY
Components					
Component		Value	Reference Range		Lab
SODIUM		119	135 - 145 meq/L	AA	956
Comment: RESULT RE	CHECKED		- CALLED TO RN SHI	ELLEY S. x3	224 @ 15:43 GXPACH 08/05/09
	K OF TEST RESULT(S)				
POTASSIUM		5.2	3.5 - 5.0 meq/L	Н^	956
CHLORIDE		81	101 - 111 meq/L	L¥	956
-		19.5	21 - 31 meq/L	L¥	956
CO2					
Reviewed by					
Reviewed by Hooks, Sar Wang, Johi Wang, Johi Wang, Johi	ah Elizabeth (M.D.) on 0 h Yung-Wen (M.D.) on 0 h Yung-Wen (M.D.) on 0 h Yung-Wen (M.D.) on 0 ya (M.D.) on 08/05/09 16	8/06/09 0813 8/06/09 0811 8/06/09 0811			
Reviewed by Hooks, Sar Wang, Johi Wang, Johi Wang, Johi	י Yung-Wen (M.D.) on 0 י Yung-Wen (M.D.) on 0 י Yung-Wen (M.D.) on 0 va (M.D.) on 08/05/09 10 d By	8/06/09 0813 8/06/09 0811 8/06/09 0811	Address		

Ann M. Vannier,

M.D.

11668 Sherman Way

NORTH HOLLYWOOD

240 - 956

SHERMAN WAY

REGIONAL

08/30/05 1817 - 09/01/10 0000

Labs (

ontinued)						
	LABORATORY		CA 91605			
ELECTROLYTES, SERUI	M [161578727] (Abnorr	nal)	Res	ulted: 08/05	/09 1524, Result status: Final resul	
Order status: Completed Collected by: RB2 08/04/	09 1550		Filed on: 08/05/09 Resulting lab: SHE		REGIONAL LABORATORY	
Components						
Component		Value	Reference Range	Flag	Lab	
SODIUM		119	135 - 145 meq/L	AA	956	
Comment: RESULT	FRECHECKED.					
POTASSIUM		5.2	3.5 - 5.0 meq/L	Н^	956	
CHLORIDE		81	101 - 111 meq/L	L¥	956	
CO2		19.5	21 - 31 meq/L	L¥	956	
Reviewed by						
Wang, John Yung-	Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09).) on 08/05/09 1621					
Lab - Abbreviation	Name	Director	Address		Valid Date Range	
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier M.D.			08/30/05 1817 - 09/01/10 0000	
ELECTROLYTES, SERU	M [161578727]		Res	sulted: 08/04	4/09 1615, Result status: In proces	
Order status: Completed Collected by: RB2 08/04/	09 1550		Filed on: 08/04/09 1615 Resulting lab: SHERMAN WAY REGIONAL LABORATORY			
Reviewed by						
Wang, John Yung- Wang, John Yung- Wang, John Yung-	abeth (M.D.) on 08/13/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Wen (M.D.) on 08/06/09 Uen (M.D.) on 08/06/09 1.) on 08/05/09 1621	9 0813 9 0811				
Lab - Abbreviation	Name	Director	Address		Valid Date Range	
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannie M.D.	r, 11668 Shern NORTH HOI CA 91605		08/30/05 1817 - 09/01/10 0000	
Indications						
	ure Reading Wo Diagno	sis Of Htn [796.2 (ICD-9-CM)]			
Wang, John Yung-We Wang, John Yung-We	h (M.D.) on 8/13/2009 1 n (M.D.) on 8/6/2009 08 n (M.D.) on 8/6/2009 08 n (M.D.) on 8/6/2009 08 n 8/5/2009 16:21	:13 :11				

Labs (continued)

•						
MOGLOBIN A1C [161579	608] (Final result)					
ectronically signed by: Ho		1.D.) on 07/28/09 1	032		S	itatus: Complete
is order may be acted on dering user: Hooks, Sarał dering mode: Standard		09 1032 A	uthorized by: Hook	s, Sarah Eliz	abeth (M.D.)	
equency: Routine 07/28/0	9 -	C	lass: Normal			
antity: 1	•		ab status: Final res	ult		
agnoses						
EDIABETES [790.29 (ICI	D-9-CM)]					
Provider Details						
Provider			NPI			
Hooks, Sarah Elizabeth	(M.D.)		1497814131			
Specimen Information						
ID Typ	e	Source		Collected	Ву	
438383454 —		BLOOD		RB2 08/04/		
			-			
HEMOGLOBIN A1C [161					/09 1321, Result	status: Final resu
Order status: Completed			Filed on: 08/05/09			
Collected by: RB2 08/04	/09 1550		Resulting lab: SHE	RIMAN WAY	REGIONAL LAB	ORATORY
Components						
Component		Value	Reference Range	Flag	Lab	
HGBA1C%			4.8 - 5.9 %	H [^]	956	
Comment:						
	BE USED TO DIAGNOS A1C IS BEST USED TO					
TREATMENT PLA	OW 7.0 % AND VALUE: N.	3 20.0 % 3000EC			IE BEOOD 30G	
Hooks, Sarah Eliz Wang, John Yung Wang, John Yung Wang, John Yung Mathur, Priya (M.I	abeth (M.D.) on 08/13/09 -Wen (M.D.) on 08/06/09 -Wen (M.D.) on 08/06/09 -Wen (M.D.) on 08/06/09 D.) on 08/05/09 1621 D.) on 08/05/09 1346) 0813) 0811				
Lab - Abbreviation	Name	Director	Address		Valid Date Rar	nge
240 - 956	SHERMAN WAY	Ann M. Vannier	, 11668 Shern	nan Way		- 09/01/10 0000
	REGIONAL LABORATORY	M.D.	NORTH HOI CA 91605	LYWOOD		
HEMOGLOBIN A1C [161	579608]		Res	sulted: 08/04	/09 1615, Result	status: In proce
Order status: Completed			Filed on: 08/04/09 '			
Collected by: RB2 08/04	/09 1550		Resulting lab: SHE	RMAN WAY	REGIONAL LAB	ORATORY
Reviewed by						
	abeth (M.D.) on 08/13/09	1425				
	-Wen (M.D.) on 08/06/09					
	-Wen (M.D.) on 08/06/09					
Wang, John Yung	-Wen (M.D.) on 08/06/09					
Wang, John Yung Mathur, Priya (M.I						

Labs (continued)

Lab - Abbreviation	Name	Director	Address	Valid Date Range		
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000		
Indications Prediabetes [790.29 (ICD-9-CM)]						
All Reviewers List						

Wang, John Yung-Wen (M.D.) on 8/6/2009 08:13 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Mathur, Priya (M.D.) on 8/5/2009 16:21 Mathur, Priya (M.D.) on 8/5/2009 13:46

Patient Instructions

Becoming More Active

Almost any activity that gets you moving and strengthens your muscles is good for your health and can help move you towards your weight goal. Forty-five minutes of brisk exercise burns 250 to 350 calories. If you haven't been exercising regularly, start slowly and gradually increase how long, how often, and how hard you exercise.

* Aim for at least 30 to 60 minutes of activity on most days. The activity should be hard enough that you feel the effort but not so hard that you become out of breath. Walking is a good choice for many people.

* Exercising for several short periods that add up to 30 minutes helps just as much as exercising for 30 minutes at a time. You don't have to do it all at once.

* "Choose to move" whenever you can. Take the stairs rather than the elevator; take a walk instead of a coffee break. These are easy ways to be more active.

* Make it fun! Vary your activities or team up with a friend to help keep you going. Pick an activity you enjoy.

You may have other ideas of your own about how to be more active. Almost any activity counts!

Electronically signed by Chakerkhaan, Altai (L.V.N.) at 7/28/2009 10:09 AM

END OF ENCOUNTER

08/05/2009 - Ancillary Orders in EMERGENCY AREA

Visit Information

Provider Information

Encounter Provider

Ghadishah, Delaram (M.D.)

Department

Name

Address

Phone

08/05/2009 - Ancillary Orders in EMERGENCY AREA (continued)

Visit Information (continued)

EMERGENCY AREA

6041 CADILLAC AVE Los Angeles CA 90034-1702 323-857-2000

O-RH [162796900] (Fina	l result)					
ectronically signed by: Int rdering user: Interface, Sc uthorized by: Ghadishah, I requency: STAT - ab status: Final result Provider Details	al_Lab_Cerner 08/05/09		904 Ordering provider: Gl Ordering mode: Stan Quantity: 1		laram (M.D.)	Status: Complet
Provider			NPI			
Ghadishah, Delaram (M	.D.)		1417909573			
Specimen Information						
ID Typ	90	Source		Collected B	у	
C0000220092170 — 03790		BLOOD		08/05/09 180	00	
ABO-RH [162796900]			Res	ulted: 08/05/0)9 1904, Resu	lt status: Final re
Ordering provider: Ghad Filed on: 08/05/09 1904 Resulting lab: WLA MEI Narrative: RMS ACCN: 43845628	DICAL CENTER LABOR		Order status: Comp Collected by: 08/05/			
Components						
Component ABO AND RH BLOO	DD TYPE	Value O POS	Reference Range	Flag —	Lab 305	
ABO AND RH BLOO	DD TYPE		Reference Range	_	305	
ABO AND RH BLOC	Name	O POS Director	Address	_	305 Valid Date R	-
ABO AND RH BLOO Testing Performed By Lab - Abbreviation 321 - 305	Name WLA MEDICAL CENTER LABORATORY	O POS Director S.R. McLare	Address	 c Ave.	305 Valid Date R	-
ABO AND RH BLOO Testing Performed By Lab - Abbreviation 321 - 305	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res	O POS Director S.R. McLare	n, D.O. 6041 Cadillao LOS ANGEL	 c Ave.	305 Valid Date R	0 - 05/23/17 0009
ABO AND RH BLOO Testing Performed By Lab - Abbreviation 321 - 305	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/	O POS Director S.R. McLare	n, D.O. 6041 Cadillao LOS ANGEL	— c Ave. ES CA	305 Valid Date R 09/01/05 085	0 - 05/23/17 0009
ABO AND RH BLOC Testing Performed By Lab - Abbreviation 321 - 305 DIRECT COOMBS TEST rder placed as a reflex to a rdering user: Interface, Sc rdering mode: Standard requency: STAT -	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/	O POS Director S.R. McLare	Address n, D.O. 6041 Cadillad LOS ANGEL 90034	— c Ave. ES CA	305 Valid Date R 09/01/05 085	ange 0 - 05/23/17 000s Status: Complet
ABO AND RH BLOC Testing Performed By Lab - Abbreviation 321 - 305 DIRECT COOMBS TEST rder placed as a reflex to A rdering user: Interface, Sc rdering mode: Standard requency: STAT - ab status: Final result Provider Details	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/	O POS Director S.R. McLare	Address n, D.O. 6041 Cadillao LOS ANGEL 90034 Authorized by: Ghadi Quantity: 1	— c Ave. ES CA	305 Valid Date R 09/01/05 085	0 - 05/23/17 0009
ABO AND RH BLOC Testing Performed By Lab - Abbreviation 321 - 305 DIRECT COOMBS TEST rder placed as a reflex to a rdering user: Interface, Sc rdering mode: Standard requency: STAT - ab status: Final result	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/ al_Lab_Cerner 08/05/09	O POS Director S.R. McLare	Address n, D.O. 6041 Cadillad LOS ANGEL 90034	— c Ave. ES CA	305 Valid Date R 09/01/05 085	0 - 05/23/17 0009
ABO AND RH BLOC Testing Performed By Lab - Abbreviation 321 - 305 DIRECT COOMBS TEST rder placed as a reflex to a rdering user: Interface, Sc rdering mode: Standard requency: STAT - ab status: Final result Provider Details Provider	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/ al_Lab_Cerner 08/05/09	O POS Director S.R. McLare	Address n, D.O. 6041 Cadillad LOS ANGEL 90034 Authorized by: Ghadi Quantity: 1	— c Ave. ES CA	305 Valid Date R 09/01/05 085	0 - 05/23/17 0009
ABO AND RH BLOC Testing Performed By Lab - Abbreviation 321 - 305 DIRECT COOMBS TEST order placed as a reflex to a redering user: Interface, Sc redering mode: Standard requency: STAT - ab status: Final result Provider Details Provider Ghadishah, Delaram (M Specimen Information	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/ al_Lab_Cerner 08/05/03	O POS Director S.R. McLare	Address n, D.O. 6041 Cadillad LOS ANGEL 90034 Authorized by: Ghadi Quantity: 1	 ES CA shah, Delara	305 Valid Date R 09/01/05 085	0 - 05/23/17 0009
ABO AND RH BLOC Testing Performed By Lab - Abbreviation 321 - 305 DIRECT COOMBS TEST rder placed as a reflex to A rdering user: Interface, Sc rdering mode: Standard requency: STAT - ab status: Final result Provider Details Provider Details Provider Ghadishah, Delaram (M Specimen Information	Name WLA MEDICAL CENTER LABORATORY [162797877] (Final res ABO-RH ordered on 08/ al_Lab_Cerner 08/05/03	O POS Director S.R. McLaren oult) /05/09 at 1904 9 1846	Address n, D.O. 6041 Cadillad LOS ANGEL 90034 Authorized by: Ghadi Quantity: 1	— c Ave. ES CA	305 Valid Date R 09/01/05 085 m (M.D.)	0 - 05/23/17 0009

08/05/2009 - Ancillary Orders in EMERGENCY AREA (continued)

Labs (continued)

Order status: Completed Collected by: 08/05/09 1800 Narrative: RMS ACCN: 438456281 Filed on: 08/05/09 1925 Resulting lab: WLA MEDICAL CENTER LABORATORY

Components

Component	Value	Reference Range	Flag	Lab
BLOOD GROUP ANTIBODY SCREEN	Negative	_	_	305

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
321 - 305	WLA MEDICAL CENTER LABORATORY	S.R. McLaren, D.O.	6041 Cadillac Ave. LOS ANGELES CA 90034	09/01/05 0850 - 05/23/17 0009

END OF ENCOUNTER

08/09/2009 - Ancillary Orders in IP INTERNAL MEDICINE

Visit Information

Provider	Information			
Enco	unter Provider			

Kim, Injib John (M.D.)

Department

Name	Address	Phone
IP INTERNAL MEDICINE	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2000

Other Orders

_ancets (ONE TOUCH ULTRASOFT LANCETS) Misc Misc [163197471] (Discontinued)	
Electronically signed by: Interface, Scal_ Pharmacy on 08/09	9/09 0000	Status: Discontinue
Ordering user: Interface, Scal_ Pharmacy 08/09/09 0000	Authorized by: Kim, Injib John (M.D.)	
Ordering mode: Standard		
Frequency: 08/09/09 - 01/29/10	Class: Fill Later	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 01/29/10 093	8 [Continue Therapy]	
Provider Details		
Provider	NPI	
Interface, Scal Pharmacy	_	
internace, ecal_ : nainnacy		

END OF ENCOUNTER

08/09/2009 - Orders Only in IP INTERNAL MEDICINE

08/09/2009 - Orders Only in IP INTERNAL MEDICINE (continued)

Visit Information

Provider Information

Encounter Provider Kim, Injib John (M.D.)

Department

Name	Address	Phone
IP INTERNAL MEDICINE	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2000

Other Orders

cations		
D LANCET DEVICE MISC MISC [163187224] (Expired)		
Electronically signed by: Kim, Injib John (M.D.) on 08/09/09 095 Ordering user: Kim, Injib John (M.D.) 08/09/09 0955 Ordering mode: Standard	Authorized by: Kim, Injib John (M.D.)	Status: Expire
Frequency: Routine 08/09/09 - 08/09/11	Class: Fill Later	
Provider Details		
Provider	NPI	
Kim, Injib John (M.D.)	1922150234	
D INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 X 1/2" MISC SY	RINGE [163187223] (Discontinued)	
Electronically signed by: Kim, Injib John (M.D.) on 08/09/09 095		Status: Discontinu
Ordering user: Kim, Injib John (M.D.) 08/09/09 0955 Ordering mode: Standard	Authorized by: Kim, Injib John (M.D.)	
Frequency: Routine 08/09/09 - 04/02/10	Class: Fill Later	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1106		
Provider Details		
Provider	NPI	
Kim, Injib John (M.D.)	1922150234	
	:	
DNE TOUCH ULTRA TEST INVT STRIPS [163187225] (Discont	•	Status: Discontinu
Electronically signed by: Kim, Injib John (M.D.) on 08/09/09 095 Ordering user: Kim, Injib John (M.D.) 08/09/09 0955 Ordering mode: Standard	Authorized by: Kim, Injib John (M.D.)	Status: Discontinu
Frequency: Routine 08/09/09 - 01/19/10	Class: Fill Later	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 01/19/10 1350 [
Discontinued by. Hooks, Salah Elizabeth (M.D.) 01/19/10 1330 [
Provider Details		
	NPI	

END OF ENCOUNTER

08/13/2009 - Ancillary Orders in PASADENA MORD

Visit Information

C	Department					
	Name	Address	Phone			
	PASADENA MORD	450 N LAKE AVE Pasadena CA 91101-1216	626-440-0036			

08/13/2009 - Ancillary Orders in PASADENA MORD (continued)

Visit Information (continued)

Oth

Other Orders			
Medications			
ABILIFY 30 MG ORAL TAB [1637642	284] (Discontinued)		
Electronically signed by: Yu, Laptak Ordering user: Yu, Laptak (Rph) 08/1 Ordering mode: Standard		Authorized by: SCAL PROVIDER	Status: Discontinued
Frequency: 08/13/09 - 04/02/10		Discontinued by: Hooks, Sarah Elizabe	eth (M.D.) 04/02/10 1106
Provider Details			
Provider		NPI	
SCAL PROVIDER		—	
Yu, Laptak (Rph)		1225452394	
	END OF EN	COUNTER	
	 009 - Office Visit in IN	TERNAL MEDICINE RAIN2	
Visit Information			
Provider Information			
Encounter Provider		Authorizing Provider	
Hooks, Sarah Elizabeth (M.D.)		Hooks, Sarah Elizabeth (M.D.)	
Department			
Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE	833-574-2273	

Los Angeles CA 90034-1702

Follow-up and Dispositions

• Return in about 4 months (around 12/13/2009) for f/u.

Level of Service

Level of Service **OUTPT EST LEVEL 3**

Reason for Visit

Chief Complaint

HOSPITAL DISCHARGE NOTE

Visit Diagnoses

Name	Code	Chronic?
OBESITY	278.00	Yes
DM 2, UNCONTROLLED	250.02	Yes
DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED	250.80, 272.2	Yes

Vitals

08/13/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued) Vitals (continued) Vital Signs Most recent update: 8/13/2009 11:44 AM ΒP Pulse Wt Temp Ht 97.3 °F (36.3 °C) 114/65 72 5'7" (1.702 m) 229 lb 3.2 oz (104 kg) BMI 35.90 kg/m² **Clinical Notes Nursing Note** at 8/13/2009 1150 Author: ----Service: -Author Type: -Creation Time: 8/13/2009 11:50 AM Filed: Encounter Date: 8/13/2009 Status: Signed >> SUSAN HOWELL LVN Thu Aug 13, 2009 12:13 PM After Visit Summary given and discussed with patient. >> LINDA A MC CRARY Thu Aug 13, 2009 11:46 AM Pt. Has appointment for retinal eye exam on 08/28/09>> LINDA A MC CRARY Thu Aug 13, 2009 11:45 AM PROACTIVE CARE ACTIONS Proactive Office Encounter Actions: Diabetes Registry Member: Member prepared for foot exam

Progress Notes

Status: Signed

Hooks, Sarah Elizabeth (M.D.) at 8/13/20	Hooks, Sarah Elizabeth (M.D.) at 8/13/2009 1154				
Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician			
Filed: 8/13/2009 12:51 PM	Encounter Date: 8/13/2009	Creation Time: 8/13/2009 11:54 AM			

Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

History:

Feeling much better, fs improving, lately 134-311

History Reviewed:

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Neurological: Negative for sensory change.

PE Text: Not used

<u>Physical Exam</u> Vitals reviewed. Constitutional: He is well-developed, well-nourished, and in no distress.

KAISER PERMANENTE

08/13/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

Cardiovascular: Normal rate, regular rhythm and intact distal pulses. Pulmonary/Chest: Effort normal. Neurological: He is alert.

Bilat feet monofilament wnl

Skin: Skin is warm and dry. Psychiatric: Affect normal.

A/P:

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] - saw Psych today, pt informed them of DM dx GERD [530.81A] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A] - reminded to submit OB CHOLELITHIASIS [574.20A] OBESITY [278.00E] - pt informed program of DM dx DM 2, UNCONTROLLED [250.02B] - CM, Eye pending, labs Oct, incr metf

RHM - PSA current, pneumovax next visit

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 8/13/2009 12:51 PM

Labs

GLUCOSE, FAS	STING [163838838] (Complet	ed)		
Electronically s	igned by: Hooks, Sarah Eliza	beth (M.D.) on 08/13/09	1149	Status: Completed
	Hooks, Sarah Elizabeth (M.D.)		Authorized by: Hooks, Sarah Elizabeth (M.D.)	•
Ordering mode				
Frequency: Ro	utine 08/13/09 -		Class: Normal	
Quantity: 1				
Diagnoses				
	TROLLED. [250.02 (ICD-9-CN			
DM 2 W MIXED	D HYPERLIPIDEMIA [250.80, 2	272.2 (ICD-9-CM)]		
Provider De	etails			
Provider			NPI	
Hooks, Sar	ah Elizabeth (M.D.)		1497814131	
Specimen li	nformation			
ID	Туре	Source	Collected By	
_		BLOOD	_	
Indications				
	NCONTROLLED [250.02 (ICD	-9-CM)]		
	DIABETIC HYPERLIPIDEMIA		(ICD-9-CM)]	
2111 2 11				
GLUCOSE,	FASTING [168670347] (Abno	ormal)	Resulted: 10/03/09 0533, Resu	ult status: Final result
Order statu	s: Completed		Filed on: 10/03/09 0533	
Collected b	y: GRE 10/02/09 1254		Resulting lab: SHERMAN WAY REGIONAL L	ABORATORY
Narrative:				

Labs (continued)

Details hyperlink for indice	inderstand that other pro ion of care is necessary ation of all providers wh	. Click on the Order	Ceivea		
notification of this result.	ation of all providers with	o nave received			
Components					
Component	-		Reference Range	Flag	Lab
GLUCOSE, FASTING	G	100	70 - 99 mg/dL	н^	956
Reviewed by					
Hooks, Sarah Eliza Hooks, Sarah Eliza	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0	9 0828 9 1733			
CC List					
Recipient	Modifier	Fax	Address		Added
Hooks, Sarah Elizabe M.D.	th (M.D.), —	—	—		—
esting Performed By					
Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherm NORTH HOL CA 91605		08/30/05 1817 - 09/01/10 0000
GLUCOSE, FASTING [16	686703471		Res	ulted: 10/02	/09 1254, Result status: In proce
Order status: Completed	-		Filed on: 10/02/09 1		·····
Collected by: GRE 10/02		I	Resulting lab: SHER	RMAN WAY	REGIONAL LABORATORY
Reviewed by					
Hooks, Sarah Eliza	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0				
Hooks, Sarah Eliza Hooks, Sarah Eliza					
Hooks, Sarah Eliza Hooks, Sarah Eliza	abeth (M.D.) on 10/06/0 Modifier		Address		Added —
Hooks, Sarah Eliza Hooks, Sarah Eliza C List Recipient Hooks, Sarah Elizabet M.D.	abeth (M.D.) on 10/06/0 Modifier	9 1733	Address		Added —
Hooks, Sarah Eliza Hooks, Sarah Eliza C List Recipient Hooks, Sarah Elizaber M.D. Testing Performed By Lab - Abbreviation	abeth (M.D.) on 10/06/0 Modifier th (M.D.), — Name	9 1733 Fax — Director	Address		 Valid Date Range
Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient Hooks, Sarah Elizabet M.D.	abeth (M.D.) on 10/06/0 Modifier th (M.D.), —	9 1733 Fax —	_		 Valid Date Range
Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient Hooks, Sarah Elizabet M.D. Festing Performed By Lab - Abbreviation 240 - 956	abeth (M.D.) on 10/06/0 Modifier th (M.D.), — Mame SHERMAN WAY REGIONAL	9 1733 Fax — Director Ann M. Vannier,	Address 11668 Sherm NORTH HOL		 Valid Date Range
Hooks, Sarah Eliza Hooks, Sarah Eliza C List Recipient Hooks, Sarah Elizabet M.D. esting Performed By Lab - Abbreviation 240 - 956 ndications DM 2, UNCONTROLL	abeth (M.D.) on 10/06/0 Modifier th (M.D.), — Mame SHERMAN WAY REGIONAL	9 1733 Fax — Director Ann M. Vannier, M.D.	Address 11668 Sherm NORTH HOL CA 91605		 Valid Date Range
Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient Hooks, Sarah Elizabet M.D. Festing Performed By Lab - Abbreviation 240 - 956 Indications DM 2, UNCONTROLL DM 2 W DIABETIC HY	Modifier th (M.D.), — Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY LABORATORY LED [250.02 (ICD-9-CM YPERLIPIDEMIA, MIXE	9 1733 Fax — Director Ann M. Vannier, M.D.	Address 11668 Sherm NORTH HOL CA 91605		
Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient Hooks, Sarah Elizabet M.D. Festing Performed By Lab - Abbreviation 240 - 956 Indications DM 2, UNCONTROLL	Abeth (M.D.) on 10/06/0 Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY LED [250.02 (ICD-9-CM] YPERLIPIDEMIA, MIXE Completed) oks, Sarah Elizabeth (I	9 1733 Fax — Director Ann M. Vannier, M.D.)] ED [250.80, 272.2 (IC M.D.) on 08/13/09 1	— Address 11668 Sherm NORTH HOL CA 91605 :D-9-CM)]		Valid Date Range 08/30/05 1817 - 09/01/10 0000

Labs (continued)

ontinued) antity: 1					
gnoses					
ESITY. [278.00 (ICD-9-CM)]					
2, UNCONTROLLED. [250.02 (ICD-9-CM)] 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (I					
Provider Details					
Provider		NPI			
Hooks, Sarah Elizabeth (M.D.)		1497814131			
Specimen Information					
ID Type	Source		Collected By	1	
	BLOOD		_		
ndications					
OBESITY [278.00 (ICD-9-CM)] DM 2, UNCONTROLLED [250.02 (ICD-9-CM) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXE		2 (ICD-9-CM)]			
IPID PANEL [168670348] (Abnormal)	L ,		ulted: 10/03/09	9 0533, Result status	s: Final resu
Order status: Completed		Filed on: 10/03/09 0			
Collected by: GRE 10/02/09 1254				EGIONAL LABORA	TORY
Narrative: FASTING? YES					
this result, thus coordination of care is necessary Details hyperlink for indication of all providers whe notification of this result					
Details hyperlink for indication of all providers when notification of this result.					
Details hyperlink for indication of all providers wh			Flag	Lab	
Details hyperlink for indication of all providers when notification of this result.	no have received		Flag	Lab 956	
Details hyperlink for indication of all providers when notification of this result. Components Component	no have received	Reference Range	Flag —		
Details hyperlink for indication of all providers when notification of this result. Components CHOLESTEROL	no have received Value 125	Reference Range	Flag — — ∟	956	
Details hyperlink for indication of all providers when notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED	No have received Value 125 102	Reference Range <200 mg/dL <150 mg/dL	_	956 956	
Details hyperlink for indication of all providers whenotification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN	Value 125 102 37	Reference Range<200 mg/dL	_	956 956 956	
Details hyperlink for indication of all providers when notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h	Reference Range <200 mg/dL	_ _ _ _ _	956 956 956 956 956 - CHOL T	TRIG
Details hyperlink for indication of all providers whenotification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h	Reference Range <200 mg/dL	 L ▼ =40 <100 NE	956 956 956 956 956 - CHOL T EAR OPTIML:	-
Details hyperlink for indication of all providers when notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9	Reference Range <200 mg/dL	 L ▼ =40 <100 NE 0-499 160	956 956 956 956 956 - CHOL T EAR OPTIML: 0-189 VERY HIGH:	-
Details hyperlink for indication of all providers whenotification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159	Reference Range <200 mg/dL	 L ✓ =40 <100 NE 0-499 160 ascular disease	956 956 956 956 956 - CHOL T EAR OPTIML: 0-189 VERY HIGH: e, diabetes mellitus,	or chronic
Details hyperlink for indication of all providers whenotification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159	Reference Range <200 mg/dL	 L ✓ =40 <100 NE 0-499 160 ascular disease	956 956 956 956 956 - CHOL T EAR OPTIML: 0-189 VERY HIGH: e, diabetes mellitus,	or chronic
Details hyperlink for indication of all providers when notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment: 	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159 All h vels below 100 m	Reference Range <200 mg/dL	 L ✓ =40 <100 NE 0-499 160 ascular disease	956 956 956 956 956 - CHOL T EAR OPTIML: 0-189 VERY HIGH: e, diabetes mellitus,	or chronic
Details hyperlink for indication of all providers whenotification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159 All h //els below 100 m 9 0828	Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs)	 L ✓ =40 <100 NE 0-499 160 ascular disease	956 956 956 956 956 - CHOL T EAR OPTIML: 0-189 VERY HIGH: e, diabetes mellitus,	or chronic
Details hyperlink for indication of all providers with notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment: F HDL-C LDL-C F HDL-C LDL-C F HOOME F HDL-C LDL-C	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159 All h //els below 100 m 9 9 9 9 9 9 9	Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova ng/dL. Optimal manage	 L ✓ =40 <100 NE 0-499 160 ascular disease	956 956 956 956 956 - CHOL T EAR OPTIML: D-189 VERY HIGH: e, diabetes mellitus, s adequate dosing o	or chronic
Details hyperlink for indication of all providers with notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment: 	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159 All h //els below 100 m 9 0828	Reference Range <200 mg/dL	 L ✓ =40 <100 NE 0-499 160 ascular disease	956 956 956 956 956 - CHOL T EAR OPTIML: 0-189 VERY HIGH: e, diabetes mellitus,	or chronic
Details hyperlink for indication of all providers with notification of this result. Components CHOLESTEROL TRIGLYCERIDE HDL LDL CALCULATED CHOLESTEROL/HIGH DENSITY LIPOPROTEIN Comment:	Value 125 102 37 68 3.4 Fasting (>/= 12 h OPTIM/ 9 130-159 All h //els below 100 m 9 9 9 9 9 9 9	Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova ng/dL. Optimal manage	 L ▼ =40 <100 NE 0-499 160 ascular disease ement includes	956 956 956 956 956 - CHOL T EAR OPTIML: D-189 VERY HIGH: e, diabetes mellitus, s adequate dosing o	or chronic

continued) 240 - 956	SHERMAN WAY REGIONAL	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD	08/30/05 1817 - 09/01/10 000
	LABORATORY		CA 91605	
LIPID PANEL [16867034				02/09 1254, Result status: In pro
Order status: Completed Collected by: GRE 10/0			ed on: 10/02/09 1254 esulting lab: SHERMAN WA	Y REGIONAL LABORATORY
Reviewed by				
	zabeth (M.D.) on 10/07/ zabeth (M.D.) on 10/06/			
CC List				
Recipient Hooks, Sarah Elizabe M.D.	Modifier eth (M.D.), —	Fax —	Address —	Added —
Testing Performed By				
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 000
Indications				
OBESITY [278.00 (IC DM 2, UNCONTROL	LED [250.02 (ICD-9-CN IYPERLIPIDEMIA, MIXI)-9-CM)]	
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) poks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)]	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas		Status: Compl izabeth (M.D.)
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 Jantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) poks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)]	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)]	9 norized by: Hooks, Sarah El ss: Normal	
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 Jantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/1 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)]	9 norized by: Hooks, Sarah El ss: Normal	
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Hooks, Sarah Elizabeth	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/1 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)]	9 norized by: Hooks, Sarah El ss: Normal	
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.)	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)]	9 horized by: Hooks, Sarah El ss: Normal 97814131	izabeth (M.D.)
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Hooks, Sarah Elizabeth	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.)	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)] NF 14	9 norized by: Hooks, Sarah El ss: Normal	izabeth (M.D.)
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.)	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)] NF 14 Source	9 horized by: Hooks, Sarah El ss: Normal 97814131	izabeth (M.D.)
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ — — — Indications DM 2, UNCONTROL	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.)	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Clas (ICD-9-CM)] NF 14 Source BLOOD	9 horized by: Hooks, Sarah El ss: Normal 97814131 Collectec —	izabeth (M.D.)
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ — — — Indications DM 2, UNCONTROL DM 2 W DIABETIC H HEMOGLOBIN A1C [167	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.) be LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8670349] (Abnormal)	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Class (ICD-9-CM)] NF 14 Source BLOOD 1)] ED [250.80, 272.2 (ICD	9 horized by: Hooks, Sarah El ss: Normal 97814131 Collected 	I By
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ Indications DM 2, UNCONTROL DM 2 W DIABETIC H	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.) be LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8670349] (Abnormal) d	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Class (ICD-9-CM)] NF 14 Source BLOOD (ICD 1)] ED [250.80, 272.2 (ICD File	19 horized by: Hooks, Sarah El ss: Normal 21 97814131 Collected 0-9-CM)] Resulted: 10/0 ed on: 10/02/09 2303	I By
OBESITY [278.00 (IC DM 2, UNCONTROL DM 2 W DIABETIC H MOGLOBIN A1C [163833 ectronically signed by: Ho rdering user: Hooks, Sara rdering mode: Standard equency: Routine 08/13/0 uantity: 1 agnoses M 2, UNCONTROLLED. [2 M 2 W MIXED HYPERLIP Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ — — — Indications DM 2, UNCONTROL DM 2 W DIABETIC H HEMOGLOBIN A1C [166 Order status: Completed	LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8840] (Completed) boks, Sarah Elizabeth (h Elizabeth (M.D.) 08/13 09 - 250.02 (ICD-9-CM)] IDEMIA [250.80, 272.2 (M.D.) be LED [250.02 (ICD-9-CM IYPERLIPIDEMIA, MIXI 8670349] (Abnormal) d	ED [250.80, 272.2 (ICD (M.D.) on 08/13/09 114 3/09 1149 Auth Class (ICD-9-CM)] NF 14 Source BLOOD (ICD 1)] ED [250.80, 272.2 (ICD File	19 horized by: Hooks, Sarah El ss: Normal 21 97814131 Collected 0-9-CM)] Resulted: 10/0 ed on: 10/02/09 2303	I By 2/09 2303, Result status: Final re

Labs (continued)

Comment: HBA1C CANNOT BE USED TO DIAGNOSE OR SCREEN FOR DIABETES OR OTHER DISORDERS OF GLUCOSE TOLERANCE. HBA1C IS BEST USED TO MONITOR BLOOD SUGAR CONTROL IN PATIENTS WITH DIABETES. IDEAL VALUES ARE BELOW 7.0 % AND VALUES >8.0 % SUGGEST THE NEED TO IMPROVE THE BLOOD SUGAR CONTROL TREATMENT PLAN.

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 10/07/09 0828 Hooks, Sarah Elizabeth (M.D.) on 10/06/09 1733

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

HEMOGLOBIN A1C [168670349]

Order status: Completed Collected by: GRE 10/02/09 1254 Resulted: 10/02/09 1254, Result status: In process

Filed on: 10/02/09 1254 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 10/07/09 0828 Hooks, Sarah Elizabeth (M.D.) on 10/06/09 1733

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
Indications				
DM 2, UNCONTROLLI	ED [250.02 (ICD-9-CM)]		
	PERLIPIDEMIA, MIXÉ		9-CM)]	
		n.		
ECTROLYTES, SERUM [1	63838841] (Completed	l)		
· · · ·)	Status: Complet
ECTROLYTES, SERUM [1 ectronically signed by: Hoo rdering user: Hooks, Sarah	ks, Sarah Elizabeth (N	I.D.) on 08/13/09 114) orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/	1.D.) on 08/13/09 114 09 1149 Auth	orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/	1.D.) on 08/13/09 114 09 1149 Auth		
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard equency: Routine 08/13/09 uantity: 1	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/	1.D.) on 08/13/09 114 09 1149 Auth	orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard equency: Routine 08/13/09 uantity: 1 agnoses	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/) -	1.D.) on 08/13/09 114 09 1149 Auth	orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard equency: Routine 08/13/09 uantity: 1 agnoses M 2, UNCONTROLLED. [25	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/) - 50.02 (ICD-9-CM)]	I.D.) on 08/13/09 114 09 1149 Auth Clas	orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard equency: Routine 08/13/09 uantity: 1 agnoses	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/) - 50.02 (ICD-9-CM)]	I.D.) on 08/13/09 114 09 1149 Auth Clas	orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard equency: Routine 08/13/09 uantity: 1 agnoses M 2, UNCONTROLLED. [25	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/) - 50.02 (ICD-9-CM)]	I.D.) on 08/13/09 114 09 1149 Auth Clas	orized by: Hooks, Sarah Eliz	
ectronically signed by: Hoo rdering user: Hooks, Sarah rdering mode: Standard equency: Routine 08/13/09 uantity: 1 agnoses M 2, UNCONTROLLED. [25 M 2 W MIXED HYPERLIPIE	ks, Sarah Elizabeth (N Elizabeth (M.D.) 08/13/) - 50.02 (ICD-9-CM)]	I.D.) on 08/13/09 114 09 1149 Auth Clas	orized by: Hooks, Sarah Eliz s: Normal	

Specimen Information

ID	Туре	Source	Collected By
—	_	BLOOD	—

Indications

DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, 272.2 (ICD-9-CM)]

Labs (continued)

, SERUM [163838842] (ctronically signed by: Ho	· /	MD) on 08/13/09 11/0)	Status: Completed
lering user: Hooks, Sarah			, orized by: Hooks, Sarah Eli	
lering mode: Standard		01	N.I	
quency: Routine 08/13/0 antity: 1	9 -	Class	s: Normal	
gnoses				
2, UNCONTROLLED. [2				
I 2 W MIXED HYPERLIPI Provider Details	DEMIA [250.80, 272.2 ([ICD-9-CM)]		
			•	
Provider Hooks, Sarah Elizabeth	(M D)	NP 149	07814131	
·	(111.0.)			
Specimen Information				
ID Typ	e	Source BLOOD	Collected	Ву
		BLOOD	—	
ndications				
	ED [250.02 (ICD-9-CM		0.000	
DM 2 W DIABETIC H	YPERLIPIDEMIA, MIXE	:D [250.80, 272.2 (ICD-	9-CM)]	
ALT, SERUM [16867035	1]		Resulted: 10/03	/09 0533, Result status: Final resul
Order status: Completed		File	d on: 10/03/09 0533	
Collected by: GRE 10/02	2/09 1254	Res	sulting lab: SHERMAN WAY	REGIONAL LABORATORY
Components				
Component		Value Ref	oronco Pango Elag	Lab
Component ALT			erence Range Flag	Lab 956
ALT Comment:	vity may vary by differe	27 <41	erence Range Flag units/L — vas measured using the Roo	956
ALT Comment: The measured acti Reviewed by		27 <41 nt method. This result v	units/L —	956
ALT Comment: The measured acti Reviewed by Hooks, Sarah Elize	vity may vary by differen abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0	27 <41 nt method. This result w 9 0828	units/L —	956
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0	27 <41 nt method. This result w 9 0828	units/L —	956
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name	27 <41 nt method. This result w 9 0828 9 1733 Director	units/L — vas measured using the Roo	956 che method. Valid Date Range
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Gesting Performed By	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0	27 <41 nt method. This result w 9 0828 9 1733	units/L —	956 che method.
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Festing Performed By Lab - Abbreviation 240 - 956	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY	27 <41 nt method. This result v 9 0828 9 1733 Director Ann M. Vannier,	units/L — vas measured using the Roo Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	956 che method. Valid Date Range
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	27 <41 nt method. This result w 9 0828 9 1733 Director Ann M. Vannier, M.D.	units/L — vas measured using the Roo Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	956 che method. Valid Date Range 08/30/05 1817 - 09/01/10 0000
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Festing Performed By Lab - Abbreviation 240 - 956	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	27 <41 nt method. This result w 9 0828 9 1733 Director Ann M. Vannier, M.D. File	units/L — /as measured using the Roo ///////////////////////////////////	956 che method. Valid Date Range 08/30/05 1817 - 09/01/10 0000
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	27 <41 nt method. This result w 9 0828 9 1733 Director Ann M. Vannier, M.D. File	units/L — /as measured using the Roo ///////////////////////////////////	956 che method. Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In process
ALT Comment: The measured acti Reviewed by Hooks, Sarah Elize Hooks, Sarah Elize Hooks, Sarah Elize Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Elize	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	27 <41 nt method. This result v 19 0828 19 1733 Director Ann M. Vannier, M.D. File Res	units/L — /as measured using the Roo ///////////////////////////////////	956 che method. Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In process
ALT Comment: The measured acti Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	27 <41 nt method. This result v 19 0828 19 1733 Director Ann M. Vannier, M.D. File Res	units/L — /as measured using the Roo ///////////////////////////////////	956 che method. Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In process
ALT Comment: The measured acti Reviewed by Hooks, Sarah Elize Hooks, Sarah Elize Festing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Elize	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	27 <41 nt method. This result v 19 0828 19 1733 Director Ann M. Vannier, M.D. File Res	units/L — /as measured using the Roo ///////////////////////////////////	956 che method. Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In process

NORTH HOLLYWOOD

REGIONAL

M.D.

CA 91605

Labs (continued)

LABORATORY

Indications

DM 2, UNCONTROLLED [250.02 (ICD-9-CM)]

DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, 272.2 (ICD-9-CM)]

Procedures

JNDUS PHOTOGRAPHY FOR DIABETIC RETINAL SCREENIN	G [163838630] (Discontinued)
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 08/13	
Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1149	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	
requency: Routine 08/13/09 -	Class: Normal
Quantity: 1	Discontinued by: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1203
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
Orders	
edications	
metFORMIN (GLUCOPHAGE) 500 mg Oral Tab [163840585]	(Discontinued)
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1158 Ordering mode: Standard	8/13/09 1158 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 08/13/09 - 04/02/10	Class: Fill Now
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113	3 [Continue Therapy]
Diagnoses	
DM 2, UNCONTROLLED. [250.02 (ICD-9-CM)]	
DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM))]
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
Indications	
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)]	272.2 (ICD-9-CM)]
	272.2 (ICD-9-CM)]
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80,	
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)]	
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti	inued)
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80,	inued)
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04	inued) 8/13/09 1150 Status: Discontinued
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 Diagnoses	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now 3 [Continue Therapy]
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now 3 [Continue Therapy]
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 Diagnoses	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now 3 [Continue Therapy]
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM) Provider Details Provider	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now 3 [Continue Therapy])] NPI
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM) Provider Details	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now 3 [Continue Therapy])]
DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, Simvastatin (ZOCOR) 20 mg Oral Tab [163839092] (Disconti Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1150 Ordering mode: Standard Frequency: Routine 08/13/09 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM) Provider Details Provider	inued) 8/13/09 1150 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Now 3 [Continue Therapy])] NPI

Other Orders (continued)

Patient Instructions

Decrease simvastatin (cholesterol medicine) to 1/2 tablet, when your current bottle is empty the refill will be for 20mg so take a whole tablet

Increase Metformin to 2 tablets twice daily

Fasting labs in October

A specialty Pharmacist will call you to check on your sugars and medicines

Remember to submit the stool test

END OF ENCOUNTER

08/18/2009 - Allied Health/Nurse Visit in INTERNAL MEDICINE AQUA2

Visit Information

Provider Information

Encounter Provider

Chakerkhaan, Altai (L.V.N.)

Department

Name	Address	Phone	
INTERNAL MEDICINE AQUA2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273	

Follow-up and Dispositions

Reason for Visit

Chief Complaint

BLOOD PRESSURE CHECK

Vitals

 Vital Signs
 Most recent update: 8/18/2009 10:11 AM

 BP
 Pulse

 123/77
 70

END OF ENCOUNTER

08/25/2009 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Authorizing Provider

Hooks, Sarah Elizabeth (M.D.)

08/25/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Visit Information (continued) Department Address Name Phone 833-574-2273 INTERNAL MEDICINE RAIN2 6041 CADILLAC AVE Los Angeles CA 90034-1702 Follow-up and Dispositions Return in about 6 months (around 2/25/2010) for f/u. ٠ Level of Service Level of Service **OUTPT EST LEVEL 2** Reason for Visit **Chief Complaint** GALLSTONES (Requests diet information.) Visit Diagnoses Name Code **Chronic?** PROPHYLACTIC VACCINE V05.9 No OBESITY 278.00 Yes 250.80, 272.2 DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED Yes **CHOLELITHIASIS** 574.20 Yes Vitals Vital Signs Most recent update: 8/25/2009 8:55 AM ΒP Pulse Wt Temp Ht 96.6 °F (35.9 °C) 128/77 82 5'7" (1.702 m) 230 lb 6.4 oz (104.5 kg) (Tympanic) BMI 36.09 kg/m² **Clinical Notes Nursing Note** at 8/25/2009 0850 Author: -Service: -Author Type: -Filed: Encounter Date: 8/25/2009 Creation Time: 8/25/2009 8:50 AM Status: Signed >> SUSAN HOWELL LVN Tue Aug 25, 2009 3:22 PM Pneumovax 0.5 IM LD given per Dr Hooks. >> SUSAN HOWELL LVN Tue Aug 25, 2009 8:55 AM PROACTIVE CARE ACTIONS Proactive Office Encounter Actions:

Diabetes Registry Member: Member prepared for foot exam Blood Pressure above goal, repeat blood pressure taken and documented

KAISER PERMANENTE

08/25/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

Hooks, Sarah Elizabeth (M.D.) at 8/25/2009 0926

Author: Hooks, Sarah Elizabeth (M.D.) Filed: 8/25/2009 9:26 AM Status: Signed Service: — Author -Encounter Date: 8/25/2009 Creation Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

Author Type: Physician Creation Time: 8/25/2009 9:26 AM

History:

Asking what can be done about the gallstone so he can enter wt loss program

History Reviewed:

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

ROS

PE Text: Not used

Physical Exam Vitals reviewed. Constitutional: He is well-developed, well-nourished, and in no distress. Pulmonary/Chest: Effort normal. Neurological: He is alert. Psychiatric: Affect normal.

A/P: Patient Active Problem List: CHOLELITHIASIS [574.20A] - will ask wt management dr OBESITY [278.00E] - losing wt with DM diet DM 2, UNCONTROLLED [250.02B] - home sugars good

RHM - pneumovax today

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 8/25/2009 9:26 AM

Labs

MICROALBUMIN, URINE, QUANTITATIVE [165525777] (Cancel Pe	end)
Electronically signed by: Howell, Susan (L.V.N.) on 08/25/09 0858 Ordering user: Howell, Susan (L.V.N.) 08/25/09 0858 Frequency: Routine 08/25/09 - Quantity: 1 Canceled by: Hooks, Sarah Elizabeth (M.D.) 08/25/09 0913 Provider Details	Status: Cancel Pend Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Pended by: Howell, Susan (L.V.N.) 08/25/09 0858
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
Howell, Susan (L.V.N.)	<u> </u>
Hooks, Sarah Elizabeth (M.D.)	

08/25/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

ID	Туре	Source	Collected By	
—	—	URINE	—	
dures				
IOTOGRAPI	HY, OCULAR FUNDUS. [1655:	26751] (Cancel Pend)		
rdering user: requency: Ro uantity: 1 anceled by: I	signed by: Howell, Susan (L.V : Howell, Susan (L.V.N.) 08/25/0 outine 08/25/09 - Hooks, Sarah Elizabeth (M.D.)	09 0858	Stat Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office Pended by: Howell, Susan (L.V.N.) 08/25/09 0858	tus: Cancel P
Provider D	etails			
Provider	rah Elizabeth (M.D.)		NPI 1497814131	
Haaka Ca			1497014131	
	Jsan (L.V.N.)		_	
Howell, Su Orders	usan (L.V.N.)		_	
Howell, Su Orders munization/	usan (L.V.N.)	ARIDE, 23 VALENT [16		
Howell, Su Orders munization/ VACC PNE Electronica Ordering u	Isan (L.V.N.) Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E Iser: Hooks, Sarah Elizabeth (M	lizabeth (M.D.) on 08/2		Status: Act
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering n	Isan (L.V.N.) Injection UMOCOCCAL POLYSACCHA	lizabeth (M.D.) on 08/2	5/09 0913	Status: Act
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering r Frequency Quantity: 1	Isan (L.V.N.) Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E Iser: Hooks, Sarah Elizabeth (M node: Standard /: Routine 08/25/09 - 1	lizabeth (M.D.) on 08/2	5/09 0913 Authorized by: Hooks, Sarah Elizabeth (M.D.)	Status: Act 25/09 0913
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering r Frequency Quantity: 1 Diagnoses	Isan (L.V.N.) Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E Iser: Hooks, Sarah Elizabeth (M node: Standard r: Routine 08/25/09 -	lizabeth (M.D.) on 08/2	5/09 0913 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office	
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering n Frequency Quantity: 1 Diagnoses VACCINA	Isan (L.V.N.) Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E Iser: Hooks, Sarah Elizabeth (M node: Standard /: Routine 08/25/09 - 1	lizabeth (M.D.) on 08/2	5/09 0913 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office	
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering n Frequency Quantity: 1 Diagnoses VACCINA	Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E user: Hooks, Sarah Elizabeth (M node: Standard /: Routine 08/25/09 - 1 5 TION [V05.9 (ICD-9-CM)] er Details	lizabeth (M.D.) on 08/2	5/09 0913 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office	
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering n Frequency Quantity: ^ Diagnoses VACCINA Provide	Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E user: Hooks, Sarah Elizabeth (M node: Standard /: Routine 08/25/09 - 1 5 TION [V05.9 (ICD-9-CM)] er Details	lizabeth (M.D.) on 08/2	5/09 0913 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office Released by: Hooks, Sarah Elizabeth (M.D.) 08/2	
Howell, Su Orders munization/ VACC PNE Electronica Ordering u Ordering n Frequency Quantity: ^ Diagnoses VACCINA Provide	Injection UMOCOCCAL POLYSACCHA ally signed by: Hooks, Sarah E Iser: Hooks, Sarah Elizabeth (M node: Standard 7: Routine 08/25/09 - 1 5 TION [V05.9 (ICD-9-CM)] er Details ler , Sarah Elizabeth (M.D.) mments: Dose 0.5mL Ro	lizabeth (M.D.) on 08/2	5/09 0913 Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office Released by: Hooks, Sarah Elizabeth (M.D.) 08/2 NPI	

END OF ENCOUNTER

09/02/2009 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider Hooks, Sarah Elizabeth (M.D.)

Department

Name	
POPULATION CA	ARE MANAGEMENT

Address 4950 SUNSET BLVD Los Angeles CA 90027-5822 Phone 323-783-7887

Other Orders

09/02/2009 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Other Orders (continued)

COMPLETE CARE DM LAB PROGRAM [167122549] (A	•	
Electronically signed by: Scal, Bulk Lab RN on 09/02/09		Status: Activ
Ordering user: Scal, Bulk Lab RN 09/02/09 1832	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard		
Cosigning events		
Electronically cosigned by Hooks, Sarah Elizabeth (M.D.	.) 09/03/09 0829 for Ordering	
Frequency: Routine 09/02/09 -	Class: BULK	
	Oldos. DOLIN	
Quantity: 1	Class. DOLIX	
Quantity: 1	NPI	

END OF ENCOUNTER

09/03/2009 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Authorizing Provider Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273	

Follow-up and Dispositions

el of Service
Level of Service
OUTPT EST LEVEL 3

Reason for Visit

Chief Complaint

BALANCE PROBLEMS (pt states sometimes both feet hurts)

Visit Diagnoses

Name	Code	Chronic?
SCREENING FOR CA, COLON	V76.51	No
DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED	250.80, 272.2	Yes
DEFORMITY OF ANKLE OR FOOT, ACQUIRED	736.70	No

Vitals

09/03/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Vitals (continued)				
Vital Signs				Most recent update: 9/3/2009 8:24 AM
BP 123/82	Pulse 66	Temp 97.9 °F (36.6 °C)	Ht 5' 7" (1.702 m)	Wt 228 lb (103.4 kg)
BMI 35.71 kg/m²				
Clinical Notes				
Nursing Note				
at 9/3/2009 083	0			
Author: — Filed: Status: Signe	ed	Service: — Encounter Date:	9/3/2009	Author Type: — Creation Time: 9/3/2009 8:30 AM
>> RAQUEL E ES PROACTIVE CARE		Thu Sep 3, 200	9 8:29 AM	
Proactive Offi		er Actions:		
-		: Member has Sel	f Monitoring	Blood Glucose meter or
Diabetes Regis	-	: Retinal exam c : Member prepare		2
>> RAQUEL E ES Lawson B Hawks level.		Thu Sep 3, 200 ses 30 minutes 3		at a moderate or strenuous
patient vital		history taken, r provide. RAQUEL		ocument information on how

Progress Notes

Escala, Raquel E (M.A.) at 9/3/2009 0827	7	
Author: Escala, Raquel E (M.A.)	Service: —	Author Type: MEDICAL ASSISTANT
Filed: 9/3/2009 8:29 AM	Encounter Date: 9/3/2009	Creation Time: 9/3/2009 8:27 AM
Status: Signed	Editor: Escala, Raquel E (M.A.) (MI	EDICAL ASSISTANT)

Electronically signed by Escala, Raquel E (M.A.) at 9/3/2009 8:29 AM

Hooks, Sarah Elizabeth (M.D.) at 9/3/2009 0840

09/03/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

Author: Hooks, Sarah Elizabeth (M.D.) Filed: 9/3/2009 8:56 AM Status: Signed Service: — Author Type Encounter Date: 9/3/2009 Creation Tin Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

Author Type: Physician Creation Time: 9/3/2009 8:40 AM

History:

Unsteady on feet x8-10 mo, more often now, ~2-3/day now, not dizzy at all, loses balance slightly, L or R no different, no falls, occ sharp pains in toes or feet for years, lasts for seconds, for years, 1988 or 1989 jumped in suicide attempt, had broken bones in feet, no surgery, hasn't had problems before these few mo

History Reviewed:

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Musculoskeletal: Negative for myalgias and joint pain. Neurological: Negative for tingling and sensory change.

<u>Physical Exam</u>
 Constitutional: He is well-developed, well-nourished, and in no distress.
 Pulmonary/Chest: Effort normal.
 Musculoskeletal: He exhibits no edema.
 Ankles large with limited ROM, flat feet

Neurological: He is alert.

Steady gait

Skin: Skin is warm and dry. Psychiatric: Affect normal. Vitals reviewed.

A/P:

Imbalance - likely chronic ankle deformity plus obesity, aging, and possible subclinical neuropathy now, PT for balance assessment and to see if anything possible with ankle work

DM - AM sugars 90s-110s, has eye appt

RHM - must do OB ASAP

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 9/3/2009 8:56 AM

09/03/2009 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

La

Labs (continued)			
GLOBIN, FECAL [167181073] (Discontine	ued)		
Electronically signed by: Hooks, Sarah El Ordering user: Hooks, Sarah Elizabeth (M Ordering mode: Standard Frequency: Routine 09/03/09 - Quantity: 1		9 0841 Sta Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal Discontinued by: Interface, Scal_ Lab 12/03/09 0	atus: Discontinuec 443 [Other (Pt. did
Provider Details		not present for lab)]	- (
Provider		NPI	
Hooks, Sarah Elizabeth (M.D.)		1497814131	
Procedures			
PHOTOGRAPHY, OCULAR FUNDUS. [16	7178077] (Cancel Pend)		
Electronically signed by: Escala, Raquel E Ordering user: Escala, Raquel E (M.A.) 09 Frequency: Routine 09/03/09 - Quantity: 1 Canceled by: Hooks, Sarah Elizabeth (M.E	9/03/09 0828	St Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Back Office Pended by: Escala, Raquel E (M.A.) 09/03/09 08	atus: Cancel Pend 28
Provider Details			
Provider		NPI	
Escala, Raquel E (M.A.) Hooks, Sarah Elizabeth (M.D.)		—	
	END OF EN	COUNTER	
09/10/2009	- Allied Health/Nurs	se Visit in OPHTHALMOLOGY	
lisit Information			
Provider Information			
Encounter Provider			
Mc Cray, Constance D			
Department	Address	Dhama	
Name OPHTHALMOLOGY	Address 6041 CADILLAC AVE Los Angeles CA 90034-	Phone 323-421-2900 1702	
Procedures			
PHOTOGRAPHY RETINA, INTERPRETA	TION AND REPORT ONL	Y [168088003] (Active)	
Electronically signed by: Mc Cray, Consta Ordering user: Mc Cray, Constance D 09/ Ordering mode: Standard Cosigning events		Authorized by: Weingarten, Robert (M.D.)	Status: Active
Electronically cosigned by Weingarten, Ro Frequency: Routine 09/10/09 -	obert (M.D.) 09/21/09 1118	for Ordering Class: Back Office	

Quantity: 1

Provider Details

Provider	NPI
Mc Cray, Constance D	_
Weingarten, Robert (M.D.)	1790833580

09/10/2009 - Allied Health/Nurse Visit in OPHTHALMOLOGY (continued)

Procedures (continued)

END OF ENCOUNTER

09/20/2009 - Released Future/Standing Orders in INTERNAL MEDICINE RAIN2 Visit Information **Provider Information Encounter Provider** Hooks, Sarah Elizabeth (M.D.) Department Name Address Phone INTERNAL MEDICINE RAIN2 6041 CADILLAC AVE 833-574-2273 Los Angeles CA 90034-1702 Reason for Visit Visit Diagnoses **Chronic?** Name Code DM 2. UNCONTROLLED 250.02 Yes DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED 250.80, 272.2 Yes OBESITY Yes 278.00 Labs ELECTROLYTES, SERUM [168670350] (Discontinued) Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1149 Status: Discontinued Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1149 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Frequency: Routine 08/13/09 -Class: Normal Quantity: 1 Instance released by: Hooks, Sarah Elizabeth (M.D.), M.D. (autoreleased) 9/15/2009 12:09 AM Discontinued by: Interface, Scal Lab 10/02/09 1254 [Other (DUPLICATE-RESULTS PENDING FOR ANOTHER ACTIVE ORDER)] **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 Specimen Information ID Source **Collected By** Туре BLOOD GLUCOSE, FASTING [168670347] (Final result) Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1149 Status: Completed This order may be acted on in another encounter. Ordering user: Hooks, Sarah Elizabeth (M.D.) 08/13/09 1149 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Class: Normal Frequency: Routine 08/13/09 -Quantity: 1 Lab status: Final result Instance released by: Hooks, Sarah Elizabeth (M.D.), M.D. (auto-released) 9/15/2009 12:09 AM Diagnoses DM 2, UNCONTROLLED. [250.02 (ICD-9-CM)] DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131

Printed on 1/12/24 5:33 PM

Labs (continued)

ID Type		Source		Collected	By
441396616 —		BLOOD		GRE 10/02	
			-		
BLUCOSE, FASTING [16	8670347] (Abnormal)				/09 0533, Result status: Final res
Order status: Completed			Filed on: 10/03/09 0		
Collected by: GRE 10/02/ Narrative:	09 1254		Resulting lab: SHE		' REGIONAL LABORATORY
Note: This is a result for y					
duplicate order. Please u this result, thus coordinati					
Details hyperlink for indica			51		
notification of this result.	,				
Components					
Component		Value	Reference Range	Flag	Lab
GLUCOSE, FASTING		100	70 - 99 mg/dL	H [^]	956
0100001,					
Reviewed by					
	beth (M.D.) on 10/07/0				
Hooks, Sarah Eliza	beth (M.D.) on 10/06/0	9 1733			
C List					
Recipient					
Recipient	Modifier	Fax	Address		Added
Hooks, Sarah Elizabeth		Fax	Address		Added
		Fax —	Address —		Added —
Hooks, Sarah Elizabeth M.D.		Fax —	Address —		Added —
Hooks, Sarah Elizabeth		Fax — Director	Address — Address		_
Hooks, Sarah Elizabeth M.D. Festing Performed By	ו (M.D.), —	_	Address	nan Way	Added — Valid Date Range 08/30/05 1817 - 09/01/10 0000
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation	n (M.D.), — Name SHERMAN WAY REGIONAL	 Director	 Address r, 11668 Shern NORTH HOL		 Valid Date Range
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation	n (M.D.), — Name SHERMAN WAY	— Director Ann M. Vannie	Address r, 11668 Shern		 Valid Date Range
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY	— Director Ann M. Vannie	 Address r, 11668 Shern NORTH HOL CA 91605	LYWOOD	 Valid Date Range 08/30/05 1817 - 09/01/10 0000
Hooks, Sarah Elizabeth M.D. esting Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY	— Director Ann M. Vannie	Address r, 11668 Shern NORTH HOL CA 91605 Res	LYWOOD	 Valid Date Range
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [16] Order status: Completed	Mame Name SHERMAN WAY REGIONAL LABORATORY 8670347]	— Director Ann M. Vannie	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. esting Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16	Mame Name SHERMAN WAY REGIONAL LABORATORY 8670347]	— Director Ann M. Vannie	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	 Valid Date Range 08/30/05 1817 - 09/01/10 0000
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [16] Order status: Completed Collected by: GRE 10/02/	Mame Name SHERMAN WAY REGIONAL LABORATORY 8670347]	— Director Ann M. Vannie	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [16 Order status: Completed Collected by: GRE 10/02/ Reviewed by	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254	— Director Ann M. Vannie M.D.	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [16 Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0	— Ann M. Vannie M.D. 9 0828	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [16 Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254	— Ann M. Vannie M.D. 9 0828	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16 Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0	— Ann M. Vannie M.D. 9 0828	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLUCOSE, FASTING [16 Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0	— Ann M. Vannie M.D. 9 0828	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16: Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0 beth (M.D.) on 10/06/0 Modifier	— Ann M. Vannie M.D. 9 0828	Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1	LYWOOD sulted: 10/02	— Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16: Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient Hooks, Sarah Elizabeth	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0 beth (M.D.) on 10/06/0 Modifier	 Ann M. Vannie M.D. 9 0828 9 1733	 Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1 Resulting lab: SHEF	LYWOOD sulted: 10/02	Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16: Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0 beth (M.D.) on 10/06/0 Modifier	 Ann M. Vannie M.D. 9 0828 9 1733	 Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1 Resulting lab: SHEF	LYWOOD sulted: 10/02	Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
Hooks, Sarah Elizabeth M.D. Testing Performed By Lab - Abbreviation 240 - 956 SLUCOSE, FASTING [16: Order status: Completed Collected by: GRE 10/02/ Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza CC List Recipient Hooks, Sarah Elizabeth	n (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY 8670347] 09 1254 beth (M.D.) on 10/07/0 beth (M.D.) on 10/06/0 Modifier	 Ann M. Vannie M.D. 9 0828 9 1733	 Address r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 10/02/09 1 Resulting lab: SHEF	LYWOOD sulted: 10/02	Valid Date Range 08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
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Labs (continued)

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Fasting (>/= 12 hrs) CHOL TRIG HDL-C LDL-C OPTIMAL: <200 <150 >/=40 <100 NEAR OPTIML: 100-129 BORDERLN HI: 200-239 150-199 130-159 HIGH: >/=240 200-499 160-189 VERY HIGH: >/=500 >/=190	Note: This is a re duplicate order. this result, thus of Details hyperlink notification of thi Components CHOLESTEN TRIGLYCER HDL LDL CALCU CHOLESTEN	Please understand that other prov coordination of care is necessary. < for indication of all providers who is result. ROL RIDE ILATED ROL/HIGH DENSITY	Click on the Or have received Value 125 102 37 68	o received oder Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL	— —	956 956 956 956
HDL-C LDL-C OPTIMAL: <200 <150 >/=40 <100 NEAR OPTIML: 100-129 BORDERLN HI: 200-239 150-199 130-159 HIGH: >/=240 200-499 160-189 VERY HIGH: >/=500 >/=190 All members with cardiovascular disease, diabetes mellitus, or chroni	Note: This is a re duplicate order. this result, thus of Details hyperlink notification of thi Components CHOLESTEN TRIGLYCER HDL LDL CALCU CHOLESTEN LIPOPROTE	Please understand that other prov coordination of care is necessary. < for indication of all providers who is result. ROL RIDE ILATED ROL/HIGH DENSITY EIN	Click on the Or have received Value 125 102 37 68	o received oder Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL	— —	956 956 956 956
>/=500 >/=190 All members with cardiovascular disease, diabetes mellitus, or chroni	Note: This is a re duplicate order. this result, thus of Details hyperlink notification of thi Components CHOLESTEN TRIGLYCER HDL LDL CALCU CHOLESTEN LIPOPROTE	Please understand that other prov coordination of care is necessary. < for indication of all providers who is result. ROL RIDE ILATED ROL/HIGH DENSITY EIN	Click on the Or have received 125 102 37 68 3.4	o received order Reference Range <200 mg/dL <150 mg/dL 100 mg/dL<br <5.0	 L* 	956 956 956 956 956
	Note: This is a re duplicate order. this result, thus of Details hyperlink notification of thi Components CHOLESTEN TRIGLYCER HDL LDL CALCU CHOLESTEN LIPOPROTE Comment:	Please understand that other provideors and that other provideors and the other provideors who is result.	Click on the Or have received 125 102 37 68 3.4 sting (>/= 12 hi	o received order Reference Range <200 mg/dL <150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs)	 L▼ 	956 956 956 956 956 CHOL TRIG
	Note: This is a re duplicate order. this result, thus of Details hyperlink notification of thi Components CHOLESTEN TRIGLYCER HDL LDL CALCU CHOLESTEN LIPOPROTE Comment: 	Please understand that other provideors and coordination of care is necessary. If for indication of all providers who is result.	Click on the Or have received 125 102 37 68 3.4 sting (>/= 12 hi OPTIMA 130-159	o received order Reference Range <200 mg/dL <150 mg/dL 100 mg/dL<br <5.0 rs)	— L ▼ — 40 <100 NEAR (0-499 160-189	956 956 956 956 956 CHOL TRIG DPTIML: VERY HIGH:

	abeth (M.D.) on 10/07/09 abeth (M.D.) on 10/06/09			
CC List	Maalifian	Fay	Address	A deb d
Recipient Hooks, Sarah Elizab M.D.	Modifier eth (M.D.), —	Fax —	Address —	Added —
Testing Performed By				
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
LIPID PANEL [1686703	48]		Resulted: 10/02	2/09 1254, Result status: In proces
Order status: Complete Collected by: GRE 10/0			ed on: 10/02/09 1254 sulting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
	zabeth (M.D.) on 10/07/0 zabeth (M.D.) on 10/06/0			
CC List				
Recipient	Modifier	Fax	Address	Added
Hooks Correly Eline 1				
Hooks, Sarah Elizab	eth (M.D.), —	—	—	—
Hooks, Sarah Elizab M.D.	etn (M.D.), —	—	_	—
M.D. Testing Performed By	· · ·	_		_
M.D. Testing Performed By Lab - Abbreviation	Name	Director	Address	Valid Date Range
M.D. Testing Performed By	· · ·	Director Ann M. Vannier, M.D.	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	Valid Date Range 08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation	Name SHERMAN WAY REGIONAL	Ann M. Vannier,	11668 Sherman Way NORTH HOLLYWOOD	-
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (IC DM 2, UNCONTROL	Name SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	_
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (IC DM 2, UNCONTROL	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (IC DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM	Ann M. Vannier, M.D.)] :D [250.80, 272.2 (ICD- 08:28	11668 Sherman Way NORTH HOLLYWOOD CA 91605	_
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (IC DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE Peth (M.D.) on 10/7/2009 (Peth (M.D.) on 10/6/2009	Ann M. Vannier, M.D.)] :D [250.80, 272.2 (ICD- 08:28	11668 Sherman Way NORTH HOLLYWOOD CA 91605	_
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 eth (M.D.) on 10/6/2009 70349] (Final result) ooks, Sarah Elizabeth (I	Ann M. Vannier, M.D. D [250.80, 272.2 (ICD- 08:28 17:33	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)]	08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 eth (M.D.) on 10/6/2009 70349] (Final result) ooks, Sarah Elizabeth (In in another encounter.	Ann M. Vannier, M.D. D [250.80, 272.2 (ICD- 08:28 17:33 M.D.) on 08/13/09 114	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)]	08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 eth (M.D.) on 10/6/2009 70349] (Final result) ooks, Sarah Elizabeth (I n in another encounter. ah Elizabeth (M.D.) 08/13	Ann M. Vannier, M.D. D [250.80, 272.2 (ICD- 08:28 17:33 M.D.) on 08/13/09 1149	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)] 9	08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab EMOGLOBIN A1C [16867 lectronically signed by: He his order may be acted or rdering user: Hooks, Sara rdering mode: Standard requency: Routine 08/13/ uantity: 1	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 (M.D.) on 10/6/2009 (70349] (Final result) ooks, Sarah Elizabeth (I n in another encounter. ah Elizabeth (M.D.) 08/13 (09 -	Ann M. Vannier, M.D.)] ED [250.80, 272.2 (ICD- 08:28 17:33 M.D.) on 08/13/09 1149 //09 1149 Auth Clas Lab	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)] 9 orized by: Hooks, Sarah Eliz s: Normal status: Final result	08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab EMOGLOBIN A1C [16867 Rectronically signed by: Hooks, Sarar requency: Routine 08/13/ uantity: 1 Istance released by: Hook iagnoses	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 (M.D.) on 10/6/2009 (M.D.) on 10	Ann M. Vannier, M.D.)] ED [250.80, 272.2 (ICD- 08:28 17:33 M.D.) on 08/13/09 1149 //09 1149 Auth Clas Lab	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)] 9 orized by: Hooks, Sarah Eliz s: Normal status: Final result	08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab SMOGLOBIN A1C [16867 lectronically signed by: Ho his order may be acted or rdering user: Hooks, Sara rdering mode: Standard requency: Routine 08/13/ uantity: 1 Istance released by: Hook	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 (M.D.) on 10/6/2009 (M.D.) on 10	Ann M. Vannier, M.D.)] ED [250.80, 272.2 (ICD- 08:28 17:33 M.D.) on 08/13/09 1149 //09 1149 Auth Clas Lab), M.D. (auto-released)	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)] 9 orized by: Hooks, Sarah Eliz s: Normal status: Final result	08/30/05 1817 - 09/01/10 0000
M.D. Testing Performed By Lab - Abbreviation 240 - 956 Indications OBESITY [278.00 (K DM 2, UNCONTROL DM 2, UNCONTROL DM 2 W DIABETIC H All Reviewers List Hooks, Sarah Elizab Hooks, Sarah Elizab Hooks, Sarah Elizab EMOGLOBIN A1C [16867 lectronically signed by: Hook his order may be acted or rdering user: Hooks, Sara rdering mode: Standard requency: Routine 08/13/ uantity: 1 stance released by: Hook iagnoses M 2, UNCONTROLLED.]	Name SHERMAN WAY REGIONAL LABORATORY CD-9-CM)] LED [250.02 (ICD-9-CM HYPERLIPIDEMIA, MIXE eth (M.D.) on 10/7/2009 (M.D.) on 10/6/2009 (M.D.) on 10	Ann M. Vannier, M.D.)] ED [250.80, 272.2 (ICD- 08:28 17:33 M.D.) on 08/13/09 1149 //09 1149 Auth Clas Lab), M.D. (auto-released)	11668 Sherman Way NORTH HOLLYWOOD CA 91605 -9-CM)] 9 orized by: Hooks, Sarah Eliz s: Normal status: Final result	08/30/05 1817 - 09/01/10 0000

Labs

	abeth (M.D.)	1	497814131	
pecimen Informa	ation			
D	Туре	Source	Collected	Ву
441396616	_	BLOOD	GRE 10/02	2/09 1254
EMOGLOBIN A1	C [168670349] (Abnormal)		Resulted: 10/02	/09 2303, Result status: Final res
Order status: Com	npleted		Filed on: 10/02/09 2303	
Collected by: GRE	E 10/02/09 1254		Resulting lab: SHERMAN WAY	REGIONAL LABORATORY
Components				
Component		Value	Reference Range Flag	Lab
HGBA1C%		7.3	4.8 - 5.9 % H^	956
TOLERANC	E. HBA1C IS BEST USED TO RE BELOW 7.0 % AND VALUE	MONITOR BLOOD		NTS WITH DIABETES. IDEAL HE BLOOD SUGAR CONTROL
	ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0			
esting Performe	d By			
Lab - Abbrevia		Director	Address	Valid Date Range
Lab - Abbrevia 240 - 956	ation Name SHERMAN WAY REGIONAL LABORATORY	Director Ann M. Vannier, M.D.		-
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier,	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
240 - 956 EMOGLOBIN A1 Order status: Com	SHERMAN WAY REGIONAL LABORATORY C [168670349] npleted	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proc
	SHERMAN WAY REGIONAL LABORATORY C [168670349] npleted	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proc
240 - 956 EMOGLOBIN A1 Order status: Com Collected by: GRE Reviewed by Hooks, Sara	SHERMAN WAY REGIONAL LABORATORY C [168670349] npleted E 10/02/09 1254 ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254	08/30/05 1817 - 09/01/10 000
240 - 956 EMOGLOBIN A1 Order status: Com Collected by: GRE Reviewed by Hooks, Sara Hooks, Sara	SHERMAN WAY REGIONAL LABORATORY C [168670349] hpleted E 10/02/09 1254 ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0 d By	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce
240 - 956 EMOGLOBIN A1 Order status: Com Collected by: GRE Reviewed by Hooks, Sara Hooks, Sara	SHERMAN WAY REGIONAL LABORATORY C [168670349] hpleted E 10/02/09 1254 ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0 d By	Ann M. Vannier, M.D. 09 0828 09 1733	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254 Resulting lab: SHERMAN WAY	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce 7 REGIONAL LABORATORY Valid Date Range
240 - 956 EMOGLOBIN A1 Order status: Com Collected by: GRE Reviewed by Hooks, Sara Hooks, Sara esting Performed Lab - Abbrevia	SHERMAN WAY REGIONAL LABORATORY C [168670349] npleted E 10/02/09 1254 ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0 d By ation Name SHERMAN WAY REGIONAL	Ann M. Vannier, M.D. 99 0828 99 1733 Director Ann M. Vannier,	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254 Resulting lab: SHERMAN WAY Address 11668 Sherman Way NORTH HOLLYWOOD	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce 7 REGIONAL LABORATORY
240 - 956 EMOGLOBIN A1 Order status: Com Collected by: GRE Reviewed by Hooks, Sara Hooks, Sara esting Performed Lab - Abbrevia 240 - 956 Indications DM 2, UNCON	SHERMAN WAY REGIONAL LABORATORY C [168670349] npleted E 10/02/09 1254 ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0 d By ation Name SHERMAN WAY REGIONAL	Ann M. Vannier, M.D. 99 0828 99 1733 Director Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254 Resulting lab: SHERMAN WAY Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce 7 REGIONAL LABORATORY Valid Date Range
240 - 956 EMOGLOBIN A1 Order status: Com Collected by: GRE Reviewed by Hooks, Sara Hooks, Sara esting Performed Lab - Abbrevia 240 - 956 Indications DM 2, UNCON	SHERMAN WAY REGIONAL LABORATORY C [168670349] hpleted E 10/02/09 1254 ah Elizabeth (M.D.) on 10/07/0 ah Elizabeth (M.D.) on 10/06/0 d By ation Name SHERMAN WAY REGIONAL LABORATORY TROLLED [250.02 (ICD-9-CM ETIC HYPERLIPIDEMIA, MIXE	Ann M. Vannier, M.D. 99 0828 99 1733 Director Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605 Resulted: 10/02 Filed on: 10/02/09 1254 Resulting lab: SHERMAN WAY Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000 2/09 1254, Result status: In proce 7 REGIONAL LABORATORY Valid Date Range

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1149

This order may be acted on in another encounter.

Status: Completed

	h Elizabeth (M.D.) 08/13	8/09 1149 Au	thorized by: Hooks, Sara	ah Elizabeth (M.D.)
rdering mode: Standard			NI 1	
requency: Routine 08/13/09 -		÷	ass: Normal b status: Final result	
uantity: 1 stance released by: Hooks, Sarah Elizabeth (M.D.), M.D. (auto-r				
iagnoses	, oaran Eileaboan (iilib		a) 0/10/2000 12:00 / 111	
M 2, UNCONTROLLED. [2				
M 2 W MIXED HYPERLIP	IDEMIA [250.80, 272.2	(ICD-9-CM)]		
Provider Details		•		
Provider Hooks, Sarah Elizabeth	(MD)		IPI 497814131	
	(10.0.)	I	497014131	
Specimen Information				
ID Typ	e	Source		cted By
441396616 —		BLOOD	GRE	10/02/09 1254
ALT, SERUM [16867035	1]		Resulted:	10/03/09 0533, Result status: Final re
Order status: Completed	-	F	iled on: 10/03/09 0533	
Collected by: GRE 10/0				WAY REGIONAL LABORATORY
Components				
Component		Value F	eference Range Flag	Lab
ALT			41 units/L —	956
Reviewed by Hooks, Sarah Eliz	ivity may vary by differe abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0	9 0828	t was measured using th	e Roche method.
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0	9 0828	t was measured using th	e Roche method.
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0	9 0828 9 1733		
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0	9 0828 9 1733 Director	Address	Valid Date Range
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name	9 0828 9 1733		Valid Date Range ay 08/30/05 1817 - 09/01/10 000
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY	9 0828 9 1733 Director Ann M. Vannier,	Address 11668 Sherman Wa NORTH HOLLYWO CA 91605	Valid Date Range ay 08/30/05 1817 - 09/01/10 000
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY	99 0828 99 1733 Director Ann M. Vannier, M.D.	Address 11668 Sherman Wa NORTH HOLLYWO CA 91605	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY	99 0828 99 1733 Director Ann M. Vannier, M.D.	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/03	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY	99 0828 99 1733 Director Ann M. Vannier, M.D.	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/03 Reviewed by	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1]	99 0828 99 1733 Director Ann M. Vannier, M.D. F	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY	99 0828 99 1733 Director Ann M. Vannier, M.D. F F	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1] 2/09 1254 abeth (M.D.) on 10/07/0	99 0828 99 1733 Director Ann M. Vannier, M.D. F F	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1] 2/09 1254 abeth (M.D.) on 10/07/0	99 0828 99 1733 Director Ann M. Vannier, M.D. F F	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc WAY REGIONAL LABORATORY
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/02 Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1] 1 2/09 1254 abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0	99 0828 99 1733 Director Ann M. Vannier, M.D. F F 99 0828 99 1733	Address 11668 Sherman Wa NORTH HOLLYWO CA 91605 Resulted: ïled on: 10/02/09 1254 cesulting lab: SHERMAN	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc WAY REGIONAL LABORATORY WAY REGIONAL LABORATORY
The measured act Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Testing Performed By Lab - Abbreviation 240 - 956 ALT, SERUM [16867035 Order status: Completed Collected by: GRE 10/03 Reviewed by Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name SHERMAN WAY REGIONAL LABORATORY 1] 1 2/09 1254 abeth (M.D.) on 10/07/0 abeth (M.D.) on 10/06/0 Name	99 0828 99 1733 Director Ann M. Vannier, M.D. P9 0828 99 0828 99 1733	Address 11668 Sherman Wa NORTH HOLLYWC CA 91605 Resulted: iled on: 10/02/09 1254 esulting lab: SHERMAN Address	Valid Date Range ay 08/30/05 1817 - 09/01/10 000 DOD 10/02/09 1254, Result status: In proc WAY REGIONAL LABORATORY WAY REGIONAL LABORATORY Valid Date Range 08/30/05 1817 - 09/01/10 000

DM 2, UNCONTROLLED [250.02 (ICD-9-CM)] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, 272.2 (ICD-9-CM)]

All Reviewers List

Labs (continued)

Hooks, Sarah Elizabeth (M.D.) on 10/7/2009 08:28 Hooks, Sarah Elizabeth (M.D.) on 10/6/2009 17:33

END OF ENCOUNTER

09/22/2009 - Allied Health/Nurse Visit in PHYSICAL THERAPY

Visit Information

Provider Information

Encounter Provider

Kohout, Marcus Eugene (P.T.)

Authorizing Provider Kohout, Marcus Eugene (P.T.)

Department

Name	Address	Phone
PHYSICAL THERAPY	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2476

Follow-up and Dispositions

Level of Service

Level of Service

PHYSICAL THERAPY EVALUATION

Reason for Visit

Chief Complaints

- BALANCE PROBLEMS
- CARE PLAN
- DISCHARGE NOTE

Visit Diagnoses

- PHYSICAL THERAPY VISIT (primary) [V57.1]
- DIFFICULTY WALKING [719.7]

Vitals

Vital Signs Most recent update: 9/22/2009 12:34 PM BP BP

127/86

Clinical Notes

Progress Notes

Kohout, Marcus Eugene (P.T.) at 9/22/2009 1236

Author: Kohout, Marcus Eugene (P.T.)	Service: —	Author Type: THERAPIST, PHYSICAL
Filed: 11/18/2009 10:02 AM	Encounter Date: 9/22/2009	Creation Time: 9/22/2009 12:36 PM
Status: Addendum	Editor: Kohout, Marcus Eugene (P	P.T.) (THERAPIST, PHYSICAL)

09/22/2009 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Clinical Notes (continued)

Time: 9:45 - 10:30 Physical Therapy Evaluation: 9/22/2009 SUBJECTIVE:

Pt comes to PT today to determine why he has a loss in balance. Dx with DM 1 month ago and was told it may be due to lack of sensation and proprioception, doesn't agree. Wants to make sure not a bigger problem, like a brain tumor. Had friend with brain tumor that also had balance problems. Reports no falls. 1 seizure 30 years ago. Experiencing dizziness, most likely related to uncontrolled DM. Not dizzy when experiences loss of balance. Reports blood sugar randing 80-120. Feels unstable with stepping activities and turning.

Reports hx of schizophrenia, attempted suicide in 1989, broke both ankles. Lack of mobility has altered balance but has been for years. Denies cardiopulmonary, CA.

Chief Complaint: feeling unsteady Onset: last year, decrease in balance Mechanism of Injury: none Aggravating Factors: stepping, turning

Past Medical History:

Past Medical History SCHIZOAFFECTIVE DISORDER GERD

OBJECTIVE:

Strength: TA, TP 5/5 B Ankle ROM: DF, EV, IV wnl, PF limited B

Sensation feet: DM sites, L4-S1 Sharp: intact B (less sensation at heel B- caluses) Light: intact B (less sensation at heels B- caluses)

DGI: 23/23 (steps n/t)// low risk. Displayed no loss of balance with walking or stepping.

Tandem stance: loses balance stepping

09/22/2009 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Clinical Notes (continued)

SLS: R 5 sec, L loses balance stepping Step alt feet: no loss of balance

Mod. CTSIB:

Narrow feet: stable Narrow feet: eyes closed: increased sway Foam narrow feet: increased sway Foam narrow feet/eyes closed: required supervision to prevent loss of balance

Treatment:

1. Patient education re: plan of care, therex, HEP, problem, prognosis // Patient verbalizes a good understanding of the fore-mentioned.

2. Educated in balance exercises: tandem stance, SLS: can progress to eyes closed. Standing SLS on 2 pillows.

3. Educated patient on balance impairments in narrow base of support, sls, most likley related to DM. Discussed common to have balance problems in pts with DM. Need to train system to adapt.

HEP: SLS, tandem stance (progress to eyes closed), SLS pillow

Response to treatment: increased understanding of condition. Will to perform HEP. Return in 4 weeks for once last time to progress.

ASSESSMENT:

Pt presents with balance deficits in narrow base of support, single leg stance, and positions challenging somatosensory system. Pt would benefit from physical therapy for HEP to address impairments with narrow base of support to help increase stability with walking.

Hooks, Sarah: MD Diagnosis: balance disorder

Prognosis: good Impairments: balance impairments with narrow base of support, sls Functional Limitations:decreased stability with stepping and turning Disability: balance Patient will benefit from skilled physical therapy for the remedy of his/her functional impairments.

Goals:

1. Pt will immediately be independent in HEP for mentioned impairments.

2. Patient will be able to perform SLS, tandem stance with no HHA 30 sec- 4 weeks.

3. Patient will perform mod CTSIB with increased stability with foam/eyes closed (no loss of balance)-4weeks.

PLAN:

Patient to be seen for one more visit to assess and progress balance training with treatment including neuromuscular re-education, balance.

Next visit to assess progress and add: tandem walking, tandem, SLS with arm movements Then DC

Patient/family agreed to Plan of Care and Treatment.

KAISER PERMANENTE

09/22/2009 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Clinical Notes (continued)

Re-eval to be performed on approximately nov 3rd, 2009 (6 weeks) unless indicated sooner otherwise.

Procedures: 30 min eval, 15 balance training (neuromuscular re-ed)

If you approve the treatment plan, please document your approval and close the treatment plan note. If you do not approve the plan, please notify the therapist of disapproval and/or modification to the plan through his/her InBasket. For the complete evaluation and assessment, please see the allied health provider note. Thank you.

Lori Parchman SPT Student Physical Therapist

Supervising PT was present and accountable throughout entire treatment.

Marcus E. Kohout, PT/DPT Physical Therapist Physical Medicine and Rehabilitation Kaiser Permanente West LA Phone:323.857.4269

Discharge Summary 11/18/2009 Patient has been seen for physical therapy for initial evaluation with treatment including therex, HEP, joint mobs, and patient education. Pt has not returned in 60 days since initial evaluation. Pt is discharged from my care.

Marcus E. Kohout, PT/DPT Physical Therapist Physical Medicine and Rehabilitation Kaiser Permanente West LA Phone:323.857.4269

Electronically signed by Kohout, Marcus Eugene (P.T.) at 11/18/2009 10:02 AM

Hooks, Sarah Elizabeth (M.D.) at 9/23/2009 0832

Author: Hooks, Sarah Elizabeth (M.D.) Filed: 9/23/2009 8:32 AM Status: Addendum Service: — Author Type: Physician Encounter Date: 9/22/2009 Creation Time: 9/23/2009 8:32 AM Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 9/23/2009 8:32 AM

09/22/2009 - Allied Health/Nurse Visit in PHYSICAL THERAPY (continued)

Other Orders

Therapy NEUROMUSCULAR REEDUCATION, MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTURE, PROPRIOCEP [169836276] (Active) Electronically signed by: Kohout, Marcus Eugene (P.T.) on 09/22/09 1235 Status: Active Ordering user: Kohout, Marcus Eugene (P.T.) 09/22/09 1235 Authorized by: Kohout, Marcus Eugene (P.T.) Ordering mode: Standard Frequency: Routine 09/22/09 -Class: Back Office Quantity: 1 Diagnoses DIFFICULTY WALKING [719.7 (ICD-9-CM)] **Provider Details** Provider NPI Kohout, Marcus Eugene (P.T.) 1841497542 Indications Difficulty Walking [719.7 (ICD-9-CM)]

END OF ENCOUNTER

10/09/2009 - Office Visit in OPTOMETRY

Visit Information

Provider Information			
Encounter Provider		Authorizing Provider	
Ghoo, Melissa (O.D.)		Ghoo, Melissa (O.D.)	
epartment			
Name	Address	Phone	

833-574-2273

1843 S LA CIENEGA BLVD

Los Angeles CA 90035-4603

Level	of	Service
LCVCI	U 1	

Level of Service

OPTOMETRY

INTERMEDIATE EYE EXAM, EST PT, INITIATION CONTINUATION OF PROGRAM

Reason for Visit

Chief Complaint

• DECREASED VISION NEAR AND DISTANCE (PT. DX WOTH DM 2 2 MOS. AG)

Visit Diagnoses

- MYOPIA [367.1]
- ASTIGMATISM [367.20]
- PRESBYOPIA [367.4]

Vitals

Vital Signs		Most recent update: 10/9/2009 9:04 AM
BP	Pulse	
95/62	92	

Clinical Notes

Nursing Note			
at 10/9/2009 0900			
Author: — Filed: Status: Signed	Service: — Encounter Date: 10/9/2	009	Author Type: — Creation Time: 10/9/2009 9:00 AM
>> SANDRA A TAYLOR MA Visual Acuity:CC OD:20/25-1 OS:20/25+1	Fri Oct 9, 2009 9):08 AM	
>> SANDRA A TAYLOR MA Lawson B Hawkins is a 54 PMHX:HTN(-) CHOL(+) (DM: HGBA1C 7.3 10/02/ LAST EXAM: OPT:5/09 EYE EYE MEDICATION: none OCULAR HISTORY: Nothin FAMILY OCULAR HISTORY:	year old male +, 2 M years) Smoke 2009 :9/09 g reported	9:04 AM (-)	
Tonometry: NCT, OD 14	mmHG, OS 15 mmHG, a	at 9:00 AM	
PROACTIVE CARE ACTIONS			
Proactive Office Encount	er Actions: PT. ASD	/ISED	

Progress Notes

Ghoo, Melissa (O.D.) at 10/9/2009 0901		
Author: Ghoo, Melissa (O.D.)	Service: —	Author Type: OPTOMETRIST (O.D.)
Filed: 10/9/2009 9:22 AM	Encounter Date: 10/9/2009	Creation Time: 10/9/2009 9:01 AM
Status: Signed	Editor: Ghoo, Melissa (O.D.) (OPTC	DMETRIST (O.D.))

MELISSA GHOO'S OPTOMETRY NOTE:

Patient presents with: DECREASED VISION NEAR AND DISTANCE - PT. DX WOTH DM 2 2 MOS. AG

Nursing Notes:

>> SANDRA A TAYLOR MA Fri Oct 9, 2009 9:08 AM Visual Acuity:CC OD:20/25-1 OS:20/25+1

Printed on 1/12/24 5:33 PM

Clinical Notes (continued)

>> SANDRA A TAYLOR MA Fri Oct 9, 2009 9:04 AM Lawson B Hawkins is a 54 year old male PMHX:HTN(-) CHOL(+) (DM:+, 2 M years) Smoke(-) HGBA1C 7.3 10/02/2009 LAST EXAM: OPT:5/09 EYE:9/09 EYE MEDICATION: none OCULAR HISTORY: Nothing reported FAMILY OCULAR HISTORY: Nothing reported

Tonometry: NCT, OD 14 mmHG, OS 15 mmHG, at 9:00 AM

PROACTIVE CARE ACTIONS

Proactive Office Encounter Actions: PT. ASDVISED

GMO: ALERT/RESPONSIVE/NOT IN DISTRESS

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A] CHOLELITHIASIS [574.20A] OBESITY [278.00E] DM 2, UNCONTROLLED [250.02B] CASE / CARE MGMT [V65.49BAAS] DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70A]

OCCUPATION: FIX COMPUTERS.

PERRLA -MG

EXTRAOCULAR MOTILITY (EOM): OD: FULL OS: FULL

COVER TEST: DISTANCE: ORTHO

VISUAL FIELD: CONFRONTATIONS OD: FULL TO FINGER COUNTING OS: FULL TO FINGER COUNTING

LAST REFRACTION: KANDA, OD 5/22/08

OD: -3.75 -0.50 x 060 20/20

OS: -3.25 -1.00 x 090 20/20 OU: 20/20

+1.75 add

Clinical Notes (continued)

Lensometry:

OD: -3.75 -0.50 x 057

OS: -3.25 -1.00 x 091

Autorefraction:

OD: -3.50 sph

OS: -3.00 -0.25 x 100

Keratometry:

OD: 7.97(42.25)/7.87(43.00) x 33

OS: 8.11(41.50)/7.99(42.25) x 87

REFRACTION: MANIFEST OD: -3.75-0.50X060 BCVA: 20/20 OS: -3.25-0.50X090 BCVA: 20/20 ADD: +2.25 20/20 OU

SLIT LAMP EXAM: LIDS/LASHES: CLEAR (OU) CONJUNCTIVA/SCLERA: CLEAR (OU) CORNEA: CLEAR (OU) IRIS: FLAT AND INTACT (OU) ANTERIOR CHAMBER: QUIET (OU) ANGLES: OD: OPEN OS: OPEN LENS: CLEAR (OU)

UNDILATED FUNDUSCOPY VITREOUS: CLEAR (OU) DISC: OD: 0.3 PINK,HEALTHY OS: 0.3 PINK, HEALTHY VESSELS: 2/3 NORMAL SIZE AND CALIBER (OU) MACULA: CLEAR (OU) POSTERIOR POLE: CLEAR (OU)

ASSESSMENT: 1. REFRACTION: CMA OD CMA OS PRES OU

2. OCULAR HEALTH: DM X 2 MONTHS. NO DR FOUND OU

Clinical Notes (continued)

PLAN: 1. REFRACTION: GIVEN SPECTACLE RX AS BELOW. PT EDUCATION ON ADAPTATION AND USAGE. GIVEN PRESBYOPIC OPTIONS. PREFERS SVD OR 1ST TIME FT28/SUN RX

2. OCULAR HEALTH:

PT EDUCATED ON HOME MONITORING OF BS, COMPLIANCE WITH MEDS, PHYSICIAN CHECK UPS, AND YEARLY RETINAL PHOTOS. RETINAL PHOTO WITH REVIEW: 9/10/09 WEINGARTEN, MD

RTC: 1 YEAR OR PRN.

SPECTACLE RX: SEE MSR/SVD/SUN RX EXPIRES: 1 YEAR

Electronically signed by Ghoo, Melissa (O.D.) at 10/9/2009 9:22 AM

Letters

 Letter by Ghoo, Melissa (O.D.) on 10/9/2009

 Status: Sent
 Letter body:

 Letter body:

Date: 10/9/2009

MRN: 000017508205

Lawson B Hawkins 2630 S. Garth Ave, # 1 Los Angeles, CA 90034-2151 310-839-6430 (home) 310-839-6430 (work)

Spectacle Prescription

OD: -3.75-0.50X060 BCVA: 20/20 OS: -3.25-0.50X090 BCVA: 20/20 ADD: +2.25 20/20 OU

Not valid for contact lenses.

DISPENSER: Do Not Fill Unless Prepared to Remake for Patient Comfort (All prescription re-checks must be done within 90 days.)

RECOMMENDATIONS: SVD OR 1ST TIME FT28/SUN RX.

EXPIRES	IN: 1	YEAR
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Letters (continued)

MELISSA GHOO, OD 1843 1/2 LA CIENEGA BLVD LOS ANGELES, CA 90035 CA LIC. NO. 12253T 323-857-2673

END OF ENCOUNTER

10/13/2009 - Office Visit in FAMILY PRACTICE PERDIEM

Visit Information			
Provider Information			
Encounter Provider	Authorizing Provider		
Katz, Jonathan (M.D.)	Katz, Jonathan (M.D.)		
Department			
Name	Address	Phone	
FAMILY PRACTICE PERDIEM	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273	
Level of Service			
Level of Service			
OUTPT EST LEVEL 2			
Reason for Visit			
Chief Complaint			
URI SYMPTOMS			
Visit Diagnosis			
ACUTE BRONCHITIS (primary)	[466.0]		
Vitals			

Vitals (continued)				
Vita	al Signs				Most recent update: 10/13/2009 3:08 PM
	BP 99/48	Pulse 78	Temp 95 °F (35 °C) (Tympanic)	Ht 5' 7" (1.702 m)	Wt 210 lb 12.8 oz (95.6 kg)
	SpO2 98%	BMI 33.02 kg/m²			
Clinica	I Notes				
Nu	rsing Note				
	at 10/13/2009 1510)			
	Author: — Filed: Status: Signed		Service: — Encounter Date	e: 10/13/2009	Author Type: — Creation Time: 10/13/2009 3:10 PM
Laws stre	ARIA GUADAL on B Hawkin nuous level CTIVE CARE	s exercises		Oct 13, 2009 tes 0 days per	3:08 PM week at a moderate or
Diab Bloo Micr	-	ry Member: 1 above goal, der staged	Diabetes Clas repeat blood		provided / class scheduled n and documented

CHECKED IN BY MARIA GUADALUPE SANDOVAL MA

Procedures

Filed on 10/13/2009 0000

Procedure Orders 1. XR CHEST, 2 VIEWS. [173092983] ordered by Katz, Jonathan (M.D.) at 10/13/09 1531

CHEST - FILMLESS - 10/13/09 - 1555 HOURS

The heart projects minimally larger than on 08/05/09 with elongation of the aorta. The pulmonary vasculature is within normal limits. There are some strand densities in the lower lungs without associated effusion. On the lateral view there is a subcentimeter density projected over a thoracic body at the level of the lower heart. This could be due to effects of overlapping structures but other etiologies must be considered. If aprior lateral view is available, it would be useful for comparison (Our KLIS record indicates no prior lateral chest imaging at our facility.) A short-term follow-up study can also offer additional information. Report put on RIS System upon submission of examination for review on 10/14/09. SIGNIFICANT REPORT FAX TO DR. JONATHAN KATZ

Clinical Notes (continued)

Electronically signed by Schneider, Merrick Tobin (M.D.) at 10/14/2009 10:23 AM

Progress Notes

Katz, Jonathan (M.D.) at 10/13/2009 1657

, , ,		
Author: Katz, Jonathan (M.D.)	Service: —	Author Type: Physician
Filed: 10/13/2009 4:57 PM	Encounter Date: 10/13/2009	Creation Time: 10/13/2009 4:57 PM
Status: Signed	Editor: Katz, Jonathan (M.D.) (Physician)	

History:

PROGRESS NOTE - Jonathan Katz, M.D, Internal Medicine, 10/13/2009

Lawson B Hawkins is a 54 year old man with severe dry cough and some shortness of breath x 5 days. Sx worse at night when lying in bed.

No Hx of respiratory disease. No apparent fever, chills, or chest pain. Has developed some low back pain with his cough.

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) CASE / CARE MGMT (V65.49BAAS) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A)

OBJECTIVE: BP 99/48 | Pulse 78 | Temp (Src) 95 °F (35 °C) (Tympanic) | Ht 1.702 m (5' 7") | Wt 95.618 kg (210 lb 12.8 oz) | SpO2 98%

General appearance: Overweight, alert, man who is wearing a surgical mask and has frequent paroxysms of dry coughing. This causes feeling of dyspnea and he tries to catch his breath.

Lungs: Clear, without wheezes, rales, or rhonchi. Exam difficult, however, because he coughs with each deep inspiration

chest X-ray: negative (my reading of transmitted computer images)

ASSESSMENT: Acute bronchitis, cannot rule out early pneumonitis

PLAN: - Increase oral fluid intake

- elevate head about 30 deg when sleeping
- Guaifenesin/codeine cough syrup, 5 ML p.o. q4h p.r.n. cough
- Albuterol Proair, 90 mcg, 2 puffs BID until symptoms subside

KAISER PERMANENTE

10/13/2009 - Office Visit in FAMILY PRACTICE PERDIEM (continued)

Clinical Notes (cont	tinued)
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- azithromycin 500mg p.o. day 1, 250mg days 2-5.

Electronically signed by Katz, Jonathan (M.D.) at 10/13/2009 4:57 PM

Quisumbing, Cecile M (R.N.) at 10/14/2009 1035

Author: Quisumbing, Cecile M (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 10/14/2009 10:35 AM	Encounter Date: 10/13/2009	Creation Time: 10/14/2009 10:35 AM
Status: Addendum	Editor: Quisumbing, Cecile M (R.N.) (RI	EGISTERED NURSE)
Quick Note:		

There is no message from the provider. This message has lab result only.

Electronically signed by Quisumbing, Cecile M (R.N.) at 10/14/2009 10:35 AM

Katz, Jonathan (M.D.) at 10/14/2009 1539

Author: Katz, Jonathan (M.D.) Filed: 10/14/2009 3:39 PM Status: Addendum Quick Note: Service: — Encounter Date: 10/13/2009 Editor: Katz, Jonathan (M.D.) (Physician) Author Type: Physician Creation Time: 10/14/2009 3:39 PM

FYI

Please see progress note of 10/13/09.

Electronically signed by Katz, Jonathan (M.D.) at 10/14/2009 3:39 PM

Hooks, Sarah Elizabeth (M.D.) at 10/14/2009 1714

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 10/14/2009 5:14 PM	Encounter Date: 10/13/2009	Creation Time: 10/14/2009 5:14 PM
Status: Addendum Quick Note:	Editor: Hooks, Sarah Elizabeth (M.D.) (P	hysician)
QUICK NOLE.		

Chest xray normal x there is a shadow making it difficult to see one area, he needs to repeat film WHEN HE IS ALL BETTER from his current bronchitis, no hurry

Clinical Notes (continued)

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 10/14/2009 5:14 PM

Spraggins, Gwendolyn (L.V.N.) at 10/15/2009 1145

Author: Spraggins, Gwendolyn (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 10/15/2009 11:45 AM	Encounter Date: 10/13/2009	Creation Time: 10/15/2009 11:45 AM
Status: Addendum	Editor: Spraggins, Gwendolyn (L.V.N.) (LI	CENSED VOCATIONAL NURSE)
Quick Note:		

Letter re: Chest xray normal x there is a shadow making it difficult to see one area, he needs to repeat film WHEN HE IS ALL BETTER from his current bronchitis, no hurry per MD mailed.

Electronically signed by Spraggins, Gwendolyn (L.V.N.) at 10/15/2009 11:45 AM

Imaging

ling	
R CHEST, 2 VIEWS. [173092983] (Final result)	
Electronically signed by: Katz, Jonathan (M.D.) on 10/	/13/09 1531 Status: Complete
This order may be acted on in another encounter.	
Ordering user: Katz, Jonathan (M.D.) 10/13/09 1531	Authorized by: Katz, Jonathan (M.D.)
Drdering mode: Standard	
Frequency: STAT 10/13/09 -	Class: Normal
Quantity: 1	Lab status: Final result
Diagnoses	
ACUTE BRONCHITIS [466.0 (ICD-9-CM)]	
Provider Details	
Provider	NPI
Katz, Jonathan (M.D.)	1467591164
neumonia. XR CHEST, 2 VIEWS. [173092983]	Resulted: 10/13/09 1602, Result status: Final result
Order status: Completed	Filed on: 10/14/09 1023
Transcription	
Type ID	Dictating Provider
Diagnostic imaging 34873	Schneider, Merrick Tobin (M.D.), M.D.
Signed by Schneider, Merrick Tobin (M.D.), ME CHEST - FILMLESS - 10/13/09 - 1555 HOURS	
The heart projects minimally larger than on 08/05	5/09 with elongation
of the aorta. The pulmonary vasculature is within	n normal limits
There are some strand densities in the lower lung	
There are some strand densities in the lower lung	gs without associated
There are some strand densities in the lower lung effusion.	gs without associated sity projected over a
There are some strand densities in the lower lung effusion. On the lateral view there is a subcentimeter dens	gs without associated sity projected over a s could be due to
There are some strand densities in the lower lung effusion. On the lateral view there is a subcentimeter dens thoracic body at the level of the lower heart. This	gs without associated sity projected over a s could be due to gies must be
There are some strand densities in the lower lung effusion. On the lateral view there is a subcentimeter dens thoracic body at the level of the lower heart. This effects of overlapping structures but other etiologi	gs without associated sity projected over a s could be due to gies must be vould be useful ior lateral chest

Imaging (continued)

offer additional information. Report put on RIS System upon submission of examination for review on 10/14/09. SIGNIFICANT REPORT FAX TO DR. JONATHAN KATZ

Reviewed by

Sproles, Scott Wesley (M.D.) on 10/20/09 1104 Katz, Jonathan (M.D.) on 10/15/09 1328 Spraggins, Gwendolyn (L.V.N.) on 10/15/09 1147 Hooks, Sarah Elizabeth (M.D.) on 10/14/09 1714 Quisumbing, Cecile M (R.N.) on 10/14/09 1035 Quisumbing, Cecile M (R.N.) on 10/14/09 1035 Quisumbing, Cecile M (R.N.) on 10/14/09 1035 Quisumbing, Cecile M (R.N.) on 10/14/09 1035

XR CHEST, 2 VIEWS. [173092983]

Order status: Completed Accession number: 34873710

Resulted: 10/13/09 1602, Result status: In process

Filed on: 10/13/09 1602 Resulting lab: SCAL RADIOLOGY INTERFACE

Transcription

Туре	ID	Dictating Provider
Diagnostic imaging	34873710	Schneider, Merrick Tobin (M.D.), M.D.

Signed by Schneider, Merrick Tobin (M.D.), MEDICAL DOCTOR on 10/14/09 at 1023

CHEST - FILMLESS - 10/13/09 - 1555 HOURS

The heart projects minimally larger than on 08/05/09 with elongation of the aorta. The pulmonary vasculature is within normal limits. There are some strand densities in the lower lungs without associated effusion.

On the lateral view there is a subcentimeter density projected over a thoracic body at the level of the lower heart. This could be due to effects of overlapping structures but other etiologies must be considered. If aprior lateral view is available, it would be useful for comparison (Our KLIS record indicates no prior lateral chest imaging at our facility.) A short-term follow-up study can also offer additional information.

Report put on RIS System upon submission of examination for review on 10/14/09.

SIGNIFICANT REPORT FAX TO DR. JONATHAN KATZ

Reviewed by

Sproles, Scott Wesley (M.D.) on 10/20/09 1104 Katz, Jonathan (M.D.) on 10/15/09 1328 Spraggins, Gwendolyn (L.V.N.) on 10/15/09 1147 Hooks, Sarah Elizabeth (M.D.) on 10/14/09 1714

Imaging (continued)

Quisumbing, Cecile M (R.N.) on 10/14/09 1035 Quisumbing, Cecile M (R.N.) on 10/14/09 1035 Quisumbing, Cecile M (R.N.) on 10/14/09 1035 Quisumbing, Cecile M (R.N.) on 10/14/09 1035

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present

Indications

Acute Bronchitis [466.0 (ICD-9-CM)]

All Reviewers List

Sproles, Scott Wesley (M.D.) on 10/20/2009 11:04 Katz, Jonathan (M.D.) on 10/15/2009 13:28 Spraggins, Gwendolyn (L.V.N.) on 10/15/2009 11:47 Hooks, Sarah Elizabeth (M.D.) on 10/14/2009 17:14 Quisumbing, Cecile M (R.N.) on 10/14/2009 10:35 Quisumbing, Cecile M (R.N.) on 10/14/2009 10:35 Quisumbing, Cecile M (R.N.) on 10/14/2009 10:35 Quisumbing, Cecile M (R.N.) on 10/14/2009 10:35

Other Orders

Medications CHERATUSSIN AC 10-100 MG/5 ML ORAL LIQD [173123097] (Discontinued) Electronically signed by: Katz, Jonathan (M.D.) on 10/13/09 1636 Status: Discontinued Ordering user: Katz, Jonathan (M.D.) 10/13/09 1636 Authorized by: Katz, Jonathan (M.D.) Ordering mode: Standard Frequency: Routine 10/13/09 - 04/02/10 Class: Fill Now Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1106 Diagnoses ACUTE BRONCHITIS [466.0 (ICD-9-CM)] **Provider Details** NPI Provider Katz, Jonathan (M.D.) 1467591164 Indications Acute Bronchitis [466.0 (ICD-9-CM)] PROAIR HFA 90 MCG/ACTUATION INHL HFAA [173123100] (Discontinued) Electronically signed by: Katz, Jonathan (M.D.) on 10/13/09 1636 Status: Discontinued Ordering user: Katz, Jonathan (M.D.) 10/13/09 1636 Authorized by: Katz, Jonathan (M.D.) Ordering mode: Standard Frequency: Routine 10/13/09 - 04/02/10 Class: Fill Now Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1106 Diagnoses ACUTE BRONCHITIS [466.0 (ICD-9-CM)] **Provider Details** Provider NPI Katz, Jonathan (M.D.) 1467591164 Indications Acute Bronchitis [466.0 (ICD-9-CM)] Printed on 1/12/24 5:33 PM

Other Orders (continued)

Electronically signed by: Katz, Jonathan (M.D.) on 10/13/09 163	7	Status: Discontinued
Ordering user: Katz, Jonathan (M.D.) 10/13/09 1637	Authorized by: Katz, Jonathan (M.D.)	
Ordering mode: Standard		
Frequency: Routine 10/13/09 - 04/02/10	Class: Fill Now	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1106		
Diagnoses		
ACUTE BRONCHITIS [466.0 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Katz, Jonathan (M.D.)	1467591164	

Acute Bronchitis [466.0 (ICD-9-CM)]

END OF ENCOUNTER

10/14/2009 - Orders Only in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273

Clinical Notes

Progress Notes		
Spraggins, Gwendolyn (L.V.N.) at 12/4/200	9 1437	
Author: Spraggins, Gwendolyn (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL NURSE
Filed: 12/4/2009 2:37 PM Status: Addendum	Encounter Date: 10/14/2009 Editor: Spraggins, Gwendolyn (L.V.N	Creation Time: 12/4/2009 2:37 PM .) (LICENSED VOCATIONAL NURSE)

Message left via H# to contact for MD message, Needs to do repeat cxr as soon as possible, if no resonse will mail letter.

Electronically signed by Spraggins, Gwendolyn (L.V.N.) at 12/4/2009 2:37 PM

Imaging

Imaging

XR CHEST, 2 VIEWS. [173341090] (Discontinued)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 10/14/09 1713

Status: Discontinued

10/14/2009 - Orders Only in INTERNAL MEDICINE RAIN2 (continued)

Imaging (continued)

Ordering user: Hooks, Sarah Elizabeth (M.D.) 10/14/09 1713 Ordering mode: Standard	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 10/14/09 -	Class: Normal
Quantity: 1	Discontinued by: Interface, Scal_Radiology 11/26/09 0755 [Other (Expired Order for DKA–Pt. failed to keep appt.; Unable to reschedule. REORDER if still required.)]
	rescriedule. REORDER il suil required./j
Provider Details	

Provider

Hooks, Sarah Elizabeth (M.D.)

NPI 1497814131

Order comments: Reason: f/u possible density seen on 10/13 xray lateral view

END OF ENCOUNTER

11/16/2009 - Allied Health/Nurse Visit in MEMBER HEALTH EDUCATION

Visit Information

Provider Information

Encounter Provider

McMillan, Yolanda Yvette (R.N.)

Department

Name	Address	Phone
MEMBER HEALTH EDUCATION	5971 VENICE BLVD Los Angeles CA 90034-1713	323-421-2710

Reason for Visit

Chief Complaint

PATIENT EDUCATION

Clinical Notes

Progress Notes

McMillan, Yolanda Yvette (R.N.) at 11/16/2009 2002

Author: McMillan, Yolanda Yvette (R.N.)Service: —Author Type: REGISTERED NURSEFiled: 11/16/20098:02 PMEncounter Date: 11/16/2009Creation Time: 11/16/2009Status: SignedEditor: McMillan, Yolanda Yvette (R.N.) (REGISTERED NURSE)

Member Lawson B Hawkins attended session #1 of the Living Well with Diabetes Education program taught in English . Topics included definition, basic pathophysiology, and sign and symptoms of diabetes; Normal, diagnostic and controlled ranges for blood glucose readings; Roles of medications, diet exercise, self blood glucose readings, and stress management in diabetes management; and self-care management overview on how to prevent, recognize and

11/16/2009 - Allied Health/Nurse Visit in MEMBER HEALTH EDUCATION (continued)

Clinical Notes (continued)

treat hyper/hypoglycemia and long term complications; action and possible side effects of oral hypoglycemic agents and insulin; sick day rules; skin/foot care; general personal hygiene; and diabetes preventive service guide. Written materials were provided along with information on other health education classes, diabetes resources, contact numbers, and follow-up care as needed.

Electronically signed by McMillan, Yolanda Yvette (R.N.) at 11/16/2009 8:02 PM

END OF ENCOUNTER

11/19/2009 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887
	Los Angeles CA 90027-5822	

Labs

MICROALBUM	IIN, URINE, QUANTITATI	/E [178825035] (Completed	1)		
Electronically s	signed by: Program, Com	olete Care on 11/19/09 1911			Status: Completed
	Program, Complete Care	11/19/09 1911	Authorized by: Hooks, Sa	rah Elizabeth (M.D.)	
Ordering mode	e: Standard				
Frequency: Ro	outine 11/19/09 -		Class: BULK		
Quantity: 1					
Provider D	etails				
Provider			NPI		
Hooks, Sa	rah Elizabeth (M.D.)		1497814131		
Specimen	Information				
ID	Туре	Source	Col	lected By	
—	—	URINE	_		

END OF ENCOUNTER

11/19/2009 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

11/19/2009 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT (continued)

Vi

Visit Information (continued)		
Name	Address	Phone
POPULATION CARE MANAGEMEN	F 4950 SUNSET BLVD Los Angeles CA 90027-	323-783-7887 5822
Labs		
MICROALBUMIN, URINE, QUANTITATI	VE [178864601] (Discontin	ued)
Electronically signed by: Program, Com Ordering user: Program, Complete Care Ordering mode: Standard Frequency: Routine 11/19/09 - Quantity: 1 Discontinued by: Interface, Scal_ Lab 02 Provider Details	plete Care on 11/19/09 191 11/19/09 1911	1 Status: Discontinued Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: BULK Instance released by: Program, Complete Care (auto-released) 11/20/2009 1:27 AM
Provider		NPI
Hooks, Sarah Elizabeth (M.D.)		1497814131
Specimen Information		
ID Туре	Source	Collected By
	END OF EN _ Orders Only in POP	COUNTER ULATION CARE MANAGEMENT
Visit Information Provider Information		
Encounter Provider		
Hooks, Sarah Elizabeth (M.D.)		
Department		
Name	Address	Phone
POPULATION CARE MANAGEMEN		323-783-7887 5822
Labs		
GLOBIN, FECAL [179711609] (Complet	ed)	
Electronically signed by: Program, Com Ordering user: Program, Complete Care Ordering mode: Standard Frequency: Routine 11/25/09 - Quantity: 1		8 Status: Completed Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: BULK
Provider Details		
Provider		NPI
Hooks, Sarah Elizabeth (M.D.)		1497814131

END OF ENCOUNTER

11/25/2009 - Orders Only in POPULATION CARE MANAGEMENT (continued)

11/25/2009 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887	
	Los Angeles CA 90027-5822		

Labs

GLOBIN, FECAL [179754570] (Discontinued)		
Electronically signed by: Program, Complete Care on 11/2	5/09 1908	Status: Discontinued
Ordering user: Program, Complete Care 11/25/09 1908	Authorized by: Hooks, Sarah	n Elizabeth (M.D.)
Ordering mode: Standard	•	
Frequency: Routine 11/25/09 -	Class: BULK	
Quantity: 1	Instance released by: Progra 11/26/2009 2:02 AM	am, Complete Care (auto-released)
Discontinued by: Interface, Scal_ Lab 02/27/10 0439 [Other	(Pt. did not present for lab)]	
Provider Details		
Provider	NPI	

Hooks, Sarah Elizabeth (M.D.)

1497814131

END OF ENCOUNTER

12/03/2009 - Orders Only in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE	833-574-2273	
	Los Angeles CA 90034-1702		

Clinical Notes

Procedures

Filed on 12/3/2009 0000

Procedure Orders

1. XR CHEST, 2 VIEWS. [180704437] ordered by Hooks, Sarah Elizabeth (M.D.) at 12/03/09 1228

CHEST PA AND LATERAL: 1/5/10

Comparison 10/13/09

FINDINGS: The cardiac silhouette is normal in size. The pulmonary vessels are normal. The lungs are clear. No infiltrate or effusion is

KAISER PERMANENTE

12/03/2009 - Orders Only in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

visualized. The nodular density previously seen on the lateral view appears to be due to pulmonary vasculature. No discrete nodule is visualized.

Electronically signed by Cho, Albert W. (M.D.) at 1/7/2010 8:47 AM

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 1/7/2010 0907 Author: Hooks, Sarah Elizabeth (M.D.) Filed: 1/7/2010 9:07 AM Status: Addendum Quick Note: Status: Addendum Status: Addendum Author: Hooks, Sarah Elizabeth (M.D.) Status: Addendum Author Type: Physician Creation Time: 1/7/2010 9:07 AM

Chest xray is normal

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 1/7/2010 9:07 AM

Spraggins, Gwendolyn (L.V.N.) at 1/7/2010 1110

Author: Spraggins, Gwendolyn (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 1/7/2010 11:10 AM	Encounter Date: 12/3/2009	Creation Time: 1/7/2010 11:10 AM
Status: Addendum	Editor: Spraggins, Gwendolyn (L.V.I	N.) (LICENSED VOCATIONAL NURSE)
Quick Note:		

Letter re: normal chest x-ray as per MD mailed.

Electronically signed by Spraggins, Gwendolyn (L.V.N.) at 1/7/2010 11:10 AM

Imaging

Imaging

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/	03/09 1228 Status: Complete
This order may be acted on in another encounter.	
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/03/09 1228	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	
Frequency: Routine 12/03/09 -	Class: Normal
Quantity: 1	Lab status: Final result
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
Order comments: Reason: f/u abnl cxr 10/09	
XR CHEST, 2 VIEWS. [180704437]	Resulted: 01/05/10 1431, Result status: Final res

12/03/2009 - Orders Only in INTERNAL MEDICINE RAIN2 (continued)

Imaging (continued)

Order status: Completed Accession number: 35546281 Filed on: 01/07/10 0847

Transcription

Туре	ID	Date and Time	Dictating Provider	
Diagnostic imaging	35546281	1/6/2010 5:35 PM	Cho, Albert W. (M.D.)	
Signed by Cho, Albert V	V. (M.D.), MEDICAL DOC	TOR on 01/07/10 at 0847		

CHEST PA AND LATERAL: 1/5/10

Comparison 10/13/09

FINDINGS:

The cardiac silhouette is normal in size. The pulmonary vessels are normal. The lungs are clear. No infiltrate or effusion is visualized. The nodular density previously seen on the lateral view appears to be due to pulmonary vasculature. No discrete nodule is visualized.

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 01/07/10 1110 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0908 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0907 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0907 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0907

XR CHEST, 2 VIEWS. [180704437]

Order status: Completed Accession number: 35546281 Resulted: 01/05/10 1432, Result status: In process

Filed on: 01/05/10 1432 Resulting lab: SCAL RADIOLOGY INTERFACE

Transcription

Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	35546281	1/6/2010 5:35 PM	Cho, Albert W. (M.D.)
Signed by Cho, Albert W. (M.D.), MEDICAL DOCTOR on 01/07/10 at 0847			

CHEST PA AND LATERAL: 1/5/10

Comparison 10/13/09

FINDINGS:

The cardiac silhouette is normal in size. The pulmonary vessels are normal. The lungs are clear. No infiltrate or effusion is visualized. The nodular density previously seen on the lateral view appears to be due to pulmonary vasculature. No discrete nodule is visualized.

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 01/07/10 1110 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0908 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0907 Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0907

12/03/2009 - Orders Only in INTERNAL MEDICINE RAIN2 (continued)

Imaging (continued)

Hooks, Sarah Elizabeth (M.D.) on 01/07/10 0907

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 1/7/2010 11:10 Hooks, Sarah Elizabeth (M.D.) on 1/7/2010 09:08 Hooks, Sarah Elizabeth (M.D.) on 1/7/2010 09:07 Hooks, Sarah Elizabeth (M.D.) on 1/7/2010 09:07 Hooks, Sarah Elizabeth (M.D.) on 1/7/2010 09:07

END OF ENCOUNTER

12/10/2009 - Ancillary Orders

Visit Information

Other Orders

ledications	
ABILIFY 20 MG ORAL TAB [181833594] (Discontinued)	
Electronically signed by: Kitahara, Jennifer M on 12/10/09 0000	Status: Discontinued
Ordering user: Kitahara, Jennifer M 12/10/09 0000	Authorized by: SCAL PROVIDER
Ordering mode: Standard	
Frequency: 12/10/09 - 01/17/10	Discontinued by: Interface, Scal_ Pharmacy 01/17/10 2228
	[Duplicate Therapy]
Provider Details	
Provider	NPI
Kitahara, Jennifer M	1790307882
SCAL PROVIDER	_

END OF ENCOUNTER

01/11/2010 - Ancillary Orders

Visit Information

Other Orders

Medications

Aripiprazole (ABILIFY) 20 mg Oral Tab [187146877] (Discontinued)

Electronically signed by: Interface, Scal_ Pharmacy on 01/11/10 0000 Ordering user: Interface, Scal_ Pharmacy 01/11/10 0000 Auth Ordering mode: Standard Frequency: 01/11/10 - 02/19/10 Disc

Authorized by: SCAL PROVIDER

Status: Discontinued

Discontinued by: Interface, Scal_ Pharmacy 02/19/10 0444 [Duplicate Therapy]

01/11/2010 - Ancillary Orders (continued)

Other Orders (continued)

Provider Details			
Provider	NPI		
Interface, Scal_ Pharmacy	_		
SCAL PROVIDER	-		

END OF ENCOUNTER

02/17/2010 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887	
	Los Angeles CA 90027-5822		

Labs

MICROALBUMIN,	URINE, QUANTITATI	VE [192208861] (Completed	3)	
Electronically sign	Electronically signed by: Program, Complete Care on 02/17/10 1925			
Ordering user: Pro	gram, Complete Care		Authorized by: Hooks, Sarah Elizabeth	(M.D.)
Ordering mode: St	andard			
Frequency: Routin	e 02/17/10 -		Class: BULK	
Quantity: 1				
Provider Detail	ls			
Provider			NPI	
Hooks, Sarah	Elizabeth (M.D.)		1497814131	
Specimen Info	rmation			
ID	Туре	Source	Collected By	
		URINE	—	

END OF ENCOUNTER

02/17/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887
	Los Angeles CA 90027-5822	

02/17/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT (continued)

Visit Information (continued)

Labs

М	MICROALBUMIN, URINE, QUANTITATIVE [192247818] (Discontinued)					
(Electronically signed by: Program, Complete Care on 02/17/10 1925 Status: Discontinued Ordering user: Program, Complete Care 02/17/10 1925 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard					
	Frequency: Routine 02/17/10 - Class: BULK Quantity: 1 Instance released by: Program, Complete Care (auto-released) 2/18/2010 1:25 AM					
[Discontinued by: Interface, Scal	_ Lab 05/22/10 0731 [Other (Pt. did				
	Provider		NPI			
	Hooks, Sarah Elizabeth (M.I	D.)	1497814131			
	Specimen Information					
	ID Type	Source	Collected By			
		URINE	—			
		END OF EN	ICOUNTER			
			looon Ek			
	00/47/0					
		010 - ALLIED HEALTH/NOR				
	Information					
P	rovider Information					
	Encounter Provider Authorizing Provider					
	White, Elizabeth Boehning (Lcsw) White, Elizabeth Boehning (Lcsw)					
D	epartment					
	Name	Address	Phone			
	PSYCHIATRY	5105 GOLDLEAF CIRC Los Angeles CA 90056-				
Le	Level of Service					
	Level of Service					
	PSYCH EXAM, DIAGNOSTI	C INTERVIEW, HISTORY MENTAL	STATUS AND DISPOSITION			
Reas	on for Visit					
С	hief Complaint					
_	SCHIZOPHRENIA					
	isit Diagnosis					
	Name SCHIZOAFFECTIVE DISORDE	Code R (primary) 295.70	Chronic? Yes			
		r (primary) 293.70	165			
	al Notes					
P	rogress Notes					
	White, Elizabeth Boehning					
	Author: White, Elizabeth E Filed: 2/17/2010 10:30 AN		Author Type: PSYCH SOC 2/17/2010 Creation Time: 2/17/2010			
	Status: Signed		zabeth Boehning (Lcsw) (Psych Social Worker LCSW			
	Sensitive Note	· · · · · · · · · · · · · · · · · · ·				

02/17/2010 - ALLIED HEALTH/NURSE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

VISIT INFORMATION 2/17/2010 Procedure Description: Initial Intake: Individual Psychotherapy Procedure Code/ Time Spent: 90801: 45-50 minutes

IDENTIFYING INFORMATION Lawson B Hawkins 54 year old male Ethnicity: African-American Marital Status: single Employment Status/Military Hx if applicable: self-employed - fix computers, write software Legal Problems: denied Lives with: alone

CHIEF COMPLAINT/ Presenting Problem/ Course of Illness: Medication refill and transfer

WHY IS THE PT SEEKING HELP NOW? Medication refill and transfer

CURRENT SYMPTOMS Depression: none Appetite: no change Weight: decrease Somatic Complaints: no Sleep: denied Anxiety: none Memory/Concentration: Yes - memory (short-term); concentration - no Motivation/Energy: "fine" Mood Swings: none

PSYCHIATRIC HISTORY:

Outpatient Treatment: Previously in outpatient psychiatric treatment at Non-KP- Los Angeles County Inpatient Treatment: 1x Psychiatric hospitalizations within the past - 1989 Result of suicide attempt; several attempts in past - jumped - 6 months - broken bones, back Last suicide attempt - 1998-99 Psychiatric Medication/ or past issues with medications: Abilify - 20 mg Suicidal or homicidal ideation: Denies suicidal ideation, plan and intent Denies homicidal ideation, plan and intent Weapons: gun not accessible

Family Psych History: cousin - schizophrenia - maternal; cousin - paternal

RELEVANT PT SOCIAL AND DEVELOPMENTAL HISTORY: France - born USA - came to USA in 1972 No children Printed on 1/12/24 5:33 PM

KAISER PERMANENTE

02/17/2010 - ALLIED HEALTH/NURSE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

High school degree, some college Hal-dozen friends, 2 various close friends No significant other

Hx of loss of Consciousness: denied

History of Violence: denied

SUBSTANCE USE: rarely

FAMILY SUBSTANCE ABUSE: 1 cousin - who used drugs

CURRENT MEDICAL PROBLEMS : Pregnant? N/A Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A] CHOLELITHIASIS [574.20A] OBESITY [278.00E] DM 2, UNCONTROLLED [250.02B] DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70A]

CURRENT MEDICATIONS : Current outpatient prescription	ns:		
Lancets (ONE TOUCH ULTRASOFT LANCETS) Mis Misc	USE AS DIRECTED c	Disp: 200	Rfl: 2
ONE TOUCH ULTRA TEST INVT STRIPS	USE AS DIRECTED	Disp: 200	Rfl: 3
ABILIFY 20 MG ORAL TAB	TAKE 1 TABLET ORALL DAILY	YDisp: 30	Rfl: 0
CHERATUSSIN AC 10-100 MG/5 ML ORAL LIQD	1 TO 2 TSPS (5 TO 10 ML) PO Q4-6H PRN COUGH	Disp: 236	Rfl: 0
PROAIR HFA 90 MCG/ACTUATION INHL HFAA	SHAKE WELL AND INHALE 2 PUFFS ORALLY EVERY 6 HOURS AS NEEDED FOR SHORTNESS OF BREATH OR WHEEZING	Disp: 8.5	Rfl: 0
AZITHROMYCIN 250 MG ORAL TAB	TAKE 2 TABLETS ORALLY ON DAY 1 THE 1 TABLET DAILY ON DAYS 2 THROUGH 5	Disp: 6 N	Rfl: 0
ABILIFY 30 MG ORAL TAB	TAKE 1 TABLET ORALL EVERY NIGHT AT	YDisp: 30	Rfl: 1

02/17/2010 - ALLIED HEALTH/NURSE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

Clinical Notes (continued)			
	BEDTIME		
SIMVASTATIN 20 MG ORAL TAB	1 TAB PO DAILY AT BEDTIME	Disp: 90	Rfl: 3
metFORMIN (GLUCOPHAGE) 500 mg Oral Tab	TAKE 2 TABLETS ORALLY 2 TIMES DAILY WITH MEALS	Disp: 400	Rfl: 3
BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 X 1/2' MISC SYRINGE	USE AS DIRECTED	Disp: 200	Rfl: 0
BD LANCET DEVICE MISC MISC	USE AS DIRECTED	Disp: 200	Rfl: 0
glipiZIDE (GLUCOTROL) 5 mg Oral Tab	TAKE 1 TABLET ORALLY 2 TIMES A DAY BEFORE MEALS		Rfl: 3
NOVOLIN R 100 UNIT/ML INJ SOLN	INJECT SUBCUTANEOUSLY BEFORE MEALS AND AT BEDTIME AS DIRECTED		Rfl: 0
ONE TOUCH ULTRA 2 MISC KIT	USE AS DIRECTED	Disp: 1	Rfl: 0
CLOTRIMAZOLE 1 % TOP CREA	APPLY TO AFFECTED AREA(S) BID	Disp: 30	Rfl: 2
OMEPRAZOLE 20 MG ORAL CPDR SR CAP	TAKE 1 CAPSULE ORALLY 2 TIMES DAILY	Disp: 200	Rfl: 3
CARMOL 20 20 % TOP CREA	apply to I 2nd and 3rd digi areas BID	tDisp: 45	Rfl: 3
Allergies: No Known Drug Aller*			
ALTERNATIVE TREATMENTS	S/ Herbal Supplements: no	D	
LIFESTYLE ISSUES: Tobacco: no Caffeine Use: 2-6 cups coffee Exercise: none	per day		
MENTAL STATUS EXAM: Appearance/Grooming: approp Eye Contact: appropriate	oriate		

Appearance/Grooming: appropriate Eye Contact: appropriate Gait and Posture: normal gait, normal posture Attitude/Behavior/Manner: normal, cooperative Motor Activity: normal Mood: stable Affect: constricted, somewhat, normal range, appropriate, mood congruent Speech: normal Thought content / Perceptual disturbances: no suicidal ideation, plan or intent, no homicidal ideation, plan or intent, no psychotic or inappropriate thought content Thought process/Flow of Thought: coherent, relevant, logical

02/17/2010 - ALLIED HEALTH/NURSE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

Sensory and cognitive: alert, clear Insight: good Judgment: unimpaired Potential for decompensation based on information reported today: minimal If yes, explain: when maintained on medication - very stable

DIAGNOSIS

Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A] CHOLELITHIASIS [574.20A] OBESITY [278.00E] DM 2, UNCONTROLLED [250.02B] DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70A]

Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71: Symptoms are transient and expectable reactions to stressors; No more than slight impairment in social, occupational, or school functioning.

Axis V: HIGHEST GAF Score in the past 12 months: 80-71: Symptoms are transient and expectable reactions to stressors; No more than slight impairment in social, occupational, or school functioning.

SHORT TERM GOALS: (operationalized, objective, measurable)1. Medication evaluation - refill2. Return as desired

TREATMENT PLAN: TREATMENT PLAN

Treatment Plan: Treatment team members: Patient referred by: self referral Safety Information: Patient advised of emergency procedures and phone numbers. Patient agrees to contact clinic or after hours if situation changes or as needed.

Diet and Exercise: Consider healthy eating and some changes to increase exercise

Follow up appointments and referrals:

Medication appointment - 2/17/10 at 11:00 AM - Dr. Talag

Individual/Group Therapy: Declined

KAISER PERMANENTE

02/17/2010 - ALLIED HEALTH/NURSE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

Treatment plan agreement: I understand the Treatment Plan reviewed. I agree with the recommended Treatment Plan. I will call the emergency numbers provided if I feel unsafe.

Elizabeth White, M.S.W., L.C.S.W. 2/17/2010 10:30 AM

Patient seen in the following program/location: Psychiatry - Outpatient .

- * Clinic information, confidentiality policies, and emergency services reviewed.
- * Client given pamphlet with above information.

Electronically signed by White, Elizabeth Boehning (Lcsw) at 2/17/2010 10:30 AM

Patient Instructions

TREATMENT PLAN

Treatment Plan: Treatment team members: Patient referred by: self referral Safety Information: Patient advised of emergency procedures and phone numbers. Patient agrees to contact clinic or after hours if situation changes or as needed.

Diet and Exercise: Consider healthy eating and some changes to increase exercise

Follow up appointments and referrals:

Medication appointment - 2/17/10 at 11:00 AM - Dr. Talag

Individual/Group Therapy: Declined

Treatment plan agreement: I understand the Treatment Plan reviewed. I agree with the recommended Treatment Plan. I will call the emergency numbers provided if I feel unsafe.

Elizabeth White, M.S.W., L.C.S.W. 2/17/2010 10:22 AM

END OF ENCOUNTER

02/17/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY

Visit Information

Provider Information

Encounter Provider

Talag, Emelita Borja (M.D.)

Authorizing Provider

Talag, Emelita Borja (M.D.)

Printed on 1/12/24 5:33 PM

Visit Information (continued)

Department

•		
Name	Address	Phone
PSYCHIATRY	5105 GOLDLEAF CIRCLE Los Angeles CA 90056-1269	323-298-3100
Level of Service		
Level of Service		
PSYCHIATRIC PHARMACOLOGIC MA	NAGEMENT	
Reason for Visit		
Chief Complaints		
PSYCHOSISMOOD DISORDER		
Visit Diagnosis		
Name	Code	Chronic?
SCHIZOAFFECTIVE DISORDER (primary	295.70	Yes
Clinical Notes		
Progress Notes		
Talag, Emelita Borja (M.D.) at 2/17/201	0 1100	
Author: Talag, Emelita Borja (M.D.) Filed: 2/17/2010 4:57 PM Status: Signed **Sensitive Note**	Service: — Encounter Date: 2/17/2010 Editor: Talag, Emelita Borja (M.D	Author Type: Physician Creation Time: 2/17/2010 11:00 AM 0.) (Physician)
History:		
2/17/2010		
awson B Hawkins		
000017508205		

5/25/1955 Type of Visit: Initial Medication Evaluation Present during the session:

Chart reviewed. Please refer to intake notes from the therapist for details.

Interim History: Patient is a 54 y/o male who came in today for medication management of his schizoaffective disorder. He said his symptoms started about 20 years ago. He was on his way to Sta. Monica Library when he bumped into 2 females which he thought was just ordinary bump. He was then arrested later in the library for alleged attempted robbery. He said he became paranoid and very psychotic because of this incident. He went to his sister in NY and contiued to get worse. He was very anxious and paranoid. He was admitted in the psychiatric hospital and stayed there for several weeks. He went to France to recuperate and continued to see psychiatrist. He went back to CA and had an episode again. He attempted to kill himself several times. He jumped off the bridge and broke his back and took long time to recover physically. He said he had been on treatment since then. He had been tried on different meds. Currently he is stable with his current regimen and wants to continue. He denied any psychosis, denied any SI/HI; denied feeling depressed or having manic episode. He takes his medication regularly.

Prior diagnoses:

Clinical Notes (continued)

Schizoaffective Disorder

OCD

Bipolar Disorder

Trials of meds - Lithium, Depakote, Haldol (high doses due to his severe symptoms), Risperdal, Abilify

He had been hospitalized twice in the past due to suicide attempts; he had tried CO poisoning and used gas stove to suffocate himself but was able to get out of it; he had been out of the hospital for more than 10 years; he lives by himself in an apartment and has been on disability for long time.

DIAGNOSIS

Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

Discussed diagnosis, risk factors, treatment plan outlined here and prognosis with the patient. Supportive psychotherapy was provided as well as answering any question patient had about his psychiatric conditions or medications ie. patient education.

Continue Abilify 20 mg po QHS as he finds this effective

Risks, benefits, side effects, and adverse events all discussed with the patient in detail. The patient acknowledged understanding and consented to treatment with the prescribed medications. In addition to education about the possible SE and adverse events, the patient was given contact information to use in the case of intolerable side effects, emergencies, or other issues or questions possible in the course of treatment;

Provided information for emergency BHL; patient also requested to decrease his dose due to medication cost but I advised him to keep the current dose to continue his stability and then we will continue to reevaluate as he follows up in the clinic. He agreed.

RTC in 1 month for medication follow up

EMELITA BORJA TALAG MD

Clinical Notes (continued)

Intake Notes from the therapis on 2/17/10 ------

ELIZABETH BOEHNING WHITE MSW Wed Feb 17, 2010 10:30 AM Signed **Sensitive Note**

VISIT INFORMATION 2/17/2010 Procedure Description: Initial Intake: Individual Psychotherapy Procedure Code/ Time Spent: 90801: 45-50 minutes

IDENTIFYING INFORMATION Lawson B Hawkins 54 year old male Ethnicity: African-American Marital Status: single Employment Status/Military Hx if applicable: self-employed - fix computers, write software Legal Problems: denied Lives with: alone

CHIEF COMPLAINT/ Presenting Problem/ Course of Illness: Medication refill and transfer

WHY IS THE PT SEEKING HELP NOW? Medication refill and transfer

CURRENT SYMPTOMS Depression: none Appetite: no change Weight: decrease Somatic Complaints: no Sleep: denied Anxiety: none Memory/Concentration: Yes - memory (short-term); concentration - no Motivation/Energy: "fine" Mood Swings: none

PSYCHIATRIC HISTORY:

Outpatient Treatment: Previously in outpatient psychiatric treatment at Non-KP- Los Angeles County Inpatient Treatment: 1x Psychiatric hospitalizations within the past - 1989 Result of suicide attempt; several attempts in past - jumped - 6 months - broken bones, back Last suicide attempt - 1998-99 Psychiatric Medication/ or past issues with medications: Abilify - 20 mg Suicidal or homicidal ideation: Denies suicidal ideation, plan and intent Denies homicidal ideation, plan and intent Weapons: gun not accessible

Family Psych History: cousin - schizophrenia - maternal; cousin - paternal

Clinical Notes (continued)

RELEVANT PT SOCIAL AND DEVELOPMENTAL HISTORY: France - born USA - came to USA in 1972 No children High school degree, some college Hal-dozen friends, 2 various close friends No significant other

Hx of loss of Consciousness: denied

History of Violence: denied

SUBSTANCE USE: rarely

FAMILY SUBSTANCE ABUSE: 1 cousin - who used drugs

CURRENT MEDICAL PROBLEMS : Pregnant? N/A Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A)

CURRENT MEDICATIONS : Current outpatient prescriptions:

Lancets (ONE TOUCH ULTRASOFT LANCETS) Misc Misc USE AS DIRECTED Disp: 200 Rfl: 2 ONE TOUCH ULTRA TEST INVT STRIPS USE AS DIRECTED Disp: 200 Rfl: 3 ABILIFY 20 MG ORAL TAB TAKE 1 TABLET ORALLY DAILY Disp: 30 Rfl: 0 CHERATUSSIN AC 10-100 MG/5 ML ORAL LIQD 1 TO 2 TSPS (5 TO 10 ML) PO Q4-6H PRN COUGH Disp: 236 Rfl: 0 PROAIR HFA 90 MCG/ACTUATION INHL HFAA SHAKE WELL AND INHALE 2 PUFFS ORALLY EVERY 6 HOURS AS NEEDED FOR SHORTNESS OF BREATH OR WHEEZING Disp: 8.5 Rfl: 0

Clinical Notes (continued)

AZITHROMYCIN 250 MG ORAL TAB TAKE 2 TABLETS ORALLY ON DAY 1 THEN 1 TABLET DAILY ON DAYS 2 THROUGH 5 Disp: 6 Rfl: 0 ABILIFY 30 MG ORAL TAB TAKE 1 TABLET ORALLY EVERY NIGHT AT BEDTIME Disp: 30 Rfl: 1 SIMVASTATIN 20 MG ORAL TAB 1 TAB PO DAILY AT BEDTIME Disp: 90 Rfl: 3 metFORMIN (GLUCOPHAGE) 500 mg Oral Tab TAKE 2 TABLETS ORALLY 2 TIMES DAILY WITH MEALS Disp: 400 Rfl: 3 BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 X 1/2" MISC SYRINGE USE AS DIRECTED Disp: 200 Rfl: 0 BD LANCET DEVICE MISC MISC USE AS DIRECTED Disp: 200 Rfl: 0 glipiZIDE (GLUCOTROL) 5 mg Oral Tab TAKE 1 TABLET ORALLY 2 TIMES A DAY BEFORE MEALS Disp: 100 Rfl: 3 NOVOLIN R 100 UNIT/ML INJ SOLN INJECT SUBCUTANEOUSLY BEFORE MEALS AND AT BEDTIME AS DIRECTED Disp: 30 Rfl: 0 ONE TOUCH ULTRA 2 MISC KIT USE AS DIRECTED Disp: 1 Rfl: 0 CLOTRIMAZOLE 1 % TOP CREA APPLY TO AFFECTED AREA(S) BID Disp: 30 Rfl: 2 OMEPRAZOLE 20 MG ORAL CPDR SR CAP TAKE 1 CAPSULE ORALLY 2 TIMES DAILY Disp: 200 Rfl: 3 CARMOL 20 20 % TOP CREA apply to I 2nd and 3rd digit areas BID Disp: 45 Rfl: 3

Allergies: No Known Drug Aller*

ALTERNATIVE TREATMENTS/ Herbal Supplements: no

LIFESTYLE ISSUES: Tobacco: no Caffeine Use: 2-6 cups coffee per day Exercise: none

MENTAL STATUS EXAM: Appearance/Grooming: appropriate Eye Contact: appropriate Gait and Posture: normal gait, normal posture Attitude/Behavior/Manner: normal, cooperative Motor Activity: normal Mood: stable Affect: constricted, somewhat, normal range, appropriate, mood congruent Speech: normal Thought content / Perceptual disturbances: no suicidal ideation, plan or intent, no homicidal ideation, plan or intent, no psychotic or inappropriate thought content Thought process/Flow of Thought: coherent, relevant, logical Sensory and cognitive: alert, clear Insight: good

Clinical Notes (continued)

Judgment: unimpaired Potential for decompensation based on information reported today: minimal If yes, explain: when maintained on medication - very stable

DIAGNOSIS

Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A)

Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71: Symptoms are transient and expectable reactions to stressors; No more than slight impairment in social, occupational, or school functioning.

Axis V: HIGHEST GAF Score in the past 12 months: 80-71: Symptoms are transient and expectable reactions to stressors; No more than slight impairment in social, occupational, or school functioning.

SHORT TERM GOALS: (operationalized, objective, measurable) 1. Medication evaluation - refill

2. Return as desired

TREATMENT PLAN: TREATMENT PLAN

Treatment Plan:

Treatment team members: Patient referred by: self referral Safety Information: Patient advised of emergency procedures and phone numbers. Patient agrees to contact clinic or after hours if situation changes or as needed.

KAISER PERMANENTE

02/17/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

Diet and Exercise: Consider healthy eating and some changes to increase exercise

Follow up appointments and referrals:

Medication appointment - 2/17/10 at 11:00 AM - Dr. Talag

Individual/Group Therapy: Declined

Treatment plan agreement: I understand the Treatment Plan reviewed. I agree with the recommended Treatment Plan. I will call the emergency numbers provided if I feel unsafe.

Elizabeth White, M.S.W., L.C.S.W. 2/17/2010 10:30 AM

Patient seen in the following program/location: Psychiatry - Outpatient .

- * Clinic information, confidentiality policies, and emergency services reviewed.
- * Client given pamphlet with above information.

Electronically signed by Talag, Emelita Borja (M.D.) at 2/17/2010 4:57 PM

Other Orders

Medications

Aripiprazole (ABILIFY) 20 mg Oral Tab [192096492] (Discontinued)

 Electronically signed by: Talag, Emelita Borja (M.D.) on 02/17/10 1147
 Status: Discontinued

 Ordering user: Talag, Emelita Borja (M.D.) 02/17/10 1147
 Authorized by: Talag, Emelita Borja (M.D.)

 Ordering mode: Standard
 Frequency: Routine 02/17/10 - 12/21/10

 Discontinued by: Talag, Emelita Borja (M.D.) 12/21/10 0842 [Continue Therapy]
 Status: Discontinued

Other Orders (continued)

Diagnoses

SCHIZOAFFECTIVE DISORDER, UNSPECIFIED TYPE [295.70 (ICD-9-CM)]

Provider Details

Provider

Talag, Emelita Borja (M.D.)

NPI 1356386403

Indications

SCHIZOAFFECTIVE DISORDER [295.70 (ICD-9-CM)]

END OF ENCOUNTER

02/24/2010 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-5822	323-783-7887

Labs

GLOBIN, FECAL [193360802] (Completed)		
Electronically signed by: Program, Complete Care on 02/24/10 193	5	Status: Completed
Ordering user: Program, Complete Care 02/24/10 1935	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard		
Frequency: Routine 02/24/10 -	Class: BULK	
Quantity: 1		
Provider Details		
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	1497814131	

END OF ENCOUNTER

02/24/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887
	Los Angeles CA 90027-5822	

02/24/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT (continued)

Visit Information (continued)

Lat

Labs		
GLOBIN, FECAL [193395474] (Discontinue	d)	
Provider Details	24/10 1935 Authoriz Class: E Instance 2/25/20	Status: Discontinued zed by: Hooks, Sarah Elizabeth (M.D.) BULK e released by: Program, Complete Care (auto-released) 10 1:36 AM SULTS PENDING FOR ANOTHER ACTIVE ORDER)]
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	14978	
	END OF ENCOUN	TER
02/46/20		
Visit Information		
Provider Information		
Encounter Provider	Autho	orizing Provider
Talag, Emelita Borja (M.D.)		, Emelita Borja (M.D.)
Department		
Name	Address	Phone
	5105 GOLDLEAF CIRCLE Los Angeles CA 90056-1269	323-298-3100
Level of Service		
Level of Service		
PSYCHIATRIC PHARMACOLOGIC MAN	JAGEMENT	
Chief Complaint		
PSYCHOSIS		
Visit Diagnosis		
Name	Code	Chronic?
SCHIZOAFFECTIVE DISORDER (primary)	295.70	Yes
Clinical Notes		
Progress Notes		
Talag, Emelita Borja (M.D.) at 3/16/2010) 1127	
Author: Talag, Emelita Borja (M.D.) Filed: 3/16/2010 11:43 AM Status: Signed **Sensitive Note**	Service: — Encounter Date: 3/16/2010 Editor: Talag, Emelita Borja	

History: 3/16/2010 Lawson B Hawkins Printed on 1/12/24 5:33 PM

Clinical Notes (continued)

000017508205 5/25/1955 Type of Visit: Medication Follow up

S: Patient reported feeling stable with his mood; denied feeling depressed or anxious; he has been sleeping good as well as his appetite; denied any A/VH; no delusion; he is pleased with his medication and no s/e noted.

DIAGNOSIS

Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

- 1. Continue Abilify 20 mg po QHS as he finds this effective;
- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 3 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 3/16/2010 11:43 AM

Filed on 3/24/2010 1112

KAISER PERMANENTE

03/16/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

1

Clinical Notes (continued)

Scan on 3/24/2010 9:23 AM: CONFIDENTIAL BHS

Electronically signed by Talag, Emelita Borja (M.D.) at 3/24/2010 11:12 AM

Filed on 3/24/2010 1210

Scan on 3/24/2010 9:13 AM: CONFIDENTIAL BHS 1

Electronically signed by Talag, Emelita Borja (M.D.) at 3/24/2010 12:10 PM

Filed on 3/24/2010 1210

Scan on 3/24/2010 9:13 AM: CONFIDENTIAL BHS 1

Electronically signed by Talag, Emelita Borja (M.D.) at 3/24/2010 12:10 PM

Documents

Confidential BHS - Scan on 3/24/2010 9:13 AM: CONFIDENTIAL BHS

Scan (below)

Documents (continued)

Confidential BHS - Scan on 3/24/2010 9:13 AM: CONFIDENTIAL BHS

Scan (below)

Documents (continued)

Confidential BHS - Scan on 3/24/2010 9:23 AM: CONFIDENTIAL BHS

Scan (below)

Description:CONFIDENTIAL BHS Scan Date:3/24/2010 Index Date:3/24/2010

	ng. Bring the form with you to the courthouse.
STEP 1 – Answer the following questions by completely filling in th	e appropriate blue circles. (Use Black Ink)
1. I am a citizen of the United States YES NO ^{**} If NO, I am a citizen of:	6. I have been convicted of a felony or malfeasance in office (If NO, skip to question 7)
2. I am able to read and understand basic English If NO, the language spoken in my household is:	 6A. If you have a felony conviction, have your rights been restored by a pardon or has your conviction been expunged under PC § 17, § 1203.4, or 1203.4a?
3. I am a resident of the County of Los Angeles (If No, place New Address in "Section F" and see "Section H")	8. I am on active military duty and/or not domiciled in this state (Please explain in Section D)
4. I am at least 18 years of age or older	EXEMPTION:
5. I am now serving as a grand or trial juror in a court of this state	9. I am a peace officer appointed under PC 830.1 or 830.2(a) on 830.33(a)
STEP 2 – Sign and date. Unsigned documents are not valid by law.	v under the buy of the Aale of California that the foregoing is true gid corfect.
	e if your name or address has changed. (Legal documentation is required as proof for a name change.)
Juror Name: LAWSON B- MAWYINS Age 54 Telephone: Home (50) 560-91489 Work (310) 566-9489	Employer Address: NA CityStateZip
Occupation: SELF EMPLOYEO Student CRetired	Employer Pays for: Days of Jury Service Emergency Contact:
Fmnlover-	Relationship: Phone: (
NAME: Lawson Hawkins 1-800-778-5879 (1-8	Boo-SRV-JURY)
MR# 1750 9205 the process. You will need	
DOB: 5-25-55	PIN NO. 0606
DOS: 3-16-70	
Section B REQUEST TO BE: EXCUSED TRANSFERRED (location change Excuse and Transfer requests must be in writing. Sign and date this portion of f	
for prin Section G below.	
age, a physician must complete Section E. If over 70, explain the medical reason in Section	
 I have a personal obligation to provide full time care for another from the hours of 8 a.m. and 5 p.m., MonFri. State relationship to dependent, age(s) and type of care provided in Section 	will be considered incomplete and involid, and the request for everyon will be dealed
12. I have no reasonable means of transportation to the court location that has summoned me. Explain in Section D.	If yes, how long will condition remain? N/A Current Diagnosis: Schizo Allectrice Disorder
13. I have served as a trial juror or grand juror in the past 12 months. Month: Location:	Prognosis: <u>guarded</u> Is patient employed? Yes @ No
Month: Location: Other reason. Please explain reason in Section D. Full-time student status, occupatio as a teacher, and age do not qualify for excuse. Service can be scheduled to a more convenient time. Breast feeding a child will qualify for postponement of service.	When will notient he well enough to serve? $12 - 24$ month(s)
Section C FINANCIAL HARDSHIP (Failure to properly explain may cause automatic qualification for jury service.)	Physician's Name: <u>EMELIDA 174-146</u> <u>MBhone</u> : <u>323-248-3</u> 125 Address <u>K415ER</u> <u>STOS</u> <u>GOLOLEAF</u> <u>CRCLE</u> , <u>LA</u> <u>CARES</u> Specialty: <u>PSYCH</u> <u>Med. lic.</u> <u># A92.488</u> I certify under penalty of perjury under the laws of the State of California that the foregoing is
15. I have an extreme financial burden or serious economic injury. ALL the questions MUST be answered in the <i>FINANCIAL HARDSHIP EVALUATION</i> below.	true and correct (CCP Sec. box (5(b)), X Bend (1) B. Tale 3-17-10
FINANCIAL HARDSHIP EVALUATION	Section F 16 Change of Address: 2626 S. CocMRAM
Number of Persons(Adults Minors) in my household. (including yourself) (dependents)	AVE LA CARPOLO
Total Yearly Income of all individuals in my household before taxes \$	Signature of Respondent X Section G
Section D EXPLAIN REASON(S) FOR EXCUSE or TRANSFER HERE (If over 70 years of age, explain medical condition here).	
	of California that the foregoing is the and correct (ccr see 2015 stop), Sign & Date X SCONT
	JURORS REQUESTING AN EXCUSE MUST SIGN AND DATE THIS PORTION OF THE FORM HERE

٠

03/16/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Description:CONFIDENTIAL BHS **Scan Date:**3/24/2010 **Index Date:**3/24/2010

-		
	PERMANENTE	-
Kaiser Foundatio	on Hospitals	NAME: Lawson Hawkins 55
Southern Califor	nia Permanente Medical Group	MR# 17508205
	IORIZATION FOR RELEASE AND / OR	DOB: <u>6-25-65</u> " DOS: <u>3-(6-7</u>)
	LOSURE OF MEDICAL INFORMATION	IMPRINT KAISER PERMANENTE ID CARD HERE
to provide this a	authorization.	will not be conditioned on my providing or refusin $\mathcal{Corryor}$
	FLUIDET: 2 CT LIDEOFCHICC	Please SEND Medical Information TO:
Wat	teridge Office Park Ctr.	SUPERIOR COURT OF CA
	AT NO AT MANAGEMENT AT SECRE	Name of Person or Entity to Receive Information
Name of Medical Office	Angeles, Ca 90056	Title (Physician, Therapist, Attorney)
Street Address	· · · · · · · · · · · · · · · · · · ·	Street Address A
014 01-4		LOS ANIGELES (A 90012
City, State and Zip Code I hereby author		City, State and Zip Code
	indicated below to the bealth care provide) <u>ALAC</u> to release and / or disclose the medica er, entity, or person I have indicated above.
	r disclose records and information regard	
1_AWSON	B. HAWKINS	0017508205 5/200
Name of Patient (List O	ther Names Lised)	Medical Record Number
<u> </u>	S. COCHRAM AVE LA (A 90016 (310) 866 - 94489
DURATION:	This authorization shall become eff	ective immediately and shall remain in effect e year from the date of signature if no date entered
REVOCATION:	This authorization may be revoked in v release of information from the disclos action taken in reliance on this authoriz	vriting by the undersigned at any time prior to the ing party. Written revocation will not affect any ration before the written revocation was received
REDISCLOSURE:	another authorization is obtained from me or un	r further use or disclose the health information unless less disclosure is specifically required or permitted by law. outside of Kaiser Permanente, it may not be protected.
SPECIFY	Check the box and initial which type of	information is to be released and / or disclosed
RECORDS	□ General Medical Information (<i>from</i> _	to). General Medical Records
TO BE Released	may include reterences or reterrals t but not the mental health records th	o mental health treatment, if noted by my provide emselves, unless specifically requested below.
AND / OR	Information Regarding Specific Injury	or Treatment (from to)
DISCLOSED:		ilms
	□ Laboratory Results (from to ☑ Mental Health (from <u>2010</u> to <u>2018</u>	
	•	Signature of Patient or Patient's Representative Date
	Alcohol / Drug (from to) / Signature of Patient or Patient's Representative Date
	HIV Test Results (from to	
	Other (specify):	Signature of Patient or Patient's Representative Date
l request that th for the followin		isclosed pursuant to this authorization be used
A copy of this autho	rization is valid as an original I have the right to re	ceive a copy of this authorization. The copy is for me to kee
3/16/10		ווופ נט געפן געטאיז איז איז איז איז איז איז איז איז איז
Date 0110110	Signature of Patient or Patient's Representative	Indicate Relationship (if Signed by Other than Patient)

NS9934 (2-09) HIPAA COMPLIANT SPANISH-NS1614, CHINESE-NS6274 ORIGINAL-DISCLOSING PARTY

CANARY-CHART PINK-PATIENT

Description:CONFIDENTIAL BHS Scan Date:3/24/2010 Index Date:3/24/2010

Telephone: Home [10] Cost 14, 243 Work [10] Cited: 1, 244 (144) Intermarker Unemployed Government Employee Imployer: Telephone: [14, 243, 243, 243, 244, 244, 244, 244, 24	Section A - AFFIDAVIT Do Not detact	n and mail if serving	. Bring the form with you	to the courthouse.	
	STEP 1 – Answer the following questions by comp		appropriate blue circles.	(Use Black Ink	
A an a resident of the County of Los Angeles Angeles are resident of the County of Los Angeles Angeles are resident of the County of Los Angeles	If NO, I am a citizen of:		office (If NO, ski	victed of a felony or malfeas p to question 7)	ance in
terr a resident of the County of Los Angeles (Ma, Jack New Address in Section P) I and a resident of the County of Los Angeles (Ma, Jack New Address in Section P) I and a resident of the County of Los Angeles (Ma, Jack New Address in Section P) I and the set By ears of age or older (Ma, Jack New Address in Section P) I and on section P and sectin P and section P and section P and section P and section P and se		. , , , ,	6A. If you have a f restored by a under PC § 17	bardon or has your conviction been (§ 1203.4, or 1203.4a?	expunged
Am mow serving as a grand or trial jury in a court of this state Superior and the formation of the state of			8. I am on active m	ilitary duty and/or not domi	iciled in
I am now serving as a grand or trial juror in a court of this state. STEP 2 - Sign and date. Unsigned term of valid by law intermediate another of the state of the court of the state of the c	. I am at least 18 years of age or older	🖂		in a second start of the DC On	
documents are not valid by law. CCF Sec.2012.5 (0) State and the second of the se		t of			
uror Name:		1	rend II	Data 3	e ghd corfect. /16/10
unrer Name:			If your name or address has	changed. (Legal documentation is re- as proof for a name chang	quired e.)
Decupation: Self E F. P. MAY DO	Telephone: Home (310) \$66-91489 Work (310)	5 Age 54 866-9489		NA	
INAME:	Occupation: SELF EMPLOYED D Stu				Service
NNN PIN NO. 0606 DOB: 3-16 0 0606 Section B REQUEST TO BE: EXCUSED 'TRANSFERRED Decision for requests runs to in writing. Sign and date this portion of the sector and Transfer requests must be in writing. Sign and date this portion of the sector approximation to the care of an advance this portion of the sector approximation to the care of an advance this portion of the sector approximation to decrease the sector. Section B Motion advance to a sector to an advance to a sector. Invest sectors and sectors to advance to a sector to advance to advan	Employer:		Anna ta ban ta anna ta an	Phone: ()	
NNN PIN NO. 0606 DOB: 3-16 0 0606 Section B REQUEST TO BE: EXCUSED 'TRANSFERRED Decision for requests runs to in writing. Sign and date this portion of the sector and Transfer requests must be in writing. Sign and date this portion of the sector approximation to the care of an advance this portion of the sector approximation to the care of an advance this portion of the sector approximation to decrease the sector. Section B Motion advance to a sector to an advance to a sector. Invest sectors and sectors to advance to a sector to advance to advan	NAME: Lawson Hawkins				
Section B REQUEST TO BE: EXCUSE 0 TRANSFERED Excise and Transfer requests must be in writing. Sign and date this particula in the special in the part of the par		cess, rou will need conement, Transfer, or Exc	use from Jury Service.		
Section B REQUEST TO BE EXCUSE 0 TRANSFERED (Decision charge) Correct on a Transfer requests must be in writing. Sign and duet bit of the finance in the section of the section balow. MODALA RELASS. Purchase applicable is the finance of the section of the sectin the sectin the section of the sectin the section of th	DOB: 5-25-55	instructed to do so	by the Telephone Center		0008
Where a physical or needed include it of expression is section D. In the expression of the medical resonance in section D. In have a personal obligation to provide full time care for another from the bins of 8 a.m. In the expression status is a section and the bins of 8 a.m. In have a personal obligation to provide full time care for another from the bins of 8 a.m. In the expression status is a section and the bins of 8 a.m. In have a resonable means of macanization to be could be a model for the bins of 8 a.m. M.M. Section C In the expression status is a section b. full-line status estimation section b. In the expression status is a section b. full-line status estimation section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression status is a section b. M.M. In the expression stression b. M.M.		* TRANSFERRED			der 70 venrs of age, a 70 use Section D)
All have a physical or mental incapacity that prevents me from serving. (If under to years) as a physical method is access that you provide, please be aware that you make the service is a method. If the prevents one service is a method is service. The service is a method by a method is a method. The service is a method is service is a method. The service is a stability of performance is found and the service is a method. The service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is found and the service is a stability of performance is stability of per	forprin Section G below.	date this portion of th		by authorize my physician to release : X	ant an excuse from service t
and space and used to dependent, agely and encode the two sets as a space of the special set of the special	A Have a physical or mental incapacity that prevents me from se age, a physician must complete Section E. If over 70, explain the m	rving. (If under 70 years o edical reason in Section D	f may warrant a postponemen b, be called to testify before the	t. For any excuse that you provide, p court about your representations r	lease be aware that you ma egarding your patient's
There are assanable means of transportation to the court location that his summond me. Maintime court location is summond me. Maintime court locatis summer me. Maintime court location is s	I have a personal obligation to provide full time care for another from	m the hours of 8 a.m.	will be considered incomplet	e and invalid, and the request for ex	 If not, then this applicatio cuse will be denied.
Have served as a trial juror or grand juror in the past 12 months. Progenosis:	I have no reasonable means of transportation to the court location		If yes, how long will condi	lon remain? <u>N/A</u>	
Month:	I have served as a trial juror or grand juror in the past 12 mont	hs	Prognosis:411.41	ald	SARA
as a teacher, and age do not qualify for excuse. Service can be scheduled to a more convenient line. Breast feeding a child will qualify for postponement of service. Section C FINANCIAL HARDSHIP (rature to properly explain may cause automatic qualification for jury service.) I have an externe financial burden or services conomic linury. Alt the question SIUST be answered in the <i>FINANCIAL HARDSHIP EVALUATION</i> Number of Persons (Address 2). Cather and a condition here). Section D EXPLAIN REASON(5) FOR EXCUSE or TRANSFER NERE (If over roy years of age, explain medical condition here). Fill out this Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult This is to certify that five Fill out this Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult This is to certify that five Fill out this Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult This is to certify that five Mather Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult This is to certify that five Mather Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult MARCS) OF ADULT(S) ENTRUSTED WITH CARE OF MINOR as agent(s) to consent to any medical, surgical or hospital care.	Month: Location: Other reason Please explain reason in Section D. Full-time si	tudent status, occupation	When will patient be well	enough to serve? $12 - 2$	induction,
Pirante Call in Auditation for (number of property explain may cause automatic qualitation for (number of periory) Med. Us. # A12.448. All the questions MUST be answered in the FINANCIAL HARDSHIP EVALUATION Number of Persons 3 - 17 - 10 Pirante Call in Auditation for (number of periory) 3 - 17 - 10 Number of Persons (Aduits_water) (feed the financial burden or serious economic light? Concluding synaptic (second financial burden or serious economic light?) (Aduits_water) (feed the financial burden or serious economic light? Number of Persons (Aduits_water) (feed the financial burden or serious economic light? 3 - 17 - 10 Number of Persons (Aduits_water) (feed the financial burden or serious economic light? 3 - 17 - 10 Number of Persons (Aduits_water) (feed the financial burden or serious economic light? 0 - 17 - 10 Section D Explain Reason(S) for Excuse or TRANSFER HERE (if over ro years of age, explain medical condition here). 9 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	as a teacher, and age do not qualify for excuse. Service can be convenient time. Breast feeding a child will qualify for postpor	escheduted to a more nement of service.	Physician's Name:_EMG	ELITA TALAG Mahone	= <u>323-248-3</u> 125
ALL the questions MUST be answered in the <i>PIMAVCAL HARDSHIP PCALUATION</i> below. FINANCIAL HARDSHIP EVALUATION FINANCIAL HARDSHIP EVALUATION Mumber of Persons (Adults	may cause automatic qualification for j	ury service.)	Specialty: <u>PSYC.H</u> I certify under penalty of per true and correct_ICCP Sec. bu	Med. Lic. # ury under the laws of the State of Co $\Sigma \Sigma S(b)$ $\sim \sim 0$	A-92-4 \$8 alifornia that the foregoing i
Introduction Pressors (duits	ALL the questions MUST be answered in the FINANCIAL HARDSHIP	EVALUATION below.		ans Signature	
Total Verfy Income of all Individuals in my household before taxes 5. Signature of Respondent X. Jucgardlin, Child Support, Retirement Benefits, etc.) Section D Explain REASON(5) FOR EXCUSE or TRANSFER HERE (If over 70 years of age, explain medical condition here). Signature of Respondent X. Jucgardlin, and the low so of the State prison (PC). Section D Explain REASON(5) FOR EXCUSE or TRANSFER HERE (If over 70 years of age, explain medical condition here). Signature of Respondent X. Jucgardlin, and the low so of the State prison (PC). Section D EXPLAIN REASON(5) FOR EXCUSE or TRANSFER HERE (If over 70 years of age, explain medical condition here). Signature of Respondent X. Jucgardling of the low so of the State prison (PC). Section D EXPLAIN REASON(5) FOR EXCUSE or TRANSFER HERE (If over 70 years of age, explain medical condition here). Signature of Respondent X. Jucgardling of the low so of the State prison (PC). Section D Explain medical condition here). Signature of Respondent X. Jucgardling of the low so of the State prison (PC). Signature of the one of the low so of the State prison (PC). Section G If the perintry to falsify an exclose for the State prison (PC). Signature of the one of the state prison (PC). Section G If the perintry is a felony phase perintry whet the low so of the State prison (PC). Signature of the state prison (PC). TELEPHONE NUMBER TELEPHONE NUMBER Fill out this Section Only when Parent Entrusts	Number of Persons(Adults Minors) in my household.	Section F	Change of Address: <u>A 6</u> <u>A</u>	55. CacMKA
Section D EXPLAIN REASON(S) FOR EXCUSE or TRANSFER INEE (If over royears of age, explain medical condition here). Perjury is of leading and the foreign dury service. Perjury is of leading	Total Yearly Income of all individuals in my household before ta (including Social Security Payments, Alimony, Child Support, Rel	kes S		Jerconell At	Date 3/16/10
Indecession of the sector of	Section D EXPLAIN REASON(S) FOR EXCUSE or TF 70 years of age, explain medical condit	CANSFER HERE (If over ion here).	11 JE	perjury to falsify an excessific nishable by up to four years der penalty of perfury under t	m jury service. I state prison (PC pe laws of the State
(310) (044) (028) TELEPHONE NUMBER TELEPHONE NUMBER Fill out this Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult This is to certify that five Quee Parent Signature PARENT SIGNATURE parent(s) of the minor listed above, do hereby authorize NAME(S) OF ADULT(S) ENTRUSTED WITH CARE OF MINOR as agent(s) to consent to any medical, surgical or hospital care. Name(S) to consent to any medical, surgical or hospital care.					
TELEPHONE NUMBER TELEPHONE NUMBER Fill out this Section Only when Parent Entrusts Care of Minor to a Non-Parent Adult This is to certify that we				CUSE MUST SIGN AND DATE THIS	
Care of Minor to a Non-Parent Adult This is to certify that five		ER		TELEPHONE NUMBER	
parent(s) of the minor listed above, do hereby authorize	Fill				
parent(s) of the minor listed above, do hereby authorize	This is to certify that I we	N THU	lardi-Al	i	
as agent(s) to consent to any medical, surgical or hospital care.	parent(s) of the minor listed above, do he	ereby authorize _			
			.,	a) LIVINUOTED WITH UA	
12-2159 (10-04) HIPAA COMPLIANCE WHITE - CHART COPY CANARY - PATIENT COPY	as agent(s) to consent to any medical, su 12-2159 (10-04) HIPAA COMPLIANCE	Irgical or hospital white - Chart Cor			

END OF ENCOUNTER

03/26/2010 - Office Visit in PLASTIC SURGERY

Visit Information

Ρ	ro	vider	Inform	nation
		VIGCI		nation

Encounter Provider

Ozersky, David (M.D.)

Authorizing Provider Ozersky, David (M.D.)

Department

Name	Address	Phone	
PLASTIC SURGERY	6041 CADILLAC AVE	323-857-2763	
	Los Angeles CA 90034-1702		

Level of Service

Level of Service OUTPT EST LEVEL 3

Reason for Visit

Chief Complaint

• CONSULTATION (cosmetic benign lesion)

Visit Diagnoses

Name	Code	Chronic?
SCREENING FOR CA, COLON (primary)	V76.51	No
SCHIZOAFFECTIVE DISORDER	295.70	Yes
DM 2, UNCONTROLLED	250.02	Yes
SKIN TAG	701.9	No

Vitals

Vital Signs		Most recent update: 3/26/2010 10:18 AM
BP	Pulse	
120/80	56	

Clinical Notes

Nursing Note			
at 3/26/2010 1000			
Author: — Filed: Status: Signed	Service: — Encounter Date: 3/26/2010	Author Type: — Creation Time: 3/26/2010 10:00 AM	
>> SANDRA L SPARKS MA Fri Mar 26, 2010 10:18 AM PROACTIVE CARE ACTIONS			
Proactive Office Encounter Actions: Colorectal screening due, iFOBT order staged and kit provided Diabetic Member: Member told to schedule foot exam Blood Pressure above goal, repeat blood pressure taken and documented Microalbumin order staged			

Clinical Notes (continued)

Progress Notes

Progress Notes		
Ozersky, David (M.D.) at 3/26/2010 103	3	
Author: Ozersky, David (M.D.) Filed: 3/26/2010 10:33 AM Status: Signed	Service: — Encounter Date: 3/26/2010 Editor: Ozersky, David (M.D.) (Physician)	Author Type: Physician Creation Time: 3/26/2010 10:33 AM
History:		
Consult Lawson B Hawkins is a 54 ye	ear old male Patient presents with:	
CONSULTATION - cosmetic benigr		
multiple bilateral lower lid skin tags a	asymptomatic does not like appearan	ce also axills wishes excision told
ffs		
Minor surgery procedure discussed a	and risks and complications	
Scar or markrec or new lesions		
Patient schizoaffective disorder on al	bilify	
History odf suicide attempts		
Takes asa		
Preop instructions		
• • •	pil,and similar drugs (except tylenol) f	or 2 weeks before surgery.
Refer to our list of other common pro	ducts to not use during this period	
Diabetes		
Patient Active Problem List:		
SCHIZOAFFECTIVE DISORDER (295.70B)	
GERD (530.81A)		
NOT CURRENT SMOKER (V15.82 DM 2 W DIABETIC HYPERLIPIDE		
ELEVATED TRANSAMINASE ME		
SCREENING FOR CA, COLON (V		
CHOLELITHIASIS (574.20A)	70.31A)	
OBESITY (278.00E)		
DM 2, UNCONTROLLED (250.02B		
DEFORMITY OF ANKLE OR FOO	/	
Current outpatient prescriptions prior	to encounter:	
	ab, TAKE 1 TABLET ORALLY AT BE	DTIME, Disp: 30, Rfl: 6
	LANCETS) Misc Misc, USE AS DIR	
	RA TEST) InVt Strips, USE AS DIRE	
	ORAL LIQD, 1 TO 2 TSPS (5 TO 1	
Disp: 236, Rfl: 0	· · · · · ·	,
PROAIR HFA 90 MCG/ACTUATION	INHL HFAA, SHAKE WELL AND INI	HALE 2 PUFFS ORALLY EVERY
6 HOURS AS NEEDED FOR SHOR	TNESS OF BREATH OR WHEEZING	G, Disp: 8.5, Rfl: 0
AZITHROMYCIN 250 MG ORAL TAB	B, TAKE 2 TABLETS ORALLY ON D	AY 1 THEN 1 TABLET DAILY OF
DAYS 2 THROUGH 5, Disp: 6, Rfl: 0		
ADILIEV AN MO ODAL TAD TAKE A		

ABILIFY 30 MG ORAL TAB, TAKE 1 TABLET ORALLY EVERY NIGHT AT BEDTIME, Disp: 30, Rfl: 1 SIMVASTATIN 20 MG ORAL TAB, 1 TAB PO DAILY AT BEDTIME, Disp: 90, Rfl: 3 metFORMIN (GLUCOPHAGE) 500 mg Oral Tab, TAKE 2 TABLETS ORALLY 2 TIMES DAILY WITH MEALS, Disp: 400, Rfl: 3 BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 X 1/2" MISC SYRINGE, USE AS DIRECTED, Disp: 200,

Clinical Notes (continued)

Rfl: 0

BD LANCET DEVICE MISC MISC, USE AS DIRECTED, Disp: 200, Rfl: 0 glipiZIDE (GLUCOTROL) 5 mg Oral Tab, TAKE 1 TABLET ORALLY 2 TIMES A DAY BEFORE MEALS, Disp: 100, Rfl: 3 NOVOLIN R 100 UNIT/ML INJ SOLN, INJECT SUBCUTANEOUSLY BEFORE MEALS AND AT BEDTIME AS DIRECTED, Disp: 30, Rfl: 0 ONE TOUCH ULTRA 2 MISC KIT, USE AS DIRECTED, Disp: 1, Rfl: 0 CLOTRIMAZOLE 1 % TOP CREA, APPLY TO AFFECTED AREA(S) BID, Disp: 30, Rfl: 2 OMEPRAZOLE 20 MG ORAL CPDR SR CAP, TAKE 1 CAPSULE ORALLY 2 TIMES DAILY, Disp: 200, Rfl: 3 CARMOL 20 20 % TOP CREA, apply to I 2nd and 3rd digit areas BID , Disp: 45, Rfl: 3

Multiple svars from burns, surgery no unsightly facial scars

Plan ffs minor surgery Ref to cosmetic coordinator

Electronically signed by Ozersky, David (M.D.) at 3/26/2010 10:33 AM

Hooks, Sarah Elizabeth (M.D.) at 4/2/2010 0819

Author: Hooks, Sarah Elizabeth (M.D.) Filed: 4/2/2010 8:19 AM Status: Addendum Quick Note: Service: —Author Type: PhysicianEncounter Date: 3/26/2010Creation Time: 4/2/2010Editor: Hooks, Sarah Elizabeth (M.D.) (Physician)

Stool test normal

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 4/2/2010 8:19 AM

Akpan, Eunice U (L.V.N.) at 4/2/2010 1132

Author: Akpan, Eunice U (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 4/2/2010 11:32 AM	Encounter Date: 3/26/2010	Creation Time: 4/2/2010 11:32 AM
Status: Addendum	Editor: Akpan, Eunice U (L.V.N.) (LI	CENSED VOCATIONAL NURSE)

KAISER PERMANENTE

03/26/2010 - Office Visit in PLASTIC SURGERY (continued)

Clinical Notes (continued)

Quick Note:

From: Sarah Hooks Sent: Apr 2, 2010 8:19 AM To: Gwendolyn Spraggins

Message:

Stool test normal

Electronically signed by Akpan, Eunice U (L.V.N.) at 4/2/2010 11:32 AM

Akpan, Eunice U (L.V.N.) at 4/2/2010 1140

Author: Akpan, Eunice U (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 4/2/2010 11:40 AM	Encounter Date: 3/26/2010	Creation Time: 4/2/2010 11:40 AM
Status: Addendum	Editor: Akpan, Eunice U (L.V.N.) (Ll	ICENSED VOCATIONAL NURSE)
Quick Note:		

Letter and results sent as ordered by md.

Electronically signed by Akpan, Eunice U (L.V.N.) at 4/2/2010 11:40 AM

Filed on 4/28/2010 0956

Scan on 4/27/2010 2:52 PM: CONSENT 1

Electronically signed by Ozersky, David (M.D.) at 4/28/2010 9:56 AM

Labs

GLOBIN, FECAL [198193582] (Final result)		
Electronically signed by: Ozersky, David (M.D.) on 03/26/10 1033		Status: Completed
Ordering user: Ozersky, David (M.D.) 03/26/10 1033	Authorized by: Ozersky, David (M.D.)	
Ordering mode: Standard		
Frequency: Routine 03/26/10 -	Class: Normal	
Quantity: 1	Lab status: Final result	
Released by: Ozersky, David (M.D.) 03/26/10 1033		
Diagnoses		
SCREENING FOR COLON CANCER [V76.51 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Ozersky, David (M.D.)	1962561555	
Specimen Information		

Labs (continued)

D Type 450397196 —		Source		o3/31/10 1228
+50397196 —		—	PIC	03/31/10 1228
GLOBIN, FECAL(aka IF				: 04/01/10 1308, Result status: Final resu
Order status: Completed Collected by: PTC 03/31 Narrative:			Filed on: 04/01/10 1308 Resulting lab: SHERMA	N WAY REGIONAL LABORATORY
Note: This is a result for duplicate order. Please this result, thus coordina Details hyperlink for india notification of this result.	understand that other p ttion of care is necessar cation of all providers w	roviders have also y. Click on the Ord	received	
Components				
Component		Value	Reference Range Fla	
GLOBIN 1, STOOL		NEGATIVE	NEGATIVE —	956
Reviewed by				
Akpan, Eunice U (Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	1.D.) on 04/14/10 1237 (L.V.N.) on 04/02/10 114 abeth (M.D.) on 04/02/1 abeth (M.D.) on 04/02/1 abeth (M.D.) on 04/02/1 abeth (M.D.) on 04/02/1	10 0819 10 0819 10 0819		
Ozersky, David (M	1.D.) on 04/01/10 1753			
Ozersky, David (N CC List	1.D.) on 04/01/10 1753			
CC List Recipient Hooks, Sarah Elizabe M.D.	Modifier	Fax —	Address —	Added
CC List Recipient Hooks, Sarah Elizabe M.D. Festing Performed By	Modifier th (M.D.), —	_	_	_
CC List Recipient Hooks, Sarah Elizabe	Modifier	Fax — Director Ann M. Vannie M.D.	Address	Valid Date Range Nay 08/30/05 1817 - 09/01/10 0000
CC List Recipient Hooks, Sarah Elizabe M.D. Festing Performed By Lab - Abbreviation 240 - 956	Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY	 Director Ann M. Vannie	Address r, 11668 Sherman V NORTH HOLLYV CA 91605	
CC List Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation	Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY OBT) [198193582]	 Director Ann M. Vannie	Address r, 11668 Sherman V NORTH HOLLYV CA 91605 Resulted Filed on: 03/31/10 1228	
CC List Recipient Hooks, Sarah Elizabe M.D. Festing Performed By Lab - Abbreviation 240 - 956 GLOBIN, FECAL(aka IFC Order status: Completed	Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY OBT) [198193582]	 Director Ann M. Vannie	Address r, 11668 Sherman V NORTH HOLLYV CA 91605 Resulted Filed on: 03/31/10 1228	
CC List Recipient Hooks, Sarah Elizabe M.D. Festing Performed By Lab - Abbreviation 240 - 956 GLOBIN, FECAL(aka IFC Order status: Completed	Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY OBT) [198193582]	 Director Ann M. Vannie	Address r, 11668 Sherman V NORTH HOLLYV CA 91605 Resulted Filed on: 03/31/10 1228	
CC List Recipient Hooks, Sarah Elizabe M.D. Festing Performed By Lab - Abbreviation 240 - 956 GLOBIN, FECAL(aka IFC Order status: Completed Collected by: PTC 03/31 Reviewed by Ozersky, David (M Akpan, Eunice U (Hooks, Sarah Eliz Hooks, Sarah Eliz	Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY OBT) [198193582]	 Director Ann M. Vannie M.D. 41 10 0819 10 0819 10 0819 10 0819 10 0819	Address r, 11668 Sherman V NORTH HOLLYV CA 91605 Resulted Filed on: 03/31/10 1228	
CC List Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 GLOBIN, FECAL(aka IFC Order status: Completed Collected by: PTC 03/31 Reviewed by Ozersky, David (M Akpan, Eunice U (Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	Modifier th (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY OBT) [198193582] 1 /10 1228 1.D.) on 04/14/10 1237 (L.V.N.) on 04/02/10 114 abeth (M.D.) on 04/02/1 abeth (M.D.) on 04/02/1 abeth (M.D.) on 04/02/1 abeth (M.D.) on 04/02/1	 Director Ann M. Vannie M.D. 41 10 0819 10 0819 10 0819 10 0819 10 0819	Address r, 11668 Sherman V NORTH HOLLYV CA 91605 Resulted Filed on: 03/31/10 1228	

Labs (continued)

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

SCREENING FOR CA, COLON [V76.51 (ICD-9-CM)]

All Reviewers List

Ozersky, David (M.D.) on 4/14/2010 12:37 Akpan, Eunice U (L.V.N.) on 4/2/2010 11:41 Hooks, Sarah Elizabeth (M.D.) on 4/2/2010 08:19 Ozersky, David (M.D.) on 4/1/2010 17:53

Letters

Letter by Ozersky, David (M.D.) on 4/2/2010

Status: Sent Letter body:

Kaiser Permanente.

4/2/2010

MR# 000017508205

Lawson B Hawkins 2626 So. Cochran Avenue

Los Angeles, CA 90016

Dear Mr. Hawkins,

I am pleased to inform you that your recent stool tests were normal.

Thank you for choosing kaiser permanente.

Sincerely,

EUNICE U AKPAN LVN on behalf of SARAH ELIZABETH HOOKS MD, MEDICAL DOCTOR WEST LA MEDICAL CENTER U PLASTIC SURGERY

Letters (continued)

6041 Cadillac Ave Los Angeles, CA 90034-1702 800-954-8000

Documents

Consent Form - Scan on 4/27/2010 2:52 PM: CONSENT

Scan (below)

Description: CONSENT Scan Date: 4/27/2010 Index Date: 4/28/2010 KAISER PERMANENTE. 0017508205 05 55 00 Kaiser Foundation Hospitals Southern California Permanente Medical Group LAWSON B HAWKINS Ħ IMPRINT KAISER PERMANENTE ID CARD HERE 4'.00 GW CONSENT TO OPERATION, ADMINISTRATION OF ANESTHETICS, AND THE RENDERING OF OTHER MEDICAL SERVICES 035210 MD and/or his/her associates, assistants Jalist 1. | authorize of his/her choice, and personnel assigned by the hospital or medical group to perform the following operation or procedure (medical and common names) Ŷ exus me ر م Q 00 err (explanation in simple terms): FOR THE PURPOSE OF NP as 4L A 22 0. and/or to do any other procedures upon (name of patient): Hank hav son that in his/her/their judgment may be advisable for the patient's well-being including such procedures as are considered medically advisable to remedy conditions discovered during the procedure or operation. I am satisfied with my understanding of the nature of the operation or procedure, the more common risks associated with it, including the potential for serious harm, including wound infection, anesthesia risks and death, and alternative methods of treatment which have been explained to me. No warranty or guarantee has been made as to the result or cure. 2. Under the Federal Safe Medical Devices Act, Kaiser Permanente must provide manufacturers of certain medical devices with personal information to enable manufacturers to locate patients when a device is removed from the market or when information about significant device problems has to be sent out. If the above procedure involves the implantation of a medical device requiring tracking by the manufacturer and/or the Food and Drug Administration (FDA), my name, birth date, address, phone number and social security number may be forwarded for this purpose. Kaiser Permanente will treat the collected information with the same degree of confidentiality provided to all other medical information. The manufacturers and the FDA are required to treat this information in the same manner. I may refuse to permit the release of this required information (complete form NS-5789, Consent for Safe Medical Device Act, Notice Regarding Medical Device Tracking). 3. I hereby authorize and direct the above-named hospital, medical group, surgeon and/or his/her associates and assistants, to provide such additional services for me as he/she or they may deem medically advisable, including, but not limited to, the selection and administration of anesthesia and the performance of pathology and radiology services. 4. I hereby authorize the hospital and medical group to dispose of any severed tissue or member in accordance with accustomed hospital practice Signed _ Date PATIENT, PARENT OR LEGAL GUARDIAN Relationship Witne Translated by (if applicable): CANARY-PATIENT WHITE-CHART 12-2163 (8-07) HIPAA COMPLIANT

END OF ENCOUNTER

04/02/2010 - Office Visit in INTERNAL MEDICINE RAIN2 Visit Information **Provider Information Authorizing Provider Encounter Provider** Hooks, Sarah Elizabeth (M.D.) Hooks, Sarah Elizabeth (M.D.) Department Name Address Phone INTERNAL MEDICINE RAIN2 6041 CADILLAC AVE 833-574-2273 Los Angeles CA 90034-1702 **Follow-up and Dispositions** • Return if symptoms worsen or fail to improve. Level of Service Level of Service **OUTPT EST LEVEL 4 Reason for Visit Chief Complaint** DIARRHEA Visit Diagnoses Name Code **Chronic?** SCREENING V82.9 No GERD 530.81 No DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED 250.80, 272.2 Yes OBESITY 278.00 Yes SCHIZOAFFECTIVE DISORDER 295.70 Yes CHOLELITHIASIS Yes 574.20 DIARRHEA 787.91 No TREMOR, ESSENTIAL 333.1 No PROPHYLACTIC VACCINE V05.9 No CHEST PAIN, ATYPICAL 786.59 No Visit Account Information **Hospital Account** Name Acct ID Class Status **Primary Coverage** Hawkins, Lawson B 2161219809 Charge Router-Auto Closed Restricted coverage HAR 5

Guarantor Account (for Hospital Account #21612198095)

Name	Relation • Pt	to Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE LOS ANGELES, CA 90016-2618	323-297-3 323-297-3	3432(H) 3432 x00000(O)		

04/02/2010 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Visit Account Information (continued)

F/O Payor/Plan				Precert #
KP MEDICARE/K	PSA SPECIAL NEED	S PLAN SCR KPSA SPEC	IAL NEEDS PLAN SC	R
Subscriber				Subscriber #
Hawkins, Lawson	В			xxxxxxx8205
Address		Phone		
5				
ital Signs				Most recent update: 4/2/2010 10:2
BP 106/67	Pulse 67	Temp 97.1 °F (36.2 °C) (Tympanic)	Ht 5' 7" (1.702 m)	Wt 205 lb (93 kg)
BMI 32.11 kg/m²				
ain Information (La				
Score	Location	Comments	6	Edu?
0 (scale 0-10) cal Notes	None	None		Yes
cal Notes ursing Note	None	None		Yes
cal Notes ursing Note at 4/2/2010 1030	None			
cal Notes ursing Note		None Service: — Encounter Date: 4	/2/2010	Yes Author Type: — Creation Time: 4/2/2010 10:30 AM
cal Notes ursing Note at 4/2/2010 1030 Author: — Filed: Status: Signed NANCY SALAS 1 0.5ML GIV AS LVN.	LVN Fri EN TO PATIEN	Service: — Encounter Date: 4 Apr 2, 2010 11 T,ORDERED BY MI	.:30 AM).VIS SHEET H	Author Type: —
cal Notes ursing Note at 4/2/2010 1030 Author: — Filed: Status: Signed NANCY SALAS 1 0.5ML GIV AS LVN.	LVN Fri EN TO PATIEN summary was LVN Fri ts with:	Service: — Encounter Date: 4 Apr 2, 2010 11 T,ORDERED BY MI	:30 AM O.VIS SHEET H ed, and expla	Author Type: — Creation Time: 4/2/2010 10:30 AM ANDED TO PATIENT.NANCY

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 4/2/2010 1104

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 4/2/2010 12:34 PM	Encounter Date: 4/2/2010	Creation Time: 4/2/2010 11:04 AM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.D.) (Ph	iysician)

04/02/2010 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

History:

~1mo ago, CP while driving, 10 min, lower sternal/epigastric pressure, none since, h/o CP similar 5 yrs ago, TMST was normal, not exercising lately but can walk a flight of stairs no prob -tremors at times, 2-6 cups coffee/day, ?SE of meds, hands, sometimes feet, intention not resting -diarrhea off/on, x10-12 mo, none currently past 2-3wks -wants to cut down on DM meds, esp metformin, FSs at goal

History Reviewed:

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Respiratory: Is not experiencing shortness of breath. Gastrointestinal: Negative for heartburn. Neurological: Negative for tingling.

Physical Exam

Constitutional: He is well-developed, well-nourished, and in no distress. Cardiovascular: Normal rate and regular rhythm. Pulmonary/Chest: Effort normal and breath sounds normal. He exhibits no tenderness. Abdominal: Soft. No tenderness. Neurological: He is alert. **No tremor noted**

Skin: Skin is warm and dry.

Callus L 4th and 1st toes Psychiatric: Affect normal. Vitals reviewed.

A/P:

Diarrhea off/on - probably metformin, decreasing today as per below Tremor - limit reg coffee to 1 cup/day then decaf, reassured not Parkinsons S/p atypical CP - reassured, ER if ever occurs with exercise

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] - stable on med GERD [530.81A] - controlled, decr PPI to daily NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] - a1c/MAB today, decr metfo 1 bid ELEVATED TRANSAMINASE MEASUREMENT [790.4B] - resolved SCREENING FOR CA, COLON [V76.51A] - OB neg CHOLELITHIASIS [574.20A] - asym OBESITY [278.00E] - cont wt loss, resume exercise gradually DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70A] SKIN TAG [701.9D]

04/02/2010 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

RHM - h1n1 today, PSA added to labs (but might be too late)

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 4/2/2010 12:34 PM

Spraggins, Gwendolyn (L.V.N.) at 5/4/2010 0817

Author: Spraggins, Gwendolyn (L.V	/.N.) Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 5/4/2010 8:17 AM	Encounter Date: 4/2/2010	Creation Time: 5/4/2010 8:17 AM
Status: Addendum	Editor: Spraggins, Gwendolyn ((L.V.N.) (LICENSED VOCATIONAL NURSE)

Letter re: overdue nonfasting lab mailed

Electronically signed by Spraggins, Gwendolyn (L.V.N.) at 5/4/2010 8:17 AM

Hooks, Sarah Elizabeth (M.D.) at 6/15/2010 0823

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 6/15/2010 8:23 AM	Encounter Date: 4/2/2010	Creation Time: 6/15/2010 8:23 AM
Status: Addendum	Editor: Hooks, Sarah Elizabeth (M.D.) (Ph	lysician)
Quick Note:		

Labs excellent, can STOP glipizide, cont other meds

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 6/15/2010 8:23 AM

Spraggins, Gwendolyn (L.V.N.) at 6/15/2010 1049

Author: Spraggins, Gwendolyn (L.V.N.)	Service: —	Author Type: LICENSED VOCATIONAL
		NURSE
Filed: 6/15/2010 10:49 AM	Encounter Date: 4/2/2010	Creation Time: 6/15/2010 10:49 AM
Status: Addendum	Editor: Spraggins, Gwendolyn (L.V.N.) (LI	CENSED VOCATIONAL NURSE)
Quick Note:		

Spoke with patient via H#, informed as per Dr.Hooks Labs excellent, can STOP glipizide, cont other meds. Patient verbalize clear understanding of the message, states will comply.

Electronically signed by Spraggins, Gwendolyn (L.V.N.) at 6/15/2010 10:49 AM

Labs

GLOBIN, FECAL [199305687] (Cancel Pend)	
Electronically signed by: Salas, Nancy (L.V.N.) on 04/02/10 1055	Status: Cancel Pend
Ordering user: Salas, Nancy (L.V.N.) 04/02/10 1055	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 04/02/10 -	Class: Normal
Quantity: 1	Pended by: Salas, Nancy (L.V.N.) 04/02/10 1055
Canceled by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1107	
Provider Details	
Provider	NPI

(continued)			
Hooks, Sarah	n Elizabeth (M.D.)	1	497814131
Salas, Nancy	r (L.V.N.)	-	_
	N, URINE, QUANTITATIVE [199305688] (Discontinue	d)
	gned by: Hooks, Sarah Eliza		
Ordering user: H Ordering mode:	Hooks, Sarah Elizabeth (M.D.) 04/02/10 1108 A	uthorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Rou		C	Class: Normal
Quantity: 1		R	Released by: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1108
		10 1015 [Other (DUPLICA	TE-RESULTS PENDING FOR ANOTHER ACTIVE ORDER)]
Provider Det	ails		
Provider			NPI
Hooks, Sara	h Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_	_	URINE	_
Ordering user: F Ordering mode: Frequency: Rou) 04/02/10 1108 A C	uthorized by: Hooks, Sarah Elizabeth (M.D.) Class: Normal
Quantity: 1])	biscontinued by: Interface, Scal_ Lab 06/14/10 1036 [Other DUPLICATE-RESULTS PENDING FOR ANOTHER ACTIVE DRDER)]
Provider Det	ails		
Provider			NPI
Hooks, Sara	h Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_	—	BLOOD	_
	A1C [199308680] (Discontin	ued)	
	gned by: Hooks, Sarah Eliza	•	108 Status: Discontin
	looks, Sarah Elizabeth (M.D.) 04/02/10 1108 A	uthorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode:			
Frequency: Rou	ltine 04/02/10 -		Class: Normal
Quantity: 1			biscontinued by: Interface, Scal_ Lab 06/14/10 1036 [Other DUPLICATE-RESULTS PENDING FOR ANOTHER ACTIVE
			PRDER)]
Provider Det	ails	-	
Provider			NPI
Hooks, Sara	h Elizabeth (M.D.)		1497814131
Specimen In	formation		
ID	Туре	Source	Collected By
_	_	BLOOD	
	S, SERUM [199308681] (Fin	al result)	
	gned by: Hooks, Sarah Eliza		108 Status: Comple
This order may I	be acted on in another encou	nter.	· · · · · · · · · · · · · · · · · · ·
Ordering user: H	looks, Sarah Elizabeth (M.D. Standard) 04/02/10 1108 A	uthorized by: Hooks, Sarah Elizabeth (M.D.)

requency: Routine 04/02/1	0 -		lass: Normal				
uantity: 1	U -	Class: Normal Lab status: Final result					
iagnoses			Lan Sidius. FIIIdi lesuil				
M 2 W MIXED HYPERLIPI							
CHIZOAFFECTIVE DISOF		YPE [295.70 (ICD-9	9-CM)]				
IARRHEA [787.91 (ICD-9- TYPICAL CHEST PAIN [78							
Provider Details							
Provider			NPI				
Hooks, Sarah Elizabeth	(M.D.)		1497814131				
	()						
Specimen Information							
ID Typ	e	Source		Collected			
454298549 —		BLOOD		VVO 06/14	(10 1034		
ELECTROLYTES, SERU	M [199308681]		Resu	ulted: 06/14/	10 2127, Result status: Final res		
Order status: Completed			Filed on: 06/14/10 2		,		
Collected by: VVO 06/14	/10 1034				REGIONAL LABORATORY		
			-				
Components							
Component			Reference Range	Flag	Lab		
SODIUM POTASSIUM			135 - 145 meq/L 3.5 - 5.0 meq/L		956 956		
CHLORIDE			3.5 - 5.0 meq/L 101 - 111 meq/L		956		
CO2			21 - 31 meg/L		956		
Hooks, Sarah Eliz	abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1						
Testing Performed By Lab - Abbreviation	Name	Director	Address		Valid Data Panga		
240 - 956	SHERMAN WAY	Ann M. Vannier		an Way	Valid Date Range 08/30/05 1817 - 09/01/10 0000		
240 000	REGIONAL LABORATORY	M.D.	NORTH HOL CA 91605				
ELECTROLYTES, SERU					/10 1036, Result status: In proce		
ELECTROLYTES, SERU Order status: Completed Collected by: VVO 06/14			Filed on: 06/14/10 1	036	/10 1036, Result status: In proce REGIONAL LABORATORY		
Order status: Completed Collected by: VVO 06/14			Filed on: 06/14/10 1	036			
Order status: Completed Collected by: VVO 06/14 Reviewed by	/10 1034		Filed on: 06/14/10 1	036	/10 1036, Result status: In proce REGIONAL LABORATORY		
Order status: Completed Collected by: VVO 06/14 Reviewed by Spraggins, Gwend Hooks, Sarah Eliz	/10 1034 lolyn (L.V.N.) on 06/15/ [/] abeth (M.D.) on 06/15/1	10 1049 0 0823	Filed on: 06/14/10 1	036			
Order status: Completed Collected by: VVO 06/14 Reviewed by Spraggins, Gwend Hooks, Sarah Eliz Hooks, Sarah Eliz	/10 1034 lolyn (L.V.N.) on 06/15/ [/] abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1	10 1049 0 0823 0 0823	Filed on: 06/14/10 1	036			
Order status: Completed Collected by: VVO 06/14 Reviewed by Spraggins, Gwend Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	/10 1034 lolyn (L.V.N.) on 06/15/ [/] abeth (M.D.) on 06/15/1	10 1049 0 0823 0 0823 0 0822	Filed on: 06/14/10 1	036			
Order status: Completed Collected by: VVO 06/14 Reviewed by Spraggins, Gwend Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	/10 1034 lolyn (L.V.N.) on 06/15/ [/] abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1	10 1049 0 0823 0 0823 0 0822	Filed on: 06/14/10 1	036			
Order status: Completed Collected by: VVO 06/14 Reviewed by Spraggins, Gwend Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	/10 1034 lolyn (L.V.N.) on 06/15/ [/] abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1	10 1049 0 0823 0 0823 0 0822	Filed on: 06/14/10 1	036			

NORTH HOLLYWOOD

CA 91605

REGIONAL

LABORATORY

M.D.

Labs (continued)

Indications

DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [250.80, 272.2 (ICD-9-CM)] SCHIZOAFFECTIVE DISORDER [295.70 (ICD-9-CM)] Diarrhea [787.91 (ICD-9-CM)] CHEST PAIN, ATYPICAL [786.59 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 6/15/2010 10:49Hooks, Sarah Elizabeth (M.D.) on 6/15/2010 08:23Hooks, Sarah Elizabeth (M.D.) on 6/15/2010 08:23Hooks, Sarah Elizabeth (M.D.) on 6/15/2010 08:22Hooks, Sarah Elizabeth (M.D.) on 6/15/2010 08:22

PSA [199331509] (Final result)

	Hooks, Sarah Elizabeth	(M.D.) on 04/02/1	0 1232		Status: C	ompleted
	d on in another encounter. Sarah Elizabeth (M.D.) 04/0	12/10 1232	Authorized by: Hooks	th (MD)		
Drdering mode: Standa		Authonzeu by. Hook				
Frequency: Routine 04,		Class: Normal				
Quantity: 1		Lab status: Final res	ult			
Diagnoses						
CREENING [V82.9 (IC	CD-9-CM)]					
Provider Details						
Provider			NPI			
Hooks, Sarah Elizat	peth (M.D.)		1497814131			
Specimen Informati	on Type	Source		Collected By		
454298548	_	BLOOD		VVO 06/14/10 1	1034	
PSA [199331509]			Res	ulted: 06/14/10 2	2137, Result status: I	-inal resul
Order status: Comp	leted		Filed on: 06/14/10 2	2138		
Collected by: VVO 0			Resulting lab: SHE	RMAN WAY REC	GIONAL LABORATO	DRY
Components						
Component		Value	Reference Range	Flag	Lab	
PSA		0.47	< OR = 3.5 ng/mL	_	956	
Comment:						
	D PSA NORMAL VALUES				(ng/mL)	
	OR LESS LESS THAN				L TO 3.5 60 - 69	LESS
	UAL TO 4.5 70 OR GREA					-
RELATED PS	A IS EITHER NORMAL OF	R ABNORMAL IS V	/ALID ONLY IF THIS I	PATIENT HAS N	IEVER BEEN TREA	IED

RELATED PSA IS EITHER NORMAL OR ABNORMAL IS VALID ONLY IF THIS PATIENT HAS NEVER BEEN TREATED FOR PROSTATE CANCER AND IS NOT ON ANY MEDICATION THAT WOULD CHANGE THE PSA VALUE. CLINICAL CORRELATION IS STRONGLY RECOMMENDED. THIS PSA ASSAY WAS PERFORMED USING THE ROCHE E170 MODULAR ANALYTIC SYSTEM, AN ELECTROCHEMILUMINESCENCE IMMUNOASSAY METHOD.

Reviewed by

Testing Performed By

	Lab - Abbreviation	Name	Director	Address	Valid Date Range
-	240 - 956	SHERMAN WAY	Ann M. Vannier,	11668 Sherman Way	08/30/05 1817 - 09/01/10 0000

Labs (continued)

	REGIONAL LABORATORY	M.D.	NORTH HOLLYWOOD CA 91605	
PSA [199331509]			Resulted: 06/14	1/10 1036, Result status: In pro
Order status: Completed Collected by: VVO 06/14			ed on: 06/14/10 1036 esulting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
Hooks, Sarah Eliz Hooks, Sarah Eliz Hooks, Sarah Eliz	dolyn (L.V.N.) on 06/15 abeth (M.D.) on 06/15/ abeth (M.D.) on 06/15/ abeth (M.D.) on 06/15/ abeth (M.D.) on 06/15/	'10 0823 '10 0823 '10 0822		
Testing Performed By				
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 000
Indications				
SCREENING [V82.9	(ICD-9-CM)]			
All Reviewers List				
Orders				
munization/Injection				
VACC INFLUENZA H1N	1-09, STANDARD DO	SE [199310374] (Activ	e)	
Electronically signed by: Ordering user: Hooks, S Ordering mode: Standar Frequency: Routine 04/	arah Elizabeth (M.D.) (d	04/02/10 1115 Au	1115 thorized by: Hooks, Sarah El ass: Back Office	Status: Ac
Quantity: 1 Diagnoses				
VACCINATION [V05.9 (ICD-9-CM)]			
Provider Details				
Provider Hooks, Sarah Elizab	eth (M.D.)		IPI 497814131	
Indications				
PROPHYLACTIC	VACCINE [V05.9 (ICD	-9-CM)]		
			(4-44-4-2)	
VACC ADMIN, FIRST IM			· · ·	Chatura: A -
Electronically signed by: Ordering user: Hooks, S Ordering mode: Standar	arah Elizabeth (M.D.) (thorized by: Hooks, Sarah El	Status: Ac lizabeth (M.D.)
Frequency: Routine 04/ Quantity: 1 Diagnoses		CI	ass: Back Office	

Other Orders (continued)

SCREENING [V82.9 (ICD-9-CM)] VACCINATION [V05.9 (ICD-9-CM)]

Provider Details

Provider

Hooks, Sarah Elizabeth (M.D.)

NPI 1497814131

Indications

SCREENING [V82.9 (ICD-9-CM)] PROPHYLACTIC VACCINE [V05.9 (ICD-9-CM)]

Medications

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0	02/10 1108 Status: Discontinue
Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1108 Ordering mode: Standard	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 04/02/10 - 12/20/10	Class: Fill Now
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 12/20/10 1454	
GERD (GASTROESOPHAGEAL REFLUX DISEASE) [530.81 (IC	CD-9-CM)]
Provider Details	NDI
Provider	NPI 1407814121
Hooks, Sarah Elizabeth (M.D.)	1497814131
Admin instructions: Do not chew or crush	
Indications	
GERD [530.81 (ICD-9-CM)]	
notEORMIN (CLUCORHAGE) 500 mg Oral Tab [100300487] (D	liscontinued)
	•
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0	02/10 1113 Status: Discontinue
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113	•
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard	02/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.)
netFORMIN (GLUCOPHAGE) 500 mg Oral Tab [199309487] (D Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [Diagnoses	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)]	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy]
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy]
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy]
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Indications	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy] NPI 1497814131
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [4 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider Hooks, Sarah Elizabeth (M.D.)	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy] NPI 1497814131
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Indications	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy] NPI 1497814131
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Indications	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy] NPI 1497814131
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Indications	D2/10 1113 Status: Discontinue Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy] NPI 1497814131
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 04/0 Ordering user: Hooks, Sarah Elizabeth (M.D.) 04/02/10 1113 Ordering mode: Standard Frequency: Routine 04/02/10 - 10/14/11 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 [0 Diagnoses DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)] Provider Details Provider Hooks, Sarah Elizabeth (M.D.) Indications	D2/10 1113 Status: Discontin Authorized by: Hooks, Sarah Elizabeth (M.D.) Class: Fill Later Continue Therapy] NPI 1497814131

Keep losing weight!!

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 4/2/2010 11:15 AM

END OF ENCOUNTER

04/26/2010 - Office Visit in PLASTIC SURGERY

Visit Information

Provider Information	
Encounter Provider	Authorizing Provider

Ozersky, David (M.D.)

Ozersky, David (M.D.)

Department

Name	Address	Phone
PLASTIC SURGERY	6041 CADILLAC AVE	323-857-2763
	Los Angeles CA 90034-1702	

Level of Service

Lovel of Service	
Level of Service	
LOS NOT REQUIRED	

Reason for Visit

...

Chief Complaint

• MINOR SURGERY (excision skin tags bilateral axilla, bilteral eyelids)

Visit Diagnosis

• SKIN TAG (primary) [701.9]

Visit Account Information

.

Hospital Account						
	Name	Acct ID	Class	Status	Primary Coverage	
	Hawkins, Lawson B	2161207854 9	Charge Router-Auto HAR	Closed	None	

Guarantor Account (for Hospital Account #21612078549)

	Relation to			
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Venture Account
Address	Phone			
2630 S. Garth Ave. Apt #1	310-839-6430(H)			
LOS ANGELES, CA 90034-2151	310-839-6430)(O)		

Coverage Information (for Hospital Account #21612078549)

Not on file

Vitals

Vital Signs		Most recent update: 4/26/2010 8:58 AM
BP	Pulse	
114/74	65	
Clinical Notes		

Aursing Note Author Type: — Author: — Service: — Author Type: — Filed: Encounter Date: 4/26/2010 Creation Time: 4/26/2010 9:00 AM

Printed on 1/12/24 5:33 PM

KAISER PERMANENTE

04/26/2010 - Office Visit in PLASTIC SURGERY (continued)

Clinical Notes (continued)

Status: Signed

>> SANDRA L SPARKS MA Mon Apr 26, 2010 8:46 AM PROACTIVE CARE ACTIONS

Proactive Office Encounter Actions: Diabetic Member: Member prepared for annual monofilament foot exam

Do You have any allergies? no Have you had any aspirin or aspirin products in the last two weeks.no

PATIENT IDENTIFICATION/SITE VERIFICATION Patient identified: yes Site/procedure verified: yes

Progress Notes

Ozersky, David (M.D.) at 4/26/2010 0952		
Author: Ozersky, David (M.D.)	Service: —	Author Type: Physician
Filed: 4/26/2010 9:52 AM	Encounter Date: 4/26/2010	Creation Time: 4/26/2010 9:52 AM
Status: Signed	Editor: Ozersky, David (M.D.) (Physician)	

History:

Diagnosis: skin tags bilateral lower lids and axillae Procedure: excision skin tags bilateral lower lids and axillae Anesthesia: none Ebl. Nil Suture: none Tylenol for pain Do not pull or rub change dressing as instructed Keep clean and dry Return: 1 week

Electronically signed by Ozersky, David (M.D.) at 4/26/2010 9:52 AM

04/26/2010 - Office Visit in PLASTIC SURGERY (continued)

ology (continued) Path

thology (continued)	
SURGICAL PATHOLOGY [202807538] (Final result)	
Electronically signed by: Ozersky, David (M.D.) on 04/26/10 Ordering user: Ozersky, David (M.D.) 04/26/10 0953 Ordering mode: Standard Frequency: Routine 04/26/10 - Quantity: 1 Released by: Gilmore, Elvia (R.N.) 04/26/10 0953 Diagnoses SKIN TAG [701.9 (ICD-9-CM)] Provider Details	Authorized by: Ozersky, David (M.D.) Class: Clinic Collected Lab status: Final result
Provider Ozersky, David (M.D.)	NPI 1962561555
Ozersky, David (M.D.)	1902001000
Questionnaire	
Question	Answer
Source of Specimen?	SKIN, EXCISION Comment - A-Axillary right skin tags Comment - B-Axillary left skin tags Comment - CRight lower eyelid skin tags Comment - D-Left lower eyelid skin tags
ORDERING INSTRUCTIONS: (1) Select the appropriate a separate row and provide details about each specimen sou character limit). (2) Provide a clinical history for all orders	 =====DO NOT MODIFY AT OR BELOW THIS LINE======== specimen source(s) from the question above. List each specimen source in rce (location, R/L, fresh/frozen) in the Comment field to the rig ht (256 n the Comments (F6) section. (3) Provide a differential diagnosis for
dermatology specimens in the Comments (F6) section. Specimen Information	
Specimen InformationIDTypeSoWLAS10007138——	urce Collected By 04/26/10 0000 Resulted: 04/28/10 1451, Result status: Final result
Specimen Information ID Type So WLAS10007138 — — SURGICAL PATHOLOGY [202807538] — — Order status: Completed Collected by: 04/26/10 0000 Lab Technician: SALLY TURLA	
Specimen Information ID Type So WLAS10007138 — — SURGICAL PATHOLOGY [202807538] Order status: Completed Collected by: 04/26/10 0000 Lab Technician: SALLY TURLA Components	04/26/10 0000 Resulted: 04/28/10 1451, Result status: Final result Filed on: 04/28/10 1451 Resulting lab: WLA MEDICAL CENTER LABORATORY
Specimen Information ID Type So WLAS10007138 — — SURGICAL PATHOLOGY [202807538] Order status: Completed Collected by: 04/26/10 0000 Lab Technician: SALLY TURLA Components Component Value	04/26/10 0000 Resulted: 04/28/10 1451, Result status: Final result Filed on: 04/28/10 1451 Resulting lab: WLA MEDICAL CENTER LABORATORY e Reference Range Flag Lab
Specimen Information ID Type So WLAS10007138 — — SURGICAL PATHOLOGY [202807538] Order status: Completed Collected by: 04/26/10 0000 Lab Technician: SALLY TURLA Components Components Component Value REPORT — Result: Patient Name: HAWKINS, LAWSON BMed West Los Angeles Medical CenterLocation: PLAS 4/26/2010Received: 4/27/2010Signed Out: 4/28/2 SKIN TAG, BIOPSY, RIGHT AXILLARY: - ACRE	04/26/10 0000 Resulted: 04/28/10 1451, Result status: Final result Filed on: 04/28/10 1451 Resulting lab: WLA MEDICAL CENTER LABORATORY e <u>Reference Range Flag Lab</u> <u>- 305</u> . Rec #: 000017508205 DOB/Age: 5/25/1955 (Age: 54) Sex: MFacility: TIC SURGERY Provider: DAVID OZERSKY M.D.CC: Collected:

04/26/2010 - Office Visit in PLASTIC SURGERY (continued)

Pathology (continued)

Reviewed by

Ozersky, David (M.D.) on 06/23/10 0947 Ozersky, David (M.D.) on 04/28/10 1634

Lab - Abbreviation	Name	Director	Address	Valid Date Range
321 - 305	WLA MEDICAL CENTER LABORATORY	S.R. McLaren, D.O.	6041 Cadillac Ave. LOS ANGELES CA 90034	09/01/05 0850 - 05/23/17 0009
SURGICAL PATHOLOG	([202807538]		Resulted: 04/27	7/10 0754, Result status: In proc
Order status: Completed			on: 04/27/10 0754	
Collected by: 04/26/10 00	000	Resu	Ilting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
	.D.) on 06/23/10 0947 .D.) on 04/28/10 1634			
Testing Performed By				
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
Indications				
Indications Skin Tag [701.9 (ICD-9	9-CM)]			
	9-CM)]			
Skin Tag [701.9 (ICD-	on 6/23/2010 09:47			
Skin Tag [701.9 (ICD-s All Reviewers List Ozersky, David (M.D.)	on 6/23/2010 09:47			
Skin Tag [701.9 (ICD-s All Reviewers List Ozersky, David (M.D.) Ozersky, David (M.D.)	on 6/23/2010 09:47 on 4/28/2010 16:34			
Skin Tag [701.9 (ICD-s All Reviewers List Ozersky, David (M.D.) Ozersky, David (M.D.)	on 6/23/2010 09:47 on 4/28/2010 16:34 wice daily			

Electronically signed by Ozersky, David (M.D.) at 4/26/2010 9:52 AM

END OF ENCOUNTER

05/17/2010 - Allied Health/Nurse Visit in MEMBER HEALTH EDUCATION

Visit Information

Provider Information

Encounter Provider

Chapmon, Catherine A. (R.D)

Department

05/17/2010 - Allied Health/Nurse Visit in MEMBER HEALTH EDUCATION (continued)

Visit Information (continued)

Name	Address	Phone
MEMBER HEALTH EDUCATION	5971 VENICE BLVD Los Angeles CA 90034-1713	323-421-2710

Reason for Visit

Chief Complaint

PATIENT EDUCATION

Visit Diagnosis

• DIETARY SURVEILLANCE AND COUNSELING (primary) [V65.3]

Clinical Notes

Progress Notes		

Chapmon, Catherine A. (R.D) at 5/17/2010 1318

Author: Chapmon, Catherine A. (R.D) Filed: 5/17/2010 1:18 PM Status: Signed Service: — Author Encounter Date: 5/17/2010 Creati Editor: Chapmon, Catherine A. (R.D) (DIETITIAN)

Author Type: DIETITIAN Creation Time: 5/17/2010 1:18 PM

Member Lawson B Hawkins attended session #2 of the Living Well with Diabetes class taught in English. Topics included basic principles of the diabetic diet, importance of weight control in the management of diabetes; nutrition education on carbohydrates, protein, fat distribution, carbohydrates counting, diabetic exchanges, appropriate serving sizes, food label reading, and meal plans; and the benefits of regular physical activity in the management of diabetes. Written materials were provided along with information on health education classes, contact number, and follow-up as needed.

Proactive Office Encounter Actions: Pt was given proactive encounter based on needs determined at time of visit.

Catherine A. Chapmon, M.S, RD

Electronically signed by Chapmon, Catherine A. (R.D) at 5/17/2010 1:18 PM

END OF ENCOUNTER

05/18/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY

Visit Information

Provider Information

Encounter Provider

Talag, Emelita Borja (M.D.)

Authorizing Provider

Talag, Emelita Borja (M.D.)

Printed on 1/12/24 5:33 PM

Visit Information (continued)

Department

N	A 11	
	Address	Phone
	5105 GOLDLEAF CIRCLE	323-298-3100
	Los Angeles CA 90056-1269	
Level of Service		
Level of Service		
PSYCHIATRIC PHARMACOLOGIC MAI	NAGEMENT	
leason for Visit		
Chief Complaints		
MENTAL HEALTH PROBLEM		
MOOD DISORDER		
Visit Diagnosis		
Name	Code	Chronic?
SCHIZOAFFECTIVE DISORDER (primary)	295.70	Yes
linical Notes		
Progress Notes		
Talag, Emelita Borja (M.D.) at 5/18/2010) 1040	
Author: Talag, Emelita Borja (M.D.)	Service: —	Author Type: Physician
Filed: 5/18/2010 10:55 AM	Encounter Date: 5/18/2010	Creation Time: 5/18/2010 10:40 AM
Status: Signed **Sensitive Note**	Editor: Talag, Emelita Borja (M	I.D.) (Physician)
Sensitive note		
History:		
5/18/2010		
awson B Hawkins		

000017508205 5/25/1955 Type of Visit: Medication Follow up

S: Patient continues to feel stable with his mood; he said he has a donut hole with his Medicare plan an dhas to pay \$106 for his medication but he is willing to pay to help him maintain his stability; denied feeling depressed or anxious; he has been sleeping good as well as his appetite; denied any A/VH; no delusion; he still has some paranoia that there's a former employee who is after him but he said he can live with it and has been there for long time so he is not bothered, able to do his daily taks and activities, he has this paranoia over decades; he is pleased with his medication and no s/e noted.

Mental Status Exam:

Patient presented with normal and appropriate attire, has a big black heavy bag which he said has his 2 laptops as he brings it everywhere for fear that they will be stolen; cooperative, no speech abnormalities, mood - he said he feels fine, affect congruent, thought process revealed itself to be linear and goal directed, thought content showed no AH, VH, SI, HI, or delusional content, no gross cognitive abnormalities noted, insight good and judgment was unimpaired.

DIAGNOSIS

Clinical Notes (continued)

Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

- 1. Continue Abilify 20 mg po QHS as he finds this effective; Offered a lot of support
- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 3 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 5/18/2010 10:55 AM

END OF ENCOUNTER

05/19/2010 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Vi

05/15/2010 - Olders	Only in POPULATIO	JN CARE MANAG		itinuea)
t Information (continued)				
Department				
Name	Address	Phon	e	
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-5		783-7887	
s				
HEMOGLOBIN A1C [206661262] (Comple	ted)			
Electronically signed by: Program, Compl Ordering user: Program, Complete Care 0 Ordering mode: Standard		8 Authorized by: Hook Class: BULK	s, Sarah Elizabet	Status: Complet h (M.D.)
Frequency: Routine 05/19/10 - Quantity: 1 Provider Details		Class. BULK		
Provider		NPI		
Hooks, Sarah Elizabeth (M.D.)		1497814131		
Specimen Information				
ID Type	Source		Collected By	
— —	BLOOD		—	
HEMOGLOBIN A1C [206702785]		Res	ulted: 06/14/10 1	928, Result status: Final res
Order status: Completed Collected by: VVO 06/14/10 1034 Narrative:		Filed on: 06/14/10 Resulting lab: SHE		GIONAL LABORATORY
Note: This is a result for your order wh duplicate order. Please understand the this result, thus coordination of care is Details hyperlink for indication of all pro- notification of this result.	at other providers have als necessary. Click on the Or	o received der		
Components				
Component	Value	Reference Range	Flag	Lab
HGBA1C% Comment: Hb A1c is best used to monitor b suggest the need to improve the			— I values are belov	956 w 7.0% and values >8.0%

CC List

Recipient	Modifier	Fax	Address	Added
Hooks, Sarah Elizabeth (M.D.),	—	_	—	—
M.D.				

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
HEMOGLOBIN A1C [206	702785]		Resulted: 06/14	4/10 1036, Result status: In process

05/19/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued) Labs (continued) Order status: Completed Filed on: 06/14/10 1036 Collected by: VVO 06/14/10 1034 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Reviewed by Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823 Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823 CC List Modifier Fax Recipient Address Added Hooks, Sarah Elizabeth (M.D.), M.D. **Testing Performed By** Lab - Abbreviation Name Director Address Valid Date Range SHERMAN WAY 08/30/05 1817 - 09/01/10 0000 240 - 956 Ann M. Vannier, 11668 Sherman Way REGIONAL NORTH HOLLYWOOD M.D. LABORATORY CA 91605 CREATININE, SERUM [206661263] (Completed) Electronically signed by: Program, Complete Care on 05/19/10 1908 Status: Completed Ordering user: Program, Complete Care 05/19/10 1908 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Frequency: Routine 05/19/10 -Class: BULK Quantity: 1 **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 Specimen Information ID Source Collected By Туре BLOOD Resulted: 06/14/10 2042, Result status: Final result **CREATININE, SERUM [206702792]** Order status: Completed Filed on: 06/14/10 2042 Collected by: VVO 06/14/10 1034 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Narrative: Note: This is a result for your order which has been determined to be a duplicate order. Please understand that other providers have also received this result, thus coordination of care is necessary. Click on the Order Details hyperlink for indication of all providers who have received

notification of this result.

Components

Component	Value	Reference Range	Flag	Lab	
CREATININE	1.0	0.7 - 1.3 mg/dL	—	956	
GLOMERULAR FILTRATION RATE	>89-B	mL/min	—	956	

Comment:

Comments: Estimated GFR is derived and reported per 1.73 m2 body surface area. Race used from Foundations System: "NB" non-black, "B" black. GFR estimate has been multiplied by 1.21 if "B" is indicated in the system. * GFR Ranges * GFR >89 Normal (or CKD1*) 60-89 Mildly reduced (CKD2*) 30-59 Moderately reduced (CKD3 if >3mos) 15-29 Severely reduced (CKD4 if >3mos) GFR <15 Kidney failure (CDK5 if >3mos) * GFR >60 is not diagnostic of CKD 1 or 2 unless another marker of kidney damage is present (e.g. microalbumin or urine protein >300 mg/day on two occasions, or renal biopsy or imaging abnormality). IDMS-calibrated. See LabNet for Details.

05/19/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

Reviewed by				
	zabeth (M.D.) on 06/15/1 zabeth (M.D.) on 06/15/1			
CC List				
Recipient Hooks, Sarah Elizabe M.D.	Modifier eth (M.D.), —	Fax —	Address —	Added —
Testing Performed By				
Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
CREATININE, SERUM [2	206702792]		Resulted: 06/14	1/10 1036, Result status: In proce
Order status: Completed			ed on: 06/14/10 1036	
Collected by: VVO 06/14	4/10 1034	Re	sulting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
CC List Recipient Hooks, Sarah Elizabe	Modifier eth (M.D.), —	Fax	Address	Added
Recipient Hooks, Sarah Elizabe M.D.		Fax —	Address —	Added —
Recipient Hooks, Sarah Elizabe M.D. Festing Performed By	eth (M.D.), —	_	_	_
Recipient Hooks, Sarah Elizabe M.D.		Fax — Director Ann M. Vannier, M.D.	Address — Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	Added — Valid Date Range 08/30/05 1817 - 09/01/10 0000
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY	Director Ann M. Vannier, M.D. 264] (Completed)		 Valid Date Range 08/30/05 1817 - 09/01/10 0000
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 1	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	 Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Routine 05/19/1 antity: 1	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 1	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth	 Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	 Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Rootine 05/19/1 antity: 1 Provider Details	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 1	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth Clas	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605 horized by: Hooks, Sarah Eliz	 Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Routine 05/19/1 antity: 1 Provider Details Provider	Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 19 10 -	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth Clas	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605 horized by: Hooks, Sarah Eliz s: BULK	 Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Routine 05/19/1 antity: 1 Provider Details Provider Hooks, Sarah Elizabeth	Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 19 10 -	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth Clas	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605 horized by: Hooks, Sarah Eliz	 Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Routine 05/19/1 antity: 1 Provider Details Provider Hooks, Sarah Elizabeth Specimen Information	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 11 10 - (M.D.)	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth Clas NP 143	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605 horized by: Hooks, Sarah Eliz s: BULK 1 97814131	Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete zabeth (M.D.)
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Routine 05/19/1 antity: 1 Provider Details Provider Hooks, Sarah Elizabeth	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 11 10 - (M.D.)	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth Clas	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605 horized by: Hooks, Sarah Eliz s: BULK	Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete zabeth (M.D.)
Recipient Hooks, Sarah Elizabe M.D. Testing Performed By Lab - Abbreviation 240 - 956 ROALBUMIN, URINE, Q ctronically signed by: Pro dering user: Program, Co dering mode: Standard quency: Routine 05/19/1 antity: 1 Provider Details Provider Hooks, Sarah Elizabeth Specimen Information	eth (M.D.), — Name SHERMAN WAY REGIONAL LABORATORY QUANTITATIVE [206661 ogram, Complete Care omplete Care 05/19/10 1: 10 - (M.D.) pe	Director Ann M. Vannier, M.D. 264] (Completed) on 05/19/10 1908 908 Auth Class NP 143 Source URINE	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605 horized by: Hooks, Sarah Eliz is: BULK 1 97814131 Collected	Valid Date Range 08/30/05 1817 - 09/01/10 0000 Status: Complete zabeth (M.D.)

Note: This is a result for your order which has been determined to be a duplicate order. Please understand that other providers have also received

05/19/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

this result, thus coordination of care is necessary. Click on the Order Details hyperlink for indication of all providers who have received notification of this result.

Component		Value	Reference Range	Flag	Lab
ALBUMIN, URINE, DETI MG/L	ECTION LIMIT <= 20	<3.0	<20.0 mg/L	_	956
CREATININE, URINE		154.0	NOT ESTABLISHED mg/dL		956
ALBUMIN/CREATININE	, URINE	<1.9	<30.0 ug/mgCREAT		956
					_BUMIN-RANDOM: >29 ug/mg
CREAT MICROALBUMINURIA	TWO C	OR MORE POSI	TIVE TESTS ARE RI	EQUIRED T	O DIAGNOSE
Reviewed by					
	th (M.D.) on 06/15/10 (th (M.D.) on 06/15/10 (
C List					
Recipient	Modifier	Fax	Address		Added
Hooks, Sarah Elizabeth (N M.D.	M.D.), —	—	—		_
esting Performed By					
		Director	Address		Valid Date Range
240 - 956	Name SHERMAN WAY REGIONAL LABORATORY	Director Ann M. Vannie M.D.			
240 - 956 ICROALBUMIN, URINE, Q	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannie M.D.	r, 11668 Shern NORTH HOL CA 91605	LYWOOD	08/30/05 1817 - 09/01/10 0000
240 - 956	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [20670	Ann M. Vannie M.D.	r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 06/14/10 1	LYWOOD sulted: 06/14	08/30/05 1817 - 09/01/10 0000
240 - 956 ICROALBUMIN, URINE, Q Order status: Completed	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [20670	Ann M. Vannie M.D.	r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 06/14/10 1	LYWOOD sulted: 06/14	08/30/05 1817 - 09/01/10 0000
240 - 956 ICROALBUMIN, URINE, Q Order status: Completed Collected by: PTC 06/14/10 Reviewed by Hooks, Sarah Elizabe	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [20670	Ann M. Vannie M.D. 02793]	r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 06/14/10 1	LYWOOD sulted: 06/14	08/30/05 1817 - 09/01/10 0000
240 - 956 ICROALBUMIN, URINE, Q Order status: Completed Collected by: PTC 06/14/10 Reviewed by Hooks, Sarah Elizabe	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [20670 1015 th (M.D.) on 06/15/10 (Ann M. Vannie M.D. 02793]	r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 06/14/10 1	LYWOOD sulted: 06/14	08/30/05 1817 - 09/01/10 0000 /10 1015, Result status: In proce
240 - 956 ICROALBUMIN, URINE, Q Order status: Completed Collected by: PTC 06/14/10 Reviewed by Hooks, Sarah Elizaber Hooks, Sarah Elizaber	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [20670 1015 th (M.D.) on 06/15/10 (th (M.D.) on 06/15/10 (Ann M. Vannie M.D. 02793]	r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 06/14/10 1	LYWOOD sulted: 06/14	08/30/05 1817 - 09/01/10 0000
240 - 956 ICROALBUMIN, URINE, Q Drder status: Completed Collected by: PTC 06/14/10 Reviewed by Hooks, Sarah Elizaber Hooks, Sarah Elizaber C List Recipient Hooks, Sarah Elizabeth (M.D.	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [2067(1015 th (M.D.) on 06/15/10 (th (M.D.) on 06/15/10 (Modifier M.D.), —	Ann M. Vannie M.D. 02793] 0823 0823	r, 11668 Sherm NORTH HOL CA 91605 Res Filed on: 06/14/10 1 Resulting lab: SHEF	LYWOOD sulted: 06/14	08/30/05 1817 - 09/01/10 0000 /10 1015, Result status: In proce REGIONAL LABORATORY Added
240 - 956 ICROALBUMIN, URINE, Q Order status: Completed Collected by: PTC 06/14/10 Reviewed by Hooks, Sarah Elizabe Hooks, Sarah Elizabe C List Recipient Hooks, Sarah Elizabeth (M.D. esting Performed By Lab - Abbreviation	SHERMAN WAY REGIONAL LABORATORY UANTITATIVE [20670 1015 th (M.D.) on 06/15/10 (th (M.D.) on 06/15/10 (Ann M. Vannie M.D. 02793] 0823 0823	r, 11668 Shern NORTH HOL CA 91605 Res Filed on: 06/14/10 1 Resulting lab: SHER Address —	LYWOOD oulted: 06/14 015 RMAN WAY	08/30/05 1817 - 09/01/10 0000 /10 1015, Result status: In proce REGIONAL LABORATORY

05/19/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued)

END OF ENCOUNTER

05/19/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887
	Los Angeles CA 90027-5822	

Visit Account Information

Hospita	al Account				
Nar	ne	Acct ID	Class	Status	Primary Coverage
Hav	vkins, Lawson B	2161219796 3	Charge Router-Auto HAR	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21612197963)

	Relation	to		
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	3432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	3432 x00000(O)		

Coverage Information (for Hospital Account #21612197963)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEEDS PLA	AN SCR KPSA SPECIAL NEEDS PLAN SCR	
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Labs

MICROALBUMIN, U	JRINE, QUANTITATIVE	[206702793] (Final result)		
	d by: Program, Comple acted on in another enco	ete Care on 05/19/10 1908	Status: Comp	leted
	gram, Complete Care 05		uthorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Sta				
	requency: Routine 05/19/10 - Class: BULK			
Quantity: 1		La	ab status: Final result	
Instance released b	y: Program, Complete C	Care (auto-released) 5/20/20	10 1:34 AM	
Provider Details	5			
Provider			NPI	
Hooks, Sarah E	lizabeth (M.D.)		1497814131	
Specimen Infor	mation			
ID	Туре	Source	Collected By	
454298570	—	URINE	PTC 06/14/10 1015	
MICROALBUMI	N, URINE, QUANTITAT	IVE [206702793]	Resulted: 06/14/10 2130, Result status: Final	result
Order status: C	ompleted		Filed on: 06/14/10 2130	
ted on 1/12/24 5.	22 DM		De	ao 2'

Labs (continued)

Collected by: PTC 06/14/10 1015 Narrative: Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Note: This is a result for your order which has been determined to be a duplicate order. Please understand that other providers have also received this result, thus coordination of care is necessary. Click on the Order Details hyperlink for indication of all providers who have received notification of this result.

Components

Component	Value	Reference Range	Flag	Lab
ALBUMIN, URINE, DETECTION LIMIT <= 20 MG/L	<3.0	<20.0 mg/L	—	956
CREATININE, URINE	154.0	NOT ESTABLISHED mg/dL	_	956
ALBUMIN/CREATININE, URINE	<1.9	<30.0 ug/mgCREAT	_	956
Comment:				
THRESHOLD TO DIAGNOSE MICROALBUN				
CREAT TWO O MICROALBUMINURIA.	R MORE POS	ITIVE TESTS ARE RI	EQUIRED TO DIAG	NOSE
Reviewed by				
Hooks, Sarah Elizabeth (M.D.) on 06/15/10 ()823			
Hooks, Sarah Elizabeth (M.D.) on 06/15/10 (1023			

CC List

Recipient	Modifier	Fax	Address	Added
Hooks, Sarah Elizabeth (M.D.),	—	—	—	—
M.D.				

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

MICROALBUMIN, URINE, QUANTITATIVE [206702793]

Resulted: 06/14/10 1015, Result status: In process

Order status: Completed Collected by: PTC 06/14/10 1015 Filed on: 06/14/10 1015 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823 Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823

CC List

Recipient	Modifier	Fax	Address	Added
Hooks, Sarah Elizabeth (M.D.),	_	_	—	_
M.D.				

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD	08/30/05 1817 - 09/01/10 0000

Labs (

LABORATORY		CA 91605	
All Reviewers List			
Hooks, Sarah Elizabeth (M.D.) on 6/15/20	10 08:23		
Hooks, Sarah Elizabeth (M.D.) on 6/15/20			
IOGLOBIN A1C [206702785] (Final result)			
ectronically signed by: Program, Complete C		1	Status: Complete
s order may be acted on in another encounte dering user: Program, Complete Care 05/19/1		Authorized by: Hooke Sarah	\mathbf{E}
dering mode: Standard	0 1906	Authorized by: Hooks, Sarah	
quency: Routine 05/19/10 -		Class: BULK	
antity: 1		Lab status: Final result	
tance released by: Program, Complete Care	(auto-released) 5/20/2	2010 1:34 AM	
Provider Details			
Provider		NPI	
Hooks, Sarah Elizabeth (M.D.)		1497814131	
Specimen Information			
ID Type	Source		ted By
454298547 —	BLOOD	VVO 0	6/14/10 1034
HEMOGLOBIN A1C [206702785]		Resulted: 0	6/14/10 1928, Result status: Final res
Order status: Completed		Filed on: 06/14/10 1928	
Collected by: VVO 06/14/10 1034			VAY REGIONAL LABORATORY
Narrative:		-	
duplicate order. Please understand that othe this result, thus coordination of care is neces Details hyperlink for indication of all provider notification of this result.	sary. Click on the Ord		
Components			
Component	Value	Reference Range Flag	Lab
HGBA1C%	5.6	4.8 - 5.9 % —	956
Comment: Hb A1c is best used to monitor blood s suggest the need to improve the blood			are below 7.0% and values >8.0%
Reviewed by Hooks, Sarah Elizabeth (M.D.) on 06/ ²	5/10 0823		
Reviewed by	5/10 0823		
Reviewed by Hooks, Sarah Elizabeth (M.D.) on 06/ ²	5/10 0823		
Reviewed by Hooks, Sarah Elizabeth (M.D.) on 06/ Hooks, Sarah Elizabeth (M.D.) on 06/	5/10 0823	Address	Added —
Reviewed by Hooks, Sarah Elizabeth (M.D.) on 06/* Hooks, Sarah Elizabeth (M.D.) on 06/* CC List Recipient Modifier Hooks, Sarah Elizabeth (M.D.), —	5/10 0823 5/10 0823		Added — Valid Date Range

HEMOGLOBIN A1C [206702785]

Labs (continued)

Order status: Completed Collected by: VVO 06/14/	10 1034		Filed on: 06/14/10 10 Resulting lab: SHERI		REGIONAL LABORATORY
Reviewed by					
	abeth (M.D.) on 06/15/1 abeth (M.D.) on 06/15/1				
CC List					
Recipient Hooks, Sarah Elizabe M.D.	Modifier th (M.D.), —	Fax —	Address —		Added —
Testing Performed By					
Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannie M.D.	r, 11668 Sherm NORTH HOL CA 91605		08/30/05 1817 - 09/01/10 0000
All Reviewers List					
	th (M.D.) on 6/15/2010 th (M.D.) on 6/15/2010				
ATININE, SERUM [2067	027921 (Final result)				
ctronically signed by: Pro s order may be acted on	gram, Complete Care in another encounter.		Authorized by: Hooks	Sarah Fliz	Status: Complete
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 ance released by: Progra	gram, Complete Care in another encounter. mplete Care 05/19/10 1 0 -	908 / (Authorized by: Hooks Class: BULK _ab status: Final resu 010 1:34 AM		-
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details	gram, Complete Care in another encounter. mplete Care 05/19/10 1 0 -	908 / (Class: BULK Lab status: Final resu 010 1:34 AM		-
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 ance released by: Progra	ogram, Complete Care in another encounter. mplete Care 05/19/10 1 0 - am, Complete Care (aut	908 / (Class: BULK Lab status: Final resu		-
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider	ogram, Complete Care in another encounter. mplete Care 05/19/10 1 0 - am, Complete Care (aut	908 / (Class: BULK Lab status: Final resu 010 1:34 AM NPI		-
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID	ogram, Complete Care in another encounter. mplete Care 05/19/10 1 0 - am, Complete Care (aut (M.D.)	908 / to-released) 5/20/20	Class: BULK Lab status: Final resu 010 1:34 AM NPI 1497814131	lt Collected B	rabeth (M.D.)
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth of Specimen Information	ogram, Complete Care in another encounter. mplete Care 05/19/10 1 0 - am, Complete Care (aut (M.D.)	908 ((to-released) 5/20/20	Class: BULK Lab status: Final resu 010 1:34 AM NPI 1497814131	lt	rabeth (M.D.)
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID	gram, Complete Care in another encounter. mplete Care 05/19/10 1 0 - am, Complete Care (aut (M.D.)	908 / to-released) 5/20/20	Class: BULK Lab status: Final resu 010 1:34 AM NPI 1497814131	It Collected F VVO 06/14/	rabeth (M.D.)
ctronically signed by: Pros s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Details Provider Hooks, Sarah Elizabeth of Specimen Information ID Type 454298547 —	e e e e e e e e e e e e e e	908 / to-released) 5/20/20	Class: BULK Lab status: Final resu 010 1:34 AM NPI 1497814131 Resu Filed on: 06/14/10 2	It Collected E VVO 06/14/ ulted: 06/14/ 042	rabeth (M.D.) By /10 1034
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Type 454298547 — CREATININE, SERUM [2 Order status: Completed Collected by: VVO 06/14	gram, Complete Care in another encounter. mplete Care 05/19/10 11 0 - am, Complete Care (aut (M.D.) e 206702792] -/10 1034 your order which has be understand that other p tion of care is necessar	908 // to-released) 5/20/20 Source BLOOD een determined to I roviders have also y. Click on the Orde	Class: BULK Lab status: Final result 010 1:34 AM NPI 1497814131 Resulting lab: SHER De a received	It Collected E VVO 06/14/ ulted: 06/14/ 042	abeth (M.D.) By /10 1034 /10 2042, Result status: Final res
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Details Provider Betails Provider Hooks, Sarah Elizabeth of Specimen Information ID Type 454298547 — CREATININE, SERUM [2 Order status: Completed Collected by: VVO 06/14 Narrative: Note: This is a result for duplicate order. Please this result, thus coordina Details hyperlink for indic notification of this result.	gram, Complete Care in another encounter. mplete Care 05/19/10 11 0 - am, Complete Care (aut (M.D.) e 206702792] -/10 1034 your order which has be understand that other p tion of care is necessar	908 // to-released) 5/20/20 Source BLOOD een determined to I roviders have also y. Click on the Orde	Class: BULK Lab status: Final result 010 1:34 AM NPI 1497814131 Resulting lab: SHER De a received	It Collected E VVO 06/14/ ulted: 06/14/ 042	abeth (M.D.) By /10 1034 /10 2042, Result status: Final res
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Details Specimen Information ID Type 454298547 — CREATININE, SERUM [2 Order status: Completed Collected by: VVO 06/14 Narrative: Note: This is a result for duplicate order. Please this result, thus coordina Details hyperlink for indic notification of this result. Components Components	gram, Complete Care in another encounter. mplete Care 05/19/10 11 0 - am, Complete Care (aut (M.D.) e 206702792] -/10 1034 your order which has be understand that other p tion of care is necessar	908 // to-released) 5/20/20 Source BLOOD een determined to I roviders have also y. Click on the Orde ho have received Value	Class: BULK Lab status: Final result 010 1:34 AM NPI 1497814131 Result Filed on: 06/14/10 2 Resulting lab: SHER De a received er Reference Range	It Collected E VVO 06/14/ ulted: 06/14/ 042	abeth (M.D.) By /10 1034 /10 2042, Result status: Final res REGIONAL LABORATORY Lab
ctronically signed by: Pro s order may be acted on lering user: Program, Cor lering mode: Standard quency: Routine 05/19/1 antity: 1 cance released by: Progra Provider Details Provider Details Provider Betails Provider Hooks, Sarah Elizabeth of Specimen Information ID Type 454298547 — CREATININE, SERUM [2 Order status: Completed Collected by: VVO 06/14 Narrative: Note: This is a result for duplicate order. Please this result, thus coordina Details hyperlink for indic notification of this result.	e control of all providers without the second seco	908 // to-released) 5/20/20 Source BLOOD een determined to I roviders have also y. Click on the Orde ho have received	Class: BULK Lab status: Final resu 010 1:34 AM NPI 1497814131 Resulting lab: SHER De a received er	IIT Collected F VVO 06/14/ ulted: 06/14/ 042 RMAN WAY	abeth (M.D.) By /10 1034 /10 2042, Result status: Final res REGIONAL LABORATORY

Labs (continued)

"NB" non-black, "B" black. GFR estimate has been multiplied by 1.21 if "B" is indicated in the system. * GFR Ranges * GFR >89 Normal (or CKD1*) 60-89 Mildly reduced (CKD2*) 30-59 Moderately reduced (CKD3 if >3mos) 15-29 Severely reduced (CKD4 if >3mos) GFR <15 Kidney failure (CDK5 if >3mos) * GFR >60 is not diagnostic of CKD 1 or 2 unless another marker of kidney damage is present (e.g. microalbumin or urine protein >300 mg/day on two occasions, or renal biopsy or imaging abnormality). IDMS-calibrated. See LabNet for Details.

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823 Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823

CC List

_			_		
F	Recipient	Modifier	Fax	Address	Added
H	Hooks, Sarah Elizabeth (M.D.),	_	_	_	_
Ν	M.D.				

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

CREATININE, SERUM [206702792]

Order status: Completed Collected by: VVO 06/14/10 1034 Filed on: 06/14/10 1036 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Resulted: 06/14/10 1036, Result status: In process

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823 Hooks, Sarah Elizabeth (M.D.) on 06/15/10 0823

CC List

Recipient	Modifier	Fax	Address	Added
Hooks, Sarah Elizabeth (M.D.),	—	—	—	—
M.D.				

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 6/15/2010 08:23 Hooks, Sarah Elizabeth (M.D.) on 6/15/2010 08:23

END OF ENCOUNTER

07/20/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY

Visit Information

Provider Information

Encounter Provider

Authorizing Provider

Talag, Emelita Borja (M.D.)	Talag, I	Emelita Borja (M.D.)
Department		
Name	Address	Phone
PSYCHIATRY	5105 GOLDLEAF CIRCLE Los Angeles CA 90056-1269	323-298-3100
Level of Service		
Level of Service		
PSYCHIATRIC PHARMACOLOGIC MA	NAGEMENT	
ason for Visit		
Chief Complaints		
MEDICATION MANAGEMENT PSYCHOSIS		
Visit Diagnosis		
Name	Code	Chronic?
CUIZOAEEECTIVE DISOBDED (primary	295.70	Yes
SCHIZOAFFECTIVE DISORDER (primary		
nical Notes		
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.)	0 1004 Service: —	Author Type: Physician
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed	0 1004 Service: —	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed **Sensitive Note**	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed **Sensitive Note** Story:	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed **Sensitive Note** Story: 20/2010	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed **Sensitive Note** story: 20/2010 wson B Hawkins	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed **Sensitive Note** story: 20/2010 wwson B Hawkins 00017508205	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM
nical Notes Progress Notes Talag, Emelita Borja (M.D.) at 7/20/201 Author: Talag, Emelita Borja (M.D.) Filed: 7/20/2010 10:41 AM Status: Signed **Sensitive Note** Story:	0 1004 Service: — Encounter Date: 7/20/2010	Creation Time: 7/20/2010 10:04 AM

S: Patient reported feeling stable; denied any psychotic symptom; he saw his PCP and he was informed that he is doing well physically; he is happy to know that; he is just noticing that he seemed to be having problem with his short term memory; he also noticing that he has ocassional intentional tremor but very mild in just 1 hand; his PCP said it is benign an dno other intervention recommended; he is pleased with his regimen; denied any fuctuation of mood; no psychosis; no SI/HI; he denied any s/e from the medication.

Mental Status Exam:

Patient is a 55 y/o AAM who presented with normal and appropriate attire, has a blue back pack this time; cooperative, no speech abnormalities, mood - he said he feels fine, affect congruent, thought process revealed itself to be linear and goal directed, thought content showed no AH, VH, SI, HI, or delusional content, no gross cognitive abnormalities noted, insight good and judgment was unimpaired.

DIAGNOSIS Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List:

Clinical Notes (continued)

SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

- 1. Continue Abilify 20 mg po QHS as he finds this effective; Offered a lot of support
- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 3 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 7/20/2010 10:41 AM

END OF ENCOUNTER

07/27/2010 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Authorizing Provider Hooks, Sarah Elizabeth (M.D.)

Printed on 1/12/24 5:33 PM

Visit Information (continued)

Department				
Name	Address	Phone		
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273		

Follow-up and Dispositions

Return if symptoms worsen or fail to improve. •

Level of Service

Level of Service	
OUTPT EST LEVEL 4	

Reason for Visit

Chief Complaints

TOE PAIN (right foot (toe) pain x 1 week per pt.) ٠

JOINT PAINS

Visit Diagnoses

Name	Code	Chronic?
EXAM, FOOT, DIABETIC (primary)	V77.99	No
TOE PAIN	729.5	No
ABRASION	919.0	No
OBESITY	278.00	Yes
DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED	250.80, 272.2	Yes

Vitals

Vital Signs				Most recent update: 7/27/2010 9:42 AM
BP 127/83	Pulse 65	Temp 96.1 °F (35.6 °C) (Tympanic)	Ht 5' 7" (1.702 m)	Wt 224 lb 9.6 oz (101.9 kg)

BMI 35.18 kg/m²

Pain Information (Last Filed)

Score	Location	Comments	Edu?
1 (scale 0-10)	OTHER	None	Yes

Clinical Notes

Nursing Note					
at 7/27/2010 0930					
Author: — Filed: Status: Signed	Service: — Encounter Date: 7/27/2010	Author Type: — Creation Time: 7/27/2010 9:30 AM			
>> MARTA C. SIGARAN MA A copy of After Visit summ explained, Pt .verbalized u	mary was given and instru	uctions to follow were			
>> NANCY SALAS LVN Tue Patient presents with:	Jul 27, 2010 9:42 AM				

Clinical Notes (continued)

TOE PAIN - right foot (toe) pain x 1 week per pt. JOINT PAINS PROACTIVE CARE ACTIONS

Proactive Office Encounter Actions: Diabetic Member: Member prepared for foot exam Blood Pressure above goal, repeat blood pressure taken and documented Member instructed on KP.ORG registration process

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 7/27/2010 0955

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 7/27/2010 10:05 AM	Encounter Date: 7/27/2010	Creation Time: 7/27/2010 9:55 AM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.D.) (P	hysician)

History:

Thinks has gout, R big toe off/on pain, sharp, in joints, daily for 1 wk, not severe, no redness/warmth, slight ttp

History Reviewed:

I have reviewed the Medical/Surgical history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Constitutional: Negative for fever. Gastrointestinal: Negative for heartburn. Neurological: Negative for sensory change.

<u>Physical Exam</u> Constitutional: He is well-developed, well-nourished, and in no distress. Pulmonary/Chest: Effort normal. Musculoskeletal:

R great toe wnl, L great to with abrasion on tip (s/p stubbing per pt), monofilament wnl, no s/s of infection

Neurological: He is alert. Skin: Skin is warm and dry. Psychiatric: Affect normal. Vitals reviewed.

A/P:

Reassured no e/o gout, possible OA but likely sprain/strain Cont care to L toe, pt will let me know if any probs healing

Patient Active Problem List:

KAISER PERMANENTE

07/27/2010 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

GERD [530.81A] - try stop PPI DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] - sugars still good per pt OBESITY [278.00E] - advised to lose weight, assistance info on AVS

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 7/27/2010 10:05 AM

Patient Instructions

STOP the omeprazole to see if your heartburn is still OK.

You must lose weight in order to be healthy! Visit Health Education to hear about our weight loss programs. Located on the 1st floor behind the information booth. Or call the Healthy Living Helpline at 1-866-402-4320. Or go on-line to kp.org/healthylifestyles.

END OF ENCOUNTER

08/18/2010 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887	
	Los Angeles CA 90027-5822		

Labs

	1063715] (Completed)			
Electronically signed by: Program, Complete Care on 08/18/10 1939				
Ordering user: Program, Complete Care 08/18/10 1939		/10 1939 Authoriz	ed by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: S				
requency: Routir	ne 08/18/10 -	Class: E	BULK	
Quantity: 1				
Provider Detai	ils			
Provider		NPI		
Hooks, Sarah	Elizabeth (M.D.)	14978	14131	
Specimen Info	ormation			
ID	Туре	Source	Collected By	
		BLOOD	_	

Printed o	n 1/12/24	5:33 PM

Electronically signed by: Program, Complete Care on 08/18/10 1939

	08/18/2010 - Orders	S Only in POPULATI	ON CARE MANAGEMENT (continued)
Labs (continued)			
Ordering user Ordering mod	: Program, Complete Care 0 e: Standard	8/18/10 1939	Authorized by: Hooks, Sarah Elizabeth (M.D.)
	outine 08/18/10 -		Class: BULK
Provider D	Details		
Provider			NPI
Hooks, Sa	arah Elizabeth (M.D.)		1497814131
Specimen	Information		
ID	Туре	Source BLOOD	Collected By
		END OF EN	COUNTER
08 Visit Information	3/18/2010 - Released F	uture/Standing Ord	ers in POPULATION CARE MANAGEMENT
Provider Infor	mation		
Encounter Hooks Sar	rah Elizabeth (M.D.)		
Department			
Name		Address	Phone
	ON CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-	323-783-7887
Labs			
LIPID PANEL	[221101304] (Discontinued)	
	signed by: Program, Compl		
Ordering user Ordering mod	: Program, Complete Care 0 e: Standard	8/18/10 1939	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Ro Quantity: 1	outine 08/18/10 -		Class: BULK Instance released by: Program, Complete Care (auto-released)
-	by: Interface, Scal_ Lab 11/2	0/10 0740 [Other (Pt. did	8/19/2010 1:07 AM
Provider D	letails		
Provider Hooks, Sa	arah Elizabeth (M.D.)		NPI 1497814131
Specimen	Information		
ID	Туре	Source	Collected By
_		BLOOD	_
ALT, SERUM [[221101306] (Discontinued)		
	signed by: Program, Compl		
Ordering user Ordering mod	: Program, Complete Care 0 e: Standard	8/18/10 1939	Authorized by: Hooks, Sarah Elizabeth (M.D.)
	outine 08/18/10 -		Class: BULK Instance released by: Program, Complete Care (auto-released)

Instance released by: Program, Complete Care (auto-released) 8/19/2010 1:07 AM

Discontinued by: Interface, Scal_ Lab 11/20/10 0740 [Other (Pt. did not present for lab)]

08/18/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT (continued) Labs (continued) Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 **Specimen Information** ID Source Collected By Туре BLOOD END OF ENCOUNTER 08/20/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY Visit Information **Provider Information Encounter Provider Authorizing Provider** Talag, Emelita Borja (M.D.) Talag, Emelita Borja (M.D.) Department Name Address Phone **PSYCHIATRY** 5105 GOLDLEAF CIRCLE 323-298-3100 Los Angeles CA 90056-1269 Follow-up and Dispositions Return in about 2 months (around 10/20/2010). • Level of Service Level of Service **PSYCHIATRIC PHARMACOLOGIC MANAGEMENT** Reason for Visit **Chief Complaint** SCHIZOPHRENIA • **Visit Diagnosis** Name Code **Chronic?** SCHIZOAFFECTIVE DISORDER (primary) 295.70 Yes **Clinical Notes Progress Notes** Talag, Emelita Borja (M.D.) at 8/20/2010 1034 Author: Talag, Emelita Borja (M.D.) Author Type: Physician Service: -Filed: 8/20/2010 10:38 AM Encounter Date: 8/20/2010 Creation Time: 8/20/2010 10:34 AM Status: Signed Editor: Talag, Emelita Borja (M.D.) (Physician) **Sensitive Note** History: 8/20/2010 Lawson B Hawkins 000017508205

5/25/1955

Clinical Notes (continued)

Type of Visit: Medication Follow up

S: Patient reported that he feels stable with his mood; no psychosis reported; some paranoia but not bothersome and not worse than before; he has good sleep and appetite; he is pleased with the medication and no other complaints.

Mental Status Exam:

Patient is a 55 y/o AAM who presented with normal and appropriate attire; cooperative, no speech abnormalities, mood - he said he feels fine, affect congruent, thought process revealed itself to be linear and goal directed, thought content showed no AH, VH, SI, HI, or delusional content, no gross cognitive abnormalities noted, insight good and judgment was unimpaired.

DIAGNOSIS

Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

- 1. Continue Abilify 20 mg po QHS as he finds this effective; Offered a lot of support
- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 2 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 8/20/2010 10:38 AM

KAISER PERMANENTE

08/20/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

Patient Instructions

Treatment Plan:

Continue Abilify 20 mg po QHS as he finds this effective; Offered a lot of support

Follow up with other MDs for all medical concerns

RTC in 2 months for medication follow up

Electronically signed by Talag, Emelita Borja (M.D.) at 8/20/2010 10:35 AM

END OF ENCOUNTER

09/10/2010 - Allied Health/Nurse Visit in OPHTHALMOLOGY

Visit Information

Provider Information

Encounter Provider

Mc Cray, Constance D

Department

Name	Address	Phone	
OPHTHALMOLOGY	6041 CADILLAC AVE	323-421-2900	
	Los Angeles CA 90034-1702		

Clinical Notes

Progress Notes Mc Crav. Constance D at 9/10/2010 1329

 Author: Mc Cray, Constance D	Service: —	Author Type: TECHNICIAN
Filed: 9/10/2010 1:29 PM	Encounter Date: 9/10/2010	Creation Time: 9/10/2010 1:29 PM
Status: Signed	Editor: Mc Cray, Constance D (TECHNICI	AN)

poe

Electronically signed by Mc Cray, Constance D at 9/10/2010 1:29 PM

Procedures [Variable]

PHOTOGRAPHY RETINA, INTERPRETATION AND REPORT ONLY [226259720] (Active)

09/10/2010 - Allied Health/Nurse Visit in OPHTHALMOLOGY (continued)

Procedures (continued)

Electronically signed by: Mc Cray, Constance D on 09/10/10 1330 Ordering user: Mc Cray, Constance D 09/10/10 1330 Ordering mode: Standard Cosigning events	Authorized by: Hwang, Michael Ming-Shan (M.D.)	Status: Active
Electronically cosigned by Hwang, Michael Ming-Shan (M.D.) 09/13	10 0808 for Ordering	
Frequency: Routine 09/10/10 -	Class: Normal	
Quantity: 1		
Provider Details		
Provider	NPI	
Hwang, Michael Ming-Shan (M.D.)	1649341603	
Mc Cray, Constance D	_	

END OF ENCOUNTER

10/20/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY

Visit Information

Provider Information

Encounter	Provider
LIICOUIIICI	I I O VIGEI

Talag, Emelita Borja (M.D.)

Authorizing Provider Talag, Emelita Borja (M.D.)

Department

Name	Address	Phone	
PSYCHIATRY	5105 GOLDLEAF CIRCLE Los Angeles CA 90056-1269	323-298-3100	

Follow-up and Dispositions

• Return in about 2 months (around 12/20/2010).

Level of Service

Level of Service
PSYCHIATRIC PHARMACOLOGIC MANAGEMENT

Reason for Visit

Chief Complaint				
MEDICATION MANAGEMENT				
Visit Diagnosis				
Name	Code		Chronic?	
SCHIZOAFFECTIVE DISORDER (primary)	295.70		Yes	
sit Account Information				
Hospital Account				
Namo	Acct ID	Class	Status	Primary Coverage

Name	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2161278400	Charge Router-Auto	Closed	Restricted coverage
	4	HAR		

Guarantor Account (for Hospital Account #21612784004)

		Relation to			
Name		Pt	Service Area	Active?	Acct Type
Hawkin	s, Lawson B	Self	SCAL	Yes	Personal/Family

Visit Account Information (continued)

Address	Phone	
2626 S COCHRAN AVE	323-297-3432(H)	
LOS ANGELES, CA 90016-2618	323-297-3432 x00000(O)	

	Precert #
EDS PLAN SCR KPSA SPECIAL NEEDS PLAN	SCR
	Subscriber #
	xxxxxxx8205
Phone	

Vitals

Vital Signs		Most recent update: 10/20/2010 8:37 AM
Wt	BMI	
231 lb 12.8 oz (105.1 kg)	36.31 kg/m²	
Clinical Notes		

Progress Notes

Talag, Emelita Borja (M.D.) at 10/20/2010 0833

Author: Talag, Emelita Borja (M.D.) Filed: 10/20/2010 8:51 AM Status: Signed **Sensitive Note**

Service: — Au Encounter Date: 10/20/2010 Cr Editor: Talag, Emelita Borja (M.D.) (Physician)

Author Type: Physician Creation Time: 10/20/2010 8:33 AM

<u>History</u>: 10/20/2010 Lawson B Hawkins 000017508205 5/25/1955 Type of Visit: Medication Follow up

S: Patient reported that he feels stable with his mood; no paranoia reported; he said his business is good; denied feeling depressed nor having manic episode; he has good sleep and appetite; he is pleased with the medication, no s/e noted; he has no other complaints.

Wt 231.8 lbs

Mental Status Exam:

Patient is a 55 y/o AAM who presented with normal and appropriate attire; cooperative, no speech abnormalities, mood - he said he feels fine, affect congruent, thought process revealed itself to be linear and goal directed, thought content showed no AH, VH, SI, HI, or delusional content, no gross cognitive abnormalities noted, insight good and judgment was unimpaired.

DIAGNOSIS Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B)

Clinical Notes (continued)

GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

1. Continue Abilify 20 mg po QHS as he finds this effective;

Blood Test request for FBS along with Lipid Panel and ALT from the PCP; please go to the lab and don't eat starting 12 MN prior to the day that you will be going for the blood test.

Offered a lot of support

- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 2 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 10/20/2010 8:51 AM

Labs

GLUCOSE, FASTING [234249897] (Final result)

Electronically signed by: **Talag, Emelita Borja (M.D.) on 10/20/10 0834** This order may be acted on in another encounter. Ordering user: Talag, Emelita Borja (M.D.) 10/20/10 0834 Au Ordering mode: Standard Frequency: Routine 10/20/10 - Cl Status: Completed

Authorized by: Talag, Emelita Borja (M.D.)

Class: Normal

uantity: 1 agnoses					
	SORDER, UNSPECIFIED T		Lab status: Final res	ult	
Provider Details			,1		
Provider			NPI		
Talag, Emelita Borja	(M.D.)		1356386403		
Specimen Information	on				
	Туре	Source		Collected	
464173330 -	_	BLOOD		PNN 12/15	5/10 0940
GLUCOSE, FASTING	6 [234249897] (Abnormal)		Res	ulted: 12/15	5/10 1950, Result status: Final r
Order status: Comple Collected by: PNN 12			Filed on: 12/15/10 1 Resulting lab: SHEI		REGIONAL LABORATORY
Components					
Component		Value	Reference Range	Flag	Lab
GLUCOSE, FAS	TING	109	70 - 99 mg/dL	н^	956
	Borja (M.D.) on 07/16/12 1 Borja (M.D.) on 12/16/10 1				
Talag, Emelita Bo	orja (M.D.), M.D.				
Respons					
ible? De	livery Method	Outcome 66581098		Ме	essage ID
ible? De In Basket Re Provider ID:	sult sent 22022 (provider defined by d to linked user A818526 us	66581098 Results Routing)		Me	ssage ID
ible? De In Basket Re Provider ID: Result routed	sult sent 22022 (provider defined by d to linked user A818526 us 3y	66581098 Results Routing)		Me	essage ID Valid Date Range
ible? De In Basket Re Provider ID: Result routed	sult sent 22022 (provider defined by d to linked user A818526 us 3y	66581098 Results Routing) sing In Basket	3 Address mer- 11668 Shern	nan Way	
ible? De In Basket Re Provider ID: Result routed Testing Performed B Lab - Abbreviatio 240 - 956	sult sent 22022 (provider defined by d to linked user A818526 us By Dn Name SHERMAN WAY REGIONAL LABORATORY	66581098 Results Routing) sing In Basket Director Darryl Erik Pal	3 Mer- NORTH HOL CA 91605	nan Way LYWOOD	Valid Date Range 09/01/10 1119 - 06/01/17 03;
ible? De In Basket Re Provider ID: Result routed Testing Performed B Lab - Abbreviatio	sult sent 22022 (provider defined by d to linked user A818526 us 3y on Name SHERMAN WAY REGIONAL LABORATORY 5 [234249897] eted	66581098 Results Routing) sing In Basket Director Darryl Erik Pal	3 Mer- NORTH HOL CA 91605	nan Way LYWOOD sulted: 12/1	Valid Date Range
ible? De In Basket Re Provider ID: Result routed Testing Performed B Lab - Abbreviatio 240 - 956 GLUCOSE, FASTING Order status: Comple Collected by: PNN 12	sult sent 22022 (provider defined by d to linked user A818526 us 3y on Name SHERMAN WAY REGIONAL LABORATORY 5 [234249897] eted	66581098 Results Routing) sing In Basket Director Darryl Erik Pal	3 mer- 11668 Shern NORTH HOL CA 91605 Res	nan Way LYWOOD sulted: 12/1	Valid Date Range 09/01/10 1119 - 06/01/17 03:
ible? De In Basket Re Provider ID: Result routed Testing Performed B Lab - Abbreviatio 240 - 956 GLUCOSE, FASTING Order status: Comple Collected by: PNN 12 Reviewed by	sult sent 22022 (provider defined by d to linked user A818526 us By Dn Name SHERMAN WAY REGIONAL LABORATORY S [234249897] eted 2/15/10 0940	66581098 Results Routing) sing In Basket Director Darryl Erik Pal Toy, MD, PhD	3 mer- 11668 Shern NORTH HOL CA 91605 Res	nan Way LYWOOD sulted: 12/1	Valid Date Range 09/01/10 1119 - 06/01/17 03:
ible? De In Basket Re Provider ID: Result routed Testing Performed B Lab - Abbreviatio 240 - 956 GLUCOSE, FASTING Order status: Comple Collected by: PNN 12 Reviewed by Talag, Emelita	sult sent 22022 (provider defined by d to linked user A818526 us 3y on Name SHERMAN WAY REGIONAL LABORATORY 5 [234249897] eted	66581098 Results Routing) sing In Basket Director Darryl Erik Pal Toy, MD, PhD	3 mer- 11668 Shern NORTH HOL CA 91605 Res	nan Way LYWOOD sulted: 12/1	Valid Date Range 09/01/10 1119 - 06/01/17 03
ible? De In Basket Re Provider ID: Result routed Testing Performed B Lab - Abbreviatio 240 - 956 GLUCOSE, FASTING Order status: Comple Collected by: PNN 12 Reviewed by Talag, Emelita	sult sent 22022 (provider defined by d to linked user A818526 us By Dn Name SHERMAN WAY REGIONAL LABORATORY S [234249897] eted 2/15/10 0940 Borja (M.D.) on 07/16/12 1	66581098 Results Routing) sing In Basket Director Darryl Erik Pal Toy, MD, PhD	3 mer- 11668 Shern NORTH HOL CA 91605 Res	nan Way LYWOOD sulted: 12/1	Valid Date Range 09/01/10 1119 - 06/01/17 03:

Talag, Emelita Borja (M.D.) on 7/16/2012 12:58 Talag, Emelita Borja (M.D.) on 12/16/2010 11:21

KAISER PERMANENTE

10/20/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Labs (continued)

Patient Instructions

Continue Abilify 20 mg po QHS as he finds this effective; Blood Test request for FBS along with Lipid Panel and ALT from the PCP; please go to the lab and don't eat starting 12 MN prior to the day that you will be going for the blood test.

Follow up with other MDs for all medical concerns

RTC in 2 months for medication follow up

Electronically signed by Talag, Emelita Borja (M.D.) at 10/20/2010 8:44 AM

END OF ENCOUNTER

11/17/2010 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-5822	323-783-7887

Labs

MOGLOBIN A1C [239768276] (Completed)				
ectronically signed by: Program, Complete C	are on 11/17/10 1956			Status: Completed
rdering user: Program, Complete Care 11/17/		Authorized by: Hooks	s, Sarah Eli	-
equency: Routine 11/17/10 -		Class: Normal		
uantity: 1				
Provider Details				
Provider		NPI		
Hooks, Sarah Elizabeth (M.D.)		1497814131		
Specimen Information				
ID Type	Source		Collected	Ву
	BLOOD		_	
HEMOGLOBIN A1C [239828062]		Resi	ulted: 12/15	5/10 1813, Result status: Final resu
Order status: Completed		Filed on: 12/15/10 1	813	
Collected by: PNN 12/15/10 0940		Resulting lab: SHEF	RMAN WAY	Y REGIONAL LABORATORY
Components				
Component	Value	Reference Range	Flag	Lab
HGBA1C%	5.8	4.8 - 5.9 %		956
Comment:				

11/17/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

Hb A1c is best used to monitor blood sugar control in patients with diabetes. Ideal values are below 7.0% and values >8.0% suggest the need to improve the blood sugar control treatment plan.

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1508
Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506
Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506

Paciniante

Respons ible?	Delivery Method	Outcome	Ma	ssage ID
In Basket Provider	Result sent ID: 29062 (provider defined buted to linked user A542989	66563332 by Results Routing)		
Testing Perform	-	Discotor	A	Valid Data Damas
Lab - Abbrev 240 - 956	iation Name SHERMAN WAY REGIONAL LABORATORY	Director Darryl Erik Palmer- Toy, MD, PhD	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	Valid Date Range 09/01/10 1119 - 06/01/17 032
HEMOGLOBIN A	1C [239828062]		Resulted: 12/15	5/10 1005, Result status: In proc
Order status: Co Collected by: PN	mpleted IN 12/15/10 0940	File	d on: 12/15/10 1006	
Reviewed by				
Hooks, Sa	rah Elizabeth (M.D.) on 12/10 rah Elizabeth (M.D.) on 12/10 rah Elizabeth (M.D.) on 12/10	6/10 1506		
Hooks, Sa Hooks, Sa ID PANEL [23976	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 88277] (Completed)	6/10 1506 6/10 1506		
Hooks, Sa Hooks, Sa ID PANEL [23976 ectronically signed dering user: Progr	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 68277] (Completed) by: Program, Complete Ca ram, Complete Care 11/17/10	6/10 1506 6/10 1506 ire on 11/17/10 1956	prized by: Hooks, Sarah Eliz	
Hooks, Sa Hooks, Sa ID PANEL [23976 ectronically signed dering user: Progr dering mode: Star equency: Routine jantity: 1	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 68277] (Completed) by: Program, Complete Ca ram, Complete Care 11/17/10 ndard	6/10 1506 6/10 1506 I re on 11/17/10 1956 0 1956 Autho	orized by: Hooks, Sarah Eliz s: Normal	-
Hooks, Sa Hooks, Sa ID PANEL [23976 ectronically signed dering user: Progr dering mode: Star equency: Routine lantity: 1 Provider Details	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 68277] (Completed) by: Program, Complete Ca ram, Complete Care 11/17/10 ndard	6/10 1506 6/10 1506 I re on 11/17/10 1956 0 1956 Autho Class	s: Normal	
Hooks, Sa Hooks, Sa ID PANEL [23976 ectronically signed	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 58277] (Completed) by: Program, Complete Ca ram, Complete Care 11/17/10 ndard 11/17/10 -	6/10 1506 6/10 1506 I re on 11/17/10 1956 0 1956 Autho Class NPI	s: Normal	
Hooks, Sa Hooks, Sa ID PANEL [23976 ectronically signed dering user: Progr dering mode: Star equency: Routine Jantity: 1 Provider Details Provider	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 88277] (Completed) by: Program, Complete Car am, Complete Care 11/17/10 ndard 11/17/10 -	6/10 1506 6/10 1506 I re on 11/17/10 1956 0 1956 Autho Class NPI	s: Normal	Status: Comple :abeth (M.D.)
Hooks, Sa Hooks, Sa Hooks, Sa Hooks, Sa Hooks, Sa Hooks, Sarah El	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 88277] (Completed) by: Program, Complete Car am, Complete Care 11/17/10 ndard 11/17/10 -	6/10 1506 6/10 1506 I re on 11/17/10 1956 0 1956 Autho Class NPI	s: Normal	rabeth (M.D.)
Hooks, Sa Hooks, Sa Hooks, Sa D PANEL [23976 ectronically signed dering user: Progi dering mode: Star equency: Routine iantity: 1 Provider Details Provider Hooks, Sarah El Specimen Inform ID	rah Elizabeth (M.D.) on 12/1 rah Elizabeth (M.D.) on 12/1 88277] (Completed) I by: Program, Complete Ca ram, Complete Care 11/17/10 ndard 11/17/10 -	6/10 1506 6/10 1506 ore on 11/17/10 1956 of 1956 Author Class NPI 149 Source	s: Normal 7814131 Collected —	rabeth (M.D.)

11/17/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

Component	Value	Reference Range	Flag	Lab
CHOLESTEROL	141	<200 mg/dL	—	956
TRIGLYCERIDE	126	<150 mg/dL	—	956
HDL	37	>/=40 mg/dL	L¥	956
LDL CALCULATED	79	<100 mg/dL	—	956
CHOLESTEROL/HIGH DENSITY	3.8	<5.0	—	956
LIPOPROTEIN				
Comment:				
	0 (s)		CHOL TRIG
HDL-C LDL-C	01 1111	L: <200 <150 >/=		•••••
100-129 BORDERLN HI: 200-239 150-199				-
>/=500 >/=190	All n	nembers with cardiova	ascular disease, dia	abetes mellitus, or chronic
kidney disease may benefit from LDL-C leve				
"statin"/lipid-lowering medications.				

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1508
Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506
Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506

Recipients

Hooks, Sarah	n Elizabeth (M.D.), M.D.			
Respons ible?	Delivery Method	Outcome	Message ID	
Provider	Result sent ID: 29062 (provider defined outed to linked user A542989			

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Darryl Erik Palmer- Toy, MD, PhD	11668 Sherman Way NORTH HOLLYWOOD CA 91605	09/01/10 1119 - 06/01/17 0325
LIPID PANEL [239828063]	1		Resulted: 12/15	/10 1005, Result status: In process
Order status: Completed		Filed	on: 12/15/10 1006	

Order status: Completed Collected by: PNN 12/15/10 0940

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1508 Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506 Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506

ALT, SERUM [239768278] (Completed)

Electronically signed by: Program, Complete Care on 11/17/10 19	956	Status: Completed
Ordering user: Program, Complete Care 11/17/10 1956	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard		
Frequency: Routine 11/17/10 -	Class: Normal	
Quantity: 1		
Provider Details		
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	1497814131	

11/17/2010 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

	tion				
D	Туре	Source		Collected	Ву
_	_	BLOOD		_	
LT, SERUM [2398	828064] (Abnormal)		Res	ulted: 12/15	/10 1936, Result status: Final resu
Order status: Com			iled on: 12/15/10 1		
Collected by: PNN	12/15/10 0940	F	Resulting lab: SHEI	RMAN WAY	REGIONAL LABORATORY
Components					
Component		Value F	Reference Range	Flag	Lab
ALT		44 <	:41 units/L	Н^	956
Comment:	ed activity may vary by differe	nt mothed. This recul	twoo mocoured u	ning the Dec	he method
The measure	eu activity may vary by unere		t was measured us		ine metrod.
Reviewed by					
	ah Elizabeth (M.D.) on 12/16/1				
	ah Elizabeth (M.D.) on 12/16/1 ah Elizabeth (M.D.) on 12/16/1				
HOOKS, Sara	an Elizabeth (M.D.) on 12/16/1	10 1506			
ecipients					
Hooks, Sarah I	Elizabeth (M.D.), M.D.				
Respons					
		Outeeme		Ma	
ible?	Delivery Method	Outcome		INIE	ssage ID
In Basket	Result sent	66563332			ssage ID
In Basket I Provider II	Result sent D: 29062 (provider defined by	66563332 Results Routing)			ssage iD
In Basket I Provider II	Result sent	66563332 Results Routing)		We:	ssage ID
In Basket I Provider II	Result sent D: 29062 (provider defined by	66563332 Results Routing)		Me:	ssage in
In Basket I Provider II Result rou	Result sent D: 29062 (provider defined by Ited to linked user A542989 us	66563332 Results Routing)		We	ssage id
In Basket I Provider II Result rou esting Performed	Result sent D: 29062 (provider defined by Ited to linked user A542989 us	66563332 Results Routing) sing In Basket	Address	Me	
In Basket I Provider II Result rou esting Performed Lab - Abbrevia	Result sent D: 29062 (provider defined by Ited to linked user A542989 us d By tion Name	66563332 Results Routing) sing In Basket Director	Address er- 11668 Shern		Valid Date Range
In Basket I Provider II Result rou esting Performed	Result sent D: 29062 (provider defined by Ited to linked user A542989 us	66563332 Results Routing) sing In Basket		nan Way	
In Basket I Provider II Result rou esting Performed Lab - Abbrevia	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY	66563332 Results Routing) sing In Basket Director Darryl Erik Palme	er- 11668 Shern	nan Way	Valid Date Range
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY	66563332 Results Routing) sing In Basket Director Darryl Erik Palme	er- 11668 Shern NORTH HOL CA 91605	nan Way LYWOOD	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956	Result sent D: 29062 (provider defined by tted to linked user A542989 us tion Name SHERMAN WAY REGIONAL LABORATORY 828064]	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2396 Drder status: Com	Result sent D: 29062 (provider defined by tted to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064]	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956	Result sent D: 29062 (provider defined by tted to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064]	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2396 Drder status: Com Collected by: PNN	Result sent D: 29062 (provider defined by tted to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064]	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2398 Order status: Com Collected by: PNN Reviewed by	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064] pleted 12/15/10 0940	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2398 Order status: Com Collected by: PNN Reviewed by Hooks, Sara	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064] pleted 12/15/10 0940	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2398 Order status: Com Collected by: PNN Reviewed by Hooks, Sara Hooks, Sara	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064] pleted 12/15/10 0940 ah Elizabeth (M.D.) on 12/16/1	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2398 Order status: Com Collected by: PNN Reviewed by Hooks, Sara Hooks, Sara	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064] pleted 12/15/10 0940	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2398 Order status: Com Collected by: PNN Reviewed by Hooks, Sara Hooks, Sara	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064] pleted 12/15/10 0940 ah Elizabeth (M.D.) on 12/16/1	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325
In Basket I Provider II Result rou esting Performed Lab - Abbrevia 240 - 956 LT, SERUM [2398 Order status: Com Collected by: PNN Reviewed by Hooks, Sara Hooks, Sara	Result sent D: 29062 (provider defined by ited to linked user A542989 us d By tion Name SHERMAN WAY REGIONAL LABORATORY 828064] pleted 12/15/10 0940 ah Elizabeth (M.D.) on 12/16/1	66563332 Results Routing) sing In Basket Director Darryl Erik Palme Toy, MD, PhD	er- 11668 Shern NORTH HOL CA 91605 Res	nan Way LLYWOOD sulted: 12/15	Valid Date Range 09/01/10 1119 - 06/01/17 0325

END OF ENCOUNTER

11/17/2010 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Printed on 1/12/24 5:33 PM

Visit Information (continued)

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-5822	323-783-7887

Visit Account Information

	Hospital Account				
	Name	Acct ID	Class	Status	Primary Coverage
-	Hawkins, Lawson B	2161278394 2	Charge Router-Auto HAR	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21612783942)

	Relation			
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-	3432(H)		
LOS ANGELES, CA 90016-2618	323-297-	3432 x00000(O)		

Coverage Information (for Hospital Account #21612783942)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEEL	DS PLAN SCR KPSA SPECIAL NEEDS PLAN SCR	
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Labs

MOGLOBIN A1C [23982	28062] (Final result)				
lectronically signed by: P	rogram, Complete Care	on 11/17/10 1956			Status: Completed
nis order may be acted or					
	omplete Care 11/17/10 1	956	Authorized by: Hooks, S	arah Elizabeth (M.D.)	
dering mode: Standard equency: Routine 11/17	/10 -	(Class: Normal		
uantity: 1	10		ab status: Final result		
	ram, Complete Care (aut	to-released) 11/18/2	2010 1:33 AM		
Provider Details					
Provider			NPI		
Hooks, Sarah Elizabeth	ח (M.D.)		1497814131		
Specimen Information					
ID Ty		Source	Co	llected By	
464173329 —	•	BLOOD		IN 12/15/10 0940	
HEMOGLOBIN A1C [2:	308280621		Resulte	d. 12/15/10 1813 Res	sult status: Final result
Order status: Complete Collected by: PNN 12/1			Filed on: 12/15/10 1813 Resulting lab: SHERM		
	10/10/0040		Tresulting lab. Of LININ		
Components					
Component		Value	Reference Range FI	ag Lab	
HGBA1C%		5.8	4.8 - 5.9 % —	956	
Comment:					
Recipients					
Hooks, Sarah Eliza	beth (M.D.), M.D.				
Respons					
	very Method	Outcome		Message ID	
	062 (provider defined by o linked user A542989 us				
Lab - Abbreviation	Name	Director	Address	Valid Date	Range
240 - 956	SHERMAN WAY	Darryl Erik Palr	ner- 11668 Sherman		19 - 06/01/17 0325
	REGIONAL	Toy, MD, PhD	NORTH HOLLY		
	LABORATORY		CA 91605		
HEMOGLOBIN A1C [2:	398280621		Resulte	ed: 12/15/10 1005, Re	sult status: In process
			Filed on: 12/15/10 1006		
Order status: Complete Collected by: PNN 12/1			Flied off. 12/15/10 1006	5	
Reviewed by					
	izabeth (M.D.) on 12/16/1 izabeth (M.D.) on 12/16/1				
1					

Labs (continued)

Hooks, Sarah Elizabeth (M.D.) on 12/16/10 1506

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 12/16/2010 15:08 Hooks, Sarah Elizabeth (M.D.) on 12/16/2010 15:06 Hooks, Sarah Elizabeth (M.D.) on 12/16/2010 15:06

LIPID PANEL [239828063] (Final result)

	by: Program, Complete Ca		6		Status: Comple
	ted on in another encounter				
	am, Complete Care 11/17/10	0 1956	Authorized by: Hooks	s, Sarah Elizabet	h (M.D.)
ering mode: Stan					
quency: Routine	11/17/10 -		Class: Normal		
intity: 1			Lab status: Final resu	ult	
ance released by	: Program, Complete Care (auto-released) 11/1	8/2010 1:33 AM		
rovider Details					
Provider			NPI		
Hooks, Sarah Eliz	zabeth (M.D.)		1497814131		
pecimen Inform	ation				
ID	Туре	Source		Collected By	
464173329	—	BLOOD		PNN 12/15/10 0	940
IPID PANEL [23	9828063] (Abnormal)		Res	ulted: 12/15/10 1	936, Result status: Final re
Order status: Cor	mpleted		Filed on: 12/15/10 1	936	
Collected by: PN					GIONAL LABORATORY
Narrative:					
Components Component		Value	Reference Range	Flag	Lab
			Reference Range	Tiag	
	201		<200 mg/dl		956
CHOLESTER		141	<200 mg/dL	_	956
CHOLESTER		141 126	<150 mg/dL		956
CHOLESTER TRIGLYCERI HDL	DE	141 126 37	<150 mg/dL >/=40 mg/dL		956 956
CHOLESTER TRIGLYCERI HDL LDL CALCUL	DE ATED	141 126 37 79	<150 mg/dL >/=40 mg/dL <100 mg/dL		956 956 956
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI	DE ATED OL/HIGH DENSITY	141 126 37	<150 mg/dL >/=40 mg/dL		956 956
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER	DE ATED OL/HIGH DENSITY	141 126 37 79 3.8	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0	 L∀ 	956 956 956 956 956
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment:	DE ATED OL/HIGH DENSITY N	141 126 37 79 3.8 Fasting (>/= 12 h	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs)	_ L∀ 	956 956 956 956 CHOL TRIG
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE	DE ATED COL/HIGH DENSITY N DL-C	141 126 37 79 3.8 Fasting (>/= 12 h	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs)	 40 <100 NEA	956 956 956 956 CHOL TRIG R OPTIML:
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150-	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs)		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH:
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chroni
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500 kidney disea	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190 ase may benefit from LDL-C	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chronic
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500 kidney disea	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chronic
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500 kidney disea	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190 ase may benefit from LDL-C	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chroni
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500 kidney disea	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190 ase may benefit from LDL-C	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chroni
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500 kidney disea "statin"/lipid	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190 ase may benefit from LDL-C I-lowering medications.	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159 All : levels below 100 m	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chroni
CHOLESTER TRIGLYCERI HDL LDL CALCUL CHOLESTER LIPOPROTEI Comment: HDL-C LE 100-129 BC >/=500 kidney disea "statin"/lipid	DE ATED COL/HIGH DENSITY N DL-C DRDERLN HI: 200-239 150- >/=190 ase may benefit from LDL-C	141 126 37 79 3.8 Fasting (>/= 12 h OPTIM/ -199 130-159 All E levels below 100 m	<150 mg/dL >/=40 mg/dL <100 mg/dL <5.0 rs) AL: <200 <150 >/= HIGH: >/=240 200 members with cardiova		956 956 956 956 CHOL TRIG R OPTIML: 89 VERY HIGH: diabetes mellitus, or chroni

Recipients

Hooks, Sarah Elizabeth (M.D.), M.D.

Respons ible?	Delivery Method	Outcome	Message ID
In Basket	Result sent	66563332	

Labs (continued)

Provider ID: 29062 (provider defined by Results Routing) Result routed to linked user A542989 using In Basket

	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Darryl Erik Palmer Toy, MD, PhD	 11668 Sherm NORTH HOL CA 91605 		09/01/10 1119 - 06/01/17 0325
IPID PANEL [23982806	3]		Res	ulted: 12/1	5/10 1005, Result status: In proce
Order status: Completed		Fil	ed on: 12/15/10 1	006	
Collected by: PNN 12/15	5/10 0940				
Reviewed by					
Hooks, Sarah Eliz	abeth (M.D.) on 12/16/1 abeth (M.D.) on 12/16/1 abeth (M.D.) on 12/16/1	0 1506			
All Reviewers List					
Hooks, Sarah Elizabe	th (M.D.) on 12/16/2010 th (M.D.) on 12/16/2010 th (M.D.) on 12/16/2010	15:06			
, SERUM [239828064] (I		on 11/17/10 1956			Status: Complete
s order may be acted on	in another encounter.		horized by: Hooks	Carab Eli	
ering user: Program, Co		900 Auli			
			Tonzea by. Hooke	, Salali Eli	
ering mode: Standard quency: Routine 11/17/1			ss: Normal	, Salah Eli	Zabeth (M.D.)
ering mode: Standard quency: Routine 11/17/1 antity: 1	0 -	Cla: Lab	ss: Normal status: Final resu		
ering mode: Standard quency: Routine 11/17/1	0 -	Cla: Lab	ss: Normal status: Final resu		
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra	0 -	Cla: Lab	ss: Normal status: Final resu 0 1:33 AM		
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details	10 - am, Complete Care (aut	Cla: Lab o-released) 11/18/201	ss: Normal status: Final resu 0 1:33 AM		
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider	10 - am, Complete Care (aut	Cla: Lab o-released) 11/18/201	ss: Normal status: Final resu 0 1:33 AM PI		
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ	I0 - am, Complete Care (aut (M.D.)	Cla: Lab o-released) 11/18/201 NF 14 Source	ss: Normal status: Final resu 0 1:33 AM PI	lt Collected	Ву
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth Specimen Information	I0 - am, Complete Care (aut (M.D.)	Cla: Lab o-released) 11/18/201 <u>NF</u> 14	ss: Normal status: Final resu 0 1:33 AM PI	lt	Ву
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ	I0 - am, Complete Care (aut (M.D.) e	Cla: Lab o-released) 11/18/201 NF 14 Source	ss: Normal status: Final resu 0 1:33 AM PI 97814131	lt Collected PNN 12/1	Ву
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ 464173329 —	I0 - am, Complete Care (aut (M.D.) e 4] (Abnormal)	Clas Lab o-released) 11/18/201 NF 14 Source BLOOD Fil	ss: Normal status: Final resu 0 1:33 AM PI 97814131 Resu Resu	It Collected PNN 12/1 Ilted: 12/15 936	By 5/10 0940
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ 464173329 — ALT, SERUM [23982806 Order status: Completed Collected by: PNN 12/15	I0 - am, Complete Care (aut (M.D.) e 4] (Abnormal)	Clas Lab o-released) 11/18/201 MF 14 Source BLOOD Fil Re	ss: Normal status: Final resu 0 1:33 AM 97814131 97814131 Resu ed on: 12/15/10 1 esulting lab: SHEF	It Collected PNN 12/1 Ilted: 12/15 936	By 5/10 0940 5/10 1936, Result status: Final resu
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ 464173329 — ALT, SERUM [23982806 Order status: Completed Collected by: PNN 12/15 Components Components	I0 - am, Complete Care (aut (M.D.) e 4] (Abnormal)	Clas Lab o-released) 11/18/201 NF 14 Source BLOOD Fil Re Value Re	ss: Normal status: Final resu 0 1:33 AM 97 97814131 Resu ed on: 12/15/10 1 esulting lab: SHEF eference Range	It Collected PNN 12/18 Ilted: 12/18 936 RMAN WAY Flag	By 5/10 0940 5/10 1936, Result status: Final result Y REGIONAL LABORATORY Lab
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ 464173329 — ALT, SERUM [23982806 Order status: Completed Collected by: PNN 12/15 Components Component ALT Comment:	I0 - am, Complete Care (aut (M.D.) e 4] (Abnormal)	Clas Lab o-released) 11/18/201 MF 14 Source BLOOD Fil Re Value Re 44 <4	ss: Normal status: Final resu 0 1:33 AM 9 97814131 Resu ed on: 12/15/10 1 esulting lab: SHEF eference Range 1 units/L	It Collected PNN 12/18 Ilted: 12/18 936 RMAN WAY Flag H ^	By 5/10 0940 5/10 1936, Result status: Final result Y REGIONAL LABORATORY Lab 956
ering mode: Standard quency: Routine 11/17/1 antity: 1 ance released by: Progra Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ 464173329 — ALT, SERUM [23982806 Order status: Completed Collected by: PNN 12/15 Components Component ALT Comment:	I0 - am, Complete Care (aut (M.D.) e 4] (Abnormal) 5/10 0940	Clas Lab o-released) 11/18/201 MF 14 Source BLOOD Fil Re Value Re 44 <4	ss: Normal status: Final resu 0 1:33 AM 9 97814131 Resu ed on: 12/15/10 1 esulting lab: SHEF eference Range 1 units/L	It Collected PNN 12/18 Ilted: 12/18 936 RMAN WAY Flag H ^	By 5/10 0940 5/10 1936, Result status: Final result Y REGIONAL LABORATORY Lab 956

Labs (continued)

Recipients

Respons			_		
ible?	Delivery M		Outcome	Mes	ssage ID
Provider		provider defined by ad user A542989 us			
sting Perform	-				
Lab - Abbrev 240 - 956	S	lame HERMAN WAY EGIONAL ABORATORY	Director Darryl Erik Palmer- Toy, MD, PhD	Address 11668 Sherman Way NORTH HOLLYWOOD CA 91605	Valid Date Range 09/01/10 1119 - 06/01/17 0325
_T, SERUM [23	9828064]			Resulted: 12/15	/10 1005, Result status: In proce
Order status: Co Collected by: PN)940	Filed	on: 12/15/10 1006	
Reviewed by		(14 D) 40/40/4	0 1508		
Hooks, Sa Hooks, Sa	rah Elizabeth rah Elizabeth	י (M.D.) on 12/16/1 (M.D.) on 12/16/1 (M.D.) on 12/16/1 (M.D.) on 12/16/1	0 1506		
Hooks, Sa Hooks, Sa	rah Elizabeth rah Elizabeth rah Elizabeth	n (M.D.) on 12/16/1	0 1506		

END OF ENCOUNTER

12/20/2010 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks,	Sarah	Elizabeth	(M.D.)	
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Authorizing Provider Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273

Follow-up and Dispositions

• Return if symptoms worsen or fail to improve.

Level of Service

Level of Service

Visit Information (continued)

OUTPT EST LEVEL 3

Reason for Visit

Chief Complaint

• FOOT PAIN (right)

Visit Diagnoses

- PROPHYLACTIC VACCINE FOR INFLUENZA (primary) [V04.81]
- DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70]
- FOOT PAIN [729.5]

Vitals

Vital Signs				Most recent update: 12/20/2010 2:38 PM
BP 118/70	Pulse 75	Temp 96.7 °F (35.9 °C) (Tympanic)	Ht 5' 7" (1.702 m)	Wt 223 lb (101.2 kg)
BMI				

34.93 kg/m²

Clinical Notes

Nursing Note		
at 12/20/2010 1430		
Author: — Filed: Status: Signed	Service: — Encounter Date: 12/20/2010	Author Type: — Creation Time: 12/20/2010 2:30 PM
>> KAREN M MARTINEZ LVN AFTER VISIT SUMMARY dis understanding of topic o	cussed and given to pati	
Podiatry appointment sch	neduled	
(deltoid)per Dr's orders	, patient is not allergic	istered to patient's left arm to eggs or any egg products, the vaccine given to patient,
>> KAREN M MARTINEZ LVN PROACTIVE CARE ACTIONS	Mon Dec 20, 2010 2:41	РМ
Proactive Office Encount LABS, IMMUNIZATIONS, Flu immunization order s	PROCEDURES, MEDICATIONS, O	THER

KAREN M MARTINEZ LVN

Procedures

Filed on 12/20/2010 0000

Procedure Orders

Printed on 1/12/24 5:33 PM

KAISER PERMANENTE

12/20/2010 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Clinical Notes (continued)

1. XR FOOT, RIGHT COMPLETE 3 OR MORE VIEWS [245405336] ordered by Hooks, Sarah Elizabeth (M.D.) at 12/20/10 1455

RIGHT ANKLE - 3 VIEWS - 12/20/10 Note: This study is submitted for signature to this dictator on Dec 27, 2010.

There are no prior films for comparison.

IMPRESSION:

There is marked deformity of the hind foot also including the ankle mortise with a pattern worrisome for Charcot joint formation. There appears to be an old healed fracture of the calcaneus. No definite acute bony pathology is currently seen but comparison previously submitted would be of value.

RIGHT FOOT - 3 VIEWS - 12/20/10

IMPRESSION: Charcot joint deformity with evidence of previous calcaneal fracture has been previously described.

There are degenerative changes of the first metatarsophalangeal joint and the first interphalangeal joint. No acute bony pathology but there is apparent deformity of digits 2 through 4 on this non-weight bearing view.

Electronically signed by Almanza, Monica Yolanda (M.D.) at 12/27/2010 8:27 AM

Filed on 12/20/2010 0000

Procedure Orders 1. XR ANKLE, RIGHT 3 OR MORE VIEWS [245405338] ordered by Hooks, Sarah Elizabeth (M.D.) at 12/20/10 1455

RIGHT ANKLE - 3 VIEWS - 12/20/10 Note: This study is submitted for signature to this dictator on Dec 27, 2010.

There are no prior films for comparison.

IMPRESSION:

There is marked deformity of the hind foot also including the ankle mortise with a pattern worrisome for Charcot joint formation. There appears to be an old healed fracture of the calcaneus. No definite acute bony pathology is currently seen but comparison previously submitted would be of value.

RIGHT FOOT - 3 VIEWS - 12/20/10

IMPRESSION:

Charcot joint deformity with evidence of previous calcaneal fracture has been previously described.

There are degenerative changes of the first metatarsophalangeal joint and the first interphalangeal joint. No acute bony pathology but there is apparent deformity of digits 2 through 4 on this non-weight bearing view.

Clinical Notes (continued)

Electronically signed by Almanza, Monica Yolanda (M.D.) at 12/27/2010 8:27 AM

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 12/20/2010 1500

Author: Hooks, Sarah Elizabeth (M.D.)	Service: —	Author Type: Physician
Filed: 12/20/2010 3:00 PM	Encounter Date: 12/20/2010	Creation Time: 12/20/2010 3:00 PM
Status: Signed	Editor: Hooks, Sarah Elizabeth (M.D	D.) (Physician)

History:

R foot pain, swelling a few days ago but better now, was not warm nor red, deformity since jumping injury yrs ago, ibuprofen helps

History Reviewed:

I have reviewed the Medical/Surgical and history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Constitutional: Negative for fever. Gastrointestinal: Negative for heartburn. Neurological: Negative for sensory change.

<u>Physical Exam</u> Constitutional: He is well-developed, well-nourished, and in no distress. Pulmonary/Chest: Effort normal. Musculoskeletal:

R medial ankle deformity but not warm/red, no significant edema

Neurological: He is alert. Skin: Skin is warm and dry. Psychiatric: Affect normal. Vitals reviewed.

A/P:

Ankle/foot deformity with pain now - xrays, Pod

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] - stable GERD [530.81A] - resolved, not needing PPI DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537]

RHM - flu shot today

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 12/20/2010 3:00 PM

Clinical Notes (continued)

Imaging

R FOOT, RIGHT COMPLETE 3 OR MORE VIEWS [2454	105336] (Final result)	
Electronically signed by: Hooks, Sarah Elizabeth (M.D.)	on 12/20/10 1455	Status: Complete
This order may be acted on in another encounter. Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/20/10 14 Ordering mode: Standard	Authorized by: Hooks, Sarah	n Elizabeth (M.D.)
Frequency: Routine 12/20/10 - Quantity: 1	Class: Normal Lab status: Final result	
Diagnoses DEFORMITY OF ANKLE OR FOOT, ACQUIRED. [736.70 FOOT PAIN. [729.5 (ICD-9-CM)]) (ICD-9-CM)]	
Provider Details		
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	1497814131	
Order comments: Reason: deformity since jumping injury y XR FOOT, RIGHT COMPLETE 3 OR MORE VIEWS [2	245405336] Resulted: 12/2	20/10 1529, Result status: Final resu
Order status: Completed Accession number: 40429506	Filed on: 12/27/10 0827 Resulting lab: SCAL RADIO	DLOGY INTERFACE
Transcription		
Туре ID	Date and Time	Dictating Provider
Diagnostic imaging 40429506 Signed by Almanza, Monica Yolanda (M.D.), MED RIGHT ANKLE - 3 VIEWS - 12/20/10	12/23/2010 6:48 AM DICAL DOCTOR on 12/27/10 at 0827	Almanza, Monica Yolanda (M.D.)
Signed by Almanza, Monica Yolanda (M.D.), MED	12/23/2010 6:48 AM DICAL DOCTOR on 12/27/10 at 0827 ctator on Dec uding the ankle prmation. There us. No definite	Almanza, Monica Yolanda
Signed by Almanza, Monica Yolanda (M.D.), MEE RIGHT ANKLE - 3 VIEWS - 12/20/10 Note: This study is submitted for signature to this die 27, 2010. There are no prior films for comparison. IMPRESSION: There is marked deformity of the hind foot also inclu mortise with a pattern worrisome for Charcot joint fo appears to be an old healed fracture of the calcanet acute bony pathology is currently seen but comparis submitted would be of value.	12/23/2010 6:48 AM DICAL DOCTOR on 12/27/10 at 0827 ctator on Dec uding the ankle ormation. There us. No definite son previously	Almanza, Monica Yolanda

Reviewed by

Imaging (continued)

Hooks, Sarah Elizabeth (M.D.) on 12/29/10 1101 Hooks, Sarah Elizabeth (M.D.) on 12/27/10 1742

Recipients

Respon sible?	Delivery Method	Outcome	Message ID
In	Result sent	67144359	
Basket			
	r ID: 29062 (provider defined outed to linked user A54298		

Testing Performed By

/13/04 0000 - Present
530, Result status: In process
INTERFACE

Transcription

Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	40429506	12/23/2010 6:48 AM	Almanza, Monica Yolanda (M.D.)

Signed by Almanza, Monica Yolanda (M.D.), MEDICAL DOCTOR on 12/27/10 at 0827

RIGHT ANKLE - 3 VIEWS - 12/20/10 Note: This study is submitted for signature to this dictator on Dec 27, 2010.

There are no prior films for comparison.

IMPRESSION:

There is marked deformity of the hind foot also including the ankle mortise with a pattern worrisome for Charcot joint formation. There appears to be an old healed fracture of the calcaneus. No definite acute bony pathology is currently seen but comparison previously submitted would be of value.

RIGHT FOOT - 3 VIEWS - 12/20/10

IMPRESSION:

Charcot joint deformity with evidence of previous calcaneal fracture has been previously described.

There are degenerative changes of the first metatarsophalangeal joint and the first interphalangeal joint. No acute bony pathology but there is apparent deformity of digits 2 through 4 on this non-weight bearing view.

Imaging (continued)

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/29/10 1101 Hooks, Sarah Elizabeth (M.D.) on 12/27/10 1742

Testing Performed By

400 001	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present
Indications				
Deformity Of Ankle Or Foot Pain [729.5 (ICD	Foot, Acquired [736.70 -9-CM)]	(ICD-9-CM)]		
All Reviewers List				
	th (M.D.) on 12/29/2010 th (M.D.) on 12/27/2010			
ANKLE, RIGHT 3 OR MO	DRE VIEWS [24540533	8] (Final resu	t)	
lectronically signed by: Ho his order may be acted on		M.D.) on 12/20	/10 1455	Status: Completed
dering user: Hooks, Sarah dering mode: Standard		/10 1455	Authorized by: Hooks, Sarah	Elizabeth (M.D.)
equency: Routine 12/20/1	0 -		Class: Normal	
uantity: 1 agnoses			Lab status: Final result	
EFORMITY OF ANKLE OF	R FOOT, ACQUIRED, [7	736.70 (ICD-9-	CM)]	
Provider Details		00110 (102 0		
Provider			NPI	
Hooks, Sarah Elizabeth	(M.D.)		1497814131	
0				
Questionnaire			Anower	
Question Special View?			Answer NONE	
			NONE	
rder comments: Reason: d			now with pain	
	MORE VIEWS [24540	5338]	Resulted: 12/2	0/10 1529, Result status: Final resu
XR ANKLE, RIGHT 3 OR				
Order status: Completed			Filed on: 12/27/10 0827	
Order status: Completed Accession number: 4042			Filed on: 12/27/10 0827 Resulting lab: SCAL RADIC	
Order status: Completed Accession number: 4042 Narrative:				
Order status: Completed Accession number: 4042				
Order status: Completed Accession number: 4042 Narrative:				
Order status: Completed Accession number: 4042 Narrative: Special View?->NONE				
Order status: Completed Accession number: 4042 Narrative: Special View?->NONE Transcription	29508		Resulting lab: SCAL RADIC	DLOGY INTERFACE Dictating Provider Almanza, Monica Yolanda
Order status: Completed Accession number: 4042 Narrative: Special View?->NONE Transcription Type Diagnostic imaging	129508 10 40429508), MEDICAL D	Resulting lab: SCAL RADIC	DLOGY INTERFACE Dictating Provider
Order status: Completed Accession number: 4042 Narrative: Special View?->NONE Transcription Type Diagnostic imaging Signed by Almanza, RIGHT ANKLE - 3 VIE	129508 1D 40429508 , Monica Yolanda (M.D.)		Resulting lab: SCAL RADIC Date and Time 12/23/2010 6:48 AM OCTOR on 12/27/10 at 0827	DLOGY INTERFACE Dictating Provider Almanza, Monica Yolanda

IMPRESSION:

Imaging (continued)

There is marked deformity of the hind foot also including the ankle mortise with a pattern worrisome for Charcot joint formation. There appears to be an old healed fracture of the calcaneus. No definite acute bony pathology is currently seen but comparison previously submitted would be of value.

RIGHT FOOT - 3 VIEWS - 12/20/10

IMPRESSION:

Charcot joint deformity with evidence of previous calcaneal fracture has been previously described.

There are degenerative changes of the first metatarsophalangeal joint and the first interphalangeal joint. No acute bony pathology but there is apparent deformity of digits 2 through 4 on this non-weight bearing view.

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/29/10 1101 Hooks, Sarah Elizabeth (M.D.) on 12/29/10 1101 Hooks, Sarah Elizabeth (M.D.) on 12/27/10 1747

Recipients

Respon sible?	Delivery Method	Outcome		Message ID
In Basket Provider	Result sent ID: 29062 (provider defined uted to linked user A54298	67144360 by Results Routing)		
Lab - Abbrevi	-	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOG	GY Unknown	Unknown	02/13/04 0000 - Present
R ANKLE, RIGH	T 3 OR MORE VIEWS [24	5405338]	Resulted: 12	2/20/10 1530, Result status: In proc
Order status: Cor Accession numbe Narrative: Special View?->N	er: 40429508		Filed on: 12/20/10 1530 Resulting lab: SCAL RAD	IOLOGY INTERFACE
Franscription				
Туре	ID		Date and Time	Dictating Provider
	ging 40429508	1	12/23/2010 6:48 AM	Almanza, Monica Yolanda

RIGHT ANKLE - 3 VIEWS - 12/20/10

Note: This study is submitted for signature to this dictator on Dec 27, 2010.

Imaging (continued)

There are no prior films for comparison.

IMPRESSION:

There is marked deformity of the hind foot also including the ankle mortise with a pattern worrisome for Charcot joint formation. There appears to be an old healed fracture of the calcaneus. No definite acute bony pathology is currently seen but comparison previously submitted would be of value.

RIGHT FOOT - 3 VIEWS - 12/20/10

IMPRESSION:

Charcot joint deformity with evidence of previous calcaneal fracture has been previously described.

There are degenerative changes of the first metatarsophalangeal joint and the first interphalangeal joint. No acute bony pathology but there is apparent deformity of digits 2 through 4 on this non-weight bearing view.

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/29/10 1101 Hooks, Sarah Elizabeth (M.D.) on 12/29/10 1101 Hooks, Sarah Elizabeth (M.D.) on 12/27/10 1747

Testing Performed By

	N	Discotor	A .1	Valid Data Danwa
Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present
Indications				
Deformity Of Ankle Or	Foot, Acquired [736.70	(ICD-9-CM)]		
All Reviewers List				
Hooks, Sarah Elizabet	h (M.D.) on 12/29/2010	11:01		
	h (M.D.) on 12/29/2010			
Hooks, Sarah Elizabet	h (M.D.) on 12/27/2010	17:47		
ders				
inization/Injection				
ACCINELLIENZA INES 3		IM [245400880]	(Completed)	

VACC INFLUENZA INFS, 3 FR TO ADULT, 0.5 ML IM [245400800] (Completed)			
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/2	0/10 1455 Status: Completed		
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/20/10 1455	Authorized by: Hooks, Sarah Elizabeth (M.D.)		
Ordering mode: Standard			
Frequency: Routine 12/20/10 -	Class: Back Office		
Quantity: 1	Released by: Martinez, Karen M (L.V.N.) 12/20/10 1455		
Diagnoses			
VACCINATION FOR INFLUENZA [V04.81 (ICD-9-CM)]			
Provider Details			
Provider	NPI		
Hooks, Sarah Elizabeth (M.D.)	1497814131		

Other Or

Other Orders (continued)

Order comments: Dose 0.5mL Route Intramuscular (IM)

Indications

PROPHYLACTIC VACCINE FOR INFLUENZA [V04.81 (ICD-9-CM)]

VACC ADMIN, FIRST IM OR SUBQ VACCINE TOXOID [245400881] (Active)

· · · · · · · · · · · · · · · · · · ·		
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/20/10 1455		
Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/20/10 1455	Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard		
Frequency: Routine 12/20/10 -	Class: Back Office	
Quantity: 1	Released by: Martinez, Karen M (L.V.N.) 12/20/1	0 1455
Diagnoses		
VACCINATION FOR INFLUENZA [V04.81 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Hooks, Sarah Elizabeth (M.D.)	1497814131	

Indications

PROPHYLACTIC VACCINE FOR INFLUENZA [V04.81 (ICD-9-CM)]

END OF ENCOUNTER

12/21/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY

Visit Information

Provider Information

Encounter Provider

Talag, Emelita Borja (M.D.)

Talag, Emelita Borja (M.D.)

Authorizing Provider

Department

Name	Address	Phone	
PSYCHIATRY	5105 GOLDLEAF CIRCLE	323-298-3100	
	Los Angeles CA 90056-1269		

Follow-up and Dispositions

• Return in about 3 months (around 3/21/2011).

Level of Service

Level of Service

PSYCHIATRIC PHARMACOLOGIC MANAGEMENT

Reason for Visit

Chief Complaints

- MEDICATION MANAGEMENT
- MOOD DISORDER

Visit Diagnosis

Name	Code	Chronic?
SCHIZOAFFECTIVE DISORDER (primary)	295.70	Yes

12/21/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes

Progress Notes

Talag, Emelita Borja (M.D.) at 12/21/2010 0826

Author: Talag, Emelita Borja (M.D.) Filed: 12/21/2010 8:47 AM Status: Signed **Sensitive Note** Service: — Author T Encounter Date: 12/21/2010 Creation Editor: Talag, Emelita Borja (M.D.) (Physician)

Author Type: Physician Creation Time: 12/21/2010 8:26 AM an)

<u>History</u>: 12/21/2010 Lawson B Hawkins 000017508205 5/25/1955 Type of Visit: Medication Follow up

S: Patient reported that he continues to feel stable with his mood; no paranoia reported; he said his business is better these days; denied feeling depressed nor having manic episode; he has good sleep and appetite; he is planning to go and visit his 87 y/o mother in France next year; he is pleased with the medication, no s/e noted; he has no other complaints.

Wt 224.8 lbs

Mental Status Exam:

Patient is a 55 y/o AAM who presented with normal and appropriate attire; cooperative, no speech abnormalities, mood - he said he feels fine, affect congruent, thought process revealed itself to be linear and goal directed, thought content showed no AH, VH, SI, HI, or delusional content, no gross cognitive abnormalities noted, insight good and judgment was unimpaired.

DIAGNOSIS Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) **OBESITY (278.00E)** DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan: 1. Continue Abilify 20 mg po QHS as he finds this effective; Offered a lot of support

12/21/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 3 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 12/21/2010 8:47 AM

Other Orders

ARIPiprazole (ABILIFY) 20 mg Oral Tab [24549	98043] (Discontinued)
Electronically signed by: Talag, Emelita Borja (
Ordering user: Talag, Emelita Borja (M.D.) 12/2	1/10 0842 Authorized by: Talag, Emelita Borja (M.D.)
Ordering mode: Standard	
Frequency: Routine 12/21/10 - 06/16/11	Class: Fill Now
Discontinued by: Talag, Emelita Borja (M.D.) 06	/16/11 0957 [Change in Sig]
Diagnoses	
SCHIZOAFFECTIVE DISORDER, UNSPECIFIE	D TYPE [295.70 (ICD-9-CM)]
Provider Details	
Provider Details Provider	NPI
	NPI 1356386403
Provider Talag, Emelita Borja (M.D.)	1356386403
Provider	1356386403

Patient Instructions

Continue Abilify 20 mg po QHS as he finds this effective

Follow up with other MDs for all medical concerns

RTC in 3 months for medication follow up

12/21/2010 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Patient Instructions (continued)

Electronically signed by Talag, Emelita Borja (M.D.) at 12/21/2010 8:44 AM

END OF ENCOUNTER

12/22/2010 - Office Visit in PODIATRY MODULE A

Visit Information

Provid	er In	forma	ation

Encounter Provider

Guimet, Moises Frank (Dpm)

Authorizing Provider Guimet, Moises Frank (Dpm)

Department

NameAddressPhonePODIATRY MODULE A12001 W WASHINGTON BLVD
Los Angeles CA 90066-5801323-857-4034

Level of Service

Level of Service	
OUTPT NEW LEVEL 1	

Reason for Visit

Ch	lof	Cor	nnl	aint
- 01	ner	U 01		amt

CONSULTATION

Visit Diagnoses

Name	Code	Chronic?
OSTEOARTHRITIS OF ANKLE OR FOOT (primary)	715.97	Yes
DM 2, CONTROLLED	250.00	Yes
EXAM, FOOT, DIABETIC	V77.99	No

Vitals

Vital Signs		Most recent update: 12/22/2010 9:03 AM
BP	Pulse	
125/69	75	

Clinical Notes

Nursing	Note
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at 12/22/2010 0900

Author: —	Service: —	Author Type: —
Filed:	Encounter Date: 12/22/2010	Creation Time: 12/22/2010 9:00 AM
Status: Signed		

>> MARIA E MANZO MA Wed Dec 22, 2010 9:03 AM 12/20/2010 14:57:43 Hooks, M.D.,Sarah (Internal Medicine) C - deformity in ankle since jumping injury yrs ago, now with pain, xrays pending

Progress Notes

12/22/2010 - Office Visit in PODIATRY MODULE A (continued)

Clinical Notes (continued)

Guimet, Moises Frank (Dpm) at 12/22/201	0 0933	
Author: Guimet, Moises Frank (Dpm)	Service: —	Author Type: PODIATRIST (D.P.M.)
Filed: 12/22/2010 9:53 AM	Encounter Date: 12/22/2010	Creation Time: 12/22/2010 9:33 AM
Status: Signed	Editor: Guimet, Moises Frank (Dpm)	(PODIATRIST (D.P.M.))

Nursing Notes:

>> MARIA E MANZO MA Wed Dec 22, 2010 9:03 AM 12/20/2010 14:57:43 Hooks, M.D.,Sarah (Internal Medicine) C - deformity in ankle since jumping injury yrs ago, now with pain, xrays pending

SUBJECTIVE:

Lawson B Hawkins is a 55 year old male presents to clinic for evaluation of rt ankle pain that started 2 wks ago and has since pretty much resolved per pt hx. + hx of fracturing his rt foot/ankle many yrs ago after jumping out a window. Pt at the time was suicidal. Pt states he takes ibuprofen when needed and resolves his pain. Pt states he never has had surgery.

Past Medical History SCHIZOAFFECTIVE DISORDER GERD ELEVATED TRANSAMINASE MEASUREMENT Comment Hep b/c neg, ~same on statin (mild)

12/14/2007

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] SCREENING FOR CA, COLON [V76.51A] CHOLELITHIASIS [574.20A] OBESITY [278.00E] DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70A] SKIN TAG [701.9D]

Past Surgical History PAST SURGICAL HISTORY, OTHER

back broken, metal plate

Social History Marital Status: Single/Never Spouse Name: N/A

12/22/2010 - Office Visit in PODIATRY MODULE A (continued)

Clinical Notes (continued)	Clinical	Notes	(continued)
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	Married				
Years of Education:	N/A	Number of Children:	0		
Occupational Histo None on file	ry				
Social History Mair	n Topics			o =	
Tobacco Use:		Quit		0.5 Packs/Da y	For 20.00 Years
Quit date: Alcohol Use Comment: Drug Use: Sexually Active:	Rare alco No	bhol.		,	Yes
Other Topics None on file	Conc	ern			

Social History Narrative

Lives in LA, self employed now on permanent disability, works parttime fixing PCs, writing software and teaching. Exercise-bicycle riding. Single, no children.

Current outpatient prescriptions:ARIPiprazole (ABILIFY) 20 mg Oral Tab, TAKE 1 TABLET ORALLY AT BEDTIME (SPECIAL ORDER ITEM: ALLOW 3 WORKING DAYS), Disp: 30, Rfl: 11; metFORMIN (GLUCOPHAGE) 500 mg Oral Tab, TAKE 1 TABLET ORALLY TWICE DAILY WITH MEALS, Disp: 200, Rfl: 3; Lancets (ONE TOUCH ULTRASOFT LANCETS) Misc Misc, USE AS DIRECTED, Disp: 200, Rfl: 2; Blood Sugar Test (ONE TOUCH ULTRA TEST) InVt Strips, USE AS DIRECTED, Disp: 200, Rfl: 3 Simvastatin (ZOCOR) 20 mg Oral Tab, 1 TAB PO DAILY AT BEDTIME, Disp: 90, Rfl: 3; BD LANCET DEVICE MISC MISC, USE AS DIRECTED, Disp: 200, Rfl: 0; ONE TOUCH ULTRA 2 MISC KIT, USE AS DIRECTED, Disp: 1, Rfl: 0; CLOTRIMAZOLE 1 % TOP CREA, APPLY TO AFFECTED AREA(S) BID, Disp: 30, Rfl: 2; CARMOL 20 20 % TOP CREA, apply to I 2nd and 3rd digit areas BID , Disp: 45, Rfl: 3

No Known Drug Aller*

OBJECTIVE:

Filed Vitals:		
	12/22/2010	9:03 AM
BP:	125/69	
Pulse:	75	

Estimated Body mass index is 34.93 kg/(m^2) as calculated from the following: Height as of 12/20/10: 5' 7"(1.702 m). Weight as of 12/20/10: 223 lb(101.152 kg)

GLUC	100	10	/02/2009
GLUC	976	08	/05/2009
GLUC FAST	1	09	12/15/2010
GLUC FAST	1	00	10/02/2009
Drinted on 1/12/24	E-22 DM		

KAISER PERMANENTE

12/22/2010 - Office Visit in PODIATRY MODULE A (continued)

Clinical Notes (continued)

GLUC FAST	116 12/17/2008	
HGBA1C	5.8 12/15/2010	
HGBA1C	5.6 06/14/2010	
HGBA1C	7.3 10/02/2009	
MICROALB	<3.0 06/14/2010	
MICROALBUMIN/C	REATININE <1.9 06/14/20)10

NVSI B/L, 5.07 monofilament intact B/L.

+ pes planus rt foot with medial deformity with dec ROM of STJ and ankle jt but no pain with ROM. Pt is able to single and dble heel raise without pain.

XR: + deg changes STJ with evidence of prev calcaneal fracture. + Ankle varus, NWB

ASSESSMENT: 715.97C OSTEOARTHRITIS OF ANKLE OR FOOT (primary encounter diagnosis) 250.00B DM 2, CONTROLLED V77.99C EXAM, FOOT, DIABETIC

PLAN:

Pt advised of findings, discussed tx options, given he asymptomatic at this time I recommend observation, rtc prn.

Electronically signed by Guimet, Moises Frank (Dpm) at 12/22/2010 9:53 AM

END OF ENCOUNTER

02/23/2011 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-5822	323-783-7887

Labs

GLOBIN, FECAL [256826933] (Completed)

Electronically signed by: **Program, Complete Care on 02/23/11 1910** Ordering user: Program, Complete Care 02/23/11 1910 Ordering mode: Standard Frequency: Routine 02/23/11 -

Authorized by: Hooks, Sarah Elizabeth (M.D.)

Status: Completed

Class: Normal

02/23/2011 - Orders Only in POPULATION CARE MANAGEMENT (continued) Labs (continued) Quantity: 1 **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 **Specimen Information** ID Туре Source Collected By STOOL **END OF ENCOUNTER** 02/23/2011 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT Visit Information **Provider Information Encounter Provider** Hooks, Sarah Elizabeth (M.D.) Department Address Phone Name POPULATION CARE MANAGEMENT 4950 SUNSET BLVD 323-783-7887 Los Angeles CA 90027-5822 Labs GLOBIN, FECAL [256893006] (Discontinued) Status: Discontinued Electronically signed by: Program, Complete Care on 02/23/11 1910 Ordering user: Program, Complete Care 02/23/11 1910 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Frequency: Routine 02/23/11 -Class: Normal Instance released by: Program, Complete Care (auto-released) Quantity: 1 2/24/2011 2:14 AM Discontinued by: Interface, Scal_ Lab 05/28/11 0526 [Other (Pt. did not present for lab)] **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 **Specimen Information** ID Source Collected By Туре STOOL END OF ENCOUNTER

05/18/2011 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Status: Completed

Status: Completed

Status: Completed

Status: Completed

Department			
Name		Address	Phone
POPULATION	I CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-	323-783-7887 5822
3			
	RUM [272141556] (Com	• •	
	ned by: Program, Comp rogram, Complete Care (lete Care on 05/18/11 20 05/18/11 2048	48 Authorized by: Hooks, Sarah Elizabeth
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Frequency: Routi	ine 05/18/11 -		Class: Normal
Quantity: 1	. 11 -		
Provider Deta	alis		
Provider	Elizabeth (MD)		NPI 1497814131
HOOKS, Sarar	n Elizabeth (M.D.)		1497614131
Specimen Inf	ormation		
ID	Туре	Source	Collected By
_		BLOOD	_
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Class: Normal

Frequency: Routine 05/18/11 -

05/18/2011 - Orders Only in POPULATION CARE MANAGEMENT (continued) Labs (continued) Quantity: 1 **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 **Specimen Information** ID Туре Source Collected By BLOOD **END OF ENCOUNTER** 05/18/2011 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT Visit Information **Provider Information Encounter Provider** Hooks, Sarah Elizabeth (M.D.) Department Address Phone Name POPULATION CARE MANAGEMENT 4950 SUNSET BLVD 323-783-7887 Los Angeles CA 90027-5822 Labs POTASSIUM, SERUM [272183841] (Discontinued) Status: Discontinued Electronically signed by: Program, Complete Care on 05/18/11 2048 Ordering user: Program, Complete Care 05/18/11 2048 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Frequency: Routine 05/18/11 -Class: Normal Instance released by: Program, Complete Care (auto-released) Quantity: 1 5/19/2011 12:57 AM Discontinued by: Interface, Scal_ Lab 08/20/11 0615 [Other (Pt. did not present for lab)] **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 **Specimen Information** ID Source Collected By Туре BLOOD MICROALBUMIN, URINE, QUANTITATIVE [272183842] (Discontinued) Electronically signed by: Program, Complete Care on 05/18/11 2048 Status: Discontinued Ordering user: Program, Complete Care 05/18/11 2048 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Frequency: Routine 05/18/11 -Class: Normal Quantity: 1 Instance released by: Program, Complete Care (auto-released) 5/19/2011 12:57 AM Discontinued by: Interface, Scal_ Lab 08/20/11 0615 [Other (Pt. did not present for lab)] **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131

Labs (continued)

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Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone
POPULATION CARE MANAGEMENT	4950 SUNSET BLVD	323-783-7887
	Los Angeles CA 90027-5822	

Labs

05/25/2011 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

tronically signed by	66891] (Completed)					
		11 2039	Authorized by: Hooks Class: Normal	s, Sarah Eliz		tatus: Completed
antity: 1						
Provider Details						
Provider			NPI			
Hooks, Sarah Eliza	Detn (M.D.)		1497814131			
Specimen Informat						
ID	Туре	Source STOOL		Collected I	Ву	
		OTOOL	_			
GLOBIN, FECAL [2	-				(11 0015, Result :	status: Final resu
Order status: Comp Collected by: XXX (Filed on: 06/29/11 0 Resulting lab: SHE		REGIONAL LAB	ORATORY
Components						
Component		Value	Reference Range	Flag	Lab	
GLOBIN 1, STO	JOL	NEGATIVE	NEGATIVE	—	956	
Reviewed by						
ecipients Hooks, Sarah F	lizabeth (M.D.), M.D.					
Respons		_				
ible? D In Basket R	Delivery Method	Outcome 78708811		Mes	ssage ID	
): 29062 (provider define					
	ed to linked user A54298					
Result rout	Ву		Address		Valid Date Rar	ge
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Result rout esting Performed Lab - Abbreviat	By ion Name SHERMAN WA REGIONAL LABORATORY	39 using In Basket Director Y Darryl Erik Palı Toy, MD, PhD	mer- 11668 Sherm NORTH HOL CA 91605	LYWOOD		06/01/17 0325
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05/25/2011 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)

END OF ENCOUNTER

05/25/2011 - Released Future/Standing Orders in POPULATION CARE MANAGEMENT Visit Information **Provider Information Encounter Provider** Hooks, Sarah Elizabeth (M.D.) Department Address Name Phone POPULATION CARE MANAGEMENT 4950 SUNSET BLVD 323-783-7887 Los Angeles CA 90027-5822 Labs GLOBIN, FECAL [273508189] (Final result) Electronically signed by: Program, Complete Care on 05/25/11 2039 Status: Completed Ordering user: Program, Complete Care 05/25/11 2039 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Frequency: Routine 05/25/11 -Class: Normal Lab status: Final result Quantity: 1 Instance released by: Program, Complete Care (auto-released) 5/26/2011 1:21 AM **Provider Details** Provider NPI Hooks, Sarah Elizabeth (M.D.) 1497814131 **Specimen Information** ID Source Туре Collected Bv 475577408 STOOL XXX 06/21/11 1235 GLOBIN, FECAL [273508189] Resulted: 06/29/11 0015, Result status: Final result Order status: Completed Filed on: 06/29/11 0015 Collected by: XXX 06/21/11 1235 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Components Component Value **Reference Range** Lab Flag GLOBIN 1, STOOL NEGATIVE NEGATIVE 956 **Reviewed by** Hooks, Sarah Elizabeth (M.D.) on 06/29/11 1218 Recipients Hooks, Sarah Elizabeth (M.D.), M.D. Respons **Delivery Method** Outcome Message ID ible? In Basket Result sent 78708811 Provider ID: 29062 (provider defined by Results Routing)

Result routed to linked user A542989 using In Basket

Labs (continued)

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Darryl Erik Palmer- Toy, MD, PhD	11668 Sherman Way NORTH HOLLYWOOD CA 91605	09/01/10 1119 - 06/01/17 0325
LOBIN, FECAL [273508	3189]		Resulted: 06/28	3/11 1158, Result status: In proces
Order status: Completed		Filed	on: 06/28/11 1159	
Collected by: XXX 06/21/	/11 1235			
– · · · ·				
Reviewed by				
,	abeth (M.D.) on 06/29/1	1 1218		
Hooks, Sarah Eliza	abeth (M.D.) on 06/29/1 abeth (M.D.) on 06/29/1			
Hooks, Sarah Eliza Hooks, Sarah Eliza	abeth (M.D.) on 06/29/1	1 1218		
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END OF ENCOUNTER

06/16/2011 - OFFICE VISIT - MH/BH in PSYCHIATRY

Visit Information

Provider Information

Encounter Provider Talag, Emelita Borja (M.D.) Authorizing Provider Talag, Emelita Borja (M.D.)

Chronic?

Department

Name	Address	Phone	
PSYCHIATRY	5105 GOLDLEAF CIRCLE	323-298-3100	
	Los Angeles CA 90056-1269		

Code

Level of Service

Level of Service

PSYCHIATRIC PHARMACOLOGIC MANAGEMENT

Hooks, Sarah Elizabeth (M.D.) on 6/29/2011 12:18

Reason for Visit

Chief Complaints

- MEDICATION MANAGEMENT
- PSYCHOSIS
- MOOD DISORDER

Visit Diagnosis

Name

Printed on 1/12/24 5:33 PM

06/16/2011 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Reason for Visit (continued)

SCHIZOAFFECTIVE DISORDER (primary)

295.70

Yes

Clinical Notes

Progress Notes

Talag, Emelita Borja (M.D.) at 6/16/2011 0939

Author: Talag, Emelita Borja (M.D.)	
Filed: 6/16/2011 10:21 AM	
Status: Signed	
Sensitive Note	

Service: — Au Encounter Date: 6/16/2011 Cr Editor: Talag, Emelita Borja (M.D.) (Physician)

Author Type: Physician Creation Time: 6/16/2011 9:39 AM

<u>History</u>: 6/16/2011 Lawson B Hawkins 000017508205 5/25/1955 Type of Visit: Medication Follow up

S: Patient reported that he feels stable; he stopped taking the medication for 2 months because he feels he doesn't need it; however, he felt "down" and he went back to take the medication; he is also now being closely monitored for his BS; otherwise he said he feels fine and he wants to cut down his pills and see if this will help him maintain the stability; he reported intentional tremor and some difficulty remembering things these days so the more he wants to lower the dose of Abilify.

Mental Status Exam:

Patient is a 56 y/o AAM who presented with normal and appropriate attire; cooperative, no speech abnormalities, mood - he said he feels fine, affect congruent, thought process revealed itself to be linear and goal directed, thought content showed no AH, VH, SI, HI, or delusional content, denied any paranoia; no gross cognitive abnormalities noted, insight good and judgment was unimpaired.

Wt 234.6 lbs

DIAGNOSIS Axis I: 295.70B SCHIZOAFFECTIVE DISORDER (primary encounter diagnosis) Axis II: Deferred Axis III: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) GERD (530.81A) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) ELEVATED TRANSAMINASE MEASUREMENT (790.4B) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) **OBESITY** (278.00E) DM 2, UNCONTROLLED (250.02B) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) Axis IV: problems with primary support group Axis V: Current GAF Score: 80-71:

Treatment Plan:

06/16/2011 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Clinical Notes (continued)

1. Decrease Abilify 20 to 10 mg po QHS per patient's request due to BS problem, weight gain, memory and tremor concerns; advised that if symptoms worsen then she will go back to 20 mg and follow

- 2. Follow up with other MDs for all medical concerns
- 3. RTC in 3-6 months for medication follow up

EMELITA BORJA TALAG MD

Electronically signed by Talag, Emelita Borja (M.D.) at 6/16/2011 10:21 AM

Other Orders

edications		
ARIPiprazole (ABILIFY) 20 mg Oral Tab [277153623] (Disco	ntinued)	
Electronically signed by: Talag, Emelita Borja (M.D.) on 06/1	6/11 0958 Status: Discontinued	
Ordering user: Talag, Emelita Borja (M.D.) 06/16/11 0958 Ordering mode: Standard	Authorized by: Talag, Emelita Borja (M.D.)	
Frequency: Routine 06/16/11 - 04/25/12	Class: Fill Now	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 Diagnoses	3 [Continue Therapy]	
SCHIZOAFFECTIVE DISORDER, UNSPECIFIED TYPE [295.	.70 (ICD-9-CM)]	
Provider Details		
Provider	NPI	
Talag, Emelita Borja (M.D.)	1356386403	

Indications

SCHIZOAFFECTIVE DISORDER [295.70 (ICD-9-CM)]

Patient Instructions

KAISER PERMANENTE

06/16/2011 - OFFICE VISIT - MH/BH in PSYCHIATRY (continued)

Patient Instructions (continued)

Decrease Abilify 20 to 10 mg po QHS as he finds this effective; NOTE: if symptoms worsen then go back to 20 mg daily dose

Follow up with other MDs for all medical concerns

RTC in 3-6 months for medication follow up

Tel # 323 298 3125

Electronically signed by Talag, Emelita Borja (M.D.) at 6/16/2011 9:59 AM

END OF ENCOUNTER

08/17/2011 - Orders Only in POPULATION CARE MANAGEMENT

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
POPULATION CARE MANAGEMENT		323-783-7887	
	Los Angeles CA 90027-5822		

Labs

CREATININE, SERUM [288601055] (Completed)			
Electronically signed by: Program, Complete Care on 0	8/17/11 203	1	Status: Completed
Ordering user: Program, Complete Care 08/17/11 2031		Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard			
Frequency: Routine 08/17/11 -		Class: Normal	
Quantity: 1			
Provider Details			
Provider		NPI	
Hooks, Sarah Elizabeth (M.D.)		1497814131	
Specimen Information			
ID Type	Source	Collected By	
	BLOOD	—	
POTASSIUM, SERUM [288601056] (Completed)			
Electronically signed by: Program, Complete Care on 0	8/17/11 203	1	Status: Completed
Ordering user: Program, Complete Care 08/17/11 2031		Authorized by: Hooks, Sarah Elizabeth (M.D.)	
Ordering mode: Standard			
Frequency: Routine 08/17/11 -		Class: Normal	
Quantity: 1			
Provider Details			
Provider		NPI	

Printed on 1/12/24 5:33 PM

08/17/2011 - Orders Only in POPULATION CARE MANAGEMENT (continued)

Labs (continued)			
	Hooks, Sarah Elizabeth (M.D.)	14978	14131	
	Specimen Information			
	ID Type	Source	Collected By	
		BLOOD		
HE	EMOGLOBIN A1C [288601057] (Compl	eted)		
E	lectronically signed by: Program, Comp	lete Care on 08/17/11 2031		Status: Completed
	ordering user: Program, Complete Care Cordering mode: Standard	08/17/11 2031 Authori	zed by: Hooks, Sarah Elizabeth (M.D.)	-
	requency: Routine 08/17/11 - Juantity: 1	Class:	Normal	
	Provider Details			
	Provider	NPI		
	Hooks, Sarah Elizabeth (M.D.)	14978	314131	
	Specimen Information			
	ID Type	Source	Collected By	
		BLOOD	—	
E O O F	CROALBUMIN, URINE, QUANTITATIV lectronically signed by: Program, Comp ordering user: Program, Complete Care (ordering mode: Standard requency: Routine 08/17/11 -	lete Care on 08/17/11 2031	zed by: Hooks, Sarah Elizabeth (M.D.) Normal	Status: Completed
	Provider Details			
	Provider	NPI		
	Hooks, Sarah Elizabeth (M.D.)	14978	314131	
	Specimen Information			
	ID Type	Source	Collected By	
		URINE	_	
		END OF ENCOUN	TER	
		_		
		Future/Standing Orders in F	POPULATION CARE MANAGE	MENT
VISITI	nformation			
Pr	ovider Information			
	Encounter Provider			
	Hooks, Sarah Elizabeth (M.D.)			
De	epartment			
	Name	Address	Phone	
	POPULATION CARE MANAGEMENT	4950 SUNSET BLVD Los Angeles CA 90027-5822	323-783-7887	
Labs				

CREATININE, SERUM [288642852] (Discontinued)

Status: Discontinue uthorized by: Hooks, Sarah Elizabeth (M.D.) lass: Normal stance released by: Program, Complete Care (auto-released) (18/2011 1:08 AM present for lab)] NPI 1497814131
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Status: Discontinu uthorized by: Hooks, Sarah Elizabeth (M.D.)
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uthorized by: Hooks, Sarah Elizabeth (M.D.) lass: Normal stance released by: Program, Complete Care (auto-released) 18/2011 1:08 AM present for lab)] NPI 1497814131 Collected By
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uthorized by: Hooks, Sarah Elizabeth (M.D.) lass: Normal stance released by: Program, Complete Care (auto-released) 18/2011 1:08 AM present for lab)] NPI 1497814131 Collected By — status: Discontinu uthorized by: Hooks, Sarah Elizabeth (M.D.) lass: Normal

08/17/2011 - Release	d Future/Standing Orders in POPUL	ATION CARE MANAGEMENT (continued)
_abs (continued)		
Provider	NPI	
Hooks, Sarah Elizabeth (M.	D.) 14978	14131
Specimen Information		
ID Type	Source	Collected By
— —	URINE	—
	END OF ENCOUN	ITER
0		
isit Information		
Provider Information		
Encounter Provider		
Mc Cray, Constance D		
Department		
Name	Address	Phone
OPHTHALMOLOGY	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-421-2900
Reason for Visit		

Chief Complaint

DIABETIC PHOTO

Visit Diagnosis

• SCREENING, DIABETIC RETINOPATHY IN ROUTINE EYE EXAM (primary) [V72.0]

END OF ENCOUNTER

10/14/2011 - Office Visit in INTERNAL MEDICINE RAIN2

Visit Information

Provider Information

Encounter Provider

Hooks, Sarah Elizabeth (M.D.)

Authorizing Provider Hooks, Sarah Elizabeth (M.D.)

Department

Name	Address	Phone	
INTERNAL MEDICINE RAIN2	6041 CADILLAC AVE Los Angeles CA 90034-1702	833-574-2273	

Follow-up and Dispositions

• Return in about 1 year (around 10/14/2012), or if symptoms worsen or fail to improve, for PE.

Questionnaires

FLU VACCINE SCREENING QUESTIONNAIRE AMB SCAL GA

KAISER PERMANENTE

10/14/2011 - Office Visit in INTERNAL MEDICINE RAIN2 (continued)

Visit Information (continued)

Are you extremely allergic to eggs or flu vaccine (hives, tongue swelling, difficulty breathing, etc.)	No
Have you suffered from a paralyzing disease called Guillain- Barre?	Νο
Are you feeling ill today? ***Enter patient's temp under comments****	Νο

Level of Service

Level of Service	
OUTPT EST LEVEL 3	

Reason for Visit

Chief Complaint

FOLLOW UP ROUTINE

Visit Diagnoses

Name	Code	Chronic?	
PROPHYLACTIC VACCINE FOR INFLUENZA	V04.81	No	
EXAM, FOOT, DIABETIC	V77.99	No	
DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (primary)	250.80, 272.2	Yes	
OBESITY	278.00	Yes	
WART, VIRAL	078.10	No	
TOE PAIN	729.5	No	
SCREENING	V82.9	No	

Vitals

Vital Signs			Ν	Nost recent update: 10/14/2011 10:00 AM
BP	Pulse	Temp	Resp	Ht
116/76	83	97.8 °F (36.6 °C) (Tympanic)	18	5' 6" (1.676 m)
Wt 234 lb (106.1 kg)	BMI 37.77 kg/m²			

Clinical Notes

Nursing Note

at 10/14/2011 0950

Author: — Filed: Status: Signed Service: — Encounter Date: 10/14/2011 Author Type: — Creation Time: 10/14/2011 9:50 AM

>> PEARL ZUNIGA LVN Fri Oct 14, 2011 10:55 AM After Visit Summary discussed with and given to patient.

>> PEARL ZUNIGA LVN Fri Oct 14, 2011 10:44 AM Flu Vaccine 5ml administered to patient's left arm (deltoid)per Dr's orders, patient is not allergic to eggs or any egg products, patient tolerated procedure well, information re: the vaccine given to patient, also entered in KITS. PEARL ZUNIGA LVN

KAISER PERMANENTE

Clinical Notes (continued)

Appt. Direct booked to podiatry 10/18/11.

>> PEARL ZUNIGA LVN Fri Oct 14, 2011 10:02 AM Lawson B Hawkins exercises 0 minutes 0 days per week at a moderate or strenuous level.

Patient's height, weight, blood pressure and temperature taken, health history, medications, pharmacy, smoking history, chief complaint and allergies reviewed and documented.

PROACTIVE CARE ACTIONS

Proactive Office Encounter Actions: Diabetic Member: Member prepared for annual monofilament exam and order staged Hemoglobin Alc lab order staged Pending at lab patient notified Lipid Panel order staged Microalbumin order staged Flu immunization order staged.

Progress Notes

Hooks, Sarah Elizabeth (M.D.) at 10/14/2011 1050

Author: Hooks, Sarah Elizabeth (M.D.)Service: —Author Type: PhysicianFiled: 10/14/2011 10:50 AMEncounter Date: 10/14/2011Creation Time: 10/14/2011 10:50 AMStatus: SignedEditor: Hooks, Sarah Elizabeth (M.D.) (Physician)

History:

-f/u -ingrown toenail -finger wart

History Reviewed:

I have reviewed the Medical/Surgical and history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Neurological: Negative for sensory change.

Physical Exam

Constitutional: He is well-developed, well-nourished, and in no distress. Cardiovascular: Normal rate, regular rhythm and intact distal pulses. Pulmonary/Chest: Effort normal. Musculoskeletal: He exhibits no edema. Neurological: He is alert. Bilat feet monofilament exam normal

Skin: Skin is warm and dry.

R medial toenail not obviously ingrown, no infection; small wart finger

Psychiatric: Affect normal. Vitals reviewed. **Clinical Notes (continued)**

A/P:

Pod referral for second opinion on chronic nail edge ttp LN2 x3 gently cycles to finger wart

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] - labs due, sugars good, decr metf daily, feet exam wnl today ORESITY [278.00E] advised to lease weight, assistance info on AVS

OBESITY [278.00E] - advised to lose weight, assistance info on AVS

RHM - flu shot

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 10/14/2011 10:50 AM

Labs

PSA [29951242	8] (Discontinued)		
Electronically s	igned by: Hooks, Sarah Elizat	oeth (M.D.) on 10/14/1	1 1016 Status: Discontinued
	Hooks, Sarah Elizabeth (M.D.)		Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode	: Standard		
Frequency: Routine 10/14/11 - Quantity: 1			Class: Normal
			Discontinued by: Interface, Scal_ Lab 04/17/12 0740 [Other (Pt. di not present for lab)]
Provider De	etails		
Provider			NPI
Hooks, Sar	ah Elizabeth (M.D.)		1497814131
Specimen I	nformation		
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Hooks, Sar	ah Elizabeth (M.D.)		1497814131
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Electronically s	igned by: Hooks, Sarah Elizab	oeth (M.D.) on 10/14/1	1 1016 Status: Discontinued
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Provider			NPI
Hooks, Sa	rah Elizabeth (M.D.)		1497814131
Specimen	Information		
ID	Туре	Source	Collected By
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Electronically s	signed by: Hooks, Sarah Eli	zabeth (M.D.) on 10/14/1	
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Labs (continued)

Procedures

ABETIC FOOT EXAM [299507977] (Active)	
ectronically signed by: Hooks, Sarah Elizabeth (M.D.) on 10/14/	11 1015 Status: Activ
dering user: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015	Authorized by: Hooks, Sarah Elizabeth (M.D.)
rdering mode: Standard	
equency: Routine 10/14/11 -	Class: Back Office
uantity: 1 agnoses	Released by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015
ABETIC FOOT EXAM [V77.99 (ICD-9-CM)]	
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
Indications	
EXAM, FOOT, DIABETIC [V77.99 (ICD-9-CM)]	
Orders	
nunization/Injection	
VACC INFLUENZA SPLIT VIRUS, 4YRS-ADULT [299506004]	(Completed)
Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 10	
Ordering user: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015 Ordering mode: Standard	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Frequency: Routine 10/14/11 -	Class: Back Office
Quantity: 1	Released by: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015
Diagnoses	
VACCINATION FOR INFLUENZA [V04.81 (ICD-9-CM)]	
SCREENING [V82.9 (ICD-9-CM)]	
Provider Details	
Provider Hooks, Sarah Elizabeth (M.D.)	NPI 1497814131
HOOKS, Salah Elizabeth (M.D.)	1497014131
Order comments: Dose 0.5mL Route Intramuscular (IM)	
Order comments: Dose 0.5mL Route Intramuscular (IM) Indications	
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Other Orders (continued)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 10/	I4/11 1015 Status: Discontinue
Ordering user: Hooks, Sarah Elizabeth (M.D.) 10/14/11 1015	Authorized by: Hooks, Sarah Elizabeth (M.D.)
Ordering mode: Standard	
Frequency: Routine 10/14/11 - 04/25/12	Class: Fill Now
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1003 [Continue Therapy]
Diagnoses	
DM 2 W MIXED HYPERLIPIDEMIA [250.80, 272.2 (ICD-9-CM)]	
Provider Details	
Provider	NPI
Hooks, Sarah Elizabeth (M.D.)	1497814131
	b
Reordered from: metFORMIN (GLUCOPHAGE) 500 mg Oral Tal	6

Patient Instructions

You must lose weight in order to be healthy! Visit Health Education to hear about our weight loss programs. Located on the 1st floor behind the information booth. Or call the Healthy Living Helpline at 1-866-402-4320. Or go on-line to kp.org/healthylifestyles.

INACTIVATED INFLUENZA VACCINE 2010-2011 What you need to know.

Many Vaccine Information Statements are available in Spanish and other languages. See http://www.immunize.org/vis Hojas de Informacián Sobre Vacunas están disponibles en Español y en muchos otros idiomas. Visite http://www.immunize.org/vis

1. Why get vaccinated?

Influenza ("flu") is a contagious disease.

It is caused by the influenza virus, which can be spread by coughing, sneezing, or nasal secretions. Anyone can get influenza, but rates of infection are highest among children. For most people, symptoms last only a few days. They include:

- fever
- sore throat
- chills
- fatigue
- cough
- headache
- muscle aches

Other illnesses can have the same symptoms and are often mistaken for influenza.

Infants, the elderly, pregnant women, and people with certain health conditions – such as heart, lung or kidney disease or a weakened immune system – can get much sicker. Flu can cause high fever and

Patient Instructions (continued)

pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. Each year thousands of people die from seasonal influenza and even more require hospitalization. By getting vaccinated you can protect yourself from influenza and may also avoid spreading influenza to others.

2. Inactivated influenza vaccine

There are two types of influenza vaccine:

Inactivated (killed) vaccine, or the "flu shot" is given by injection into the muscle.

Live, attenuated (weakened) influenza vaccine is sprayed into the nostrils. This vaccine is described in a separate Vaccine Information Statement.

A "high-dose" inactivated influenza vaccine is available for people 65 years of age and older. Ask your healthcare provider for more information.

Influenza viruses are always changing, so annual vaccination is recommended. Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year.

The 2010-2011 vaccine provides protection against A/H1N1 (pandemic) influenza and two other influenza viruses – influenza A/H3N2 and influenza B. It will not prevent illness caused by other viruses.

It takes up to 2 weeks for protection to develop after the shot. Protection lasts about a year. Some inactivated influenza vaccine contains a preservative called thimerosal. Thimerosal-free influenza vaccine is available. Ask your healthcare provider for more information.

3. Who should get inactivated influenza vaccine?

WHO

All people 6 months of age and older should get flu vaccine. Vaccination is especially important for people at higher risk of severe influenza and their close contacts, including healthcare personnel and close contacts of children younger than 6 months. People who got the 2009 H1N1 (pandemic) influenza vaccine, or had pandemic fl u in 2009, should still get the 2010-2011 seasonal influenza vaccine.

WHEN

Getting the vaccine as soon as it is available will provide protection if the flu season comes early. You can get the vaccine as long as illness is occurring in your community. Influenza can occur at any time, but most influenza occurs from November through May. In recent seasons, most infections have occurred in January and February. Getting vaccinated in December, or even later, will still be beneficial in most years. Adults and older children need one dose of influenza vaccine each year. But some children younger than 9 years of age need two doses to be protected. Ask your healthcare provider. Influenza vaccine may be given at the same time as other vaccines, including pneumococcal vaccine.

4. Some people should not get inactivated influenza vaccine or should wait

• Tell your healthcare provider if you have any severe (life-threatening) allergies. Allergic reactions to influenza vaccine are rare.

-Influenza vaccine virus is grown in eggs. People with a severe egg allergy should not get influenza vaccine. -A severe allergy to any vaccine component is also a reason not to get the vaccine.

KAISER PERMANENTE

Patient Instructions (continued)

-If you ever had a severe reaction after a dose of influenza vaccine, tell your healthcare provider.
-Tell your healthcare provider if you ever had Guillain-Barré Syndrome (a severe paralytic illness, also called GBS). Your provider will help you decide whether the vaccine is recommended for you.
-People who are moderately or severely ill should usually wait until they recover before getting flu vaccine. If

you are ill, talk to your healthcare provider about whether to reschedule the vaccination. People with a mild illness can usually get the vaccine.

5. What are the risks from inactivated influenza vaccine?

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of a vaccine causing serious harm, or death, is extremely small. Serious problems from inactivated influenza vaccine are very rare. The viruses in inactivated influenza vaccine have been killed, so you cannot get influenza from the vaccine.

Mild problems:

- soreness, redness, or swelling where the shot was given
- · hoarseness; sore, red or itchy eyes; cough
- fever
- aches

If these problems occur, they usually begin soon after the shot and last 1-2 days.

Severe problems:

- Life-threatening allergic reactions from vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the shot.

- In 1976, a type of inactivated influenza (swine flu) vaccine was associated with Guillain-Barré Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS. However, if there is a risk of GBS from current flu vaccines, it would be no more than 1 or 2 cases per million people vaccinated. This is much lower than the risk of severe influenza, which can be prevented by vaccination.

One brand of inactivated flu vaccine, called Afluria, should not be given to children 8 years of age or younger, except in special circumstances. A related vaccine was associated with fevers and fever-related seizures in young children in Australia. Ask your healthcare provider for more information.

The safety of vaccines is always being monitored. For more information, visit: http://www.cdc.gov/vaccinesafety/Vaccine_Monitoring/Index.html and

http://www.cdc.gov/vaccinesafety/Activities/Activities_Index.html

6. What if there is a severe reaction?

What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- Call a doctor, or get the person to a doctor right away.
- Tell the doctor what happened, the date and time it happened, and when the vaccination was given.

KAISER PERMANENTE

Patient Instructions (continued)

• Ask your healthcare provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at http://www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not provide medical advice.

7. The National Vaccine Injury Compensation Program The National Vaccine Injury Compensation Program (VICP) was created in 1986.

People who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382, or visiting the VICP website at http://www.hrsa.gov/vaccinecompensation.

8. How can I learn more?

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
- -Call 1-800-232-4636 (1-800-CDC-INFO) or

-Visit CDC's website at www.cdc.gov/flu

DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention Vaccine Information Statement (Interim) Inactivated Influenza Vaccine (8/10/10)

Electronically signed by Hooks, Sarah Elizabeth (M.D.) at 10/14/2011 10:17 AM

END OF ENCOUNTER

10/18/2011 - Office Visit in PODIATRY MODULE A

Visit Information

Provider Information

Encounter Provider

Lee, Suzette (Dpm)

Authorizing Provider

Lee, Suzette (Dpm)

Department

Name	Address	Phone
PODIATRY MODULE A	12001 W WASHINGTON BLVD Los Angeles CA 90066-5801	323-857-4034

Level of Service

Level of Service	
OUTPT NEW LEVEL 3	

Reason for Visit

Chief Complaint

Printed on 1/12/24 5:33 PM

Reason for Visit (continued)

INGROWN NAIL

Visit Diagnoses

Name	Code	Chronic?
DM 2, CONTROLLED (primary)	250.00	Yes
INGROWN NAIL	703.0	No
EXAM, FOOT, DIABETIC	V77.99	No
DEFORMITY OF ANKLE OR FOOT, ACQUIRED	736.70	No

Vitals

Vital Signs			Most recent update: 10/18/2011 9:40 AM
BP	Pulse	Resp	
120/73	76	16	

Clinical Notes

Nursing Note		
at 10/18/2011 0930		
Author: — Filed: Status: Signed	Service: — Encounter Date: 10/18/2011	Author Type: — Creation Time: 10/18/2011 9:30 AM
>> VERONICA BUZO MA PROACTIVE CARE ACTIONS	Tue Oct 18, 2011 9:41 A	M
		are above goal, repeat blood s lab test AlC and Microlumin.
	Tue Oct 18, 2011 9:33 A Medial great toenail edge	M e, pt thinks ingrown, not obvious

Progress Notes

Lee, Suzette	(Dpm) at 10/18/2011 1012	2	
Author: Le	e, Suzette (Dpm)	Service: —	Author Type: PODIATRIST (D.P.M.)
Filed: 10/	18/2011 10:12 AM	Encounter Date: 10/18/2011	Creation Time: 10/18/2011 10:12 AM
Status: Si	gned	Editor: Lee, Suzette (Dpm) (PODIA	TRIST (D.P.M.))

C/C:painful right ingrown toenail

HPI: Lawson B Hawkins is a 56 year old male complains of painful right ingrown toenail. Pt has had this for a number of months. He has pain in certain types of shoes and if he should accidentally bump his foot. Pt would like to have this removed.

PMH: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] NOT CURRENT SMOKER [V15.82C] DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED [500537] SCREENING FOR CA, COLON [V76.51A] CHOLELITHIASIS [574.20A] OBESITY [278.00E] DEFORMITY OF ANKLE OR FOOT, ACQUIRED [736.70A] SKIN TAG [701.9D] CASE / CARE MGMT [V65.49BAAS]

MED:

Current outpatient prescriptions ordered prior to encounter:

Clinical Notes (continue	d)
---------------------------------	----

metFORMIN (GLUCOPHAGE		, Disp: 100	Rfl: 3
500 mg Oral Tab	DAILY WITH A MEAL TAKE ONE-HALF	·	
ARIPiprazole (ABILIFY) 20 mg Oral Tab	TABLET ORALLY AT BEDTIME	Disp: 15	Rfl: 11
Lancets (ONE TOUCH			
ULTRASOFT LANCETS) Misc	USE AS DIRECTED	Disp: 200	Rfl: 2
Misc			
Blood Sugar Test (ONE		D	54 0
TOUCH ULTRA TEST) Misc Strips	USE AS DIRECTED	Disp: 200	Rfl: 3
Simvastatin (ZOCOR) 20 mg	1 TAB PO DAILY AT	Diam. 00	
Oral Tab	BEDTIME	Disp: 90	Rfl: 6
CLOTRIMAZOLE 1 % TOP	APPLY TO AFFECTED	Disp: 30	Rfl: 2
CREA	AREA(S) BID	•	111. 2
CARMOL 20 20 % TOP CREA	apply to I 2nd and 3rd digi areas BID	^t Disp: 45	Rfl: 3

ALLERGIES: No Known Drug Aller*

PREVIOUS SURGERIES:

Past Surgical History	
Procedure	Date
 Past surgical history, other 	back broken, metal plate

SOCIAL HISTORY: History

Substance Use Topics	
 Smoking status: 	Former Smoker 0.5 packs/day for 20 years
Types:	Cigarettes
Quit date:	07/21/2008
 Smokeless tobacco: 	Former User
 Alcohol Use: 	Yes
Rare alcohol.	

ROS: denies trauma

HGBA1C 5.8 12/15/2010

PHYSICAL EXAMINATION:

Filed Vitals:		
	10/18/11 0938	10/18/11 0940
BP:	131/78	120/73
Pulse:	81	76
Resp:	17	16

Printed on 1/12/24 5:33 PM

Clinical Notes (continued)

well developed male in no acute distress, alert and oriented x 3 VASC: DP/PT: 2/4 bilateral CFT: < 3sec (-)edema, (-)erythema DERM: TTT prior surgical incisions along the medial hind foot due to prior foot surgery MUSCULO: right foot-Pes planus foot type No dislocation noted, no laxity present No atrophy noted in the foot musculature (+) foot deformities, valgus foot type, due to prior hx of trauma in this area surgical reconstruction left foot-Pes planus foot type No dislocation noted, no laxity present Normal strength on dorsiflexion/plantarflexion No atrophy noted in the foot musculature (+) foot deformities, valgus foot type, due to prior hx of trauma in this area surgical reconstruction NEURO: sharp/dull sensations intact GAIT: propulsive, not antalgic

IMPRESSION: DM 2 Onychocyptosis medial border, right great toe nail

RECOMMENDATIONS:

-pt was given the options for have a permanent procedure for the ingrown toenail, pt would like to proceed at this time, however was unable to have this done today due to a prior committment procedure was scheduled in the part few weeks for a partial phenol matrisectomy medial border, right great toe pail.

-procedure was scheduled in the next few weeks for a partial phenol matrisectomy medial border, right great toe nail -pt advised to avoid Asprin type products, 7-10 days prior to the procedure

Electronically signed by Lee, Suzette (Dpm) at 10/18/2011 10:12 AM

Procedures

IABETIC FOOT EXAM [300202140] (Active)		
Electronically signed by: Lee, Suzette (Dpm) on 10/18/11 1013		Status: Active
Ordering user: Lee, Suzette (Dpm) 10/18/11 1013	Authorized by: Lee, Suzette (Dpm)	
Drdering mode: Standard		
Frequency: Routine 10/18/11 -	Class: Back Office	
Quantity: 1		
Diagnoses		
DM 2, CONTROLLED. [250.00 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Lee, Suzette (Dpm)	1255457495	
Indications		
DM 2, CONTROLLED [250.00 (ICD-9-CM)]		

END OF ENCOUNTER

11/03/2011 - Office Visit in PODIATRY MODULE A

isit Information				
Provider Information				
Encounter Provider	Authorizing Provider			
Lee, Suzette (Dpm)	Lee, Suze	Lee, Suzette (Dpm)		
Department				
Name	Address	Phone		
PODIATRY MODULE A	12001 W WASHINGTON BLVD Los Angeles CA 90066-5801	323-857-4034		
Level of Service				
Level of Service				
LOS NOT REQUIRED				
eason for Visit				
Chief Complaint				
INGROWN NAIL				
Visit Diagnosis				
INGROWN NAIL (primary)) [703.0]			
itals				
Vital Signs		Most recent update: 11/3/2011 10:22 A		
Ht	Wt	BMI		
5' 6" (1.676 m)	234 lb (106.1 kg)	37.77 kg/m²		
linical Notes				
Nursing Note				
at 11/3/2011 1045				
Author: — Filed: Status: Signed	Service: — Encounter Date: 11/3/2011	Author Type: — Creation Time: 11/3/2011 10:45 AM		
ositive ID name and t is due for AlC	-			
	Thu Nov 3, 2011 10:21 AM a 56 years old male is here	for ingrown nail right great		
Progress Notes				
Lee. Suzette (Dpm) at 11/3/2	2011 1031			

Author: Lee, Suzette (Dpm)	Service: —	Author Type: PODIATRIST (D.P.M.)
Filed: 11/3/2011 12:22 PM	Encounter Date: 11/3/2011	Creation Time: 11/3/2011 10:31 AM
Status: Signed	Editor: Lee, Suzette (Dpm) (PODIA	TRIST (D.P.M.))

Clinical Notes (continued)

SUBJECTIVE: Lawson B Hawkins is a 56 year old male presents for removal of painful ingrown toenail.

MATRIX PHENOL NAIL POST PROCEDURE NOTE

Preoperative diagnosis: onychocyptosis medial border, right great toe nail

Postoperative diagnosis: same as above

Procedure: partial phenol matrisectomy medial border, right great toe nail

INDICATIONS:

Lawson B Hawkins is a 56 year old male who failed a trial of non-operative conservative management and has requested surgical intervention for persistent complaints. Prior to surgery, the risks and benefits of operative versus non-operative management were explained. The patient clearly understood these risks and benefits and agreed to the surgery and risks entailed. The consent form was signed and witnessed at this time. Prior to the procedure, the correction location was verified with the patient.

The patient was given a local anesthetic Bupivacaine 0.5% 2.5 mL and Lidocaine 2% 2.5 mL

The foot was then prepped and draped in the usual sterile manner. A tourniquet was applied to the base of the affected toe for hemostasis. The involved nail Was avulsed with a hemostat and all nail spicules were cleaned out.

One 90 second application of Phenol (89% carboxylic acid) was applied to the base of the nail bed. The tourniquet was released, with normal warmth and vascularity returning to the toe immediately.

The surgical site was dressed with antibiotic ointment, sterile adaptic 4 x 4 gauze and two inch Kling gauze.

The patient tolerated the anesthesia and procedure well and left the minor room in stable condition. The patient was given post-operative instructions, post-operative pain medication(s), a post-operative shoe, and a follow-up appointment in Podiatry Clinic.

I emphasized to the patient to contact us immediately there were any problems.

SUZETTE LEE DPM

Electronically signed by Lee, Suzette (Dpm) at 11/3/2011 12:22 PM

Filed on 11/9/2011 1408

Scan on 11/8/2011 1:24 PM: CONSENT 1

Clinical Notes (continued)

Electronically signed by Lee, Suzette (Dpm) at 11/9/2011 2:08 PM

Procedures

MATRIXECTOMY, CHEMICAL [303384796] (Active)		
Electronically signed by: Lee, Suzette (Dpm) on 11/03/11 1223 Ordering user: Lee, Suzette (Dpm) 11/03/11 1223 Ordering mode: Standard	Authorized by: Lee, Suzette (Dpm)	Status: Active
Frequency: Routine 11/03/11 - Quantity: 1	Class: Back Office	
Diagnoses		
INGROWN NAIL [703.0 (ICD-9-CM)]		
Provider Details		
Provider Lee, Suzette (Dpm)	NPI 1255457495	
Indications	1200401400	
INGROWN NAIL [703.0 (ICD-9-CM)]		
INJECTION, SINGLE OR MULTIPLE TRIGGER POINTS, 3 OR MC Electronically signed by: Lee, Suzette (Dpm) on 11/03/11 1223		Status: Active
Ordering user: Lee, Suzette (Dpm) 11/03/11 1223 Ordering mode: Standard	Authorized by: Lee, Suzette (Dpm)	
Frequency: Routine 11/03/11 - Quantity: 1	Class: Back Office	
Diagnoses INGROWN NAIL [703.0 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Provider Lee, Suzette (Dpm)	NPI 1255457495	
Lee, Suzette (Dpm)		
Lee, Suzette (Dpm) Indications INGROWN NAIL [703.0 (ICD-9-CM)]		
Lee, Suzette (Dpm) Indications		
Lee, Suzette (Dpm) Indications INGROWN NAIL [703.0 (ICD-9-CM)] ner Orders	1255457495	
Lee, Suzette (Dpm) Indications INGROWN NAIL [703.0 (ICD-9-CM)] mer Orders Medications Phenol (PHENOL EZ) 89 % Top Swab [303384800] (Discontin Electronically signed by: Lee, Suzette (Dpm) on 11/03/11 1223 Ordering user: Lee, Suzette (Dpm) 11/03/11 1223	1255457495 nued)	Status: Discontinued
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Other Orders (continued)

Electronically signed by: Lee, Suzette (Dpm) on 11/03/11 1223		Status: Discontinu
Ordering user: Lee, Suzette (Dpm) 11/03/11 1223	Authorized by: Lee, Suzette (Dpm)	
Drdering mode: Standard	(-p.),	
requency: Routine 11/03/11 - 04/25/12	Class: Back Office	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1001		
Diagnoses		
NGROWN NAIL [703.0 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Lee, Suzette (Dpm)	1255457495	
Indiantiana		
Indications		
INGROWN NAIL [703.0 (ICD-9-CM)]		
INGROWN NAIL [703.0 (ICD-9-CM)] upivacaine (MARCAINE) 0.5 % (5 mg/mL) Inj Soln [30338480	6] (Discontinued)	
INGROWN NAIL [703.0 (ICD-9-CM)] upivacaine (MARCAINE) 0.5 % (5 mg/mL) Inj Soln [30338480 Electronically signed by: Lee, Suzette (Dpm) on 11/03/11 1223		Status: Discontin
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INGROWN NAIL [703.0 (ICD-9-CM)] upivacaine (MARCAINE) 0.5 % (5 mg/mL) Inj Soln [303384800 Electronically signed by: Lee, Suzette (Dpm) on 11/03/11 1223 Ordering user: Lee, Suzette (Dpm) 11/03/11 1223 Ordering mode: Standard Frequency: Routine 11/03/11 - 04/25/12 Discontinued by: Hooks, Sarah Elizabeth (M.D.) 04/25/12 1001 Diagnoses NGROWN NAIL [703.0 (ICD-9-CM)] Provider Details	Authorized by: Lee, Suzette (Dpm) Class: Back Office	Status: Discontin
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Letters

Letter by Lee, Suzette (Dpm) on 11/3/2011

Status: Sent Letter body:

🏙 Kaiser Permanente.

CONSENT TO OPERATION, ADMINISTRATION OF ANESTHETICS, AND THE RENDERING OF OTHER MEDICAL SERVICES

1. I authorize, **SUZETTE LEE DPM** and/or his/her associates, assistants of his/her choice, and personnel assigned by the hospital or medical group to perform the following operation or procedure (medical and common names):

Partial phenol matrisectomy, medial border, right great toe nail

FOR THE PURPOSE OF (explanation in simple terms):

Permanent removal painful right ingrown toenail

Upon Lawson B Hawkins, 000017508205 and/or to do any other procedures that in his/her judgment may be advisable for the patient's well-being including such procedures as are considered medically advisable to remedy conditions discovered during the procedure or operation. I am satisfied with my understanding of the nature of the operation or procedure, the more common risks associated with it, including the

Letters (continued)

potential for serious harm, including wound infection, anesthesia risks and death, and alternative methods of treatment which have been explained to me. No warranty or guarantee has been made as to the result or cure.

2. Under the Federal Safe Medical Devices Act, Kaiser Permanente must provide manufacturers of certain medical devices with personal information to enable manufacturers to locate patients when a device is removed from the market or when information about significant device problems has to be sent out. If the above procedure involves the implantation of a medical device requiring tracking by the manufacturer and/or the Food and Drug Administration (FDA), my name, birth date, address, phone number and social security number may be forwarded for this purpose. Kaiser Permanente will treat the collected information with the same degree of confidentiality provided to all other medical information. The manufacturers and the FDA are required to treat this information in the same manner. I may refuse to permit the release of this required information (complete form NS-5789, Consent for Safe Medical Device Act, Notice Regarding Medical Device Tracking).

3. I hereby authorize and direct the above-named hospital, medical group, surgeon and/or his/her associates and assistants, to provide such additional services for me as he/she or they may deem medically advisable, including, but not limited to, the selection and administration of anesthesia and the performance of pathology and radiology services.

4. I hereby authorize the hospital and medical group to dispose of any severed tissue or member in accordance with accustomed hospital practice.

Date	Time PATIENT, PAREN	Signed NT OR LEGAL GUARDIAN	
Witness		Relationship	
Translated by (if ap	oplicable):		

Documents

Consent Form - Scan on 11/8/2011 1:24 PM: CONSENT

Scan (below)

Description:CONSENT Scan Date:11/8/2011 Index Date:11/9/2011

KAISER PERMANENTE

CONSENT TO OPERATION, ADMINISTRATION OF ANESTHETICS, AND THE RENDERING OF OTHER MEDICAL SERVICES

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Time 10'35AM Signed Date ATIENT, PARENT OR LEGAL GUARDIAN Witness Relation\$hip

Translated by (if applicable):

END OF ENCOUNTER

	11/14/20	11 - Office Visit in INT	ERNAL MEDICINE	GREEN2
Visit Information				
Provider Info	rmation			
Encounte	r Provider		Authorizing Provide	er
Thomas, E	lizabeth Desmond (N.P.)		Thomas, Elizabeth De	esmond (N.P.)
Department				
Name		Address	Phone	
INTERNAL	_ MEDICINE GREEN2	6041 CADILLAC AVE Los Angeles CA 90034-1	833-574 702	4-2273
Level of Servi	ice			
Level of S	ervice			
	ST LEVEL 2			
Reason for Visit				
Chief Compla	lint			
WART				
Visit Diagnos	is			
	TITIS (primary) [692.9]			
Vitals				
Vital Signs				Most recent update: 11/14/2011 8:41 AM
BP	Pulse	Temp	Ht	Wt
125/81	72	97.3 °F (36.3 °C)	5' 7" (1.702 m)	234 lb (106.1 kg)
51.0				
BMI 36.65 kg/i	m²			
5				
Clinical Notes				
Nursing Note				
at 11/14/2	011 0830			
Author	:—	Service: —		Author Type: —
Filed: Status:	Signed	Encounter Date: 1	1/14/2011	Creation Time: 11/14/2011 8:30 AM
>> CASSIE	M TATE LVN	Mon Nov 14, 2011	8:55 AM	
				l given to the patient.
	A A BIRDEN MA	Mon Nov 14, 2	011 8:41 AM	
EXERCISE Y	ES			

11/14/2011 - Office Visit in INTERNAL MEDICINE GREEN2 (continued)

Clinical Notes (continued)

omas, Elizabeth Desmond (N.P.) at 11/1	14/2011 1151	
Author: Thomas, Elizabeth Desmond	Service: —	Author Type: NURSE PRACTITIONER
(N.P.)		(N.P.)
Filed: 11/14/2011 11:54 AM	Encounter Date: 11/14/2011	Creation Time: 11/14/2011 11:51 AM
Status: Signed	Editor: Thomas, Elizabeth Desmond	(N.P.) (NURSE PRACTITIONER (N.P.))

History: 11/14/2011

SUBJECTIVE:

Lawson B Hawkins is a 56 year old male complains of: past week has skin irritation on ant chest and wonders if they are warts ; all his life he has had hx increased perspiration with exercise

PMH: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER (295.70B) NOT CURRENT SMOKER (V15.82C) DM 2 W DIABETIC HYPERLIPIDEMIA, MIXED (500537) SCREENING FOR CA, COLON (V76.51A) CHOLELITHIASIS (574.20A) OBESITY (278.00E) DEFORMITY OF ANKLE OR FOOT, ACQUIRED (736.70A) SKIN TAG (701.9D) CASE / CARE MGMT (V65.49BAAS)

Outpatient prescriptions marked as taking for the 11/14/11 encounter (Office Visit) with THOMAS, ELIZABETH DESMOND (N.P.): metFORMIN (GLUCOPHAGE) 500 mg Oral Tab, TAKE 1 TABLET ORALLY DAILY WITH A MEAL, Disp: 100, Rfl: 3 ARIPiprazole (ABILIFY) 20 mg Oral Tab, TAKE ONE-HALF TABLET ORALLY AT BEDTIME, Disp: 15, Rfl: 11 Simvastatin (ZOCOR) 20 mg Oral Tab, 1 TAB PO DAILY AT BEDTIME, Disp: 90, Rfl: 6

ALL: No Known Drug Allergies occup: Smoking Status: Former Smoker Types: Cigarettes Quit date: 07/21/2008 Smokeless Status: Never Used Alcohol Use: Yes Comment: Rare alcohol.

OBJECTIVE: BP 125/81 | Pulse 72 | Temp 97.3 °F (36.3 °C) | Ht 5' 7" (1.702 m) | Wt 234 lb (106.142 kg) Skin:scattered anterior chest pink inflammation of some hair follicles;no palpable masses

KAISER PERMANENTE

11/14/2011 - Office Visit in INTERNAL MEDICINE GREEN2 (continued)

Clinical Notes (continued)

ASSESSMENT: 692.9C DERMATITIS (primary encounter diagnosis)

PLAN: Orders Placed This Encounter Hydrocortisone (PENECORT) 2.5 % Top Crea

Pt Ed

Pt Ed: Return appt if sign increase or persists

ELIZABETH DESMOND THOMAS NP

History Reviewed:

I have reviewed the Medical/Surgical and Social history as displayed in HealthConnect on the date of the encounter or the portion(s) as noted in the progress note.

<u>Review of Systems</u> Constitutional: Negative for fever and chills. Skin: Positive for rash. Negative for itching.

Electronically signed by Thomas, Elizabeth Desmond (N.P.) at 11/14/2011 11:54 AM

Other Orders

Electronically signed by: Thomas, Elizabeth Desmond (N.P.) on	11/14/11 0850	Status: Discontinue
Ordering user: Thomas, Elizabeth Desmond (N.P.) 11/14/11 0850	Authorized by: Thomas, Elizabeth Desmo	nd (N.P.)
Ordering mode: Standard		
Frequency: Routine 11/14/11 - 06/13/13	Class: Fill Now	
Discontinued by: Hooks, Sarah Elizabeth (M.D.) 06/13/13 0839		
Diagnoses		
DERMATITIS [692.9 (ICD-9-CM)]		
Provider Details		
Provider	NPI	
Thomas, Elizabeth Desmond (N.P.)	1215096938	

11/14/2011 - Office Visit in INTERNAL MEDICINE GREEN2 (continued)

Other Orders (continued)

DERMATITIS [692.9 (ICD-9-CM)]

END OF ENCOUNTER

11/18/2011 - Office Visit in PODIATRY MODULE A Visit Information **Provider Information Encounter Provider Authorizing Provider** Lee, Suzette (Dpm) Lee, Suzette (Dpm) Department Address Phone Name PODIATRY MODULE A 12001 W WASHINGTON BLVD 323-857-4034 Los Angeles CA 90066-5801 Level of Service Level of Service **OUTPT EST LEVEL 2** Reason for Visit **Chief Complaint** INGROWN NAIL (f/u) Visit Diagnosis AFTERCARE, SURGERY OF MUSCULOSKELETAL SYSTEM (primary) [V58.78] Vitals Vital Signs Most recent update: 11/18/2011 8:58 AM Wt Ht BMI 5'7" (1.702 m) 234 lb (106.1 kg) 36.65 kg/m² **Clinical Notes Nursing Note** at 11/18/2011 0900 Author: ----Service: -Author Type: ---Filed: Encounter Date: 11/18/2011 Creation Time: 11/18/2011 9:00 AM Status: Signed Fri Nov 18, 2011 >> ELDA CHANDRA MA 9:06 AM Lawson B Hawkins is a 56 years old male is here for 2wks f/u ingrown nail right great toe. Did not take BP - Last BP in past 3 months < 140/90. positive ID name and birthday.

Progress Notes

KAISER PERMANENTE

11/18/2011 - Office Visit in PODIATRY MODULE A (continued)

Clinical Notes (continued)

Lee, Suzette (Dpm) at 11/18/2011 0929

Author: Lee, Suzette (Dpm) Filed: 11/18/2011 9:42 AM Status: Signed Service: — Author Type: PODIATRIST (D.P.M.) Encounter Date: 11/18/2011 Creation Time: 11/18/2011 9:29 AM Editor: Lee, Suzette (Dpm) (PODIATRIST (D.P.M.))

FOOT POSTOP FOLLOW UP VISIT

Surgeon: Dr.Lee

Date of surgery: 03 November 2011

Type of surgery: partial phenol matrisectomy medial border, right great toe nail

SUBJECTIVE:

Patient is 2 weeks postop. The patient c/o none pain.

Red flag questions: No fever, chills.

Activity: walking and weight bearing.

Pt is doing well, he is back to most of his activities, he no longer has the pain he had preop

OBJECTIVE:

Surgical site: clean, dry, healing well, no erythema and no Swelling, almost complete epithelization of the surgical site

ASSESSMENT: Healing well

PLAN:

-the wound was cleaned with peroxide, redressed with antibiotic ointment and a band aid -pt to continue soaks until drainage stops -shoe gear and activities as tolerated -pt pleased with out come of procedure

Plans next visit: RTC prn

Electronically signed by: SUZETTE LEE DPM 11/18/2011 9:29 AM

Clinical Notes (continued)

Electronically signed by Lee, Suzette (Dpm) at 11/18/2011 9:42 AM

END OF ENCOUNTER

03/30/2007 - Diagnostic Imaging in HOV GENERAL (X-RAY)

Visit Information

Department			
Name	Address	Phone	
HOV GENERAL (X-RAY)	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2421	

Location

Name	Address	Phone
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE Los Angeles CA 90034-1702	857-2000

Visit Account Information

lospital Account				
Name	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2161358609	Outpatient	Closed	Restricted coverage
Guarantor Account (for Hospital Acco	·			
	Relation to			
Name	Pt	Service Area	Active?	Acct Type
	0.11			/

 		•••••••		
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3432	2(H)		
LOS ANGELES, CA 90016-2618	323-297-3432	2 x00000(O)		

Coverage Information (for Hospital Account #2161358609)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEI	EDS PLAN SCR KPSA SPECIAL NEEDS PLAN	SCR
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Treatment Team

	. .			- • •	_	_
Provider	Service	Role	Provider Team	Specialty	From	То
Lawless, Dorothy	_	Attending	_	GENERAL,	_	_
Lee (N.P.)				OTHER		

Events

Hospital Outpatient at 3/30/2007 1020

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

Discharge at 3/30/2007 2359

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

END OF ENCOUNTER

08/09/2007 - ED in WLED

KAISER PERMANENTE

08/09/2007 - ED in WLED (continued)

Visit Information

Admission Information	n					
Arrival Date/Time: Admission Type:	08/08/2007 2248 Emergency	Admit Date/Time: Point of Origin:	Home - Em Room	ergency	IP Adm. Date/Time: Admit Category:	Unscheduled, Les Than 24 Hours Pri To Admission
Means of Arrival: Transfer Source:	Car - Drove Self	Primary Service: Service Area:	SOUTHERN CALIFORNIA REGION		Secondary Service: Unit:	N/A WLED
Admit Provider:	Venne, Chad M (M.D.)	Attending Provide	er: Venne, Cha (M.D.)	ad M	Referring Provider:	
ED Disposition						
ED Disposition HOME	Condition 	Venne, Chad M	Date/Time Thu Aug 9, 2007 1:55 AM	Commo 	ent	
Discharge Information						
Date/Time: 08/09/20 Provider: Venne, Ch		Disposition: Hom Unit: WLED	e Or Self Care.		Destination:	
Follow-up Information	l					
Follow up With Hooks, Sarah Elizat	Specialties beth Internal Media	Details cine Call in 2		Why		ontact Info 041 Cadillac Ave
(M.D.)						os Angeles, California 0034-1702
ation						
ation Name	Ac	dress		Phone		
Name WEST LA MEDICAL CE	ENTER L 60	Idress 141 CADILLAC AVE 1s Angeles CA 90034-	1702	Phone 857-2000)	
Name WEST LA MEDICAL CE son for Visit	ENTER L 60	41 CADILLAC AVE	1702)	
Name WEST LA MEDICAL CE son for Visit Chief Complaint	ENTER L 60 Lo	941 CADILLAC AVE os Angeles CA 90034-	1702)	
Name WEST LA MEDICAL CE son for Visit Chief Complaint	ENTER L 60	941 CADILLAC AVE os Angeles CA 90034-	1702)	
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis	ENTER L 60 Lo REFILL REQUESTE	941 CADILLAC AVE os Angeles CA 90034-	1702)	
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [ENTER L 60 Lo REFILL REQUESTE [110.3]	941 CADILLAC AVE os Angeles CA 90034-	1702)	
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information	ENTER L 60 Lo REFILL REQUESTE [110.3]	941 CADILLAC AVE os Angeles CA 90034-	1702)	
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account	ENTER L 60 Lo REFILL REQUESTE [110.3]	941 CADILLAC AVE os Angeles CA 90034-				Primary Coverage
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account Name	ENTER L 60 Lo REFILL REQUESTE [110.3]	Angeles CA 90034-	Class	857-2000) Status Closed	
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account	ENTER L 60 Lo REFILL REQUESTE [110.3]	Angeles CA 90034- D D Acct ID 2161226	Class	857-2000	Status	
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account Name Hawkins, Lawson B Guarantor Account (fo	ENTER L 60 Lo REFILL REQUESTE [110.3]	41 CADILLAC AVE os Angeles CA 90034- D D 2161226 #2161226687) Relation	Class 6687 Emergenc	857-2000	Status Closed	Restricted coverag
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account Name Hawkins, Lawson B Guarantor Account (fo	ENTER L 60 Lo REFILL REQUESTE [110.3]	41 CADILLAC AVE os Angeles CA 90034- D D 2161226 #2161226687)	Class 6687 Emergenc	857-2000	Status	Primary Coverage Restricted coverage Acct Type Personal/Family
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account Name Hawkins, Lawson B Guarantor Account (fo	ENTER L 60 Lo REFILL REQUESTE [110.3]	41 CADILLAC AVE os Angeles CA 90034- D D 2161226 #2161226687) Relation Pt	Class 6687 Emergenc n to Service A	857-2000	Status Closed Active?	Restricted coverag
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account Name Hawkins, Lawson B Guarantor Account (for Name Hawkins, Lawson B	ENTER L 60 Lo REFILL REQUESTE [110.3] or Hospital Account	41 CADILLAC AVE Is Angeles CA 90034- D Acct ID 2161226 #2161226687) Relation Pt Self Phone 323-297	Class 6687 Emergenc n to Service A	857-2000	Status Closed Active?	Restricted coverag
Name WEST LA MEDICAL CE son for Visit Chief Complaint • PRESCRIPTION Visit Diagnosis • TINEA CRURIS [t Account Information Hospital Account Name Hawkins, Lawson B Guarantor Account (for Name Hawkins, Lawson B Address 2626 S COCHRAN	ENTER L 60 Lo REFILL REQUESTE [110.3] or Hospital Account AVE 90016-2618	Acct ID 2161226687) Acct ID 2161226 #2161226687) Relation Pt Self Phone 323-297 323-297	Class 5687 Emergenc n to SCAL 7-3432(H)	857-2000	Status Closed Active?	Restricted coverag

Visit Account Information (continued)

KP MEDICARE/KPSA SPECIAL NE	EEDS PLAN SCR KPSA SPECIAL NEEDS PLAN SCF	२
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Discharge Summary Note

Discharge Summary by Mims, Latricia M (R.N.) at 8/9/2007 0211						
Author: Mims, Latricia M (R.N.)	Service: —	Author Type: REGISTERED NURSE				
Filed: 8/9/2007 2:11 AM	Date of Service: 8/9/2007 2:11 AM	Creation Time: 8/9/2007 2:11 AM				
Status: Signed	Editor: Mims, Latricia M (R.N.) (REGIST	ERED NURSE)				

a/o X3, not in any acute respiratory distress, ambulatory with steady gate, informed to follow up with primary md in 1-2 days, return if your condition worsens, contact provider for any questions or concerns, verbalized understanding.

Electronically signed by Mims, Latricia M (R.N.) at 8/9/2007 2:11 AM

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	То
Venne, Chad M	_	Admitting		Emergency	_	
(M.D.), M.D.				Medicine		
Venne, Chad M (M.D.), M.D.	_	Attending	_	Emergency Medicine	08/09/07 0019	_
nts						
ED Arrival at 8/8/2007	2248					
Unit: WLED						
	7 0013	Room: HV	V12	Bec	1: 12	
ED Roomed at 8/9/200 Unit: WLED Patient class: Emer		Room: HV Service: E	V12 Emergency Medicine	Bec	d: 12	
Unit: WLED	gency			Bec	d: 12	
Unit: WLED Patient class: Emer	gency		mergency Medicine		d: 12 d: N6	
Unit: WLED Patient class: Emer Discharge at 8/9/2007	gency 0203	Service: E Room: HN	mergency Medicine			

Author: Venne, Chad M (M.D.)	Service: —	Author Type: Physician
Filed: 8/9/2007 1:54 AM	Date of Service: 8/9/2007 1:42 AM	Creation Time: 8/9/2007 1:42 AM
Status: Signed	Editor: Venne, Chad M (M.D.) (Physician)	

HPI Comments: 1:42 AM

52 y/o male seen in ED tonight requesting medication refill. Pt states luggage was stolen with a cream he uses due to skin condition on genitals. Has taken numerous different meds for problem, which he has had for greater than 10 years. Denies other complaints.

ED Provider Note (continued)

Review of Systems Constitutional: Reports no fever and no chills. Skin: Reports rash. HENT: Reports no headaches. Cardiovascular: Reports no chest pain. Respiratory: Is experiencing no shortness of breath. Gastrointestinal: Reports no nausea, no vomiting, no abdominal pain and no diarrhea. Genitourinary: Reports no dysuria and no hematuria. Musculoskeletal: Reports joint pain. Has chronic L shoulder pain Neurological: Reports no dizziness, no sensory change and no focal weakness. Past Medical History Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] Active Medications as of 08/08/2007: RISPERDAL 2 MG ORAL TAB, Sig: TAKE 1 TABLET ORALLY EVERY NIGHT AT BEDTIME ABILIFY 20 MG ORAL TAB, Siq: TAKE 1 TABLET ORALLY EVERY MORNING OMEPRAZOLE 20 MG ORAL CPDR SR CAP, Siq: 1 CAP PO DAILY No Known Drug Aller* 6 cigarettes/day SH: Denies EtOH or drugs BP 118/79 | Pulse 97 | Temp 96.9 °F (36.1 °C) | Resp 16 | Ht 1.702 m (5' 7") | Wt 99.791 kg (220 lbs) | Sp02 97% Physical Exam Vitals reviewed. Constitutional: He is oriented. He appears not toxic, not dehydrated, not diaphoretic and not distressed. HENT: Head: Normocephalic and atraumatic. Neck: Normal range of motion. Neck supple. Cardiovascular: Normal rate, regular rhythm and normal heart sounds. Pulmonary/Chest: Effort normal and breath sounds normal. He exhibits no respiratory distress. He has no wheezes. Abdominal: Abdomen soft and bowel sounds normal. He exhibits no distension. No tenderness present. Genitourinary: Penis normal. Pt has mild erythema to bilateral scrutum. Area non-tender, but patient says it does itch Musculoskeletal: Normal range of motion. Neurological: He has normal motor skills and intact cranial nerves. He is alert and oriented.

Skin: Skin is warm and dry. Rash noted. He is not diaphoretic.

Bilateral scrotal erythema. No open lesions. No pain.

Psychiatric: He displays normal mood, memory, affect, and judgment.

ASSESSMENT:

52 y/o male w/ chronic tinea cruris

ED Provider Note (continued)

Will write for Clotrimazole cream, 1%, apply twice daily.

F/U PMD.

CHAD M VENNE MD Kaiser West Los Angeles Emergency Department 1:54 AM

Electronically signed by Venne, Chad M (M.D.) at 8/9/2007 1:54 AM

ED Care Timeline

Because of the "fall back" time switch, events that occur between the following time periods may be shown out of order: November 4, 2007 01:00:00 to 01:59:59
November 2, 2008 01:00:00 to 01:59:59
November 1, 2009 01:00:00 to 01:59:59
November 7, 2010 01:00:00 to 01:59:59
November 6, 2011 01:00:00 to 01:59:59
November 4, 2012 01:00:00 to 01:59:59
November 3, 2013 01:00:00 to 01:59:59
November 2, 2014 01:00:00 to 01:59:59
November 1, 2015 01:00:00 to 01:59:59
November 6, 2016 01:00:00 to 01:59:59
November 5, 2017 01:00:00 to 01:59:59
November 4, 2018 01:00:00 to 01:59:59
November 3, 2019 01:00:00 to 01:59:59
November 1, 2020 01:00:00 to 01:59:59
November 7, 2021 01:00:00 to 01:59:59
November 6, 2022 01:00:00 to 01:59:59
November 5, 2023 01:00:00 to 01:59:59

8/8/2007	Event	Details	User
22:48	Patient arrived in ED		Davis, Dorothy Isobel (R.N.)
22:49	RN Started		Davis, Dorothy Isobel (R.N.)
22:49	General Appearance	Other flowsheet entries (Distress Level): MILD	Davis, Dorothy Isobel (R.N.)
22:49:39	Chief Complaints Updated	PRESCRIPTION REFILL REQUESTED	Davis, Dorothy Isobel (R.N.)
22:50	RETIRED PRESENTING INFO	PRESENTING HISTORY History of Present Illness: c/o genital itching General Appearance-DistressLevel: MILD Industrial Related: NO Stated Medical History: (schizo effictive disorder) Stated Surg/Procedure History: SPINAL SURGERY Suicide Risk Assessment: Assess only for patients with primary diagnosis or primary complaint of emotional or behavioral disorder. Suicide risk assessment: NONE	Davis, Dorothy Isobel (R.N.)

are Timeline ((continued)		
22:50	Disposition	Vital Signs Temp: 96.9 °F (36.1 °C) Temp Source: ORAL Pulse: 97 BP: 118/79 Resp: 16 Height: 5' 7" (170.2 cm) Weight: 220 lb (99.8 kg) Scale Type: STATED SpO2: 97 % Pain Assessment Pain Score: 0 Scale Type: NUMERIC 0-10 PER PATIENT Other flowsheet entries RETIRED 02 Delivery: RA-ROOM AIR RETIRED Location: GENITAL RETIRED - Character: (itching)	Davis, Dorothy Isobel (R.N.)
22:54	Prenotification		Downing, Katrina
22:54	Triage Completed		Davis, Dorothy Isobel (R.N.)
22:54	Triage Completed	Other flowsheet entries Priority: 4 Non-Urgent Triage Priority Assigned: YES	Davis, Dorothy Isobel (R.N.)
22:54	Private Encounter?	Other flowsheet entries Private?: MAY DISCLOSE ALL PER PATIENT/PERSONAL REPRESENTATIVE	Davis, Dorothy Isobel (R.N.)
22:54:37	Home Medications Reviewed		Davis, Dorothy Isobel (R.N.)
8/9/2007	Event	Details	User

08/09/2007 - ED in WLED (continued)

ED Care Timeline (continued)

-			
00:00	RETIRED Comprehensive Assess	RETIRED Schmid Fall Risk Mobility: 0-AMBULATES WITH NO GAIT DISTURBANCE Mentation: 0-ALERT, ORIENTED X 3 Elimination: 0-INDEPENDENT IN ELIMINATION Brier History of Falls: 0 NO	Mims, Latricia M (R.N.)
		Prior History of Falls: 0-NO Current Medications: 1-ANTI-CONVULSANTS/TRANQUILIZERS OR PSYCHOTROPICS/HYPNOTICS Total Score: 1	
		SAFETY INTERVENTIONS	
		Patient Safety: ID BAND CHECK	
		Patient Rounds: AWAKE	
		Glasgow Coma Scale Eye opening: SPONTANEOUS	
		Verbal response: ORIENTED	
		Motor Response: OBEYS COMMANDS	
		NEUROLOGICAL WDL** Arouses to voice or touch; Awake or alert,	
		opens eyes spontaneously; Follows Commands; Oriented x 3; Speech	
		spontaneous, well paced, logical Denies Symptoms: YES	
		Assessments: WDL	
		Consciousness Level**: AWAKE; ALERT	
		Orientation**: PERSON; PLACE; TIME; EVENT; APPROPRIATE FOR AGE AND DEVELOPMENTAL STAGE	
		EYES, EARS, NOSE, AND THROAT ASSESSMENT	
		Denies Symptoms: YES	
		CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion-Pink nail	
		beds; 2+pulses; No edema Denies Symptoms: YES	
		Assessments: WDL	
		RETIRED CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion-	1
		Pink nail beds; 2+pulses; No edema	
		Denies Symptoms: YES Assessments: WDL	
		RESPIRATORY WDL** Regular rate, depth and pattern; Breath sounds	
		clear and equal bilaterally; Chest expansion equal; No shortness of	
		breath; No cough or productive sputum	
		Denies Symptoms: YES Assessments: WDL	
		Breathing Pattern**: REGULAR	
		GASTROINTESTINAL WDL** Abdomen soft, non-tender; Normoactive	
		bowel sounds; Continent of stool	
		Denies Symptoms: YES Assessments: WDL	
		GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine;	
		continent of urine; Bladder non-distended	
		Assessments: WDL GU Symptoms**: ITCHING	
		RETIRED GENITOURINARY WDL** Voids without difficulty; Clear,	
		yellow urine; continent of urine; Bladder non-distended	
		Assessments: WDL	
		GU Symptoms**: ITCHING Musculoskeletal Assessment	
		Denies Symptoms: YES	
		RETIRED MUSCULOSK / INTEG assessment	
		Denies Symptoms: YES Braden Scale for Prodicting Prossure Sore Pick @1988	
		Braden Scale for Predicting Pressure Sore Risk ©1988 Sensory Perception: NO IMPAIRMENT	
		Moisture: RARELY MOIST	
		Activity: WALKS FREQUENTLY	
		Mobility: NO LIMITATION Nutrition: ADEQUATE	
		Friction and Shear: NO APPARENT PROBLEM	
		Braden Scale Total: 22	
		PSYCHOSOCIAL ASSESSMENT	

		Denies Symptoms: YES Living Arrangement: LIVES ALONE	
00:00	RETIRED PRESENTING INFO	Other flowsheet entries RETIRED Precautions: FALL	Mims, Latricia M (R.N.)
00:00	Disposition	Other flowsheet entries RETIRED - Denies Symptoms: YES RETIRED - Abuse Assessment: DENIES ABUSE RETIRED - Abuse Report Completed: NOT APPLICABLE	Mims, Latricia M (R.N.)
00:13	Patient roomed in ED	To room HW12	Bugay, Connie
00:19	Begin Nurse Exam		Downing, Katrina
00:19	MD Started	VENNE, C assigned as Attending	Pennicott, Patsy E (R.N.)
00:23	Home Medications Reviewed		Mims, Latricia M (R.N.)
01:54:59	ED Provider Notes	Note filed at this time	Venne, Chad M (M.D.)
01:55	Condition at Disch	Other flowsheet entries Condition on Discharge: STABLE	Venne, Chad M (M.D.)
01:55:32	ED Disposition Entered	ED Disposition set to HOME	Venne, Chad M (M.D.)
02:00	Disposition	Discharge Discharged to: HOME Discharged via: AMBULATORY; PRIVATE AUTO Verbalizes understanding: YES KP Card given to Patient/Family: YES Other flowsheet entries RETIRED - After care instruction given to: PATIENT RETIRED - All belongings given to: PATIENT	Mims, Latricia M (R.N.)
02:02:09	Nurse Discharge Complete		Pennicott, Patsy B (R.N.)
02:02:09	Patient transferred	From room HW12 to room HNDC	Pennicott, Patsy E (R.N.)
02:03:46	Registration Completed		Downing, Katrina
02:03:51	Patient discharged		Downing, Katrina

Clinical Notes

Discharge Instructions

Venne, Chad M (M.D.) at 8/9/2007 0159

Author: Venne, Chad M (M.D.) Filed: 8/9/2007 1:59 AM Status: Written Pt given Jock itch handout.

Service: — Date of Service: 8/9/2007 1:59 AM Editor: Venne, Chad M (M.D.) (Physician) Author Type: Physician Creation Time: 8/9/2007 1:59 AM

Electronically signed by Venne, Chad M (M.D.) at 8/9/2007 1:59 AM

END OF ENCOUNTER

12/12/2007 - Lab in HOV LABORATORY

Visit Information

Department					
Name	Address	Phone			
HOV LABORATORY	6041 CADILLAC AVE Los Angeles CA 90034-1702	855-522-2778			

Location

Name	Address	Phone	
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE	857-2000	
	Los Angeles CA 90034-1702		

Visit Account Information

Hospital Account					
	Name	Acct ID	Class	Status	Primary Coverage
	Hawkins, Lawson B	2161622306	Outpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #2161622306)

	Relation	to		
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3432(H)			
LOS ANGELES, CA 90016-2618	323-297-3	323-297-3432 x00000(O)		

Coverage Information (for Hospital Account #2161622306)

F/O Payor/Plan		Precert #			
KP MEDICARE/KPSA SPECIAL NEEDS PLAN SCR KPSA SPECIAL NEEDS PLAN SCR					
Subscriber		Subscriber #			
Hawkins, Lawson B		xxxxxxx8205			
Address	Phone				

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	То
. Hooks, Sarah Elizabeth (M.D.), M.D.	_	Attending	_	Internal Medicine	_	_

Events

Hospital Outpatient at 12/12/2007 0742				
Unit: HOV LABORATORY Patient class: Outpatient				

Discharge at 12/12/2007 2359

Unit: HOV LABORATORY Patient class: Outpatient

12/12/2007 - Lab in HOV LABORATORY (continued)

END OF ENCOUNTER

07/28/2008 - Diagnostic Imaging in HOV GENERAL (X-RAY)

Visit Information

Department			
Name	Address	Phone	
HOV GENERAL (X-RAY)	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2421	

Location

Name	Address	Phone	
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE	857-2000	
	Los Angeles CA 90034-1702		

Visit Account Information

Но	ospital Account				
	Name	Acct ID	Class	Status	Primary Coverage
	Hawkins, Lawson B	2161943914	Outpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #2161943914)

Name	Relation • Pt	to Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	3432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	3432 x00000(O)		

Coverage Information (for Hospital Account #2161943914)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEE	DS PLAN SCR KPSA SPECIAL NEEDS PLAN SO	CR
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	То
Economou,	_	Attending	_	Surgery,	_	_
Tasia Stephanie				Head/Neck		
(M.D.), M.D.						

Events

Hospital Outpatient at 7/28/2008 2035

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

Discharge at 7/28/2008 2359

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

07/28/2008 - Diagnostic Imaging in HOV GENERAL (X-RAY) (continued)

Imaging

ectronically signed by: Econo		07/23/08 0900	Status: Comple
nis order may be acted on in a rdering user: Economou, Tasi rdering mode: Standard requency: Routine 07/23/08 -	nother encounter. a Stephanie (M.D.) 07/23/08 0900	Authorized by: Economou, T Ordered during: Office Visit of Class: Normal	asia Stephanie (M.D.) on 07/23/2008
uantity: 1 agnoses		Lab status: Final result	
ERVICALGIA. [723.1 (ICD-9-0 Provider Details	CM)]		
Provider		NPI	
Economou, Tasia Stephanie	e (M.D.)	1811045891	
Questionnaire			
		Answer	
DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a	SE?	No	<i>z</i>
DOES PT HAVE: KNOWN O DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a rder comments: Reason:pt c/	LOMA, OR IS TAKING GE?	No h Exam normal Please check	-
DOES PT HAVE: KNOWN O DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a rder comments: Reason:pt c/ CT SOFT TISSUE OF NECK Order status: Completed Accession number: 285870	LOMA, OR IS TAKING GE? and be cooperative. o pain left neck along carotid sheat C, W CONTRAST [112426362]	No h Exam normal Please check	-
DOES PT HAVE: KNOWN O DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a rder comments: Reason:pt c/ CT SOFT TISSUE OF NECK Order status: Completed Accession number: 2858709 Narrative: Exam normal Please check	LOMA, OR IS TAKING GE? and be cooperative. o pain left neck along carotid sheat C, W CONTRAST [112426362] 59 for abnormality or mass DOES PT GE, MULTIPLE MYELOMA, OR IS	No h Exam normal Please check Resulted: 07/2 Filed on: 07/29/08 1605 HAVE: KNOWN CONTRAST	29/08 2113, Result status: Final re
DOES PT HAVE: KNOWN O DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a rder comments: Reason:pt c/ CT SOFT TISSUE OF NECK Order status: Completed Accession number: 2858709 Narrative: Exam normal Please check ALLERGY, RENAL DISEAS	LOMA, OR IS TAKING GE? and be cooperative. o pain left neck along carotid sheat C, W CONTRAST [112426362] 59 for abnormality or mass DOES PT GE, MULTIPLE MYELOMA, OR IS	No h Exam normal Please check Resulted: 07/2 Filed on: 07/29/08 1605 HAVE: KNOWN CONTRAST	29/08 2113, Result status: Final re
DOES PT HAVE: KNOWN O DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a rder comments: Reason:pt c/ CT SOFT TISSUE OF NECK Order status: Completed Accession number: 2858709 Narrative: Exam normal Please check ALLERGY, RENAL DISEAS METFORMIN/GLUCOPHAC Transcription	LOMA, OR IS TAKING GE? and be cooperative. o pain left neck along carotid sheat 5, W CONTRAST [112426362] for abnormality or mass DOES PT SE, MULTIPLE MYELOMA, OR IS GE?->No	No th Exam normal Please check Resulted: 07/2 Filed on: 07/29/08 1605 THAVE: KNOWN CONTRAST TAKING Date and Time	29/08 2113, Result status: Final re Dictating Provider
DOES PT HAVE: KNOWN O DISEASE, MULTIPLE MYE METFORMIN/GLUCOPHAC cheduling instructions atient must be able to lie flat a rder comments: Reason:pt c/ CT SOFT TISSUE OF NECK Order status: Completed Accession number: 2858709 Narrative: Exam normal Please check ALLERGY, RENAL DISEAS METFORMIN/GLUCOPHAC Transcription Type Diagnostic imaging	LOMA, OR IS TAKING GE? and be cooperative. o pain left neck along carotid sheat 5, W CONTRAST [112426362] for abnormality or mass DOES PT SE, MULTIPLE MYELOMA, OR IS GE?->No	No th Exam normal Please check Resulted: 07/2 Filed on: 07/29/08 1605 THAVE: KNOWN CONTRAST TAKING Date and Time 7/29/2008 3:07 PM	29/08 2113, Result status: Final re

base to the lung apices. Coronal and sagittal reformatted images were performed. There were no comparison studies at present. The study demonstrates the airway to be patent. No acute fracture or dislocation is identified within the cervical spine. Mild degenerative changes are seen in the lower cervical spine with anterior osteophyte formation and intervertebral disc space narrowing. The lung apices are clear. No enhancing mass lesions are identified in the neck. Incidental note is made of a polypoid area of mucosal thickening in the floor of the left maxillary sinus measuring approximately 1.5 cm in greatest transverse dimension. Differential diagnosis includes possible mucus retention cyst vs polyp. No other significant abnormality is identified at this time. No explanation for left sided neck pain is noted. IMPRESSION: Incidental 1.5 cm left maxillary sinus mucus retention 1.

cyst vs polyp. Otherwise essentially unremarkable post contrast CT scan of the neck. No acute pathology is identified. No explanation for left sided neck pain is noted. No enhancing mass lesions are seen.

07/28/2008 - Diagnostic Imaging in HOV GENERAL (X-RAY) (continued)

Imaging (continued)

Reviewed by

Economou, Tasia Stephanie (M.D.) on 11/26/08 1342 Economou, Tasia Stephanie (M.D.) on 07/29/08 2043

CT SOFT TISSUE OF NECK, W CONTRAST [112426362]

Resulted: 07/28/08 2114, Result status: In process

Order status: **Completed** Accession number: 28587059 Narrative: Filed on: 07/28/08 2114 Resulting lab: SCAL RADIOLOGY INTERFACE

Exam normal Please check for abnormality or mass DOES PT HAVE: KNOWN CONTRAST ALLERGY, RENAL DISEASE, MULTIPLE MYELOMA, OR IS TAKING METFORMIN/GLUCOPHAGE?->No

Transcription

Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	28587059	7/29/2008 3:07 PM	Hsu, Christopher Ta-Wei
			(M.D.)
Signed by Hsu, Christophe	r Ta-Wei (M.D.), MEDICAL DOC	TOR on 07/29/08 at 1605	
CT NECK WITH CONTRAS	Γ-		
TECHNIQUE: Contiguous a	ial 5 mm images were obtained	from the skull	
	onal and sagittal reformatted ima	ges were	
	omparison studies at present.		
	airway to be patent. No acute fra	cture or	
dislocation is identified within	the cervical spine. Mild		

degenerative changes are seen in the lower cervical spine. With anterior osteophyte formation and intervertebral disc space narrowing. The lung apices are clear. No enhancing mass lesions are identified in the neck. Incidental note is made of a polypoid area of mucosal thickening in the floor of the left maxillary sinus measuring approximately 1.5 cm in greatest transverse dimension. Differential diagnosis includes possible mucus retention cyst vs polyp. No other significant abnormality is identified at this time. No explanation for left sided neck pain is noted. IMPRESSION:

1. Incidental 1.5 cm left maxillary sinus mucus retention cyst vs polyp. Otherwise essentially unremarkable post contrast CT scan of the neck. No acute pathology is identified. No explanation for left sided neck pain is noted. No enhancing mass lesions are seen.

Reviewed by

Economou, Tasia Stephanie (M.D.) on 11/26/08 1342 Economou, Tasia Stephanie (M.D.) on 07/29/08 2043

Testing Performed By

		Lab - Abbreviation	Name	Director	Address	Valid Date Range	
--	--	--------------------	------	----------	---------	------------------	--

Unknown

Imaging (continued)

120 - SCA

SCAL RADIOLOGY

Unknown

02/13/04 0000 - Present

Indications

Cervicalgia [723.1 (ICD-9-CM)]

All Reviewers List

Economou, Tasia Stephanie (M.D.) on 11/26/2008 13:42 Economou, Tasia Stephanie (M.D.) on 7/29/2008 20:43

END OF ENCOUNTER

12/17/2008 - Lab in HOV LABORATORY

Visit Information

Department			
Name	Address	Phone	
HOV LABORATORY	6041 CADILLAC AVE Los Angeles CA 90034-1702	855-522-2778	

Location

Name	Address	Phone	
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE Los Angeles CA 90034-1702	857-2000	

Visit Account Information

Hospital Account				
Name	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2161123259	Outpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21611232592)

	Relation	to		
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	3432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	3432 x00000(O)		

Coverage Information (for Hospital Account #21611232592)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL N	EEDS PLAN SCR KPSA SPECIAL NEEDS PLAN SCR	
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxx8205
Address	Phone	

Treatment Team

Provider Service Role Provider Team Specialty From	То
--	----

KAISER PERMANENTE

Hawkins, Lawson B MRN: 000017508205, DOB: 5/25/1955, Sex: M

12/17/2008 - Lab in HOV LABORATORY (continued)

Treatment Team (continued)

. Hooks, Sarah Elizabeth (M.D.), M.D.	_	Attending	_	Internal Medicine —	_

Events

Hospital Outpatient at 12/17/2008 0952
Unit: HOV LABORATORY

Patient class: Outpatient

Discharge at 12/17/2008 1038

Unit: HOV LABORATORY Patient class: Outpatient

Labs

LT, SERUM [130928333] (Final result)					
Electronically signed by: Hooks, Sarah Elizabeth (M.D.)	Status: Complete				
s order may be acted on in another encounter. dering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926 dering mode: Standard equency: Routine 12/17/08 - antity: 1		Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordered during: Office Visit on 12/17/2008 Class: Normal Lab status: Final result			
Diagnoses HYPERLIPIDEMIA [272.4 (ICD-9-CM)]					
Provider Details					
Provider		NPI			
Hooks, Sarah Elizabeth (M.D.)		1497814131			
Specimen Information					
ID Type	Source		Collected By		
426881288 —	BLOOD		MN2 12/17/08 1	1020	
ALT, SERUM [130928333] (Abnormal)		Resu	Ilted: 12/17/08 2	2158, Result status: Final resu	
Order status: Completed Collected by: MN2 12/17/08 1020		Filed on: 12/17/08 2 Resulting lab: SHEF		GIONAL LABORATORY	
Components	/alue	Reference Range	Flog	Lab	
	ilue	<pre><41 units/L</pre>	Flag H [^]	Lab 956	
Comment: The measured activity may vary by different me					
Reviewed by					
Spraggins, Gwendolyn (L.V.N.) on 12/22/08 14 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 12 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 12	13				

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209

Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024

Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024

Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953

Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953

Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

12/17/2008 - Lab in HOV LABORATORY (continued)

Labs (continued)

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
LT, SERUM [130928333	3]		Resulted: 12/17	7/08 1040, Result status: In proce
Order status: Completed Collected by: MN2 12/17			iled on: 12/17/08 1041 esulting lab: SHERMAN WAY	REGIONAL LABORATORY
Reviewed by				
Hooks, Sarah Eliza Hooks, Sarah Eliza	olyn (L.V.N.) on 12/22/0 abeth (M.D.) on 12/19/0 abeth (M.D.) on 12/19/0 abeth (M.D.) on 12/19/0 abeth (M.D.) on 12/18/0 abeth (M.D.) on 12/18/0 abeth (M.D.) on 12/18/0	8 1213 8 1213 8 1209 8 1209 8 1024 8 1024 8 0953 8 0953 8 0855		
esting Performed By Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
ndications HYPERLIPIDEMIA [27	72.4 (ICD-9-CM)]			
All Reviewers List				
Spraggins, Gwendolyr	n (L.V.N.) on 12/22/2008	3 14:40		
	th (M.D.) on 12/22/2008			
Hooks, Sarah Elizabet	th (M.D.) on 12/22/2008	12:13		
Hooks, Sarah Elizabet	th (M.D.) on 12/22/2008	12:09		
Hooks, Sarah Elizabet	th (M.D.) on 12/22/2008	12:09		
Hooks, Sarah Elizabet	th (M.D.) on 12/19/2008	10:24		
Hooks, Sarah Elizabet	th (M.D.) on 12/19/2008	10:24		
Hooks, Sarah Elizabet	th (M.D.) on 12/19/2008	09:53		
Hooks, Sarah Elizabet	th (M.D.) on 12/19/2008	09:53		
Hooks, Sarah Elizabet	th (M.D.) on 12/18/2008	08:55		
	th (M.D.) on 12/18/2008			
, SERUM [130928334] (F	Final result)			
ctronically signed by: Hoc		M.D.) on 12/17/08 09	26	Status: Comple
s order may be acted on i				
lering user: Hooks, Sarah	Elizabeth (M.D.) 12/17		thorized by: Hooks, Sarah Eliz	
lering mode: Standard			dered during: Office Visit on 12	2/17/2008
quency: Routine 12/17/0	8 -	• • •	ss: Normal	
antity: 1		Lat	o status: Final result	
gnoses				
PERLIPIDEMIA [272.4 (IC	CD-9-CM)]			
Provider Details				
Provider Details Provider		N	PI	

1497814131

Hooks, Sarah Elizabeth (M.D.)

Labs (continued)

nation				
Туре	Source		Collected	I By
_	BLOOD		MN2 12/1	7/08 1020
80928334]		Res	ulted: 12/17	7/08 2158, Result status: Final result
mpleted		Filed on: 12/17/08 2159		
N2 12/17/08 1020		Resulting lab: SHERMAN WAY REGIONAL LABORATORY		
	Value	Reference Range	Flag	Lab
	30	<37 units/L	_	956
	Type — 30928334] mpleted N2 12/17/08 1020	Type Source — BLOOD 30928334]	Type Source — BLOOD 30928334] Res mpleted Filed on: 12/17/08 1 V2 12/17/08 1020 Resulting lab: SHE Value Reference Range	TypeSourceCollectedBLOODMN2 12/10928334]Resulted: 12/17mpletedFiled on: 12/17/08 2159V2 12/17/08 1020Resulting lab: SHERMAN WAValueReference RangeFlag

Comment:

The measured activity may vary by different method. This result was measured using the Roche method.

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
AST, SERUM [130928334]		Resulted: 12/17	7/08 1040, Result status: In process
Order status: Completed		File	ed on: 12/17/08 1041	
	~~	D		DECIONAL LADODATODY

Collected by: MN2 12/17/08 1020

Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Labs (continued)

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

CBC W DIFFERENTIAL, AUTO [130928335] (Final result)

• • • • • • • • • •					
is order may be a	d by: Hooks, Sarah Elizabeth (M acted on in another encounter.	-			Status: Complete
dering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926 dering mode: Standard equency: Routine 12/17/08 -			Authorized by: Hooks, Sarah Elizabeth (M.D.)		
			Ordered during: Offic	e Visit on 12/17/20	08
			Class: Normal		
antity: 1			Lab status: Final resu	ılt	
gnoses					
	SOPHAGEAL REFLUX DISEASE) [530.81 (ICD-	9-CM)]		
ROAT PAIN [784					
	[272.4 (ICD-9-CM)]				
Provider Details					
Provider			NPI		
Hooks, Sarah El	lizabeth (M.D.)		1497814131		
Cuccimon Inform	nation				
Specimen Inform		Source		Collected By	
426881306	Туре	BLOOD		MN2 12/17/08 102	0
420001300	—	BLOOD		WINZ 12/17/00 102	.0
CBC W DIFFERE	ENTIAL, AUTO [130928335] (Abi	normal)	Resulted: 12/17/08 1445, Result status: Final res		
Order status: Co			Filed on: 12/17/08 1		-,
	N2 12/17/08 1020		Resulting lab: WLA		
Collected by. MI	12/17/00 1020				CEABORATORT
Components	5				
Component		Value	Reference Range	Flag	Lab
WBC'S AUT	0	5.6	4.0 - 11.0	—	305
			thou/cumm		
RBC, AUTO		4.82	4.7 - 6.1 mil/cumm		305
HGB		15.1	14.0 - 18.0 g/dL		305
HCT, AUTO		44.7	42 - 52 %		305
MCV		92.7	80 - 94 fl		305
MCH		31.2	27 - 35 pg/cell		305
MCHC		33.7	32 - 37 g/dL	_	305
RDW, BLOO)D	13.8	11.5 - 14.5 %	_	305
	, AUTOMATED COUNT	148	130 - 400		305
· _ · · ~ · ·	,		thou/mcL		
MPV		10.8	7.4 - 10.4 fl	Н^	305
	IILS %, AUTOMATED COUNT	61.5	42 - 75 %	_	305
	TES %, AUTOMATED COUNT	27.7	20 - 51 %		305
MONOS %,	· ·	7.8	1 - 12 %		305
		1.0	1 12 /0		000

0 - 10 %

2.5

EOSINOPHILS %, AUTOMATED COUNT

305

Labs (continued)

BASOPHILS %, AUTOMATED COUNT	0.5	0 - 1 %	_	305
NEUTROPHILS	3.5	1 - 7 thou/mcL	_	305
LYMPHOCYTES	1.6	1 - 3 thou/mcL	—	305
MONOCYTES	0.40	0.11 - 0.59 thou/mcL	—	305
EOSINOPHILS	0.10	0 - 10 thou/mcL	—	305
BASOPHILS	0.00	0.0 - 0.2 thou/mcL		305

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/17/08 1524

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
321 - 305	WLA MEDICAL CENTER LABORATORY	S.R. McLaren, D.O.	6041 Cadillac Ave. LOS ANGELES CA 90034	09/01/05 0850 - 05/23/17 0009

CBC W DIFFERENTIAL, AUTO [130928335]

Order status: Completed Collected by: MN2 12/17/08 1020

Filed on: 12/17/08 1041 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Resulted: 12/17/08 1040, Result status: In process

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/17/08 1524

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

GERD [530.81 (ICD-9-CM)] Throat Pain [784.1 (ICD-9-CM)] HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

Labs (continued)

All Reviewers List				
Spraggins, Gwendolyn (L.V.N.) on 12/22/20 Hooks, Sarah Elizabeth (M.D.) on 12/19/20 Hooks, Sarah Elizabeth (M.D.) on 12/18/20 Hooks, Sarah Elizabeth (M.D.) on 12/18/20 Hooks, Sarah Elizabeth (M.D.) on 12/18/20	08 12:13 08 12:13 08 12:09 08 12:09 08 10:24 08 10:24 08 09:53 08 09:53 08 08:55 08 08:55			
UCOSE, FASTING [130928337] (Final result)				
ectronically signed by: Hooks, Sarah Elizabeth nis order may be acted on in another encounter. rdering user: Hooks, Sarah Elizabeth (M.D.) 12/ rdering mode: Standard requency: Routine 12/17/08 - uantity: 1 agnoses YPERLIPIDEMIA [272.4 (ICD-9-CM)] Provider Details		D8 0926 Authorized by: Hook Ordered during: Offic Class: Normal Lab status: Final res	ce Visit on 12	
Provider		NPI		
Hooks, Sarah Elizabeth (M.D.) Specimen Information		1497814131		
ID Type	Source		Collected	Ву
426881307 —	BLOOD		MN2 12/17	
GLUCOSE, FASTING [130928337] (Abnorma	l)	Res	ulted: 12/17/	/08 2158, Result status: Final re
Order status: Completed Collected by: MN2 12/17/08 1020	I)	Filed on: 12/17/08 2	2159	REGIONAL LABORATORY
Order status: Completed Collected by: MN2 12/17/08 1020 Components		Filed on: 12/17/08 2 Resulting lab: SHE	2159 RMAN WAY	REGIONAL LABORATORY
Order status: Completed Collected by: MN2 12/17/08 1020	l) Value 116	Filed on: 12/17/08 2	2159	

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Labs (continued)

GLUCOSE, FASTING [130928337]

Resulted: 12/17/08 1040, Result status: In process

Order status: Completed Collected by: MN2 12/17/08 1020 Filed on: 12/17/08 1041 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855 Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

HBSAG [130928338] (Final result)

	tronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/17/08 0926 order may be acted on in another encounter.				
Ordering user: Hooks, Sarah Eliza Ordering mode: Standard Frequency: Routine 12/17/08 - Quantity: 1 Diagnoses ROUTINE ADULT HEALTH CHEC Provider Details	beth (M.D.) 12/17/08 0926 Authorize Ordered Class: No Lab statu	ed by: Hooks, Sarah Elizabeth (M.D.) during: Office Visit on 12/17/2008 ormal is: Final result			
Provider	NPI				
Hooks, Sarah Elizabeth (M.D.)	149781	4131			
Specimen Information					
ID Type	Source	Collected By			
	BLOOD	MN2 12/17/08 1020			

12/17/2008 - Lab in HOV LABORATORY (continued)

Labs (continued)

BSAG [130928338]			Resulted: 12/18/08 1338, Result status: Final resu			
Order status: Completed Collected by: MN2 12/17/08 1020			Filed on: 12/18/08 1338 Resulting lab: SHERMAN WAY REGIONAL LABORATORY			
Components						
Component		Value	Reference Range Flag	g Lab		
HEP B SURFACE AG	B, EIA	NEGATIVE		956		
Reviewed by						
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	olyn (L.V.N.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0	8 1213 8 1213 8 1209 8 1209 8 1024 8 1024 8 1024 8 0953				
esting Performed By	N	D'				
Lab - Abbreviation		Director	Address	Valid Date Range		
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannie M.D.	r, 11668 Sherman V NORTH HOLLYW CA 91605	,		
IBSAG [130928338]			Resulted	: 12/17/08 1040, Result status: In proce		
Order status: Completed			Filed on: 12/17/08 1041			
Reviewed by	olyn (L.V.N.) on 12/22/0	08 1440				
	beth (M.D.) on 12/22/0	8 1213				
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0	8 1209 8 1209 8 1024 8 1024 8 1024 8 0953				
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0	8 1209 8 1209 8 1024 8 1024 8 0953 8 0953				
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Testing Performed By Lab - Abbreviation	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 Name	8 1209 8 1209 8 1024 8 1024 8 0953 8 0953 Director	Address	Valid Date Range		
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0	8 1209 8 1209 8 1024 8 1024 8 0953 8 0953		Vay 08/30/05 1817 - 09/01/10 0000		
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Testing Performed By Lab - Abbreviation	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 Name SHERMAN WAY REGIONAL	8 1209 8 1209 8 1024 8 1024 8 0953 8 0953 Director Ann M. Vannie	r, 11668 Sherman V NORTH HOLLYW	Vay 08/30/05 1817 - 09/01/10 0000		
Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Testing Performed By Lab - Abbreviation 240 - 956	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 BERMAN WAY REGIONAL LABORATORY	8 1209 8 1209 8 1024 8 1024 8 0953 8 0953 Director Ann M. Vannie M.D.	r, 11668 Sherman V NORTH HOLLYW	Vay 08/30/05 1817 - 09/01/10 0000		
Hooks, Sarah Eliza Hooks, Sarah Eliza Testing Performed By Lab - Abbreviation 240 - 956	beth (M.D.) on 12/22/0 beth (M.D.) on 12/22/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 beth (M.D.) on 12/19/0 BERMAN WAY REGIONAL LABORATORY	8 1209 8 1209 8 1024 8 1024 8 0953 8 0953 Director Ann M. Vannie M.D.	r, 11668 Sherman V NORTH HOLLYW	Vay 08/30/05 1817 - 09/01/10 0000		

Labs (continued) Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 HEPATITIS C ANTIBODY [130928339] (Final result) Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 12/17/08 0926 Status: Completed This order may be acted on in another encounter. Ordering user: Hooks, Sarah Elizabeth (M.D.) 12/17/08 0926 Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordering mode: Standard Ordered during: Office Visit on 12/17/2008 Frequency: Routine 12/17/08 -Class: Normal Quantity: 1 Lab status: Final result Diagnoses ROUTINE ADULT HEALTH CHECK UP EXAM [V70.0 (ICD-9-CM)] **Provider Details** NPI Provider Hooks, Sarah Elizabeth (M.D.) 1497814131 Specimen Information ID Source **Collected By** Туре 426881307 BLOOD MN2 12/17/08 1020 **HEPATITIS C ANTIBODY [130928339]** Resulted: 12/18/08 1553, Result status: Final result Filed on: 12/18/08 1553 Order status: Completed Collected by: MN2 12/17/08 1020 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Components Component Value Reference Range Flag Lab HEPATITIS C VIRUS AB, EIA QL NEGATIVE 956 Comment: A NON-REACTIVE TEST RESULT DOES NOT EXCLUDE THE POSSIBILITY OF EXPOSURE TO HEPATITIS C. LEVELS OF ANTI-HCV MAY BE UNDETECTABLE IN EARLY INFECTION. **Reviewed by** Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953 Testing Performed By Valid Date Range Lab - Abbreviation Director Address Name 240 - 956 SHERMAN WAY Ann M. Vannier, 11668 Sherman Way 08/30/05 1817 - 09/01/10 0000 REGIONAL M.D. NORTH HOLLYWOOD LABORATORY CA 91605 HEPATITIS C ANTIBODY [130928339] Resulted: 12/17/08 1040, Result status: In process Filed on: 12/17/08 1041 Order status: Completed Collected by: MN2 12/17/08 1020 Resulting lab: SHERMAN WAY REGIONAL LABORATORY Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440 Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213

Labs (continued)

Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53

LIPID PANEL [130928340] (Final result)

lectronically signed by: Hooks, Sarah Elizabet		8 0926		Status: Completed
his order may be acted on in another encounte rdering user: Hooks, Sarah Elizabeth (M.D.) 12 rdering mode: Standard equency: Routine 12/17/08 - uantity: 1 agnoses YPERLIPIDEMIA [272.4 (ICD-9-CM)]		Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordered during: Office Visit on 12/17/2008 Class: Normal Lab status: Final result		
Provider Details				
Provider		NPI		
Hooks, Sarah Elizabeth (M.D.)		1497814131		
Specimen Information				
ID Type	Source		Collected	I Ву
426881307 —	BLOOD		MN2 12/1	7/08 1020
LIPID PANEL [130928340] (Abnormal)		Resi	ulted: 12/17	7/08 2158, Result status: Final result
Order status: Completed		Filed on: 12/17/08 2		
Collected by: MN2 12/17/08 1020 Narrative:		Resulting lab: SHEF	RMAN WA	Y REGIONAL LABORATORY
FASTING? YES				
Components				
Component	Value	Reference Range	Flag	Lab
CHOLESTEROL	166	<200 mg/dL		956
TRIGLYCERIDE	202	<150 mg/dL	Н^	956
		0		956
HDL	34	>/=40 mg/dL	L¥	900

Labs (continued)

					-
CHOLESTEROL/HIGH DENSITY LIPOPROTEIN	4.9	<5.0	_	956	
Comment:					
	Fasting (>/= 1	2 hrs)		CHOL TRIG	
HDL-C LDL-C	OPT	TMAL: <200 <1	50 >/=40 <100) NEAR OPTIML:	
100-129 BORDERLN HI: 200-239 150					
>/=500 >/=190					2
kidney disease may benefit from LDL-0	C levels below 10	0 mg/dL. Optima	I management inclu	udes adequate dosing of	
"statin"/lipid-lowering medications.					

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

LIPID PANEL [130928340]

Order status: Completed Collected by: MN2 12/17/08 1020 Resulted: 12/17/08 1040, Result status: In process

Filed on: 12/17/08 1041 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40

Labs (continued)

Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55
Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

PSA [130928341] (Final result)

	by: Hooks, Sarah Elizab		8 0926		Status: C	completed
dering user: Hook dering mode: Star equency: Routine antity: 1	s, Sarah Elizabeth (M.D.) ndard		Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordered during: Office Visit on 12/17/2008 Class: Normal Lab status: Final result			
agnoses REENING EXAM	FOR PROSTATE CANCE	ER [V76.44 (ICD-9-CM)]			
Provider Details						
Provider			NPI			
Hooks, Sarah Eli	zabeth (M.D.)		1497814131			
Specimen Inform				<u> </u>		
ID	Туре	Source		Collected By		
426881307	—	BLOOD		MN2 12/17/0	8 1020	
PSA [130928341]	1		Res	ulted: 12/17/08	8 2228, Result status: I	-inal resu
Order status: Co	mpleted		Filed on: 12/17/08 2	229		
Collected by: MN	12 12/17/08 1020		Resulting lab: SHEF	RMAN WAY R	EGIONAL LABORATO	DRY
Components						
		Value	Reference Range	Flag	Lab	
Component					0=0	
Component PSA		0.53	< OR = 3.5 ng/mL	_	956	
Component PSA Comment:			< OR = 3.5 ng/mL			
Component PSA Comment: AGE-RELA		JESAGE	< OR = 3.5 ng/mL NORMAL VALUE(YEARS)	(ng/mL)	
Component PSA Comment: AGE-RELA	19 OR LESS LESS TH	JESAGE AN OR EQUAL TO 2.9	< OR = 3.5 ng/mL NORMAL VALUE(5 50 - 59 LESS 1	YEARS) HAN OR EQU	(ng/mL) JAL TO 3.5 60 - 69	LESS
Component PSA Comment: AGE-RELA 	49 OR LESS LESS TH EQUAL TO 4.5 70 OR GR	JESAGE IAN OR EQUAL TO 2.3 EATER LESS THAN	< OR = 3.5 ng/mL NORMAL VALUE(5 50 - 59 LESS 1 I OR EQUAL TO 6.5 T	YEARS) HAN OR EQU HE DETERM	(ng/mL) JAL TO 3.5 60 - 69 INATION THAT THIS A	AGE-
Component PSA Comment: AGE-RELA 	19 OR LESS LESS TH	JESAGE AN OR EQUAL TO 2. EATER LESS THAN OR ABNORMAL IS V	< OR = 3.5 ng/mL NORMAL VALUE (5 50 - 59 LESS T I OR EQUAL TO 6.5 T (ALID ONLY IF THIS F	YEARS) HAN OR EQU HE DETERM PATIENT HAS	(ng/mL) JAL TO 3.5 60 - 69 INATION THAT THIS A NEVER BEEN TREA	AGE- TED

MODULAR ANALYTIC SYSTEM, AN ELECTROCHEMILUMINESCENCE IMMUNOASSAY METHOD.

Reviewed by

Spraggins, Gwendolyn (L.V.N.) on 12/22/08 1440
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1213
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/22/08 1209
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 1024
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/19/08 0953
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855
Hooks, Sarah Elizabeth (M.D.) on 12/18/08 0855

Testing Performed By

Labs (continued)

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
'SA [130928341]			Resulted: 12/1	7/08 1040, Result status: In proces
Order status: Comple Collected by: MN2 12			iled on: 12/17/08 1041 Resulting lab: SHERMAN WAY	Y REGIONAL LABORATORY
Reviewed by				
Hooks, Sarah E Hooks, Sarah E	endolyn (L.V.N.) on 12/22/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/19/0 Elizabeth (M.D.) on 12/18/0 Elizabeth (M.D.) on 12/18/0	8 1213 8 1213 8 1209 8 1209 8 1024 8 1024 8 0953 8 0953 8 0855		
Testing Performed B Lab - Abbreviatio	-	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
ndications				
SCREENING EXA	MINATION FOR CA, PRO	STATE [V76.44 (ICD	-9-CM)]	
All Reviewers List				
Hooks, Sarah Eliza Hooks, Sarah Eliza	olyn (L.V.N.) on $12/22/2008$ abeth (M.D.) on $12/19/2008$ abeth (M.D.) on $12/19/2008$ abeth (M.D.) on $12/19/2008$ abeth (M.D.) on $12/19/2008$ abeth (M.D.) on $12/18/2008$ abeth (M.D.) on $12/18/2008$	12:13 12:13 12:09 12:09 10:24 10:24 09:53 09:53 08:55		
[130928342] (Final r			20	
s order may be acted dering user: Hooks, Sa dering mode: Standard quency: Routine 12/1 antity: 1 gnoses ROAT PAIN [784.1 (IC	7/08 -	/08 0926 Au Or Cla	126 Ithorized by: Hooks, Sarah Eli: dered during: Office Visit on 1 ass: Normal b status: Final result	

NPI

1497814131

Provider Details Provider

Hooks, Sarah Elizabeth (M.D.)

Labs (continued)

Specimen Information					
ID Type		Source		Collected E	Зу
426881307 —		BLOOD		MN2 12/17/	/08 1020
FSH [130928342]			Res	ulted: 12/17/	08 2307, Result status: Final resu
Order status: Completed			Filed on: 12/17/08 2	2307	
Collected by: MN2 12/17/	08 1020		Resulting lab: SHE	RMAN WAY	REGIONAL LABORATORY
Components					
Component		Value	Reference Range	Flag	Lab
TSH		0.65	0.4 - 4.00 uIU/mL	_	956
Reviewed by					
	(1×10^{-10})	1440			
	olyn (L.V.N.) on 12/22/08 beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/18/08				
HOOKS, Sarah Eliza	beth (M.D.) on 12/18/08	0855			
Testing Performed By Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY	Ann M. Vannie		nan Wav	08/30/05 1817 - 09/01/10 0000
	REGIONAL LABORATORY	M.D.	NORTH HOL CA 91605		
FSH [130928342]			Res	sulted: 12/17	/08 1040, Result status: In proces
Order status: Completed			Filed on: 12/17/08 1		· · · · · · · · · · · · · · · · · · ·
Collected by: MN2 12/17/	08 1020				REGIONAL LABORATORY
· · · · · · · · · · · · · · · · · · ·			5		
Reviewed by					
Spraggins, Gwendo	olyn (L.V.N.) on 12/22/08	1440			
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/22/08				
	beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/19/08 beth (M.D.) on 12/19/08				
	beth (M.D.) on 12/18/08				
	beth (M.D.) on 12/18/08				
resting Performed By					
Festing Performed By Lab - Abbreviation	Name	Director	Address		Valid Date Range
	Name SHERMAN WAY	Director Ann M. Vannie		nan Way	Valid Date Range 08/30/05 1817 - 09/01/10 0000

Indications

Throat Pain [784.1 (ICD-9-CM)]

Labs (continued)

HYPERLIPIDEMIA [272.4 (ICD-9-CM)]

All Reviewers List

Spraggins, Gwendolyn (L.V.N.) on 12/22/2008 14:40 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:13 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:09 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 10:24 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/19/2008 09:53 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55 Hooks, Sarah Elizabeth (M.D.) on 12/18/2008 08:55

END OF ENCOUNTER

12/17/2008 - Diagnostic Imaging in HOV GENERAL (X-RAY)

Visit Information

Department			
Name	Address	Phone	
HOV GENERAL (X-RAY)	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2421	

Location

Name	Address	Phone	
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE	857-2000	
	Los Angeles CA 90034-1702		

Visit Account Information

1	lospital Account				
	Name	Acct ID	Class	Status	Primary Coverage
-	Hawkins, Lawson B	2161123259 2	Outpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21611232592)

	Relation	to		
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	323-297-3432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	323-297-3432 x00000(O)		

Coverage Information (for Hospital Account #21611232592)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEEL	DS PLAN SCR KPSA SPECIAL NEEDS PLAN SCR	
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	То
. Hooks, Sarah Elizabeth (M.D.), M.D.		Attending	_	Internal Medicine	_	_

Events

Hospital Outpatient at 12/17/2008 1039

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

Discharge at 12/17/2008 2359

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

Imaging

Imaging

XR CERVICAL SPINE, AP AND LATERAL [130927301] (Final result)

	ks, Sarah Elizabeth (M.D.) on 12/	17/08 0921	Status: Complete
Ordering mode: Standard Frequency: Routine 12/17/08	Elizabeth (M.D.) 12/17/08 0921	Authorized by: Hooks, Sarah B Ordered during: Office Visit or Class: Normal	
Quantity: 1 Diagnoses		Lab status: Final result	
THROAT PAIN [784.1 (ICD-9	9-CM)]		
Provider Details			
Provider		NPI	
Hooks, Sarah Elizabeth (N	M.D.)	1497814131	
Order comments: Reason: r/	/o OA		
XR CERVICAL SPINE, A	P AND LATERAL [130927301]	Resulted: 12/2	2/08 1113, Result status: Final res
Order status: Completed		Filed on: 12/22/08 1054	
Accession number: 3094	14465		
Transcription			
Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	30944465	12/19/2008 11:44 AM	Allweiss, Kenneth David
			(M.D.)
Signed by Allweiss,	Kenneth David (M.D.), MEDICAL D	OCTOR ON 12/22/06 at 1054	
osteophyte formation	pace height at C5-C6 with some and which is also present at the C6-C7 demonstrated. The remainder of th arkable. Minimal degenerative changes as o	evel. No e	
osteophyte formation posterior extension is examination is unrema	which is also present at the C6-C7 demonstrated. The remainder of th arkable.	evel. No e	
osteophyte formation posterior extension is examination is unrema	which is also present at the C6-C7 demonstrated. The remainder of th arkable.	evel. No e	
osteophyte formation posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	which is also present at the C6-C7 demonstrated. The remainder of th arkable.	evel. No e	
osteophyte formation posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142	evel. No e described.	7/08 1113, Result status: In proce
osteophyte formation posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Mooks, Sarah Eliza Mooks, Sarah Eliza	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 AP AND LATERAL [130927301]	evel. No e described. Resulted: 12/1 Filed on: 12/17/08 1113	· · · · ·
osteophyte formation posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Kooks, Sarah Eliza	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 AP AND LATERAL [130927301]	evel. No e described. Resulted: 12/1	· · · · ·
osteophyte formation posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Mooks, Sarah Eliza Mooks, Sarah Eliza	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 AP AND LATERAL [130927301]	evel. No e described. Resulted: 12/1 Filed on: 12/17/08 1113	· · · · ·
osteophyte formation is posterior extension is examination is unrema IMPRESSION:	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 AP AND LATERAL [130927301]	evel. No e described. Resulted: 12/1 Filed on: 12/17/08 1113	· · · · ·
osteophyte formation is posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Order status: Completed Accession number: 3094 Transcription	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 AP AND LATERAL [130927301]	evel. No e described. Resulted: 12/1 Filed on: 12/17/08 1113 Resulting lab: SCAL RADIC	DLOGY INTERFACE Dictating Provider Allweiss, Kenneth David
osteophyte formation is posterior extension is examination is unrema IMPRESSION: Reviewed by Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Hooks, Sarah Eliza Nooks, Sarah Eliza Hooks, Sarah Eliza Order status: Completed Accession number: 3094 Transcription Type Diagnostic imaging	which is also present at the C6-C7 demonstrated. The remainder of the arkable. Minimal degenerative changes as of abeth (M.D.) on 12/22/08 1214 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1142 abeth (M.D.) on 12/22/08 1138 AP AND LATERAL [130927301] d 14465	evel. No e described. Resulted: 12/1 Filed on: 12/17/08 1113 Resulting lab: SCAL RADIC Date and Time 12/19/2008 11:44 AM	DLOGY INTERFACE Dictating Provider

Imaging (continued)

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 12/2	22/08 1214
Hooks, Sarah Elizabeth (M.D.) on 12/2	22/08 1142
Hooks, Sarah Elizabeth (M.D.) on 12/2	22/08 1142
Hooks, Sarah Elizabeth (M.D.) on 12/2	22/08 1138

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present

Indications

Throat Pain [784.1 (ICD-9-CM)]

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 12:14 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 11:42 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 11:42 Hooks, Sarah Elizabeth (M.D.) on 12/22/2008 11:38

END OF ENCOUNTER

07/23/2009 - Diagnostic Imaging in HOV GENERAL (X-RAY)

Visit Information

Department			
Name	Address	Phone	
HOV GENERAL (X-RAY)	6041 CADILLAC AVE Los Angeles CA 90034-1702	323-857-2421	

Location

Name	Address	Phone
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE Los Angeles CA 90034-1702	857-2000

Visit Account Information

Hospital Account				
Name	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2161154173 7	Outpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21611541737)

Name	Relation to Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3432	2(H)		

KAISER PERMANENTE

07/23/2009 - Diagnostic Imaging in HOV GENERAL (X-RAY) (continued)

Visit Account Information (continued)

LOS ANGELES, CA 90016-2618

323-297-3432 x00000(O)

Coverage Information (for Hospital Account #21611541737)

F/O Payor/Plan		Precert #
KP MEDICARE/KPSA SPECIAL NEEDS PLAN SCR	KPSA SPECIAL NEEDS PLAN SCR	
Subscriber		Subscriber #
Hawkins, Lawson B		xxxxxxx8205
Address	Phone	

Events

Hospital Outpatient at 7/23/2009 0755

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

Discharge at 7/23/2009 2359

Unit: HOV GENERAL (X-RAY) Patient class: Outpatient

Imaging

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 0 This order may be acted on in another encounter.				
This order may be acted on in another encounter.	6/25/09 1706	Status: Complete		
Ordering user: Hooks, Sarah Elizabeth (M.D.) 06/25/09 1706	Authorized by: Hooks, Sarah			
Ordering mode: Standard		Ordered during: Telephone on 06/22/2009		
Frequency: Routine 06/25/09 -	Class: Normal			
Quantity: 1	Lab status: Final result			
Provider Details				
Provider	NPI			
Hooks, Sarah Elizabeth (M.D.)	1497814131			
Scheduling instructions				
NPO for 8 hours prior to procedure.				
Order comments: Reason: r/o gallstones				
US ABDOMEN [157000790]	Resulted: 07/24/09 0910, Result status: Final resu			
Order status: Completed	Filed on: 07/24/09 1019			
Accession number: 33432727	Filed 011. 07/24/09 1019			
Narrative:				
7/22/09 SCHEDULED U/S VIA PHONE INSTR AND PT KI	NOW, (PT IS NOT DIABETIC)			
Transcription				
T 15	Date and Time	Dictating Provider		
Туре ID	7/24/2009 10:19 AM	Bhasin, Dimple (M.D.)		
Type ID Diagnostic imaging 33432727				
	R on 07/24/09 at 1019	, I ()		
Diagnostic imaging 33432727	R on 07/24/09 at 1019			
Diagnostic imaging 33432727	R on 07/24/09 at 1019			
Diagnostic imaging 33432727 Signed by Bhasin, Dimple (M.D.), MEDICAL DOCTOR	R on 07/24/09 at 1019			
Diagnostic imaging 33432727	R on 07/24/09 at 1019			

Patient ID: 000017508205

Imaging (continued)

Age: 54 yrs Ref Phys: HOOKS, SARAH ELIZABETH Exam Date: 7/23/2009 Procedure: US ABDOMEN Exam Site: WLA Accession #: 33432727

INDICATIONS FOR SONOGRAPHY Reason: r/o gallstones

COMMENTS Abdominal Ultrasound:

LIVER:

The echogenicity of the liver appears increased.

BILIARY TREE:

The common bile duct measures 3.4 mm.

GALLBLADDER:

The gallbladder demonstrates at least one calculus.

PANCREAS:

The pancreas was not visualized due to overlying bowel gas.

RIGHT KIDNEY:

Right kidney measures L: 12.1 x W: x H: cm. The right kidney appears normal.

LEFT KIDNEY:

Left kidney measures L: 13.9 x W: x H: cm. The left kidney appears normal.

SPLEEN:

The spleen measures 12.9 cm in length.

Preliminary prepared by MARISA YRIARTE, SONOGRAPHER WLA RAD on 7/23/2009 9:13:51 AM. Sonographer: MARISA YRIARTE, SONOGRAPHER WLA RAD Electronically Signed and Authenticated By: DIMPLE BHASIN, M.D. WLA RAD on 7/24/2009 10:15:25 AM

Reviewed by

Yoder, William Henry Jr. (R.N.) on 07/06/11 1720 Yoder, William Henry Jr. (R.N.) on 07/06/11 1720 Alvarez, David III (C.H.E.) on 08/25/09 1529 Mirdamadi, Linda Marie (M.D.) on 08/25/09 1312

Imaging (continued)

Mirdamadi, Linda Marie (M.D.) on 08/25/09 1311 Lee, Jean Hwajin (M.D.) on 08/20/09 1701 Alvarez, David III (C.H.E.) on 08/20/09 1300 Alvarez, David III (C.H.E.) on 08/20/09 1300 Hooks, Sarah Elizabeth (M.D.) on 08/19/09 2334 Hooks, Sarah Elizabeth (M.D.) on 08/19/09 2334 Mirdamadi, Linda Marie (M.D.) on 08/19/09 1835 Mirdamadi, Linda Marie (M.D.) on 08/19/09 1830 Mirdamadi, Linda Marie (M.D.) on 08/07/09 1837 Mirdamadi, Linda Marie (M.D.) on 08/03/09 1852 Hooks, Sarah Elizabeth (M.D.) on 07/28/09 1402 Hooks, Sarah Elizabeth (M.D.) on 07/24/09 1209 Hooks, Sarah Elizabeth (M.D.) on 07/24/09 1208

US ABDOMEN [157000790]

Resulted: 07/23/09 0910, Result status: In process

Filed on: 07/23/09 0910 Order status: Completed Accession number: 33432727 Resulting lab: SCAL RADIOLOGY INTERFACE

7/22/09 SCHEDULED U/S VIA PHONE INSTR AND PT KNOW. (PT IS NOT DIABETIC)

Transcription

Narrative:

Туре	ID	Date and Time	Dictating Provider
Diagnostic imaging	33432727	7/24/2009 10:19 AM	Bhasin, Dimple (M.D.)
Signed by Bhasin, Dim	ple (M.D.), MEDICAL DOC	CTOR on 07/24/09 at 1019	

HAWKINS, LAWSON B General Exam, 7/23/2009

EXAM INFORMATION Patient Name: HAWKINS, LAWSON B Patient ID: 000017508205 DOB: 5/25/1955 Age: 54 yrs Ref Phys: HOOKS, SARAH ELIZABETH Exam Date: 7/23/2009 Procedure: US ABDOMEN Exam Site: WLA Accession #: 33432727

INDICATIONS FOR SONOGRAPHY Reason: r/o gallstones

COMMENTS

Abdominal Ultrasound:

LIVER:

The echogenicity of the liver appears increased.

BILIARY TREE:

The common bile duct measures 3.4 mm.

GALLBLADDER:

The gallbladder demonstrates at least one calculus.

Imaging (continued)

PANCREAS:

The pancreas was not visualized due to overlying bowel gas.

RIGHT KIDNEY:

Right kidney measures L: 12.1 x W: x H: cm. The right kidney appears normal.

LEFT KIDNEY:

Left kidney measures L: 13.9 x W: x H: cm. The left kidney appears normal.

SPLEEN:

The spleen measures 12.9 cm in length.

Preliminary prepared by MARISA YRIARTE, SONOGRAPHER WLA RAD on 7/23/2009 9:13:51 AM. Sonographer: MARISA YRIARTE, SONOGRAPHER WLA RAD Electronically Signed and Authenticated By: DIMPLE BHASIN, M.D. WLA RAD on 7/24/2009 10:15:25 AM

Reviewed by

Yoder, William Henry Jr. (R.N.) on 07/06/11 1720
Yoder, William Henry Jr. (R.N.) on 07/06/11 1720
Alvarez, David III (C.H.E.) on 08/25/09 1529
Mirdamadi, Linda Marie (M.D.) on 08/25/09 1312
Mirdamadi, Linda Marie (M.D.) on 08/25/09 1311
Lee, Jean Hwajin (M.D.) on 08/20/09 1701
Alvarez, David III (C.H.E.) on 08/20/09 1300
Alvarez, David III (C.H.E.) on 08/20/09 1300
Hooks, Sarah Elizabeth (M.D.) on 08/19/09 2334
Hooks, Sarah Elizabeth (M.D.) on 08/19/09 2334
Mirdamadi, Linda Marie (M.D.) on 08/19/09 1835
Mirdamadi, Linda Marie (M.D.) on 08/19/09 1830
Mirdamadi, Linda Marie (M.D.) on 08/07/09 1837
Mirdamadi, Linda Marie (M.D.) on 08/03/09 1852
Hooks, Sarah Elizabeth (M.D.) on 07/28/09 1402
Hooks, Sarah Elizabeth (M.D.) on 07/24/09 1209
Hooks, Sarah Elizabeth (M.D.) on 07/24/09 1208

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
120 - SCA	SCAL RADIOLOGY	Unknown	Unknown	02/13/04 0000 - Present

All Reviewers List

Yoder, William Henry Jr. (R.N.) on 7/6/2011 17:20 Yoder, William Henry Jr. (R.N.) on 7/6/2011 17:20 Alvarez, David III (C.H.E.) on 8/25/2009 15:29 Mirdamadi, Linda Marie (M.D.) on 8/25/2009 13:12 Mirdamadi, Linda Marie (M.D.) on 8/25/2009 13:11

Imaging (continued)

Lee, Jean Hwajin (M.D.) on 8/20/2009 17:01 Alvarez, David III (C.H.E.) on 8/20/2009 13:00 Alvarez, David III (C.H.E.) on 8/20/2009 13:00 Hooks, Sarah Elizabeth (M.D.) on 8/19/2009 23:34 Hooks, Sarah Elizabeth (M.D.) on 8/19/2009 23:34 Mirdamadi, Linda Marie (M.D.) on 8/19/2009 18:35 Mirdamadi, Linda Marie (M.D.) on 8/19/2009 18:37 Mirdamadi, Linda Marie (M.D.) on 8/7/2009 18:37 Mirdamadi, Linda Marie (M.D.) on 8/3/2009 18:52 Hooks, Sarah Elizabeth (M.D.) on 7/28/2009 14:02 Hooks, Sarah Elizabeth (M.D.) on 7/24/2009 12:09 Hooks, Sarah Elizabeth (M.D.) on 7/24/2009 12:08

END OF ENCOUNTER

	08/04/2009 -	Lab in HO	V LABORATO	ORY	
sit Information					
Department					
Name	Address		Ph	one	
HOV LABORATORY	6041 CADILLA Los Angeles C	-		5-522-2778	
cation					
Name	Address		Pho	ne	
WEST LA MEDICAL CENTER L	6041 CADILLAC Los Angeles CA		857	-2000	
it Account Information					
Hospital Account					
Name	l	Acct ID	Class	Status	Primary Coverage
Hawkins, Lawson B	2	2161161555)	Outpatient	Closed	Restricted coverage
Guarantor Account (for Hospital Acc	ount #2161161555())			
Name		Relation to Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Ś	Self	SCAL	Yes	Personal/Family
Address	F	Phone			
2626 S COCHRAN AVE		323-297-3432			
LOS ANGELES, CA 90016-2618	3	323-297-3432	x00000(O)		
Coverage Information (for Hospital A	ccount #21611615	550)			
F/O Payor/Plan					Precert #
KP MEDICARE/KPSA SPECIAL NE	EDS PLAN SCR K	PSA SPECIA	L NEEDS PLAN	SCR	
Subscriber					Subscriber #
Hawkins, Lawson B					xxxxxxx8205

Phone

Address

Treatment Team (continued)

Provider	Service	Role	Provider Team	Specialt	v	From	То
Hooks, Sarah Elizabeth (M.D.), M.D.	_	Attending	_		Medicine	_	
nts							
lospital Outpatient a	: 8/4/2009 1542						
Unit: HOV LABORA Patient class: Outp	-						
Discharge at 8/4/2009	2359						
Unit: HOV LABORA Patient class: Outp	-						
5							
SH [161578723] (Fin	-						
Electronically signed the This order may be act			07/28/09 1028				Status: Complete
Ordering user: Hooks, Ordering mode: Stand Frequency: Routine C Quantity: 1 Diagnoses OBESITY. [278.00 (IC HYPERLIPIDEMIA [2] ELEVATED TRANSA	Sarah Elizabeth (ard 7/28/09 - D-9-CM)] 72.4 (ICD-9-CM)]	M.D.) 07/28/09 1028	Ordered of Class: No	during: Offic	e Visit on	lizabeth (M.D.) 07/28/2009	
Provider Details Provider			NPI				
Hooks, Sarah Eliz	abeth (M.D.)		1497814	4131			
Specimen Informa			ource		Collector		
438383454	Туре		.OOD		Collected RB2 08/0	4/09 1550	
				_			_
TSH [161578723]						6/09 0314, Re	sult status: Final resu
Order status: Com Collected by: RB2				: 08/06/09 0 Ig lab: SHEI		Y REGIONAL	LABORATORY
		Volu	De Deferer	Des Bango	Flog	Loh	
Components Component TSH		Valu 1.28		nce Range 00 uIU/mL	Flag —	Lab 956	
Reviewed by							
Hooks, Sara Wang, John Wang, John	Yung-Wen (M.D.) Yung-Wen (M.D.)) on 08/13/09 1425) on 08/06/09 0813) on 08/06/09 0811) on 08/06/09 0811					
Hooks, Sara Wang, John Wang, John	Yung-Wen (M.D.) Yung-Wen (M.D.) Yung-Wen (M.D.)	on 08/06/09 0813 on 08/06/09 0811					
Hooks, Sara Wang, John Wang, John Wang, John	Yung-Wen (M.D. Yung-Wen (M.D. Yung-Wen (M.D.	on 08/06/09 0813 on 08/06/09 0811	ctor A	ddress		Valid Date	Range

NORTH HOLLYWOOD

CA 91605

REGIONAL

LABORATORY

M.D.

Labs (continued)

TSH [161578723]

Resulted: 08/04/09 1615, Result status: In process

Order status: Completed Collected by: RB2 08/04/09 1550 Filed on: 08/04/09 1615 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

OBESITY [278.00 (ICD-9-CM)] HYPERLIPIDEMIA [272.4 (ICD-9-CM)] ELEVATED TRANSAMINASE MEASUREMENT [790.4 (ICD-9-CM)]

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 8/13/2009 14:25 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:13 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11

ALT, SERUM [161578724] (Final result)

	d by: Hooks, Sarah Elizabeth (M.D.)) on 07/28/09	1028			Status: Completed
rdering user: Hoo rdering mode: Sta requency: Routine uantity: 1 iagnoses HOLELITHIASIS YPERLIPIDEMIA REDIABETES [79	07/28/09 - 574.20 (ICD-9-CM)] [272.4 (ICD-9-CM)]		Authorized by: Hooks Ordered during: Offic Class: Normal Lab status: Final resu	e Visit on 0		
Provider Details						
Provider	lizabeth (M.D.)		NPI			
Provider Hooks, Sarah E Specimen Inform			NPI 1497814131			
Hooks, Sarah E		Source		Collected	Ву	
Hooks, Sarah E Specimen Infor	nation	Source BLOOD		Collected RB2 08/04	-	
Hooks, Sarah E Specimen Inform	nation Type —		1497814131	RB2 08/04	1/09 1550	sult status: Final resul
Hooks, Sarah E Specimen Inform ID 438383454 ALT, SERUM [10	nation <u>Type</u> — 61578724]		1497814131	RB2 08/04 ulted: 08/05	1/09 1550	sult status: Final resul
Hooks, Sarah E Specimen Inform ID 438383454 ALT, SERUM [14 Order status: Co	nation <u>Type</u> — 61578724]		1497814131 Res	RB2 08/04 ulted: 08/05 524	4/09 1550 5/09 1524, Res	
Hooks, Sarah E Specimen Inform ID 438383454 ALT, SERUM [14 Order status: Co	nation Type 51578724] ompleted 32 08/04/09 1550		1497814131 Res Filed on: 08/05/09 1	RB2 08/04 ulted: 08/05 524	4/09 1550 5/09 1524, Res	
Hooks, Sarah E Specimen Inform ID 438383454 ALT, SERUM [14 Order status: Co Collected by: RI	nation Type 		1497814131 Res Filed on: 08/05/09 1	RB2 08/04 ulted: 08/05 524	4/09 1550 5/09 1524, Res	LABORATORY
Hooks, Sarah E Specimen Inform ID 438383454 ALT, SERUM [14 Order status: Co Collected by: RI Components	mation Type 	BLOOD	1497814131 Res Filed on: 08/05/09 1 Resulting lab: SHEF	RB2 08/04 ulted: 08/05 524 RMAN WAN	4/09 1550 5/09 1524, Res Y REGIONAL I	LABORATORY

Labs (continued)

The measured activity may vary by different method. This result was measured using the Roche method.

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

ALT, SERUM [161578724]

Order status: Completed Collected by: RB2 08/04/09 1550 Resulted: 08/04/09 1615, Result status: In process Filed on: 08/04/09 1615

Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

CHOLELITHIASIS [574.20 (ICD-9-CM)] HYPERLIPIDEMIA [272.4 (ICD-9-CM)] Prediabetes [790.29 (ICD-9-CM)] ELEVATED TRANSAMINASE MEASUREMENT [790.4 (ICD-9-CM)]

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 8/13/2009 14:25 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:13 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Mathur, Priya (M.D.) on 8/5/2009 16:21

T3 [161578725] (Final result)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 07/28/09 1028 This order may be acted on in another encounter. Ordering user: Hooks, Sarah Elizabeth (M.D.) 07/28/09 1028 Ordering mode: Standard Frequency: Routine 07/28/09 -Quantity: 1 Diagnoses HYPERLIPIDEMIA [272.4 (ICD-9-CM)] Provider Details

Status: Completed

Authorized by: Hooks, Sarah Elizabeth (M.D.) Ordered during: Office Visit on 07/28/2009 Class: Normal Lab status: Final result

Provider		Ν	PI		
Hooks, Sarah Elizabeth (N	Л.D.)		497814131		
Specimen Information					
ID Type)	Source		Collected	By
438383454 —		BLOOD		RB2 08/04/	
T3 [161578725]			Res	ulted: 08/06	/09 0314, Result status: Final
Order status: Completed		F	-iled on: 08/06/09 0		
Collected by: RB2 08/04/	09 1550				REGIONAL LABORATORY
Components					
Component T3			Reference Range 58 - 159 ng/dL	Flag	Lab 956
Wang, John Yung- Wang, John Yung-	abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0	9 0813 9 0811			
Testing Performed By Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.			08/30/05 1817 - 09/01/10 00
T3 [161578725]			Res	ulted: 08/04	l/09 1615, Result status: In pro
Order status: Completed Collected by: RB2 08/04/			Filed on: 08/04/09 1 Resulting lab: SHE		REGIONAL LABORATORY
Reviewed by					
Wang, John Yung- Wang, John Yung-	abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0	9 0813 9 0811			
Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.			08/30/05 1817 - 09/01/10 00
Indications					
HYPERLIPIDEMIA [27	2.4 (ICD-9-CM)]				
All Reviewers List					

CREATININE, SERUM [161578726] (Final result)

Electronically signed by: Hooks, Sarah Elizabeth (M.D.) on 07/28/09 1028

Labs (continued)

s order may be acted on in another encounter.				
lering user: Hooks, Sarah Elizabeth (M.D.) 07/28 lering mode: Standard quency: Routine 07/28/09 - antity: 1 gnoses OLELITHIASIS [574.20 (ICD-9-CM)] PERLIPIDEMIA [272.4 (ICD-9-CM)] EDIABETES [790.29 (ICD-9-CM)] EVATED BP READING WO HTN DIAGNOSIS [7 EVATED TRANSAMINASE [790.4 (ICD-9-CM)] Provider Details		Authorized by: Hooks Ordered during: Offic Class: Normal Lab status: Final rest	e Visit on 07/28	
Provider		NPI		
Hooks, Sarah Elizabeth (M.D.)		1497814131		
Specimen Information		-		
ID Туре	Source		Collected By	
438383454 —	BLOOD		RB2 08/04/09	1550
CREATININE, SERUM [161578726]		Res	ulted: 08/05/09	1524, Result status: Final resul
Order status: Completed Collected by: RB2 08/04/09 1550 Components		Filed on: 08/05/09 1 Resulting lab: SHEI		GIONAL LABORATORY
•	Value	Reference Range	Flag	Lab
Component				
Component CREATININE	1.3		_	956
	1.3 58-NB	0.7 - 1.3 mg/dL mL/min		956 956

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000
CREATININE, SERUM [10	61578726]		Resulted: 08/04	09 1615, Result status: In process
Order status: Completed		File	d on: 08/04/09 1615	
	00 4550	Dee		REGIONAL LABORATORY
Collected by: RB2 08/04/	09 1550	Res	Sulling Iab. SHERIVIAN WAT	REGIONAL LADORATORT

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811

Labs (continued)

Mathur, Priya (M.D.) on 08/05/09 1621

Lab - Abbreviation	Name	Director	Address		Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vann M.D.	ier, 11668 Sher NORTH HO CA 91605		08/30/05 1817 - 09/01/10 0000
ndications					
	72.4 (ICD-9-CM)]				
II Reviewers List					
Wang, John Yung-We Wang, John Yung-We Wang, John Yung-We Mathur, Priya (M.D.) o		3:13 3:11			
CTROLYTES, SERUM [ctronically signed by: Ho		(ID) on 07/28/0	0 1028		Status: Complet
aring usor Hooks Sarah				<u> </u>	
ering doe: Nooks, Salar ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses EVATED BP READING V Provider Details			Authorized by: Hook Ordered during: Offi Class: Normal Lab status: Edited		
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V	9 -		Ordered during: Offi Class: Normal Lab status: Edited		
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V Provider Details	9 - VO HTN DIAGNOSIS [7		Ordered during: Offi Class: Normal Lab status: Edited		
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V Provider Details Provider	9 - VO HTN DIAGNOSIS [7		Ordered during: Offi Class: Normal Lab status: Edited		
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V Provider Details Provider Hooks, Sarah Elizabeth	99 - VO HTN DIAGNOSIS [79 (M.D.)		Ordered during: Offi Class: Normal Lab status: Edited	ce Visit on 07	7/28/2009 By
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V Provider Details Provider Hooks, Sarah Elizabeth Specimen Information	99 - VO HTN DIAGNOSIS [79 (M.D.)	96.2 (ICD-9-CM)	Ordered during: Offi Class: Normal Lab status: Edited	ce Visit on 07	7/28/2009 By
ering mode: Standard quency: Routine 07/28/C antity: 1 gnoses VATED BP READING V Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ	99 - VO HTN DIAGNOSIS [74 (M.D.) e	96.2 (ICD-9-CM) Source BLOOD	Ordered during: Offi Class: Normal Lab status: Edited	ce Visit on 07 Collected I RB2 08/04/	7/28/2009 By
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V Provider Details Provider Details Provider Hooks, Sarah Elizabeth Specimen Information ID Typ 438383454 — ELECTROLYTES, SERU Order status: Completed Collected by: RB2 08/04	99 - VO HTN DIAGNOSIS [74 (M.D.) e IM [161578727] (Abnorn	96.2 (ICD-9-CM) Source BLOOD	Ordered during: Offi Class: Normal Lab status: Edited] NPI 1497814131 Filed on: 08/05/09	Collected I RB2 08/04/ Resulted: 0 1545	7/28/2009 By 09 1550
ering mode: Standard quency: Routine 07/28/0 antity: 1 gnoses VATED BP READING V Provider Details Provider D	99 - VO HTN DIAGNOSIS [74 (M.D.) e IM [161578727] (Abnorn	96.2 (ICD-9-CM) Source BLOOD mal)	Ordered during: Offi Class: Normal Lab status: Edited NPI 1497814131 Filed on: 08/05/09 Resulting lab: SHE	Collected I RB2 08/04/ Resulted: 0 1545 RMAN WAY	7/28/2009 By 109 1550 8/05/09 1545, Result status: Edi REGIONAL LABORATORY
ering mode: Standard quency: Routine 07/28/C antity: 1 gnoses VATED BP READING V Provider Details Provider D	99 - VO HTN DIAGNOSIS [74 (M.D.) e IM [161578727] (Abnorn	96.2 (ICD-9-CM) Source BLOOD mal) Value	Ordered during: Offi Class: Normal Lab status: Edited NPI 1497814131 Filed on: 08/05/09 Resulting lab: SHE Reference Range	Collected I RB2 08/04/ Resulted: 0 1545 RMAN WAY Flag	7/28/2009 By 09 1550 8/05/09 1545, Result status: Edi REGIONAL LABORATORY Lab
ering mode: Standard quency: Routine 07/28/C antity: 1 gnoses VATED BP READING V Provider Details Provider D	99 - VO HTN DIAGNOSIS [74 (M.D.) e IM [161578727] (Abnorn / /09 1550	96.2 (ICD-9-CM) Source BLOOD mal) Value 119	Ordered during: Offi Class: Normal Lab status: Edited NPI 1497814131 Filed on: 08/05/09 Resulting lab: SHE Reference Range 135 - 145 meq/L	Collected I RB2 08/04/ Resulted: 0 1545 RMAN WAY	7/28/2009 By 109 1550 8/05/09 1545, Result status: Edi REGIONAL LABORATORY
ering mode: Standard quency: Routine 07/28/C antity: 1 gnoses VATED BP READING V Provider Details Provider D	99 - VO HTN DIAGNOSIS [74 (M.D.) e IM [161578727] (Abnorn I /09 1550	96.2 (ICD-9-CM) Source BLOOD mal) Value 119 IRMED.	Ordered during: Offi Class: Normal Lab status: Edited] NPI 1497814131 Filed on: 08/05/09 Resulting lab: SHE Reference Range 135 - 145 meq/L CALLED TO RN SHE	Collected I RB2 08/04/ Resulted: 0 1545 RMAN WAY Flag AA ELLEY S. x32	7/28/2009 By 7/09 1550 8/05/09 1545, Result status: Edi REGIONAL LABORATORY Lab 956 224 @ 15:43 GXPACH 08/05/09
ering mode: Standard quency: Routine 07/28/C antity: 1 gnoses VATED BP READING V Provider Details Provider D	99 - VO HTN DIAGNOSIS [74 (M.D.) e IM [161578727] (Abnorn / /09 1550	96.2 (ICD-9-CM) Source BLOOD mal) Value 119	Ordered during: Offi Class: Normal Lab status: Edited NPI 1497814131 Filed on: 08/05/09 Resulting lab: SHE Reference Range 135 - 145 meq/L	Collected I RB2 08/04/ Resulted: 0 1545 RMAN WAY	7/28/2009 By 09 1550 8/05/09 1545, Result status: Edi REGIONAL LABORATORY Lab 956

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813

Labs (continued)

Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621

Testing Performed By

Lab - Abbreviation	Name	Director	Address		Valid Date Range	
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	, 11668 Sherman Way NORTH HOLLYWOOD CA 91605		08/30/05 1817 - 09/01/10 0000	
LECTROLYTES, SERU	M [161578727] (Abnor	mal)	Res	ulted: 08/05	i/09 1524, Result status: Final res	
Order status: Completed Collected by: RB2 08/04/			Filed on: 08/05/09 1524 Resulting lab: SHERMAN WAY REGIONAL LABORATORY			
Components						
Component			Reference Range	Flag	Lab	
SODIUM		119	135 - 145 meq/L	AA	956	
Comment: RESULT	I RECHECKED.	5.0			050	
POTASSIUM			3.5 - 5.0 meq/L	н^	956	
CHLORIDE			101 - 111 meq/L	L¥	956	
CO2		19.5	21 - 31 meq/L	L¥	956	
Reviewed by						
Wang, John Yung-	Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0 0.) on 08/05/09 1621					
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation	Wen (M.D.) on 08/06/0 0.) on 08/05/09 1621 Name	9 0811 Director	Address		Valid Date Range	
Wang, John Yung- Mathur, Priya (M.D esting Performed By	Wen (M.D.) on 08/06/0).) on 08/05/09 1621	9 0811	Address 11668 Shern NORTH HOL CA 91605		Valid Date Range 08/30/05 1817 - 09/01/10 0000	
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation	Wen (M.D.) on 08/06/0 0.) on 08/05/09 1621 Name SHERMAN WAY REGIONAL LABORATORY	9 0811 Director Ann M. Vannier,	11668 Shern NORTH HOL CA 91605	LYWOOD		
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation 240 - 956	Wen (M.D.) on 08/06/0 0.) on 08/05/09 1621 Name SHERMAN WAY REGIONAL LABORATORY M [161578727]	9 0811 Director Ann M. Vannier, M.D.	11668 Shern NORTH HOL CA 91605 Res Filed on: 08/04/09 1	LYWOOD sulted: 08/04	08/30/05 1817 - 09/01/10 0000	
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation 240 - 956 LECTROLYTES, SERU	Wen (M.D.) on 08/06/0 0.) on 08/05/09 1621 Name SHERMAN WAY REGIONAL LABORATORY M [161578727]	9 0811 Director Ann M. Vannier, M.D.	11668 Shern NORTH HOL CA 91605 Res Filed on: 08/04/09 1	LYWOOD sulted: 08/04	08/30/05 1817 - 09/01/10 0000 4/09 1615, Result status: In proce	
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation 240 - 956 LECTROLYTES, SERUE Order status: Completed Collected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung-	Wen (M.D.) on 08/06/0 0.) on 08/05/09 1621 Name SHERMAN WAY REGIONAL LABORATORY M [161578727]	9 0811 Director Ann M. Vannier, M.D. 19 1425 9 0813 9 0811	11668 Shern NORTH HOL CA 91605 Res Filed on: 08/04/09 1	LYWOOD sulted: 08/04	08/30/05 1817 - 09/01/10 0000 4/09 1615, Result status: In proce	
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation 240 - 956 LECTROLYTES, SERUE Order status: Completed Collected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung- Wang, John Yung- Mathur, Priya (M.D	Wen (M.D.) on 08/06/0 b.) on 08/05/09 1621 Name SHERMAN WAY REGIONAL LABORATORY M [161578727] 709 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0	9 0811 Director Ann M. Vannier, M.D. 19 1425 9 0813 9 0811	11668 Shern NORTH HOL CA 91605 Res Filed on: 08/04/09 1	LYWOOD sulted: 08/04	08/30/05 1817 - 09/01/10 0000 4/09 1615, Result status: In proce	
Wang, John Yung- Mathur, Priya (M.D esting Performed By Lab - Abbreviation 240 - 956 LECTROLYTES, SERUE Order status: Completed Collected by: RB2 08/04/ Reviewed by Hooks, Sarah Eliza Wang, John Yung- Wang, John Yung- Wang, John Yung-	Wen (M.D.) on 08/06/0 b.) on 08/05/09 1621 Name SHERMAN WAY REGIONAL LABORATORY M [161578727] 709 1550 abeth (M.D.) on 08/13/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0 Wen (M.D.) on 08/06/0	9 0811 Director Ann M. Vannier, M.D. 19 1425 9 0813 9 0811	11668 Shern NORTH HOL CA 91605 Res Filed on: 08/04/09 1	LYWOOD sulted: 08/04	08/30/05 1817 - 09/01/10 0000 4/09 1615, Result status: In proce	

Indications

Elevated Blood Pressure Reading Wo Diagnosis Of Htn [796.2 (ICD-9-CM)]

Labs (continued)

All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 8/13/2009 14:25 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:13 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Mathur, Priya (M.D.) on 8/5/2009 16:21

HEMOGLOBIN A1C [161579608] (Final result)

-					
	by: Hooks, Sarah Elizabeth (Med on in another encounter.	I.D.) on 07/28/09	9 1032		Status: Completed
	Sarah Elizabeth (M.D.) 07/28/	00 1032	Authorized by: Hooks	Sarah Elizabeth	
ordering mode: Stand		09 1032	Ordered during: Offic		
requency: Routine C			Class: Normal		
uantity: 1	11/20/00		Lab status: Final resu	ılt	
liagnoses					
REDIABETES [790.2	29 (ICD-9-CM)]				
Provider Details	, , , , , , , , , , , , , , , , , , ,				
Provider			NPI		
Hooks, Sarah Eliz	abeth (M.D.)		1497814131		
Specimen Informa	ition				
ID	Туре	Source		Collected By	
438383454	—	BLOOD		RB2 08/04/09 15	50
HEMOGLOBIN A1	C [161579608] (Abnormal)		Resu	ulted: 08/05/09 13	321, Result status: Final result
Order status: Com	pleted		Filed on: 08/05/09 1	321	
Collected by: RB2	08/04/09 1550		Resulting lab: SHEF	RMAN WAY REG	IONAL LABORATORY
Components					
Component		Value	Reference Range	Flag	Lab
HGBA1C%		14.1	4.8 - 5.9 %	H^	956
Comment:					
HBA1C CAN	INOT BE USED TO DIAGNOS	E OR SCREEN	FOR DIABETES OR C	OTHER DISORDE	ERS OF GLUCOSE
	E. HBA1C IS BEST USED TO			-	_
	E BELOW 7.0 % AND VALUE	S >8.0 % SUGG	EST THE NEED TO IN	MPROVE THE BL	LOOD SUGAR CONTROL
TREATMEN	T PLAN.				
Reviewed by					
	ah Elizabeth (M.D.) on 08/13/09				
	Yung-Wen (M.D.) on 08/06/09				
	Yung-Wen (M.D.) on 08/06/09				
	Yung-Wen (M.D.) on 08/06/09	0811			
	/a (M.D.) on 08/05/09 1621				
Mathur, Priy	/a (M.D.) on 08/05/09 1346				

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

HEMOGLOBIN A1C [161579608]

Order status: Completed Collected by: RB2 08/04/09 1550 Resulted: 08/04/09 1615, Result status: In process

Filed on: 08/04/09 1615 Resulting lab: SHERMAN WAY REGIONAL LABORATORY

Labs (continued)

Reviewed by

Hooks, Sarah Elizabeth (M.D.) on 08/13/09 1425 Wang, John Yung-Wen (M.D.) on 08/06/09 0813 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Wang, John Yung-Wen (M.D.) on 08/06/09 0811 Mathur, Priya (M.D.) on 08/05/09 1621 Mathur, Priya (M.D.) on 08/05/09 1346

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
240 - 956	SHERMAN WAY REGIONAL LABORATORY	Ann M. Vannier, M.D.	11668 Sherman Way NORTH HOLLYWOOD CA 91605	08/30/05 1817 - 09/01/10 0000

Indications

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Prediabetes [790.29 (ICD-9-CM)]
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All Reviewers List

Hooks, Sarah Elizabeth (M.D.) on 8/13/2009 14:25 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:13 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Wang, John Yung-Wen (M.D.) on 8/6/2009 08:11 Mathur, Priya (M.D.) on 8/5/2009 16:21 Mathur, Priya (M.D.) on 8/5/2009 13:46

END OF ENCOUNTER

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2

Visit Information

VISITINOIMATION							
Admission Informatio	n						
Arrival Date/Time: Admission Type:	08/05/2009 1640 Urgent	Point of Origin:		08/05/2009 Home - Em Room	-	IP Adm. Date/Time: Admit Category:	08/05/2009 2246 Unscheduled, Less Than 24 Hours Prior To Admission
Means of Arrival: Transfer Source:	Walk-in	Primary Service: Internal Medic Service Area: SOUTHERN CALIFORNIA REGION		N	Secondary Service: Unit:	N/A 5B2	
Admit Provider:	Ta, Tuan (M.D.)	Attending Provi	ider:	Ghadishah, (M.D.)	Delaram	Referring Provider:	
ED Disposition							
ED Disposition	Condition	User	Date	/Time	Comm	ent	
Admit to IP		Gilles, Marie G		Aug 5, 10:46 PM			
Discharge Information	n						
Date/Time: 08/07/2	009 1402	Disposition: Ho	me Or	Self Care.		Destination: -	
Provider: Kim, Injib	John (M.D.)	Unit: 5B2					
Location							
Name	A	ddress			Phone		

Printed on 1/12/24 5:33 PM

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

Location (continued)

Name	Address	Phone	
WEST LA MEDICAL CENTER L	6041 CADILLAC AVE Los Angeles CA 90034-1702	857-2000	

Reason for Visit

Chief	Com	plaint
Children	00111	pianic

ABNORMAL BLOOD LEVEL

Visit Diagnoses

Name	Code	Chronic?
HYPERGLYCEMIA	790.29	No
OBESITY	278.00	Yes
HYPONATREMIA	276.1	No

Visit Account Information

ł	lospital Account				
	Name	Acct ID	Class	Status	Primary Coverage
-	Hawkins, Lawson B	2161161978 7	Inpatient	Closed	Restricted coverage

Guarantor Account (for Hospital Account #21611619787)

	Relation	to		
Name	Pt	Service Area	Active?	Acct Type
Hawkins, Lawson B	Self	SCAL	Yes	Personal/Family
Address	Phone			
2626 S COCHRAN AVE	323-297-3	3432(H)		
LOS ANGELES, CA 90016-2618	323-297-3	3432 x00000(O)		

Coverage Information (for Hospital Account #21611619787)

F/O Payor/Plan		Precert #		
KP MEDICARE/KPSA SPECIAL NEEDS PLAN SCR KPSA SPECIAL NEEDS PLAN SCR				
Subscriber		Subscriber #		
Hawkins, Lawson B		xxxxxxx8205		
Address	Phone			

Vitals

Date/Time	Temp	Pulse	Resp	BP	SpO2	Weight
08/07/09 1200	96.3 °F (35.7 °C)	98	20	132/84	98 %	_
08/07/09 0800	96.5 °F (35.8 °C)	101	20	116/85	98 %	_
08/07/09 0600	_ `	_	_	_	_	227 lb 11.8 oz
						(103.3 kg)
08/07/09 0400	98 °F (36.7 °C)	83	19	121/86	99 %	_
08/07/09 0000	98 °F (36.7 °C)	87	20	120/68	98 %	_
08/06/09 1953	98.7 °F (37.1 °C)	91	20	115/79	97 %	_
08/06/09 1547	98.3 °F (36.8 °C)	87	21	121/79	99 %	_
08/06/09 1200	98.1 °F (36.7 °C)	88	20	120/82	97 %	_
08/06/09 0800	98.7 °F (37.1 °C)	91	20	108/76	97 %	_
08/06/09 0700	—	_	—	_	—	229 lb 4.5 oz
						(104 kg)
08/06/09 0600	—	—	—	—	—	228 lb 14.4 oz
						(103.8 kg)
08/06/09 0400	99 °F (37.2 °C)	91	20	112/77	98 %	_
08/06/09 0100	98.7 °F (37.1 °C)	101	18	116/85	97 %	—
08/05/09 2316	98.3 °F (36.8 °C)	110	18	123/73	95 %	—
08/05/09 2100	—	109	20	129/99 !	97 %	—
08/05/09 1854	—	108	20	145/100 *	98 %	—

KAISER PERMANENTE

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

Vitals (continued)

Date/Time	Temp	Pulse	Resp	BP	SpO2	Weight
08/05/09 1800	<u> </u>	104	16	137/90	98 %	_
08/05/09 1655	98.2 °F (36.8 °C)	120	15	138/95 *	97 %	225 lb (102.1 kg)

Discharge Summary Note

Discharge Summary by Kim, Injib John (M.D.) at 8/7/2009 1138

Author: Kim, Injib John (M.D.) Filed: 8/7/2009 11:54 AM Status: Signed

Service: — Date of Service: 8/7/2009 11:38 AM Editor: Kim, Injib John (M.D.) (Physician) Author Type: Physician Creation Time: 8/7/2009 11:38 AM

DISCHARGE SUMMARY

DATE OF ADMISSION: 8/5/2009 5:19 PM DATE OF DISCHARGE: 8/7/2009

DISPOSITION: home

PRINCIPAL DIAGNOSES

DIABETES MELLITUS TYPE 2, UNCOMPLICATED. (8/7/2009) HYPONATREMIA

SECONDARY DIAGNOSES

SCHIZOAFFECTIVE DISORDER (9/21/2006) OBESITY (7/28/2009) HYPERLIPIDEMIA (12/14/2007)

CONSULTANTS INPATIENT DIABETES EDUCATION CONSULT INPATIENT NUTRITION SERVICE CONSULT

CONDITION ON DISCHARGE: STABLE

DISCHARGE SUMMARY

Lawson B Hawkins is a pleasant 54 year old male with history of obesity, HTN, HL, schizoaffective disorder with chief complaint of 2 weeks of polyuria, polydipsia, dry mouth, malaise and bluury vision.

NEWLY DIAGNOSED DM: BS in ER was 976 with mod urine ketones but without an AG. Hgb A1c 14.1. Pt was given IV insulin and started on insulin gtt. Started on glipizide and metformin and continue RISS. Discussed the importance of diet and regular monitoring. Diabetes education in process. Will discharge to home on metformin 500mg bid and glipizide 5mg bid plus RISS. Pt will be followed by diabetes care RN. NPH prescribed for future use.

HYPONATREMIA : Due to hyperglycemia and dehydration. Resolved with NS.

DISCHARGE INSTRUCTIONS:

NEW MEDICATIONS:

GLIPIZIDE 5 MG ORAL 1 TAB TWICE DAILY METFORMIN 500 MG ORAL 1 TAB TWICE DAILY REGULAR INSULIN SLIDIND SCALE : BEFORE MEALS AT BED TIME <151 0 UNITS 0 UNITS 151-200 2 UNITS 0 UNITS

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

Discharge Summary Note (continued)

201-250	4 UNITS	2 UNITS
251-300	8 UNITS	4 UNITS
301-350	12 UNITS	7 UNITS
351-400	16 UNITS	10 UNITS

CONTINUE WITHOUT CHANGE:

CLOTRIMAZOLE 1 % TOP CREA, Sig: APPLY TO AFFECTED AREA(S) BID ABILIFY 5 MG ORAL TAB, Sig: TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME OMEPRAZOLE 20 MG ORAL CPDR SR CAP, Sig: TAKE 1 CAPSULE ORALLY 2 TIMES DAILY CARMOL 20 20 % TOP CREA, Sig: apply to I 2nd and 3rd digit areas BID

FOLLOW UP APPOINTMENTS:

Date	Time	Provider	Department	Center
8/18/2009	10:00 AM	129867-CHAKERKHAAN, ALTAI (L.V.N.)	WLMEDU	WLAU
8/28/2009	8:30 AM	10028061-MC CRAY, CONSTANCE D	WLEYE	WLAU

SARAH ELIZABETH HOOKS MD, MEDICAL DOCTOR in 1 week. If you are unable to make your appointment, please call appropriate number to cancel in advance.

ACTIVITY: No restrictions

DIET: Low Fat, Low Cholesterol and 1800 Calorie ADA Diet

PATIENT SPECIFIC INSTRUCTIONS: Please check your blood sugar before each meal and at bed time. Keep NPH insulin for use when instructed by diabetes educator.

If you have smoked in the past 12 months, please call Smoker's Helpline: 1-888-883-7867 or visit the website http://members.Kaiserpermanente.org

I John Kim, MD

Electronically signed by Kim, Injib John (M.D.) at 8/7/2009 11:54 AM

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	То
Ta, Tuan V, M.D.	_	Admitting	_	Infectious Diseases	_	_
. Kim, Injib John (M.D.), M.D.	—	Attending	—	Internal Medicine	08/05/09 2247	_
Lai, Mai K, M.D.	—	Attending	—	Emergency Medicine	08/05/09 2031	08/06/09 0108
. Ghadishah, Delaram (M.D.), M.D.		Attending	_	Emergency Medicine	08/05/09 1756	08/05/09 2031
WLA DIABETIC TEAM	_	Case Manager	_	_	08/07/09 0758	_

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

atment Team (continued)					
WLA T1 —	Hospitalist	_		08/05/09 2235	_
. Odunze, —	Registered	_	GENERAL,	08/05/09 1923	—
Polycarp I.	Nurse		OTHER		
(R.N.), R.N.				/ /	/ /
. Velthoen, —	Registered	_	GENERAL,	08/05/09 1854	08/05/09 1926
Deborah (R.N.),	Nurse		OTHER		
R.N.					
nts					
ED Arrival at 8/5/2009 1640					
Unit: EDWL					
ED Roomed at 8/5/2009 1719					
Unit: EDWL	Room: HA05		Bed	: 05	
Patient class: Emergency		gency Medicine			
ED Transfer at 8/5/2009 2235					
Unit: EDWL	Room: HA05		Bed	: 05	
Patient class: Emergency		gency Medicine			
ED Transfer at 8/5/2009 2239					
Unit: EDWL	Room: HA05		Bed	: 05	
Patient class: Emergency		gency Medicine	200		
Patient Update at 8/5/2009 2246					
Unit: EDWL	Room: HB02		Bed	: 02	
Patient class: Inpatient	Service: Interr	nal Medicine			
Transfer Out at 8/6/2009 0053					
Unit: EDWL	Room: HB02		Bed	: 02	
Patient class: Inpatient	Service: Interr	nal Medicine	200		
Transfer In at 8/6/2009 0053					
Unit: EDWL	Room: HOFF		Bed	· 04	
Patient class: Inpatient	Service: Interr	nal Medicine	Dea	. 04	
Fransfer Out at 8/6/2009 0108					
Unit: EDWL	Room: HOFF		Bed	: 04	
Patient class: Inpatient	Service: Interr	nal Medicine			
Transfer In at 8/6/2009 0108					
Unit: 5B2	Room: 5712		Bed	: A	
Patient class: Inpatient	Service: Interr	nal Medicine			
Admit from ED at 8/6/2009 0108					
Unit: 5B2	Room: 5712		Bed	: A	
Patient class: Inpatient	Service: Interr	nal Medicine			
Discharge at 8/7/2009 1402					
Unit: 5B2	Room: 5712		Bed	: A	
Patient class: Inpatient	Service: Interr				

Aripiprazole Tab 30 mg (ABILIFY) [162824735]

Medication Administrations (continued)

Ordering Provider: Ta, Tuan (M.D.) Ordered On: 08/06/09 0735 Ordered Dose (Remaining/Total): 30 mg (—/—) Frequency: DAILY

Status: Discontinued (Past End Date/Time) Starts/Ends: 08/06/09 1000 - 08/07/09 1816 Route: Oral Ordered Rate/Order Duration: — / —

Timestamps	Action	Dose	Route	Other Information
Performed 08/07/09 1008 Documented: 08/07/09 1009	Given	30 mg	Oral	Performed by: Morita, Alyssa Tashiro (R.N.)
Performed 08/06/09 1017 Documented: 08/06/09 1017	Given	30 mg	Oral	Performed by: Morita, Alyssa Tashiro (R.N.)

busPIRone Tab 10 mg (BUSPAR) [162807331]

Ordering Provider: Ta, Tuan (M.D.)	Status: Discontinued (Past End Date/Time)
Ordered On: 08/06/09 0110	Starts/Ends: 08/06/09 1000 - 08/07/09 1816
Ordered Dose (Remaining/Total): 10 mg (/)	Route: Oral
Frequency: DAILY	Ordered Rate/Order Duration: — / —
Admin Instructions: No grapefruit or grapefruit juice.	Note to pharmacy: Outpt Rx: BUSPIRONE 5 MG ORAL TAB - Orig
	Sig - TAKE 1 TABLET ORALLY AT NIGHT FOR 5 DAYS THEN
	TAKE 1 TABLET 2 TIMES DAILY OUTPATIENT SIG: TAKE 1
	TABLET ORALLY AT NIGHT FOR 5 DAYS THEN TAKE 1 TABLET
	2 TIMES DAILY

Timestamps	Action	Dose	Route	Other Information
Performed 08/07/09 1008 Documented: 08/07/09 1009	Given	10 mg	Oral	Performed by: Morita, Alyssa Tashiro (R.N.)
Performed 08/06/09 1017 Documented: 08/06/09 1017	Given	10 mg	Oral	Performed by: Morita, Alyssa Tashiro (R.N.)

Clotrimazole Cream (LOTRIMIN AF/MYCELEX) [162807334]

Ordering Provider: Ta, Tuan (M.D.)	Status: Discontinued (Past End Date/Time)
Ordered On: 08/06/09 0110	Starts/Ends: 08/06/09 1000 - 08/07/09 1816
Ordered Dose (Remaining/Total): — (—/—)	Route: Topical
Frequency: 2 TIMES A DAY	Ordered Rate/Order Duration: — / —
Note to pharmacy: Outpt Rx: CLOTRIMAZOLE 1 % TOP CREA - On	rig Sig - APPLY TO AFFECTED AREA(S) BID OUTPATIENT
SIG:APPLY TO AFFECTED AREA(S) BID	

Timestamps	Action	Dose / Rate / Duration	Route	Other Information
Performed 08/07/09 1010 Documented: 08/07/09 1010	Given	_	Topical	Performed by: Morita, Alyssa Tashiro (R.N.)
Performed 08/06/09 2223 Documented: 08/06/09 2224	Refused	_	Topical	Performed by: Manding, Percy Domingo (R.N.)

Performed 08/06/09	Given	_	Topical	Performed by: Morita, Alyssa Tashir
1017				(R.N.)
Documented:				
08/06/09 1017				
NaCIOOV with KC	1 20 mEa/L IV/I	Promix [163917637]		
5-NaCl 0.9 % with KC Ordering Provider: Al	-		Status: Discontinued ((Past End Date/Time)
Ordered On: 08/06/09		nce Robert (M.D.)		0200 - 08/06/09 0543
Ordered Dose (Rema		000 mL (—/—)	Route: intraVENOUS	
Frequency: CONTINU	JOUS		Ordered Rate/Order E	Ouration: 150 mL/hr / —
Line Derinkerel IV/ Did		Med Link Info	v Adapina Lugy N (D N)	Comment
Peripheral IV Rig	ght;Antecubital	08/06/09 0225 b	y Adesina, Lucy N (R.N.)	—
Timestamps	Action	Dose / Rate	Route	Other Information
Performed 08/06/09	New Bag	1,000 mL 150 mL/hr	intraVENOUS	Performed by: Adesina, Lucy N
0225 Documented:		150 mL/m		(R.N.)
08/06/09 0225				
ipiZIDE Tab 5 mg (GI	LUCOTROL) [1	62886326]		
Ordering Provider: Ki		-	Status: Discontinued	(Past End Date/Time)
Ordered On: 08/06/09	9 1228			1230 - 08/07/09 1122
Ordered Dose (Rema			Route: Oral	
Frequency: 2 TIMES	A DAY BEFOR	EMEALS	Ordered Rate/Order E	Duration: — / —
Timestamps	Action	Dose	Route	Other Information
Performed 08/07/09 0742	Given	5 mg	Oral	Performed by: Morita, Alyssa Tashi (R.N.)
Documented:				(IX.IN.)
08/07/09 0743				
Performed 08/06/09	Civon	5 mg	Oral	Performed by: Morita, Alyssa Tash
1736	Siven	5 mg	Jiai	(R.N.)
Documented:				()
08/06/09 1737				
Performed 08/06/09	Civon	5 mg	Oral	Performed by: Morita, Alyssa Tash
1318	Given	5 mg	Ulai	(R.N.)
Documented:				
08/06/09 1318				
sulin Regular Humar	n 100 Units in S	Sodium Chloride 0.9 % 100	mL IV Soln [162797867]	
-				Past End Date/Time), Reason: Change in
Ordering Provider: G			Dose	
Ordering Provider: G	···· , ···			1020 00/06/00 0150
Ordered On: 08/05/09	9 1925		Starts/Ends: 08/05/09	1930 - 06/06/09 0130
Ordered On: 08/05/09 Ordered Dose (Rema	9 1925 aining/Total): 4 l	Jnits/hr (—/—)	Route: intraVENOUS	
Ordered On: 08/05/09 Ordered Dose (Rema Frequency: CONTINU	9 1925 hining/Total): 4 U JOUS			
Ordered On: 08/05/09 Ordered Dose (Rema Frequency: CONTINU Admin Instructions: *I	9 1925 aining/Total): 4 U JOUS DOUBLE CHEC	K REQUIRED*	Route: intraVENOUS Ordered Rate/Order E	Ouration: 4 mL/hr / —
Ordered On: 08/05/09 Ordered Dose (Rema Frequency: CONTINU Admin Instructions: *I	9 1925 hining/Total): 4 U JOUS DOUBLE CHEC Action	K REQUIRED*	Route: intraVENOUS Ordered Rate/Order E	Duration: 4 mL/hr / — Other Information
Ordered On: 08/05/09 Ordered Dose (Rema Frequency: CONTINU Admin Instructions: *I <u>Timestamps</u> Performed 08/05/09	9 1925 hining/Total): 4 U JOUS DOUBLE CHEC Action	K REQUIRED* Dose / Rate 4 Units/hr	Route: intraVENOUS Ordered Rate/Order E	Duration: 4 mL/hr / — Other Information Performed by: Odunze, Polycarp I.
Ordered On: 08/05/09 Ordered Dose (Rema Frequency: CONTINU Admin Instructions: *I <u>Timestamps</u> Performed 08/05/09 1930	9 1925 hining/Total): 4 U JOUS DOUBLE CHEC Action	K REQUIRED*	Route: intraVENOUS Ordered Rate/Order E	Ouration: 4 mL/hr / — Other Information Performed by: Odunze, Polycarp I. (R.N.)
Ordered On: 08/05/09 Ordered Dose (Rema Frequency: CONTINU Admin Instructions: *I <u>Timestamps</u> Performed 08/05/09	9 1925 hining/Total): 4 U JOUS DOUBLE CHEC Action	K REQUIRED* Dose / Rate 4 Units/hr	Route: intraVENOUS Ordered Rate/Order E	Ouration: 4 mL/hr / — Other Information Performed by: Odunze, Polycarp I.

Medication Administrations (continued)

Insulin Regular Human	100 Units in S	Sodium Chloride 0.9 % 10	00 mL IV Soln [1628181	65]
Ordering Provider: Ale	exander, Lawre	ence Robert (M.D.)	Status: Discontinue	ed (Past End Date/Time)
Ordered On: 08/06/09	0152		Starts/Ends: 08/06	/09 0200 - 08/06/09 0543
Ordered Dose (Rema	ining/Total): 3	Units/hr (—/—)	Route: intraVENO	US
Frequency: CONTINL	IOUS		Ordered Rate/Orde	er Duration: 3 mL/hr / —
Admin Instructions: *D	OUBLE CHE	CK REQUIRED*		
Line		Med Link Info)	Comment
Peripheral IV Rig	ht;Antecubital	08/06/09 0200) by Adesina, Lucy N (R.	N.) —
Timestamps	Action	Dose / Rate	Route	Other Information
Performed 08/06/09	New Bag	3 Units/hr	intraVENOUS	Performed by: Adesina, Lucy N
0200	Ū.	3 mL/hr		(R.N.)
Documented:				Dual Signoff by: Lombard, Juan J
08/06/09 0247				(R.N.)

Insulin Regular Human Inj (HumuLIN R/NovoLIN R) [162812606]

Ordering Provider: Ta, Tuan (M.D.)	Status: Discontinued (Past End Date/Time), Reason: Duplicate
	Therapy
Ordered On: 08/06/09 0110	Starts/Ends: 08/06/09 0730 - 08/06/09 0816
Ordered Dose (Remaining/Total): — (—/—)	Route: Subcutaneous
Frequency: BEFORE MEALS AND AT BEDTIME	Ordered Rate/Order Duration: — / —
Admin Instructions: If blood glucose	70-120: no action
121-150: 2 units	151-200: 4 units
201-250: 6 units	251-300: 8 units
301-350: 10 units	351-400: 12 units
Greater than 400: call physician	If blood glucose less than 70:
1) Do not administer any scheduled insulin doses until after	2) call Physician to alert and for additional orders (including when
consulting Physician.	to re-check glucose and for dose adjustment of any scheduled
	insulin)
3) a)if taking orally and alert, give juice or glucose oral gel or	b) if not taking orally and with IV access, give 25mL (1/2
snack/meal	ampule) of D50W IV

c) if not taking orally and without IV access, give 1 mg glucagon IM

Timestamps	Action	Dose / Rate / Duration	Route / Site / Linked Line	Other Information
Performed 08/06/09	Canceled Entry		_	Performed by: Morita, Alyssa Tashiro
0730				(R.N.)
Documented:				
08/06/09 0821				

Insulin Regular Human Inj (HumuLIN R/NovoLIN R) [162821621]

	a			
Ordering Provider:	Sina, Mehran (M	.D.)	Status: Discontinued	(Past End Date/Time)
Ordered On: 08/06	/09 0544		Starts/Ends: 08/06/09	9 0730 - 08/06/09 1221
Ordered Dose (Rer	maining/Total):	- (/)	Route: Subcutaneous	S
Frequency: BEFOF	RE MEALS AND	AT BEDTIME	Ordered Rate/Order	Duration: — / —
Admin Instructions:	If blood glucose		70-120: no action	
121-150: 1 unit			151-200: 2 units	
201-250: 3 units			251-300: 4 units	
301-350: 6 units			351-400: 8 units	
Greater than 400: o	all physician		If blood glucose less	than 70:
1) Do not adminis	ter any schedule	d insulin doses until after	call Physician to a	alert and for additional orders (including when
consulting Physicia	n.		to re-check glucose a	and for dose adjustment of any scheduled
			insulin)	
a) if taking ora	ally and alert, give	e juice or glucose oral gel or	b) if not taking o	rally and with IV access, give 25mL (1/2
snack/meal			ampule) of D50W IV	
c) if not taking	or			
T :	A = (! =	Dees	Davida / Olica	
Timestamps	Action	Dose	Route / Site	Other Information

		ed)		
Performed 08/06/09 1130 Documented: 08/06/09 1318	Canceled E	ntry —	—	Performed by: Morita, Alyssa Tas (R.N.)
Performed 08/06/09 0820 Documented: 08/06/09 0821	Given	8 Units	Subcutaneous Right Arm	Performed by: Morita, Alyssa Tas (R.N.) Comments: MED VERIFIED BY C.G.
ulin Regular Humar	ı Inj (Humu	LIN R/NovoLIN R) [162	884574]	
Ordering Provider: Ki Ordered On: 08/06/09 Ordered Dose (Rema	9 1221			nued (Past End Date/Time) 06/09 1730 - 08/07/09 1816
Frequency: BEFORE	MEALS AN	ID AT BEÓTIME		rder Duration: — / —
<pre>Admin Instructions: A <151 0 UN</pre>		N QAC & HS 0 UNITS	151-200	ACHS 2 UNITS 0 UNITS
201-250 4 UN	-	UNITS		7 UNITS 4 UNITS
301-350 10 U		7 UNITS		15 UNITS 10 UNITS
f blood glucose less			1) Do not admir	nister any scheduled insulin doses until after
			consulting Physic	
		additional orders (includ		orally and alert, give juice or glucose source or
to re-check glucose a insulin)	nd for dose	adjustment of any sche	duled snack/meal	
	rally and wit	h IV access, give 25mL	(1/2 c) if not taki	ing orally and without IV access, give 1 mg
ampule) of D50W IV			glucagon IM	
Timestamps	Action	Dose	Route / Site	Other Information
		Dose 15 Units		Other Information Performed by: Morita, Alyssa Tas
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 1144 Performed 08/07/09	Given		Route / Site Subcutaneous Abdominal Tissue Subcutaneous	Other Information Performed by: Morita, Alyssa Tas (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tas
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 1144	Given	15 Units	Route / Site Subcutaneous Abdominal Tissue	Other Information Performed by: Morita, Alyssa Tas (R.N.) Comments: med verified by h.e.
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0743	Given	15 Units	Route / Site Subcutaneous Abdominal Tissue Subcutaneous	Other Information Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Manding, Percy Domingo (R.N.)
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0743	Given	15 Units 15 Units	Route / Site Subcutaneous Abdominal Tissue Subcutaneous Left Arm Subcutaneous	Other Information Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Manding, Percy
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 08/07/09 Performed 08/06/09 2221 Performed 08/06/09 Performed	Given	15 Units 15 Units	Route / Site Subcutaneous Abdominal Tissue Subcutaneous Left Arm Subcutaneous Right Arm Subcutaneous	Other Information Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Manding, Percy Domingo (R.N.) Comments: BS 383 Performed by: Morita, Alyssa Tase
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0743 Performed 08/06/09 2221 Documented: 08/06/09 2221	Given	15 Units 15 Units 15 Units	Route / Site Subcutaneous Abdominal Tissue Subcutaneous Left Arm Subcutaneous Right Arm	Other Information Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Manding, Percy Domingo (R.N.) Comments: BS 383 Performed by: Morita, Alyssa Tase
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 1144 Performed 08/07/09 0742 Documented: 08/07/09 0743 Performed 08/06/09 2221 Documented: 08/06/09 2221 Performed 08/06/09 1736 Documented: 08/06/09 1737	Given Given Given	15 Units 15 Units 15 Units 7 Units	Route / Site Subcutaneous Abdominal Tissue Subcutaneous Left Arm Subcutaneous Right Arm Subcutaneous Abdominal Tissue	Other Information Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Manding, Percy Domingo (R.N.) Comments: BS 383 Performed by: Morita, Alyssa Tase (R.N.) Comments: MED VERIFIED BY
Timestamps Performed 08/07/09 1143 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0742 Documented: 08/07/09 0743 Performed 08/06/09 2221 Documented: 08/06/09 1736 Documented: 08/06/09 1736 Documented: 08/06/09 1737	Given Given Given	15 Units 15 Units 15 Units 7 Units 5 (HumuLIN R/NovoLI	Route / Site Subcutaneous Abdominal Tissue Subcutaneous Left Arm Subcutaneous Right Arm Subcutaneous Abdominal Tissue Subcutaneous Abdominal Tissue Subcutaneous Abdominal Tissue Subcutaneous Abdominal Tissue N R) [162797866]	Other Information Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by h.e. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Morita, Alyssa Tase (R.N.) Comments: med verified by p.p. Performed by: Manding, Percy Domingo (R.N.) Comments: BS 383 Performed by: Morita, Alyssa Tase (R.N.) Comments: MED VERIFIED BY

Ordered Rate/Order Duration: - / --

Comment

Med Link Info

08/05/09 1957 by Odunze, Polycarp I.

Frequency: ONE TIME

Peripheral IV Right;Antecubital

Line

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

Medication Administrations (continued)

Timestamps	Action	Dose	Route	Other Information
Performed 08/05/09	9 Given	10 Units	intraVENOUS	Performed by: Odunze, Polycarp I.
1957				(R.N.)
Documented:				
00/05/00 4057				

08/05/09 1957

Insulin Regular Human Inj 15 Units (HumuLIN R/NovoLIN R) [162884575]

Ordering Provider:	(im. Iniib John ((M.D.)	Status: Completed (Pa	ast End Date/Time)			
Ordered On: 08/06/				Starts/Ends: 08/06/09 1230 - 08/06/09 1225			
Ordered Dose (Rem		5 Units (0/1)	Route: Subcutaneous				
Frequency: ONE TI		()	Ordered Rate/Order Duration: — / —				
Timestamps	Action	Dose	Route / Site	Other Information			
Performed 08/06/0	9 Given	15 Units	Subcutaneous	Performed by: Morita, Alyssa Tashiro			
1225			Left Arm	(R.N.)			
Documented:				Comments: MED VERIFIED BY			
08/06/09 1225				C.G.			
nsulin Regular Huma			· · ·				
Ordering Provider: S		/I.D.)	Status: Completed (Pa	,			
Ordered On: 08/06/			Starts/Ends: 08/06/09	0545 - 08/06/09 0554			
Ordered Dose (Rem		o Units (0/1)	Route: intraVENOUS				
Frequency: ONE TI	ME		Ordered Rate/Order D				
Line			ink Info	Comment			
Peripheral IV R	ight;Antecubita	I 08/06/	09 0553 by Adesina, Lucy N (R.N.)	—			
Timestamps	Action	Dose	Route	Other Information			
Performed 08/06/0	9 Given	5 Units	intraVENOUS	Performed by: Adesina, Lucy N			
0553				(R.N.)			
Documented: 08/06/09 0554				Comments: VERIFY WITH LILLY			
nsulin Regular Huma	· · ·						
Ordering Provider:		aram (M.D.)	Status: Completed (Pa				
Ordered On: 08/05/			Starts/Ends: 08/05/09	1830 - 08/05/09 1846			
Ordered Dose (Rem		3 Units (0/1)	Route: Subcutaneous				
Frequency: ONE TI	ИE		Ordered Rate/Order D	Duration: — / —			
Timestamps	Action	Dose	Route / Site	Other Information			
Performed 08/05/0	9 Given	8 Units	Subcutaneous	Performed by: Velthoen, Deborah			
1845			Right Arm	(R.N.)			
Documented:			C C	Comments: verifiied by Janica M, Rn			
08/05/09 1846							
metFORMIN Tab 500	mg (GLUCOPI	HAGE) [162886327]					
metFORMIN Tab 500 Ordering Provider: I			Status: Discontinued (Past End Date/Time)			

Ordered Dose (Remaining/Total): 500 mg (—/—) Frequency: 2 TIMES A DAY WITH MEALS			Route: Oral Ordered Rate/Order Duration: — / —	
Timestamps Action Dose			Route	Other Information

			mission (Discharged)	in 5B2 (continued)
ation Administratior	is (continued)		
Performed 08/07/09 0836 Documented: 08/07/09 0836	Given	500 mg	Oral	Performed by: Morita, Alyssa Tashi (R.N.)
Performed 08/06/09 1836 Documented: 08/06/09 1836	Given	500 mg	Oral	Performed by: Morita, Alyssa Tashi (R.N.)
Performed 08/06/09 1318 Documented: 08/06/09 1318	Given	500 mg	Oral	Performed by: Morita, Alyssa Tashi (R.N.)
Ordering Provider: Ta	a, Tuan (M.D.)	PriLOSEC) [162807330	Status: Discontinu	ued (Past End Date/Time)
Ordered On: 08/06/09		10 mm (1)		6/09 0730 - 08/07/09 1816
Ordered Dose (Rema Frequency: DAILY BI	E = O P = A M =	,∪ mg (—/—) ∧I	Route: Oral	der Duration: — / —
Admin Instructions: D			Note to pharmacy SR CAP - Orig Sig	© Outpt Rx: OMEPRAZOLE 20 MG ORAL CPE g - TAKE 1 CAPSULE ORALLY 2 TIMES DAIL G:TAKE 1 CAPSULE ORALLY 2 TIMES DAILY
Timestamps	Action	Dose	Route	Other Information
Performed 08/07/09 0742 Documented: 08/07/09 0743	Given	40 mg	Oral	Performed by: Morita, Alyssa Tasl (R.N.)
Performed 08/06/09 0820 Documented:	Given	40 mg	Oral	Performed by: Morita, Alyssa Tasl (R.N.)
08/06/09 0821				
08/06/09 0821 mvastatin Tab 40 mg		-	Status Disposting	und (Part End Date/Time)
08/06/09 0821 mvastatin Tab 40 mg Ordering Provider: Ta Ordered On: 08/06/09 Ordered Dose (Rema	a, Tuan (M.D.) 9 0110 aining/Total): 4		Starts/Ends: 08/06 Route: Oral	ued (Past End Date/Time) 6/09 1800 - 08/07/09 1816
08/06/09 0821 mvastatin Tab 40 mg Ordering Provider: Ta Ordered On: 08/06/09	a, Tuan (M.D.) 9 0110 aining/Total): 4 EVENING	40 mg (—/—)	Starts/Ends: 08/06 Route: Oral Ordered Rate/Ord Note to pharmacy	6/09 1800 - 08/07/09 1816 der Duration: — / — r: Outpt Rx: SIMVASTATIN 40 MG ORAL TAB PO DAILY AT BEDTIME OUTPATIENT SIG:1
08/06/09 0821 mvastatin Tab 40 mg Ordering Provider: Ta Ordered On: 08/06/09 Ordered Dose (Rema Frequency: EVERY E	a, Tuan (M.D.) 9 0110 aining/Total): 4 EVENING	40 mg (—/—)	Starts/Ends: 08/06 Route: Oral Ordered Rate/Ord Note to pharmacy Orig Sig - 1 TAB F	6/09 1800 - 08/07/09 1816 der Duration: — / — r: Outpt Rx: SIMVASTATIN 40 MG ORAL TAB PO DAILY AT BEDTIME OUTPATIENT SIG:1

Sodium Chloride 0.9 % Bolus IV Soln [162788521]

Ordering Provider: Ghadishah, Delaram (M.D.) Ordered On: 08/05/09 1802 Ordered Dose (Remaining/Total): 1,000 mL (0/1) Frequency: ONE TIME

Status: Completed (Past End Date/Time) Starts/Ends: 08/05/09 1815 - 08/05/09 1831 Route: intraVENOUS Ordered Rate/Order Duration: - / --

Timestamps	Action	Dose	Route	Other Information

Performed 08/05/09	Given	1,000 mL	intraVENOUS	Performed by: Velthoen, Deborah
1815		,		(R.N.)
Documented:				
08/05/09 1831				
odium Chloride 0.9 %			· · · · · · · · · · · · · · · · · · ·	
Ordering Provider: Ta Ordered On: 08/06/09				(Past End Date/Time) 9 0600 - 08/07/09 1816
Ordered Dose (Rema		- (/)	Route: intraVENOUS	
Frequency: EVERY 8	HOURS	. ,	Ordered Rate/Order I	
Admin Instructions: S	aline lock with	routine flushes per n Med Lir		Commont
Line Peripheral IV Rig	ht:Antecubita		או הוס ס 0552 by Adesina, Lucy N (R.N.)	Comment
Timestamps Due 08/07/09 1400	Action Due	Dose	Route	Other Information
Scheduled: 08/06/09			-	
0110				
Performed 08/07/09	Given	10 mL	intraVENOUS	Performed by: Manding, Percy
0601				Domingo (R.N.)
Documented:				
08/07/09 0601				
Performed 08/06/09	Given	10 mL	intraVENOUS	Performed by: Manding, Percy
2220				Domingo (R.N.)
Documented: 08/06/09 2221				
	<u> </u>			
Performed 08/06/09 1318	Given	10 mL	intraVENOUS	Performed by: Morita, Alyssa Tas (R.N.)
Documented:				(((,)))
08/06/09 1318				
Performed 08/06/09	Given	10 mL	intraVENOUS	Performed by: Adesina, Lucy N
0552				(R.N.)
Documented:				
08/06/09 0552				
dium Chloride 0.9 %	IV Premix [1	62792485]		
Ordering Provider: G		aram (M.D.)		(Past End Date/Time)
Ordered On: 08/05/09 Ordered Dose (Rema		000 ml (/)	Starts/Ends: 08/05/09 Route: intraVENOUS	9 1830 - 08/06/09 0110
Frequency: CONTINU		,000 IIIL (<i>—/—)</i>	Ordered Rate/Order [
Timestamps	Action	Dose	Route	Other Information
Performed 08/05/09		1,000 mL	intraVENOUS	Performed by: Velthoen, Deborah
1846	-			(R.N.)
Documented: 08/05/09 1846				
00/00/03 1040				
dium Chloride 0.9 %				
Ordering Provider: G		aram (M.D.)		(Past End Date/Time)
Ordered On: 08/05/09 Ordered Dose (Rema		000 ml (/)	Starts/Ends: 08/05/09 Route: intraVENOUS	9 1930 - 08/06/09 0159
Frequency: CONTINU		,, <u>,</u>)	Ordered Rate/Order [

Line		Med Link Info		Comment
Peripheral IV Rig	ht;Antecubita	l 08/05/09 2003 b (R.N.)	y Odunze, Polycarp I.	_
Timestamps	Action	Dose	Route	Other Information
Performed 08/05/09 2003 Documented: 08/05/09 2003	New Bag	1,000 mL	intraVENOUS	Performed by: Odunze, Polycarp I. (R.N.)
a 20 % Cream (URE Drdering Provider: Ta	, Tuan (M.D.)		Status: Discontinued (
Ordered On: 08/06/09			Starts/Ends: 08/06/09	1000 - 08/07/09 1816
Ordered Dose (Rema		- (—/—)	Route: Topical	
requency: 2 TIMES	A DÂY	– (—/—) 10L 20 20 % TOP CREA - Ori	Ordered Rate/Order D	
requency: 2 TIMES a lote to pharmacy: Ou	A DÂY		Ordered Rate/Order D	
requency: 2 TIMES J lote to pharmacy: Ou Timestamps Performed 08/07/09 1009 Documented:	A DAY utpt Rx: CARM Action	/IOL 20 20 % TOP CREA - Ori	Ordered Rate/Order D ig Sig - apply to I 2nd and	3rd digit areas BID
requency: 2 TIMES A lote to pharmacy: Ou	A DAY utpt Rx: CARM Action Given	/IOL 20 20 % TOP CREA - Ori	Ordered Rate/Order D ig Sig - apply to I 2nd and Route	3rd digit areas BID Other Information Performed by: Morita, Alyssa Tashir

ED Provider Note

ED Provider Notes by Ghadishah, Delaram (M.D.) at 8/5/2009 1834 Author: Ghadishah, Delaram (M.D.) Service: — Author Type: Physician Filed: 8/5/2009 Bito of Service: 8/5/2009 6:34 PM Creation Time: 8/5/2009 6:34 PM Status: Signed Editor: Ghadishah, Delaram (M.D.) (Physician)

HPILawson B Hawkins is a 54 year old male presents with ABNORMAL BLOOD LEVEL The Pt presents wit polyuria and polydipsi as well as dry mouth for a couple of weeks. Has had malaise, fatigue, blurred vision, unsteadyness as well as nausea. No vomiting, abd pain, CP, SOB, URI sx, bloody or black stools, dysuria.

PMH: Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] NOT CURRENT SMOKER [V15.82C] HYPERLIPIDEMIA [272.4C] PREDIABETES [790.29C] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A]

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued) ED Provider Note (continued) CHOLELITHIASIS [574.20A] OBESITY [278.00E] ELEVATED BLOOD PRESSURE READING WO DIAGNOSIS OF HTN [796.2D] Social Hx: Quit tob 2008. Smoked 1/2 ppd x 20 yrs. Rare ETOH no IVDA. FH: None Surg Hx: Past Surgical History PAST SURGICAL HISTORY, OTHER back broken, metal plate Medications marked Taking as of 8/5/09 encounter (Hospital Encounter): CLOTRIMAZOLE 1 % TOP APPLY TO AFFECTED Disp: 30 Rfl: 2 CREA AREA(S) BID ABILIFY 5 MG ORAL TAKE 4 TABLETS Disp: 120Rfl: 0 ORALLY EVERY NIGHT TAB AT BEDTIME OMEPRAZOLE 20 MG ORALTAKE 1 CAPSULE Disp: 200Rfl: 3 ORALLY 2 TIMES CPDR SR CAP DATLY CARMOL 20 20 % TOP apply to 1 2nd andDisp: 45 Rfl: 3 CREA 3rd digit areas BID All: NKDA

BP 137/90 | Pulse 104 | Temp 98.2 °F (36.8 °C) | Resp 16 | Ht 1.702 m (5' 7") | Wt 102.059 kg (225 lb) | SpO2 98%

Review of Systems

Constitutional: Positive for malaise/fatigue and weakness. Negative for fever, chills and diaphoresis. HENT: Negative for headaches, congestion and sore throat. Eyes: Positive for blurred vision. Negative for photophobia. Cardiovascular: Negative for chest pain and palpitations. Respiratory: Negative for cough. Is not experiencing shortness of breath. Gastrointestinal: Positive for nausea. Negative for vomiting, abdominal pain, diarrhea and blood in stool. Genitourinary: Positive for frequency. Negative for dysuria and urgency. Musculoskeletal: Negative for myalgias and neck pain. Neurological: Positive for dizziness. Negative for sensory change.

Physical Exam

Constitutional: He appears well-developed and well-nourished. No distress. HENT:

ED Provider Note (continued)

Head: Normocephalic and atraumatic.

Mouth/Throat: Oropharynx is clear and moist. No oropharyngeal exudate.

Eyes: Conjunctivae are normal. Pupils are equal, round, and reactive to light.

Neck: Normal range of motion. Neck supple.

Cardiovascular: Regular rhythm, normal heart sounds and intact distal pulses.

No murmur heard.

Tachycardic.

Pulmonary/Chest: Effort normal and breath sounds normal. No respiratory distress. He has no wheezes. He has no rales.

Abdominal: Bowel sounds are normal. He exhibits no distension. Soft. No tenderness. He has no rebound. Genitourinary: Guaiac negative stool.

Neurological: He is alert.

Skin: Skin is warm.

EKG: NSR 100, LAD, Q waves II/III/AVF c/w inferior MI age undetermined

CXR:

Component	Reference Range	8/5/2009
WBC's, automated count	4.0-11.0 thou/cumm	6.4
RBC, auto	4.7-6.1 mil/cumm	5.12
Hgb	14.0-18.0 g/dL	15.5
Hct, auto	42-52 %	46.0
MCV	80-94 fl	89.8
MCH	27-35 pg/cell	30.2
MCHC	32-37 g/dL	33.6
RDW, Blood	11.5-14.5 %	12.5
Platelets, automated count	130-400 thou/mcL	165
MPV	7.4-10.4 fl	11.9 (H)
Neutrophils %, automated count	42-75 %	69.2
Lymphocytes %, automated count	20-51 %	23.4
Monos %, auto	1-12 %	6.4
Eosinophils %, automated count	0-10 %	0.6
Basophils %, automated count	0-1 %	0.4
Neutrophils	1-7 thou/mcL	4.4
Lymphocytes	1-3 thou/mcL	1.5
Monocytes	0.11-0.59 thou/mcL	0.40
Eosinophils	0-10 thou/mcL	0.00
Basophils	0.0-0.2 thou/mcL	0.00
Sodium	135-145 meq/L	117 (AA)
Potassium	3.5-5.0 meq/L	5.0
Chloride	101-111 meq/L	84 (L)
Bicarb	21-31 meq/L	20 (L)
Creatinine	0.7-1.3 mg/dL	1.3
Glomerular filtration rate	mL/min	58-NB
GLUCOSE, RANDOM	<140 mg/dL	976 (AA)

ED Provider Note (continued)

BUN	<19 mg/dL	20 (H)
AST	<35 units/L	27
ALT	17-63 units/L	40
Lipase	16-63 U/L	53
ABO+Rh group type		O POS
AB screen		Negative

URINE DIPSTICK RESULT: Patient Urine Glucose in the past 24 hrs:

	Urine Glucose
08/05/09	1000
1800	

Patient Urine Ketones in the past 24 hrs:

	Urine Ketones
08/05/09 1800	MODERATE (40)

Patient Urine Specific Gravity in the past 24 hrs:

	Urine Specific Gravity
08/05/09 1800	1.005

Patient Urine Blood in the past 24 hrs:

	Urine Blood
08/05/09 1800	TRACE

Patient Urine pH in the past 24 hrs:

	Urine pH
08/05/09 1800	5

Patient Urine Protein in the past 24 hrs:

	Urine Protein
08/05/09 1800	NEGATIVE

Patient Urine Nitrite in the past 24 hrs:

ED Provider Note (continued)

	Urine Nitrite
08/05/09	NEGATIVE
1800	

Patient Urine Leukocytes in the past 24 hrs:

	Urine Leukocytes
08/05/09 1800	NEGATIVE

8:25 PM d/W MOD. Signed out to Dr Lai. On insulin drip with hourly BS.

790.29J HYPERGLYCEMIA 278.00E OBESITY 276.1A HYPONATREMIA

Signed Electronically by Delaram Ghadishah, MD West LA ED 8:25 PM 8/5/2009

Electronically signed by Ghadishah, Delaram (M.D.) at 8/5/2009 8:26 PM

ED Notes

ED Notes by Velthoen, Deborah (R.N.) at 8/5/2009 1741

Author: Velthoen, Deborah (R.N.)Service: —Author Type: REGISTERED NURSEFiled: 8/5/20096:51 PMDate of Service: 8/5/20095:41 PMCreation Time: 8/5/20095:41 PMStatus: SignedEditor: Velthoen, Deborah (R.N.) (REGISTERED NURSE)

Patient ambulatory to ED, A&Ox4, no decreased LOC, ABC's intact, skin-W/D, NO c/o pain OR sob. Pt c/o polyuria, dry mouth, blurred vision, weakness. BS critical high in triage. Pt labs drawn prior to arrival Hc1 elevated and referred by PMD.

Labs drawn and sent to lab. Urine sample obtained. EKG reviewed and signed by Dr. Ghadisha. Pt on cardiac monitor. Sinus Tach. NAD noted or verbalized

1730 Pt medicated per MD. Pt c/o of mild nausea. MD aware.

Electronically signed by Velthoen, Deborah (R.N.) at 8/5/2009 6:51 PM

ED Notes by Velthoen, Deborah (R.N.) at 8/5/2009 1925

Author: Velthoen, Deborah (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 8/5/2009 7:26 PM	Date of Service: 8/5/2009 7:25 PM	Creation Time: 8/5/2009 7:25 PM

ED Notes (continued)

Status: Signed

Editor: Velthoen, Deborah (R.N.) (REGISTERED NURSE)

Pt care endorsed to Polycarp, RN. NAD.

Electronically signed by Velthoen, Deborah (R.N.) at 8/5/2009 7:26 PM

ED Notes by Odunze, Polycarp I. (R.N.) at 8/5/2009 1926

Author: Odunze, Polycarp I. (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 8/5/2009 7:29 PM	Date of Service: 8/5/2009 7:26 PM	Creation Time: 8/5/2009 7:26 PM
Status: Signed	Editor: Odunze, Polycarp I. (R.N.) (REGI	STERED NURSE)

Received in bed at this time a/a/o x 3. Respiration is regular, even, and unlabored. No sign of distress noted.

Electronically signed by Odunze, Polycarp I. (R.N.) at 8/5/2009 7:29 PM

ED Notes by Odunze, Polycarp I. (R.N.) at 8/5/2009 2108

Author: Odunze, Polycarp I. (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 8/5/2009 9:09 PM	Date of Service: 8/5/2009 9:08 PM	Creation Time: 8/5/2009 9:08 PM
Status: Signed	Editor: Odunze, Polycarp I. (R.N.) (REGIS	TERED NURSE)

10 units of regular insulin was given to pt iv at 1957. Insulin was verified by jessica-RN.

Electronically signed by Odunze, Polycarp I. (R.N.) at 8/5/2009 9:09 PM

ED Notes by Odunze, Polycarp I. (R.N.) at 8/5/2009 2113

Author: Odunze, Polycarp I. (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 8/5/2009 9:15 PM	Date of Service: 8/5/2009 9:13 PM	Creation Time: 8/5/2009 9:13 PM
Status: Signed	Editor: Odunze, Polycarp I. (R.N.) (REGI	STERED NURSE)

Pt's blood sugar still reading critical high. Dr Lai informed at this time and she instructed me to increase insulin drip to 7 units/hr at this time.

Electronically signed by Odunze, Polycarp I. (R.N.) at 8/5/2009 9:15 PM

ED Notes by Odunze, Polycarp I. (R.N.) at 8/5/2009 2210

Author: Odunze, Polycarp I. (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 8/5/2009 10:10 PM	Date of Service: 8/5/2009 10:10 PM	Creation Time: 8/5/2009 10:10 PM
Status: Signed	Editor: Odunze, Polycarp I. (R.N.) (REGIS	STERED NURSE)

Inpatient consult in room at this time assessing pt.

Electronically signed by Odunze, Polycarp I. (R.N.) at 8/5/2009 10:10 PM

ED Notes by Odunze, Polycarp I. (R.N.) at 8/6/2009 0025

Author: Odunze, Polycarp I. (R.N.)	Service: —	Author Type: REGISTERED NURSE
Filed: 8/6/2009 12:26 AM	Date of Service: 8/6/2009 12:25 AM	Creation Time: 8/6/2009 12:25 AM
Status: Signed	Editor: Odunze, Polycarp I. (R.N.) (REGI	STERED NURSE)

Pt transferred to room 5712 at this time in no apparent distress. All belongings transferred with pt.

Electronically signed by Odunze, Polycarp I. (R.N.) at 8/6/2009 12:26 AM

ED Notes (continued)

ED Care Timeline

8/5/2009	Event	Details	User
16:40	Patient arrived in ED		Shumate, Helen L (R.N.)
16:41	Triage Completed		Shumate, Helen L (R.N.)
16:41	Private Encounter?	Other flowsheet entries Private?: DO NOT DISCLOSE ANY PER PATIENT/PERSONAL REPRESENTATIVE	Shumate, Helen L (R.N.)
16:41	ESI (Emergency Severity Index)	 Decision B RETIRED Arrived in high risk situation? or confused/lethargic/disoriented? or severe pain/distress?: No Decision C RETIRED How many different resources are needed?: Many, Level 3 assigned Other flowsheet entries Triage Complete: YES RETIRED Arrived requiring immediate life-saving intervention?: No 	Shumate, Helen L (R.N.)
16:41	ESI Secondary Assessment	Secondary Assessment Priority: 3Urg RETIRED Decision D Priority: 3Urg	Shumate, Helen L (R.N.)
16:41:17	Chief Complaints Updated	ABNORMAL BLOOD LEVEL	Shumate, Helen L (R.N.)
16:55	RETIRED PRESENTING INFO	PRESENTING HISTORY History of Present Illness: A 54 y/o male pt came to ED as instructed by Kaiser MD(Mathur) due to abnormal lab results(HgbA1C and Na level) and .Pt has a new onset DM.Denies any discomfort at this time. General Appearance-DistressLevel: NONE Pre Hospital Care: REST Industrial Related: NO Stated Medical History: GERD; HYPERLIPIDEMIA (Schizoaffective Disorder) Stated Surg/Procedure History: CHOLE RETIRED PAIN Comment: Called to Linda(charge RN) and was made aware of pt's current BS level of critical high for immediate placement.	Dagamac, Maria Cielo Garcia (R.N.)

16:55	Disposition	Vital Signs	Dagamac, Maria
		Temp: 98.2 °F (36.8 °C)	Cielo Garcia
		Temp Source: ORAL	(R.N.)
		Pulse: 120	
		BP: 138/95 *	
		BP Source: AUTOMATIC	
		BP Location: LA-LEFT ARM	
		Patient Position: SITTING	
		Resp: 15	
		Height: 5' 7" (170.2 cm)	
		Weight: 225 lb (102.1 kg)	
		Scale Type: STANDING	
		O2 Delivery: RA-ROOM AIR	
		SpO2: 97 % Pain Assessment	
		Pain Assessment Pain Score: 0	
		Scale Type: NUMERIC 0-10 PER PATIENT	
		Other flowsheet entries	
		Body Mass Index: 35	
17:00	I/O ADULT	INTAKE	Velthoen, Deborah
		P.O. (+ml): 350 mL	(R.N.)
		Ουτρύτ	
		Urine (-ml): 600 mL	
17:00	Peripheral IV	Line Status: FLUIDS INFUSING	Velthoen, Deborah
	Right;Antecubital	Site Intervention: NONE REQUIRED	(R.N.)
	Assessment	Dressing Assessment: DRESSING CLEAN, DRY AND INTACT	
		Dressing Intervention: NONE REQUIRED	
		Dressing Type: Hydrophilic Polyurethane (Transparent)	
17:00	Secondary		Dagamac, Maria
	Assessment		Cielo Garcia
	Completed		(R.N.)

	(continued)		
17:00	RETIRED Comprehensive Assess	NEUROLOGICAL WDL** Arouses to voice or touch; Awake or alert, opens eyes spontaneously; Follows Commands; Oriented x 3; Speech spontaneous, well paced, logical Denies Symptoms: YES EYES, EARS, NOSE, AND THROAT ASSESSMENT Denies Symptoms: YES CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion-Pink nail beds; 2+pulses; No edema Capillary Refill**: 3 SEC OR LESS Right Leg Edema**: 2 Left Leg Edema**: 2 Pulse Quality/Rhythm: REGULAR Extremities: WARM RETIRED CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion- Pink nail beds; 2+pulses; No edema Capillary Refill**: 3 SEC OR LESS Right Leg Edema**: 2 Left Leg Edema**: 2 Pulse Quality/Rhythm: REGULAR Extremities: WARM RESPIRATORY WDL** Regular rate, depth and pattern;Breath sounds clear and equal bilaterally; Chest expansion equal; No shortness of breath; No cough or productive sputum Denies Symptoms: YES Breathing Patten**: REGULAR Right Upper Breath Sounds**: CLEAR Right Lower Breath Sounds**: CLEAR Left Upper Breath Sounds**: CLEAR Left Upper Breath Sounds**: CLEAR Chest Expansion**: EQUAL Cough**: NONE Sputum Amount**: NONE Sputum Amount*: NONE Sputum Color: NOT APPLICABLE GASTROINTESTINAL WDL** Abdomen soft, non-tender; Normoactive bowel sounds; Continent of stool Denies Symptoms: YES GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended Denies Symptoms: NO RETIRED GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended Denies Symptoms: NO Musculoskeletal Assessment Denies Symptoms: YES RETIRED GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; Continent of urine; Bladder non-distended Denies Symptoms: NO	Dagamac, Maria Cielo Garcia (R.N.)
		Trauma Denies Symptoms: YES	
17:00	Point of Care Tests	BLOOD GLUCOSE, ADULT / CHILD Glucose, Random: (Critical High)	Dagamac, Maria Cielo Garcia (R.N.)
17:00	ESI Secondary Assessment	Secondary Assessment Priority: 3Urg Secondary Assessment Completed: YES RETIRED Decision D RETIRED Danger zone vitals?: No Priority: 3Urg Secondary Assessment Completed: YES	Dagamac, Maria Cielo Garcia (R.N.)

ED Care Timeline (continued)

17:01	RETIRED Comprehensive Assess	GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended GU Symptoms**: FREQUENCY RETIRED GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended GU Symptoms**: FREQUENCY	Dagamac, Maria Cielo Garcia (R.N.)
17:19:05	Patient roomed in ED	To room HA05	Williams, Linda (R.N.)
17:19:50	Patient transferred	From room HA05 to room HB02	Williams, Linda (R.N.)
17:41:18	ED Notes	 Patient ambulatory to ED, A&Ox4, no decreased LOC, ABC's intact, skin-W/D, NO c/o pain OR sob. Pt c/o polyuria, dry mouth, blurred vision, weakness. BS critical high in triage. Pt labs drawn prior to arrival Hc1 elevated and referred by PMD. Labs drawn and sent to lab. Urine sample obtained. EKG reviewed and signed by Dr. Ghadisha. Pt on cardiac monitor. Sinus Tach. NAD noted or verbalized 1730 Pt medicated per MD. Pt c/o of mild nausea. MD aware. 	Velthoen, Deborah (R.N.)
17:45	MD Started	ZIMMERMANN, C assigned as Attending	Williams, Linda (R.N.)
17:56	MD Started	GHADISHAH, D assigned as Attending	Williams, Linda (R.N.)

 18:00
 Peripheral IV
 Removal Date/Time: 08/07/09 1200 Placement Date/Time: 08/05/09 1800
 Velthoen, Deborah

 18:00
 Right;Antecubital
 Size: 20
 Site: Right;Antecubital Site Prep: Alcohol Number of Attempts: 1
 (R.N.)

 Placed
 Line Secured: Taped Antimicrobial Line: NO Reason for removal: Therapy no
 (R.N.)

-	•		
18:00	RETIRED Comprehensive	RETIRED Schmid Fall Risk Mobility: 0-AMBULATES WITH NO GAIT DISTURBANCE	Velthoen, Deborah (R.N.)
	Assess	Mentation: 0-ALERT, ORIENTED X 3 Elimination: 0-INDEPENDENT IN ELIMINATION	
		Prior History of Falls: 0-NO	
		Current Medications: 0-NO ANTI-CONVULSANTS/TRANQUILIZERS OR PSYCHOTROPICS/HYPNOTICS	
		Total Score: 0	
		SAFETY INTERVENTIONS	
		Patient Safety: ID BAND CHECK	
		Side Rails: BOTH UPPERS - SIDE RAILS	
		Call Light in Reach: YES	
		Patient Rounds: AWAKE	
		Glasgow Coma Scale	
		Eye opening: SPONTANEOUS	
		Verbal response: ORIENTED	
		Motor Response: OBEYS COMMANDS NEUROLOGICAL WDL** Arouses to voice or touch; Awake or alert,	
		opens eyes spontaneously; Follows Commands; Oriented x 3; Speech	
		spontaneous, well paced, logical	
		Denies Symptoms: YES	
		Assessments: WDL	
		EYES, EARS, NOSE, AND THROAT ASSESSMENT	
		Denies Symptoms: NO	
		Eye Exam Right: VISUAL DISTURBANCE (blurred)	
		Eye Exam Left: VISUAL DISTURBANCE	
		CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion-Pink nail beds; 2+pulses; No edema	
		Denies Symptoms: YES	
		Assessments: EXCEPTION TO WDL, SEE BELOW	
		Heart Sounds**: REGULAR	
		Cardiac Rhythm **: SINUS TACHYCARDIA	
		Perfusion**: NORMAL COLOR FOR RACE AND ETHNICITY	
		Right Dorsalis Pedis Pulse**: 2+ - NORM	
		Other Pulse: 2+ - NORM	
		Capillary Refill**: 3 SEC OR LESS Generalized Edema**: 2	
		Right Leg Edema**: 2	
		Left Leg Edema**: 2	
		Right Pedal/Ankle Edema**: MILD	
		Left Pedal/Ankle Edema**: MILD	
		Pulse Quality/Rhythm: REGULAR	
		Extremities: WARM	
		RETIRED CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion- Pink nail beds; 2+pulses; No edema	
		Denies Symptoms: YES	
		Assessments: EXCEPTION TO WDL, SEE BELOW	
		Heart Sounds**: REGULAR	
		Cardiac Rhythm **: SINUS TACHYCARDIA	
		Perfusion**: NORMAL COLOR FOR RACE AND ETHNICITY	
		Right Dorsalis Pedis Pulse**: 2+ - NORM Other Pulse: 2+ - NORM	
		Capillary Refill**: 3 SEC OR LESS	
		Generalized Edema**: 2	
		Right Leg Edema**: 2	
		Left Leg Edema**: 2	
		Right Pedal/Ankle Edema**: MILD	
		Left Pedal/Ankle Edema**: MILD	
		Pulse Quality/Rhythm: REGULAR	
		Extremities: WARM RESPIRATORY WDL** Regular rate, depth and pattern;Breath sounds	
		clear and equal bilaterally; Chest expansion equal; No shortness of	
		breath; No cough or productive sputum	
		Denies Symptoms: YES	

ED Care	Timeline	(continued)
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		Assessments: WDL GASTROINTESTINAL WDL** Abdomen soft, non-tender; Normoactive bowel sounds; Continent of stool Denies Symptoms: YES Assessments: WDL GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended Denies Symptoms: NO Assessments: EXCEPTION TO WDL, SEE BELOW GU Symptoms**: POLYURIA Voided Urine Color*: YELLOW Voided Urine Characteristics**: CLEAR Flank Pain: NO RETIRED GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended Denies Symptoms: NO Assessments: EXCEPTION TO WDL, SEE BELOW GU Symptoms**: POLYURIA Voided Urine Color*: YELLOW Voided Urine Color*: YELOW Voided Urine Color*: YELOW Denies Symptoms: YES PSYCHOSOCIAL ASSESSMENT Denies Symptoms: YES	
		Living Arrangement: LIVES ALONE Trauma Denies Symptoms: YES	
18:00	Disposition	Vital Signs Pulse: 104 BP: 137/90 BP Source: AUTOMATIC BP Location: LA-LEFT ARM Patient Position: SITTING Resp: 16 O2 Delivery: RA-ROOM AIR SpO2: 98 % Pain Assessment Pain Score: 0 Scale Type: NUMERIC 0-10 PER PATIENT Abuse Assessment Abuse Assessment: DENIES ABUSE	Velthoen, Deborah (R.N.)
18:00	Point of Care Tests	Urinalysis (Dipstick) (Bayer) Urine Glucose: 1000 Urine Ketones: MODERATE (40) Urine Specific Gravity: 1.005 Urine Blood: TRACE Urine pH: 5 Urine Nitrite: NEGATIVE Urine Leukocytes: NEGATIVE Other flowsheet entries RETIRED Urine Protein: NEGATIVE	Velthoen, Deborah (R.N.)
18:00	Specimens Collected	GLUCOSE, RANDOM - ID: 438456279 CREATININE, SERUM - ID: 438456279 BUN, SERUM - ID: 438456279 ELECTROLYTES, SERUM - ID: 438456279 CBC W DIFFERENTIAL, AUTO - ID: 438456279 TYPE (ABO-RH) AND ANTIBODY SCREEN PANEL(aka TYPE AND SCREEN) AST, SERUM - ID: 438456279 ALT, SERUM - ID: 438456279 LIPASE - ID: 438456279	

ED Care Timeline (continued) 18:02:01 Orders Placed Nursing - MONITORING, CARDIAC Ghadishah. Medications - Sodium Chloride 0.9 % Bolus IV Soln Delaram (M.D.) Lab - GLUCOSE, RANDOM; CREATININE, SERUM ; BUN, SERUM; ELECTROLYTES, SERUM; CBC W DIFFERENTIAL, AUTO EKG - ECG, ROUTINE 12 LEAD 18:02:02 Lab Ordered LIPASE, ALT, SERUM, AST, SERUM, TYPE (ABO-RH) AND ANTIBODY Ghadishah, SCREEN PANEL, CBC W DIFFERENTIAL, AUTO, ELECTROLYTES, Delaram (M.D.) SERUM, BUN, SERUM, CREATININE, SERUM, GLUCOSE, RANDOM Point of Care - GLUCOSE, POCT ; URINE DIPSTICK, POCT 18:02:02 Orders Placed Ghadishah. Lab - TYPE (ABO-RH) AND ANTIBODY SCREEN PANEL(aka TYPE AND Delaram (M.D.) SCREEN) ; AST, SERUM ; ALT, SERUM ; LIPASE 18:12:19 Orders New - Sodium Chloride 0.9 % Bolus IV Soln; GLUCOSE, RANDOM; Velthoen, Deborah CREATININE, SERUM ; BUN, SERUM; ELECTROLYTES, SERUM; CBC W Acknowledged (R.N.) DIFFERENTIAL, AUTO; ECG, ROUTINE 12 LEAD; MONITORING, CARDIAC GLUCOSE, POCT ; TYPE (ABO-RH) AND ANTIBODY SCREEN PANEL(aka TYPE AND SCREEN) ; AST, SERUM ; ALT, SERUM ; LIPASE; URINE DIPSTICK, POCT 18:15 Medication Given Sodium Chloride 0.9 % Bolus IV Soln - Dose: 1,000 mL ; Route: Velthoen, Deborah intraVENOUS : Scheduled Time: 1815 (R.N.) Orders Placed 18:29:35 Medications - Insulin Regular Human Inj 8 Units (HumuLIN R/NovoLIN R) Ghadishah. Delaram (M.D.) 18:29:50 Orders Placed Medications - Sodium Chloride 0.9 % IV Premix Ghadishah, Delaram (M.D.) New - Insulin Regular Human Inj 8 Units (HumuLIN R/NovoLIN R); Sodium Velthoen, Deborah 18:37:08 Orders Acknowledged Chloride 0.9 % IV Premix (R.N.) 18:42:18 Lab Resulted (Final result) CBC W DIFFERENTIAL, AUTO Interface, Scal_ Lab 18:43:15 **Home Medications** Ghadishah, Reviewed Delaram (M.D.) Velthoen. Deborah 18:45 Point of Care Tests BLOOD GLUCOSE, ADULT / CHILD Glucose out of Range (High/Low): GREATER THAN 400 (R.N.) 18:45:52 Insulin Regular Human Inj 8 Units (HumuLIN R/NovoLIN R) - Dose: 8 Units ; Velthoen, Deborah Medication Given Route: Subcutaneous ; Site: Right Arm ; Scheduled Time: 1830 ; (R.N.) Comment: verified by Janica M, Rn 18:46:42 Velthoen, Deborah Medication New Sodium Chloride 0.9 % IV Premix - Dose: 1,000 mL ; Route: intraVENOUS Bag : Scheduled Time: 1830 (R.N.) 18:47:52 Orders Placed Diet - Daily diabetic calorie allowance: 1800 calorie Ghadishah, Delaram (M.D.) 18:49:19 Orders New - Daily diabetic calorie allowance: 1800 calorie Velthoen, Deborah Acknowledged (R.N.) 18:51:39 Lab Resulted (Final result) LIPASE Interface, Scal Lab 18:53:58 Lab Resulted (Final result) AST, SERUM Interface, Scal Lab 18:53:58 (Final result) ALT, SERUM Interface, Scal_ Lab Resulted Lab 18:54 Begin Nurse Exam VELTHOEN, D assigned as Registered Nurse Velthoen, Deborah (R.N.)

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

18:54	RETIRED Comprehensive	RETIRED Schmid Fall Risk Mobility: 0-AMBULATES WITH NO GAIT DISTURBANCE	Velthoen, Deborah (R.N.)
	Assess	Mentation: 0-ALERT, ORIENTED X 3	
		Elimination: 0-INDEPENDENT IN ELIMINATION Prior History of Falls: 0-NO	
		Current Medications: 0-NO ANTI-CONVULSANTS/TRANQUILIZERS OR	
		PSYCHOTROPICS/HYPNOTICS	
		Total Score: 0 SAFETY INTERVENTIONS	
		Patient Safety: ID BAND CHECK	
		Side Rails: BOTH UPPERS - SIDE RAILS	
		Call Light in Reach: YES	
		Patient Rounds: AWAKE	
		Glasgow Coma Scale Eye opening: SPONTANEOUS	
		Verbal response: ORIENTED	
		Motor Response: OBEYS COMMANDS	
		NEUROLOGICAL WDL** Arouses to voice or touch; Awake or alert,	
		opens eyes spontaneously; Follows Commands; Oriented x 3; Speech spontaneous, well paced, logical	
		Denies Symptoms: YES	
		Assessments: WDL	
		EYES, EARS, NOSE, AND THROAT ASSESSMENT	
		Denies Symptoms: NO Eye Exam Right: VISUAL DISTURBANCE (blurred)	
		Eye Exam Left: VISUAL DISTURBANCE	
		CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion-Pink nail	
		beds; 2+pulses; No edema	
		Denies Symptoms: YES Assessments: EXCEPTION TO WDL, SEE BELOW	
		Heart Sounds**: REGULAR	
		Cardiac Rhythm **: SINUS TACHYCARDIA	
		Perfusion**: NORMAL COLOR FOR RACE AND ETHNICITY	
		Right Dorsalis Pedis Pulse**: 2+ - NORM Other Pulse: 2+ - NORM	
		Capillary Refill**: 3 SEC OR LESS	
		Generalized Edema**: 2	
		Right Leg Edema**: 2 Left Leg Edema**: 2	
		Right Pedal/Ankle Edema**: MILD	
		Left Pedal/Ankle Edema**: MILD	
		Pulse Quality/Rhythm: REGULAR	
		Extremities: WARM RETIRED CARDIOVASCULAR WDL** Regular sounds/rhythm; Pefusion-	
		Pink nail beds; 2+pulses; No edema	
		Denies Symptoms: YES	
		Assessments: EXCEPTION TO WDL, SEE BELOW	
		Heart Sounds**: REGULAR Cardiac Rhythm **: SINUS TACHYCARDIA	
		Perfusion**: NORMAL COLOR FOR RACE AND ETHNICITY	
		Right Dorsalis Pedis Pulse**: 2+ - NORM	
		Other Pulse: 2+ - NORM Capillary Refill**: 3 SEC OR LESS	
		Generalized Edema**: 2	
		Right Leg Edema**: 2	
		Left Leg Edema**: 2	
		Right Pedal/Ankle Edema**: MILD	
		Left Pedal/Ankle Edema**: MILD Pulse Quality/Rhythm: REGULAR	
		Extremities: WARM	
		RESPIRATORY WDL** Regular rate, depth and pattern;Breath sounds	
		clear and equal bilaterally; Chest expansion equal; No shortness of breath; No cough or productive sputum	
		Denies Symptoms: YES	

		Assessments: WDL GASTROINTESTINAL WDL** Abdomen soft, non-tender; Normoactive bowel sounds; Continent of stool Denies Symptoms: YES Assessments: WDL GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended Denies Symptoms: NO Assessments: EXCEPTION TO WDL, SEE BELOW GU Symptoms**: POLYURIA Voided Urine Color**: YELLOW Voided Urine Characteristics**: CLEAR Flank Pain: NO RETIRED GENITOURINARY WDL** Voids without difficulty; Clear, yellow urine; continent of urine; Bladder non-distended Denies Symptoms: NO Assessments: EXCEPTION TO WDL, SEE BELOW GU Symptoms**: POLYURIA Voided Urine Color**: YELLOW Voided Urine Characteristics**: CLEAR Flank Pain: NO Musculoskeletal Assessment Denies Symptoms: YES RETIRED MUSCULOSK / INTEG assessment Denies Symptoms: YES PSYCHOSOCIAL ASSESSMENT Denies Symptoms: YES Living Arrangement: LIVES ALONE Trauma Denies Symptoms: YES	
18:54	Disposition	Vital Signs Pulse: 108 BP: 145/100 [†] BP Source: AUTOMATIC BP Location: LA-LEFT ARM Patient Position: LYING Resp: 20 O2 Delivery: RA-ROOM AIR SpO2: 98 % Pain Assessment Pain Score: 0 Scale Type: NUMERIC 0-10 PER PATIENT Abuse Assessment Abuse Assessment: DENIES ABUSE	Velthoen, Deborah (R.N.)
19:00	CRITICAL/EVENT NOTIFICATION	LAB Critical Lab: YES Result / Primary Findings: 117 Notified by (Last Name, First Initial): THelma RETIRED Notified (Time) : 1905 Verified with Readback : YES Provider Notified (Last Name, First Initial): Ghadisha Provider Notified (Time) : 1905 Other flowsheet entries Retired - Lab Test: SODIUM	Velthoen, Deborah (R.N.)

10.05			Velthoon Debarah
19:05	CRITICAL/EVENT NOTIFICATION	LAB Critical Lab: YES Result / Primary Findings: 076	Velthoen, Deborah (R.N.)
		Result / Primary Findings: 976 Notified by (Last Name, First Initial): thelma	
		RETIRED Notified (Time):1905 Verified with Readback:YES	
		Provider Notified (Last Name, First Initial): gha	
		Provider Notified (Time): 1905 Other flowsheet entries	
		Retired - Lab Test: GLUCOSE	
19:05:35	Lab Resulted	(Final result) BUN, SERUM	Interface, Scal_ Lab
19:05:35	Lab Resulted	(Final result) CREATININE, SERUM	Interface, Scal_ Lab
19:05:35	Lab Resulted	(Final result) ELECTROLYTES, SERUM	Interface, Scal_ Lab
19:05:35	Lab Resulted	(Final result) GLUCOSE, RANDOM	Interface, Scal_ Lab
19:23	Begin Nurse Exam	ODUNZE, P assigned as Registered Nurse	Odunze, Polycarp I. (R.N.)
19:25:13	Orders Placed	Point of Care - GLUCOSE, POCT	Ghadishah,
		Medications - Insulin Regular Human Inj 10 Units (HumuLIN R/NovoLIN R); Insulin Regular Human 250 Units in Sodium Chloride 0.9 % 250 mL IV Soln; Sodium Chloride 0.9 % IV Premix	Delaram (M.D.)
19:25:48	ED Notes	Pt care endorsed to Polycarp, RN. NAD.	Velthoen, Deboral (R.N.)
19:26:05	ED Notes	Received in bed at this time a/a/o x 3. Respiration is regular, even, and unlabored. No sign of distress noted.	Odunze, Polycarp I. (R.N.)
19:28:11	ED Consult Ordered	INPATIENT HOSPITAL MEDICINE CONSULT	Ghadishah, Delaram (M.D.)
19:28:11	Orders Placed	Consult - INPATIENT HOSPITAL MEDICINE CONSULT	Ghadishah, Delaram (M.D.)
19:30	Medication New Bag	Insulin Regular Human 100 Units in Sodium Chloride 0.9 % 100 mL IV Soln - Dose: 4 Units/hr ; Rate: 4 mL/hr ; Route: intraVENOUS ; Scheduled Time: 1930 ; Comment: unable to scan	Odunze, Polycarp I. (R.N.)
19:30	I/O ADULT		Odunze, Polycarp
		P.O. (+ml): 400 mL OUTPUT	I. (R.N.)
		Urine (-ml): 800 mL	
		INTRAOP Infusion Totals IV Fluids (+ml): 1000 ML (ns bolus)	
19:30:55	Orders Modified	Rx Verify - Insulin Regular Human 100 Units in Sodium Chloride 0.9 % 100	Oak, Caroline F
		mL IV Soln (Comment: Modified during verification from Insulin Regular Human 250 Units in Sodium Chloride 0.9 % 250 mL IV Soln)	(Rph)
19:37:45	Orders	New - Insulin Regular Human Inj 10 Units (HumuLIN R/NovoLIN R); Insulin	Odunze, Polycarp
19:37:45	Orders Acknowledged	New - Insulin Regular Human Inj 10 Units (HumuLIN R/NovoLIN R); Insulin Regular Human 100 Units in Sodium Chloride 0.9 % 100 mL IV Soln; GLUCOSE, POCT; Sodium Chloride 0.9 % IV Premix; INPATIENT HOSPITAL MEDICINE CONSULT	Odunze, Polycarp I. (R.N.)

19:44:32	Orders Placed	Imaging - XR CHEST, 1 VIEW	Ghadishah, Delaram (M.D.)
19:52:48	Orders Acknowledged	New - XR CHEST, 1 VIEW	Odunze, Polycarp I. (R.N.)
19:53	Point of Care Tests	BLOOD GLUCOSE, ADULT / CHILD Glucose, Random: (critical high)	Odunze, Polycarp I. (R.N.)
19:57:29	Medication Given	Insulin Regular Human Inj 10 Units (HumuLIN R/NovoLIN R) - Dose: 10 Units ; Route: intraVENOUS ; Line: Peripheral IV Right;Antecubital ; Scheduled Time: 1930	Odunze, Polycarp I. (R.N.)
20:03:23	Medication New Bag	Sodium Chloride 0.9 % IV Premix - Dose: 1,000 mL ; Route: intraVENOUS ; Line: Peripheral IV Right;Antecubital ; Scheduled Time: 1930	Odunze, Polycarg I. (R.N.)
20:04	Order Performed	XR CHEST, 1 VIEW - ID: 33969217	
20:26:12	ED Provider Notes	Note filed at this time	Ghadishah, Delaram (M.D.)
20:26:12	ED Note Filed	ED Prov Note filed by Ghadishah, Delaram (M.D.)	Ghadishah, Delaram (M.D.)
20:31	MD Started	LAI, M assigned as Attending	Ghadishah, Delaram (M.D.)
21:00	I/O ADULT	INTAKE P.O. (+ml): 400 mL OUTPUT Urine (-ml): 800 mL	Odunze, Polycarp I. (R.N.)
21:00	RETIRED Comprehensive Assess	RETIRED Schmid Fall Risk Mobility: 0-AMBULATES WITH NO GAIT DISTURBANCE Mentation: 0-ALERT, ORIENTED X 3 Elimination: 0-INDEPENDENT IN ELIMINATION Prior History of Falls: 0-NO Current Medications: 0-NO ANTI-CONVULSANTS/TRANQUILIZERS OR PSYCHOTROPICS/HYPNOTICS Total Score: 0	Odunze, Polycarp I. (R.N.)
21:00	Disposition	Vital Signs Pulse: 109 BP: 129/99 * BP Source: AUTOMATIC BP Location: LA-LEFT ARM Patient Position: SITTING Resp: 20 O2 Delivery: RA-ROOM AIR SpO2: 97 % Pain Assessment Pain Score: 0 Scale Type: NUMERIC 0-10 PER PATIENT	Odunze, Polycarp I. (R.N.)
21:00	Point of Care Tests	BLOOD GLUCOSE, ADULT / CHILD Glucose, Random: (critical high)	Odunze, Polycarp I. (R.N.)
21:08:26	ED Notes	10 units of regular insulin was given to pt iv at 1957. Insulin was verified by jessica-RN.	Odunze, Polycarp I. (R.N.)
21:13:07	Orders Placed	Nursing - NURSING COMMUNICATION ORDER	Lai, Mai Kim (M.D.)

re Timeline		ED to Hosp-Admission (Discharged) in 5B2 (continued)	
21:13:55	ED Notes	Pt's blood sugar still reading critical high. Dr Lai informed at this time and she instructed me to increase insulin drip to 7units/hr at this time.	Odunze, Polyca I. (R.N.)
22:00	I/O ADULT	OUTPUT Urine (-ml): 800 mL	Odunze, Polyca I. (R.N.)
22:09:35	Orders Acknowledged	New - NURSING COMMUNICATION ORDER	Odunze, Polyca I. (R.N.)
22:10		BLOOD GLUCOSE, ADULT / CHILD Glucose, Random: 485 *	Odunze, Polyca I. (R.N.)
22:10:17	ED Notes	Inpatient consult in room at this time assessing pt.	Odunze, Polyca I. (R.N.)
22:35:16	Patient transferred	ADMIT TO HOSPITAL	Ta, Tuan (M.D.)
22:35:16	Orders Placed	ADT Admission - ADMIT TO HOSPITAL	Ta, Tuan (M.D.)
22:39:19	Patient transferred	ADMIT TO HOSPITAL	Ta, Tuan (M.D.)
22:39:19	Orders Discontinued	ADMIT TO HOSPITAL (08/05/09 2245)	Ta, Tuan (M.D.)
22:39:19	Orders Modified	Order Modified - ADMIT TO HOSPITAL (Comment: Modified from ADMIT TO HOSPITAL)	Ta, Tuan (M.D.)
22:46:03	Orders Acknowledged	New - ADMIT TO HOSPITAL Modified - ADMIT TO HOSPITAL (Comment: Modified from ADMIT TO HOSPITAL)	Odunze, Polyca I. (R.N.)
22:46:58	Patient Class Updated		Gilles, Marie G
22:47:52	Bed Requested		Gilles, Marie G
22:58:41	Bed Assigned		Gilles, Marie G
23:00	I/O ADULT	OUTPUT Urine (-ml): 400 mL	Odunze, Polycar I. (R.N.)

23:00	Patient Belongings	Patient Belongings Glasses: KEPT BY PATIENT	Odunze, Polycar
		Contact Lens: NONE	I. (R.N.)
		Dentures/Appliances: NONE	
		Hearing Aids: NONE	
		Assistive Devices: NONE	
		Prosthetic Limb: NONE	
		Electronic Devices: KEPT BY PATIENT (MOTOROLLA CELL PHONE.) Clothing: KEPT BY PATIENT (A BLUE JEANS AND A SHORT SLEEVE	
		SHIRT) Patient Meds/Inhalers: NONE	
		CPAP/BiPAP/Oxygen: NONE	
		Purse/Wallet: KEPT BY PATIENT	
		Credit Cards: KEPT BY PATIENT (A WELLS FARGO DEBIT CARD.)	
		Cash Amount: KEPT BY PATIENT (\$8.00)	
		Keys: KEPT BY PATIENT Jewelry: NONE	
		Body Piercings: NONE	
		Watch: KEPT BY PATIENT (CASIO)	
		Driver's License: KEPT BY PATIENT	
		Checkbook: NONE	
		Misc Items: NONE	
		RETIRED Returned to Pt/Family: YES	
		RETIRED Patient Belongings Glasses: KEPT BY PATIENT	
		Contact Lens: NONE	
		Dentures/Appliances: NONE	
		Hearing Aids: NONE	
		Assistive Devices: NONE	
		Prosthetic Limb: NONE	
		Electronic Devices: KEPT BY PATIENT (MOTOROLLA CELL PHONE.) Clothing: KEPT BY PATIENT (A BLUE JEANS AND A SHORT SLEEVE SHIRT)	
		Patient Meds/Inhalers: NONE	
		CPAP/BiPAP/Oxygen: NONE	
		Purse/Wallet: KEPT BY PATIENT	
		Credit Cards: KEPT BY PATIENT (A WELLS FARGO DEBIT CARD.)	
		Cash Amount: KEPT BY PATIENT (\$8.00) Keys: KEPT BY PATIENT	
		Jewelry: NONE	
		Body Piercings: NONE	
		Watch: KEPT BY PATIENT (CASIO)	
		Driver's License: KEPT BY PATIENT	
		Checkbook: NONE	
		Misc Items: NONE RETIRED Returned to Pt/Family: YES	
23:13:23	Orders Placed	Point of Care - TROPONIN I, POCT	Ta, Tuan (M.D.)
23:15:20	Lab Ordered	BLOOD CULTURE	Ta, Tuan (M.D.)
23:15:20	Orders Placed	Lab - BLOOD CULTURE	Ta, Tuan (M.D.)
23:16	RETIRED Comprehensive Assess	RETIRED Schmid Fall Risk Mobility: 0-AMBULATES WITH NO GAIT DISTURBANCE Mentation: 0-ALERT, ORIENTED X 3 Elimination: 0-INDEPENDENT IN ELIMINATION Prior History of Falls: 0-NO	Odunze, Polycar I. (R.N.)
		Current Medications: 0-NO ANTI-CONVULSANTS/TRANQUILIZERS OR PSYCHOTROPICS/HYPNOTICS Total Score: 0	

ED Care Timeline (continued) Vital Signs 23:16 Odunze, Polycarp Disposition Temp: 98.3 °F (36.8 °C) I. (R.N.) Temp Source: ORAL Pulse: 110 BP: 123/73 **BP Source: AUTOMATIC** BP Location: LA-LEFT ARM Patient Position: SITTING Resp: 18 O2 Delivery: RA-ROOM AIR SpO2: 95 % **Pain Assessment** Pain Score: 0 Scale Type: NUMERIC 0-10 PER PATIENT 23:16 Point of Care Tests BLOOD GLUCOSE, ADULT / CHILD Odunze, Polycarp Glucose, Random: 382 ! I. (R.N.) 23:18:19 Orders Placed Point of Care - NA, K, CL, CO2, CA-I, GLU, CREAT, BUN, HEMATOCRIT, Ta, Tuan (M.D.) HB, POCT, VENOUS New - TROPONIN I, POCT; BLOOD CULTURE; NA, K, CL, CO2, CA-I, GLU, Odunze, Polycarp 23:23:24 Orders CREAT, BUN, HEMATOCRIT, HB, POCT, VENOUS Acknowledged I. (R.N.) 23:30 Labs Collected Odunze, Polycarp RETIRED Comprehensive Labs Collected: Blood Culture I. (R.N.) Assess 23:30 BLOOD CULTURE - ID: C000022009217004635 Specimens Collected 23:31:15 Consult Cardreon, Keri Responded 23:31:18 **Consult Arrived** Cardreon, Keri 23:50 POCT (Moderately Chemistry (Moderately Complex) ADULT/CHILD Odunze, Polycarp Complex) BUN (Mod Complex): 17 I. (R.N.) Adult/Child CHLORIDE (Mod Complex): 105 CREATININE (Mod Complex): 0.9 GLUCOSE (Mod Complex): 353 SODIUM (Mod Complex): 135 POTASSIUM (Mod Complex): 3.8 CO2 (Mod Complex): 17 Blood Count (Moderately Complex) ADULT/CHILD HCT (Mod Complex): 42 23:54:34 Odunze, Polycarp Registration Completed I. (R.N.) 8/6/2009 Event Details User TRANSFER TO OTHER UNIT OF HOSPITAL Odunze, Polycarp 00:15 Disposition Destination: 5712 I. (R.N.) Report Given To: Lucy Time report given: 0015 Belongings inventory completed: YES Medical Records (w/imaging films): YES ACLS protocol: YES Mode of Transport:: GURNEY 00:17:59 Home Medications Ta, Tuan (M.D.) Reviewed

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

ED Care Timeline (continued)

00:25:37 ED Notes

Pt transferred to room 5712 at this time in no apparent distress. All belongings transferred with pt.

Odunze, Polycarp I. (R.N.)

00:53:03	Patient Transported to IP Bed		Bogan, Demetrice D.
00:53:06	Patient transferred	From room HB02 to room HOFF	Bogan, Demetrice D.
01:00	Vital Signs/Pain	PAIN Body Movements: RESTING COMFORTABLY RASS-Sedation Scale Score: 0-ALERT AND CALM	Adesina, Lucy N (R.N.)
01:00	Disposition	Vital Signs Temp: 98.7 °F (37.1 °C) Temp Source: TYMPANIC Pulse: 101 BP: 116/85 BP Source: AUTOMATIC BP Location: LA-LEFT ARM Resp: 18 O2 Delivery: RA-ROOM AIR SpO2: 97 % Pain Assessment Pain Score: 0 Scale Type: NUMERIC 0-10 PER PATIENT Acceptable Level (Pain): 2	Adesina, Lucy N (R.N.)
01:08:36	Patient admitted	To department WLA 5B2 TEL	Cariaga, Jennessa Lynne C (R.N.)

H&P Notes

H&P by Ta, Tuan (M.D.) at 8/5/2009 22	235	
Author: Ta, Tuan (M.D.)	Service: —	Author Type: Physician
Filed: 8/5/2009 11:16 PM	Date of Service: 8/5/2009 10:35 PM	Creation Time: 8/5/2009 10:35 PM
Status: Signed	Editor: Ta, Tuan (M.D.) (Physician)	

HISTORY AND PHYSICAL - MEDICINE CONSULTATION SERVICE

PRIMARY CARE PROVIDER:

SARAH ELIZABETH HOOKS MD, MEDICAL DOCTOR

CHIEF COMPLAINT:

POLYURIA, POLYDIPSIA, DRY MOUTH, MALAISE, FATIGUE

HISTORY OF PRESENT ILLNESS:

Lawson B Hawkins is a pleasant 54 year old male with history of obesity, HTN, HL, schizoaffective disorder with chief complaint of 2 weeks of polyuria, polydipsia, dry mouth. Notes that it got progressively worse until recently a few days ago when he started to experience malaise, fatigue and blurry vision. States that he has also been nauseated. No vomiting. Felt well about a month or so ago (recollects 7/4/09), started to feel abnormal about 2 weeks ago. Notes that he transitioned to 30 mg of Abilify from 20 mg a few months ago. Notes no other changes in medications.

Denies any dysuria, no cough, notes some loose stools, x 6 months 2-3x/day. No abdominal pain, no fevers/chills. Denies chest pain, shortness of breath. States that he sometimes gets very diaphoretic.

Family history of diabetes, in mother, grandmother and grand uncle.

REVIEW OF SYSTEMS:

Gen: No fever, chills, weight loss, or change appetite

Pulm: No cough, no dyspnea

CV: No angina, no orthopnea/PND, no LE swelling

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)

H&P Notes (continued)

- GI: + N, no V, +D, no melena/hematochezia
- GU: No dysuria, no obstructive symptoms
- Neuro: No new focal symptoms
- MS: No new symptoms

EMERGENCY DEPARTMENT COURSE / INTERIM INTERVENTIONS:

- 1. Labs
- 2. ECG
- 3. 8 units insulin
- 4. 10 units insulin
 5. Insulin GTT
- 6. CXR
- 7. MCS Consult

PAST MEDICAL/SURGICAL HISTORY / PROBLEM LIST:

*POLYURIA (8/5/2009) SCHIZOAFFECTIVE DISORDER (9/21/2006) OBESITY (7/28/2009) HYPERLIPIDEMIA (12/14/2007)

Past Medical History

SCHIZOAFFECTIVE DISORDER GERD

Past Surgical History PAST SURGICAL HISTORY, OTHER

back broken, metal plate

IMMUNIZATIONS:

DTaP (Diphtheria, Tetanus, acellular Pertussis) 05/21/2008 Tdap (ADACEL) (Tetanus, diphtheria, acellular pertussis) 05/21/2008

ALLERGIES: No Known Drug Aller*

CURRENT MEDICATIONS:

CLOTRIMAZOLE 1 % TOP CREA, Sig: APPLY TO AFFECTED AREA(S) BID ABILIFY 5 MG ORAL TAB, Sig: TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME OMEPRAZOLE 20 MG ORAL CPDR SR CAP, Sig: TAKE 1 CAPSULE ORALLY 2 TIMES DAILY CARMOL 20 20 % TOP CREA, Sig: apply to I 2nd and 3rd digit areas BID

SOCIAL HISTORY:

Marital Status: Unknown Spouse Name: Years of Education: Number of children: 0 Social History Main Topics Tobacco Use: Quit Packs/Day: 0.50 Years: 20 Quit date: 07/21/2008 Alcohol Use: Yes Comment: Rare alcohol. Drug Use: No Social History Narrative Lives in LA, self employed now on permanent disability, works parttime fixing PCs, writing software and teaching. Exercise-bicycle riding. Single, no children.

VITAL SIGNS:

Flied vitals.	08/05/2009 4:55 PM	08/05/2009 6:00 PM	08/05/2009 6:54 PM
BP:	138/95	137/90	145/100

Printed on 1/12/24 5:33 PM

H&P Notes (continued)				
Pulse:	120	104	108	
Temp:	98.2 °F (36.8 °C)			
Resp:	15	16	20	
Height:	1.702 m (5' 7")			
Weight:	102.059 kg (225 lb)			
SpO2:	97%	98%	98%	

PHYSICAL EXAMINATION:

GENERAL - Alert and oriented, in no acute distress, somewhat diaphoretic. Fruity breath

HEENT- Normocephalic, atraumatic, extraocular movements intact, sclerae anicteric, dry mucous membranes NECK - Supple, no JVD

CHEST - Cear to auscultation bilaterally, no wheezing, rales or rhonchi

CV - Regular rate and rhythm, without murmur

ABD - Soft, nontender, nondistended, normoactive bowel sounds, no hepatosplenomegaly/masses

GU - Not done

EXT - No cyanosis, clubbing or edema. No neuropathy. SKIN - No rashes

NEURO - Nonfocal examination

LABORATORY STUDIES:

Basename	8/5/09 1800	8/4/09 1550
WBC	6.4	
HGB	15.5	
HCT	46.0	
PLT	165	
NA	117*	119*
К	5.0	5.2*
CL	84*	81*
CO2	20*	19.5*
BUN	20*	
CR	1.3	1.3
GFR	58-NB*	58-NB*
INR		
RBS	976*	

Basename	8/5/09 1800
NEUT	4.4 69.2
BAND	
BANDPC	
LYMPH	23.4
LYMPHPC	
MONO	6.4
MONOPC	
BASOPC	0.4
EOS	0.6

H&P Notes (continued)

Basename	8/5/09 1800	8/4/09 1550
AMYL		
ALT	40	39*
AST	27*	
TBILI		
ALKP		
INR		

Lipase: 53

RADIOLOGICAL STUDIES:

CHEST X-RAY: Clear lungs.

ELECTROCARDIOGRAM:

NSR at 100 bpm, early repolarization. TWI in R. Q waves in II, III, F.

IMPRESSION:

54 year old man with obesity, HTN, HL and schizoaffective disorder now with polyuria, polydipsia presenting with hyperglycemia and ketonuria consistent with DKA. No infectious symptoms present, also consider possibility of anti psychotic/anti depressants/mood stabilizers as playing role in patient's diabetes though no recent switches other than dose adjustment.

PLAN:

- 1. POLYURIA (8/5/2009)
 - Continue with insulin GTT. Currently at 7-8 units/hr
 - Check chemistry panel and anion gap, last was 13 or so
 - Continue with Q30 minutes-Qhour accuchecks, until gap has closed
 - Continue with IV Fluids, decrease to 1/2 NS once gap closed, sugars <250
 - Replete lytes as as needed, check chemistry panel
 - Check troponin, routine blood cultures (though no infectious symptoms)
 - DM education/nutrition consult

2. SCHIZOAFFECTIVE DISORDER (9/21/2006)

- Continue with abilify for now, consider psychiatry consult to adjust medications if needed
- 3. OBESITY (7/28/2009)
 - Pt planning liquid diet via program with kaiser
 - Advised followup with primary MD, who will then address with patient once stable and discharged.
- 4. HYPERLIPIDEMIA (12/14/2007)
 - Check lipids
- 5. HYPONATREMIA
 - Asymptomatic. Check chemistry panel now, should increase with control of sugars Replete as needed

PROPHYLAXIS

DVT GI

Immunize with pneumovax

ADVANCE DIRECTIVE / CODE STATUS: FULL CODE

ADMIT TO TEAM: 1 Notified via voicemail

TUAN TA MD DEPARTMENT OF INTERNAL MEDICINE KAISER PERMANENTE OF WEST LOS ANGELES 8/5/2009 10:35 PM

H&P Notes (continued)

Electronically signed by Ta, Tuan (M.D.) at 8/5/2009 11:16 PM

Clinical Notes (group 1 of 2)

Care Planning Progress Note

Levitskaya, Roxanne O (R.N.) at 8/5/2009 2158

Author: Levitskaya, Roxanne O (R.N.) Filed: 8/5/2009 9:59 PM Status: Signed Service: — Author Type: REGISTERED NURSE Date of Service: 8/5/2009 9:58 PM Creation Time: 8/5/2009 9:58 PM Editor: Levitskaya, Roxanne O (R.N.) (REGISTERED NURSE)

CCC note: the pt lives alone, he is independent. Able to perform self care. Planning to return home on d/c. Discussed that he will need to go to Health Ed classes on DM when he is discharged. Pt verbalized understanding

Electronically signed by Levitskaya, Roxanne O (R.N.) at 8/5/2009 9:59 PM

Consults

Bravo, Victoria R at 8/6/2009 1150

Author: Bravo, Victoria R Filed: 8/6/2009 11:50 AM Status: Signed

Service: — Date of Service: 8/6/2009 11:50 AM Editor: Bravo, Victoria R (DIETITIAN) Author Type: DIETITIAN Creation Time: 8/6/2009 11:50 AM

Nutrition Services Adult Initial Assessment

<u>SUBJECTIVE</u>: Reports no special diet in past and eats whatever he wants. Eager to learn about his Db. Regimen at this time. Willing to change his eating habits. No cultural/religious food preferences indicated,

OBJECTIVE:

Reason for Visit: MD consult for New Onset DM. 8/06/09

Current diet1800 kcal ada Date:8/05/09

Patient Active Problem List: SCHIZOAFFECTIVE DISORDER [295.70B] GERD [530.81A] NOT CURRENT SMOKER [V15.82C] HYPERLIPIDEMIA [272.4C] PREDIABETES [790.29C] ELEVATED TRANSAMINASE MEASUREMENT [790.4B] SCREENING FOR CA, COLON [V76.51A] CHOLELITHIASIS [574.20A] OBESITY [278.00E] ELEVATED BLOOD PRESSURE READING WO DIAGNOSIS OF HTN [796.2D] POLYURIA [788.42A]

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)					
Clinical Notes (group 1 of 2) (continued)					
Diagnosis: 790.29J HYPERGLYCEMIA 278.00E OBESITY 276.1A HYPONATREMIA					
Current hospital medications:					
busPIRone Tab 10 mg (BUSPAR)	Oral	DAILY TA, TUAN (M.D.)			
Simvastatin Tab 40 mg (ZOCOR)	Oral	EVERY TA, TUAN (M.D.) EVENIN G			
Clotrimazole Cream (LOTRIMIN AF/MYCELEX)	Topical	2 TIMESTA, TUAN (M.D.) A DAY			
Urea 20 % Cream (UREACIN- 20)	Topical	2 TIMESTA, TUAN (M.D.) A DAY			
Omeprazole CPDR SR Cap 40 mg (PriLOSEC)	Oral	DAILY TA, TUAN (M.D.) BEFOR E A MEAL			
Sodium Chloride 0.9 % Inj Syg (NORMAL SALINE FLUSH)	Intravenous	EVERY TA, TUAN (M.D.) 8 HOURS			
Metoclopramide Inj 10 mg (REGLAN)	Intravenous	EVERY TA, TUAN (M.D.) 6 HOURS AS NEEDE D			
traZODone Tab 25 mg (DESYREL)	Oral	EVERY TA, TUAN (M.D.) BEDTIM E AS NEEDE D			
Acetaminophen Tab 650 mg (TYLENOL)	Oral	EVERY TA, TUAN (M.D.) 4 HOURS AS NEEDE D			
TYLENOL #3 300-30 mg 2 Tab Oral (Acetaminophen-Codeine)		EVERY TA, TUAN (M.D.) 4 HOURS AS NEEDE D			

08/05/2009 - ED to Hosp-Admission (Discharged) in 5B2 (continued)			
Clinical Notes (group 1 of 2) (continue	d)		
Acetaminophen Tab 650 mg (TYLENOL)	Oral	EVERY 4 HOURS AS NEEDE D	TA, TUAN (M.D.)
Potassium Chloride Oral Pack 40 mEq (K-LOR/KLOR-CON)	Oral	EVERY 12 HOURS AS NEEDE D	TA, TUAN (M.D.)
Pneumococcal Polyvalent Vaccine 0.5 mL (PNEUMOVA) 23)	Intramuscula K	NSEE INSTRU CTION	TA, TUAN (M.D.)
Insulin Regular Human Inj (HumuLIN R/NovoLIN R)	Subcutaneou s	UBEFOR E MEALS AND AT BEDTIM E	
Aripiprazole Tab 30 mg (ABILIFY)	Oral	DAILY	TA, TUAN (M.D.)

Skin condition:

Intake/Output Summary (Last 24 hours) at 08/06 1150 Last data filed at 08/06 0900

	Gross per 24 hour
Intake	3350 ml
Output	3950 ml
Net	-600 ml

Emesis -

Bowel movement:

Date of Last Bowel Movement: 8/5/09

Clinical Notes (group 1 of 2) (continued)

Basename	8/6/09 1040	8/6/09 0610	8/6/09 0200	8/5/09 1800	8/4/09 1550
NA	130*	135	136		
К	4.0	3.3*	4.2		
BUN		12*		20*	
CR		0.8		1.3	1.3
FBS					
RBS				976*	
CA		8.5			
PHOS		2.7			

No results found for this basename: PREALB

No results found for this basename: ALB

HGBA1C14.108/04/2009CHOL16612/17/2008TRIG20212/17/2008HDL3412/17/2008LDL CALC9212/17/2008CHOL/HDL4.912/17/2008

BS (blood glucose) Patient Glucose, Random in the past 24 hrs:

	Glucose, Random
08/06/09 1134	403
08/06/09 1133	418
08/06/09 0820	367
08/06/09 0553	286
08/06/09 0500	286
08/06/09 0140	187
08/05/09 2316	382

Clinical Notes (group 1 of 2) (continued)

08/05/09 485 **2210**

Height: 170.2 cm (5' 7")

Last 3 Encounter Wt Readings: Date: Wt: 08/05/2009 104 kg (229 lb 4.5 oz) 07/28/2009 105.597 kg (232 lb 12.8 oz) 12/17/2008 110.678 kg (244 lb)

Body mass index is 35.91 kg/(m^2).

Ideal/Desired Body Weight (kg): 67 kg (147 lb 11.3 oz) % of Ideal/Desired Body Weight: 155.22 %

Adjusted Body Weight For Obesity (Kg): 76.25 kg

Weight history Lost 15 lbs in almost 8 month period but intentional per pt.

P.O. Intake: Patient Diet % Taken in the past 72 hrs:

	Diet % Taken
08/06/09 0900	100 %

ASSESSMENT:

Estimated daily nutrition needs based on:76 kgADJBW

Calories (Kcal/Day): 1520 to 1900 Calorie Based On: 20-25 KCAL/KG

Protein (Gm/Day): 61 to 76 Protein Based On: 0.8 - 1.0 GM/KG

Fluids (ML/Day): 1520 to 1900 Fluids Based On: 1 ML/KCAL

Assessment of weight: Obese Assessment of nutritionally pertinent labs:High HGBAIC sec. To DM

P.O. intake is:Adequate, eats 100% of meal which provides 1800 kcals and 90 gms pro which is adequate to mmet est nutrition goal.

Nutritional risk:**Moderate**<u>PLAN:</u>

Clinical Notes (group 1 of 2) (continued)

Instructed pt. On Db. Mgt. And diet regimen. Discussed importance of portion control. Reading food labels, exercise and increase activity for wt. Loss. Written information provided and verbalized. Suggested attendance to Db. Class offered by MHE and willing to attend. Provided tel/#. Per RN, pt.will be seen by Db Educator Ann Yoon Prior to discharge.

Electronically signed by Victoria Bravo RD LD Food and Nutrition Services 8/6/2009 11:37 AM

Electronically signed by Bravo, Victoria R at 8/6/2009 11:50 AM

Discharge Instructions

Morita, Alyssa Tashiro (R.N.) at 8/7/2009 1216

Author: Morita, Alyssa Tashiro (R.N.) Filed: 8/7/2009 12:16 PM Status: Written

Service: -Date of Service: 8/7/2009 12:16 PM Editor: Morita, Alyssa Tashiro (R.N.) (REGISTERED NURSE)

Author Type: REGISTERED NURSE Creation Time: 8/7/2009 12:16 PM



Patient Information

Name: Lawson B Hawkins 8/7/2009 Date: Allergies: No Known Drug Aller*

Patient Discharge Instructions

NEW MEDICATIONS:

GLIPIZIDE 5 MG ORAL 1 TABLET TWICE DAILY Please take next dose tonight (8/7/09) before dinner

METFORMIN 500 MG ORAL 1 TABLET TWICE DAILY Please take next dose tonight (8/7/09) with dinner

REGULAR INSULIN SLIDIND SCALE : BEFORE MEALS AT BED TIME

Clinical Notes (group 1 of 2) (continued)

<151	0 UNITS	0 UNITS
151-200	2 UNITS	0 UNITS
201-250	4 UNITS	2 UNITS
251-300	8 UNITS	4 UNITS
301-350	12 UNITS	7 UNITS
351-400	16 UNITS	10 UNITS

CONTINUE WITHOUT CHANGE:

CLOTRIMAZOLE 1 % TOP CREA, Sig: APPLY TO AFFECTED AREA(S) TWICE DAILY

ABILIFY 5 MG ORAL TAB, Sig: TAKE 4 TABLETS ORALLY EVERY NIGHT AT BEDTIME Please take next dose tonight (8/7/09) tonight at bedtime

OMEPRAZOLE 20 MG ORAL CPDR SR CAP, Sig: TAKE 1 CAPSULE ORALLY 2 TIMES DAILY Please take next dose tonight (8/7/09) before dinner

CARMOL 20 20 % TOP CREAM, Sig: apply to I 2nd and 3rd digit areas twice daily

Future Appointments

Date	Time	Provider	Department	Center
8/13/2009	11:50 AM	29062-HOOKS, SARAH ELIZABETH (M.D.)	WLMED9	WLAU
8/18/2009	10:00 AM	129867-CHAKERKHAAN, ALTAI (L.V.N.)	WLMEDU	WLAU
8/28/2009	8:30 AM	10028061-MC CRAY, CONSTANCE D	WLEYE	WLAU

If you are unable to make your appointment, please call the 1 800 954 8000 number to cancel in advance.

ACTIVITY: No restrictions

DIET: Low Fat, Low Cholesterol and 1800 Calorie ADA (American Diabetic Association) Diet

PATIENT SPECIFIC INSTRUCTIONS: Please check your blood sugar before each meal and at bed time.

Keep NPH insulin for use when instructed by diabetes educator.

If you have smoked in the past 12 months, please call Smoker's Helpline: 1-888-883-7867 or visit the website http://members.Kaiserpermanente.org

Discharge Destination

Patient and/or family agrees to discharge destination.

Discharge Destination home