

UNIVERSITY HOSPITAL 2500 North State Street THE UNIVERSITY OF MISSISSIPPI Jackson, MS 39216 MEDICAL CENTER Notes

THOMAS, QUARDIOUS MRN: 0791771 DOB: 4/3/1993, Sex: M

Adm:7/12/2013, D/C:7/12/2013

ED Provider Notes signed by James C Kolb, MD at 07/12/13 2057 (continued)

Author: James C Kolb, MD Service:

Emergency Medicine

Physician

Filed:

07/12/13 2057

Note Time:

Type: 07/12/13 0657

Note Type:

ED Provider Notes

Related Original Note by: Jason R. Schwanebeck, MD filed at 07/12/13 1004

Notes:

Procedure Orders:

1. INTUBATION [26401974] ordered by Jason R. Schwanebeck, MD at 07/12/13 0725

History

Chief Complaint

Patient presents with

Gun Shot Wound

HPI Comments: Pt arrives in full arrest after multiple GSW. He was initially awake and combative, lost pulse 5 minutes PTA. Pt is in extremis and no further history is known or can be obtained. EMS does not have identification for patient.

The history is provided by the EMS personnel. The history is limited by the condition of the patient.

No past medical history on file.

No past surgical history on file.

No family history on file.

History

Substance Use Topics

Smoking status:

Not on file

· Smokeless tobacco:

Not on file

· Alcohol Use:

Not on file

No birth history on file.

Review of Systems

Unable to perform ROS: Mental status change

Physical Exam

There were no vitals taken for this visit

Physical Exam

Constitutional: He appears well-developed and well-nourished.

HENT:

Head: Normocephalic and atraumatic.

Right Ear: External ear normal. Left Ear: External ear normal.

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Mouth/Throat: Oropharynx is clear and moist.

Eyes: Right eye exhibits no discharge. Left eye exhibits no discharge.

Neck: Neck supple. No tracheal deviation present.

Cardiovascular: asystolic Pulmonary/Chest:

BS equal after intubation

Abdominal: Soft. He exhibits distension. Musculoskeletal: He exhibits no edema.

Neurological: GCS 3T

Skin: Skin is warm and dry. No rash noted. He is not diaphoretic. No erythema.

Pt has multiple GSW - left nipple, left forearm, right buttock, right lower back, left middle back, left upper back

ED Course

Intubation

Date/Time: 7/12/2013 6:20 AM

Performed by: STONE, MARY CATHERINE

Authorized by: KOLB, JAMES C

Consent: The procedure was performed in an emergent situation.

Required items: required blood products, implants, devices, and special equipment available

Patient identity confirmed: anonymous protocol, patient vented/unresponsive

Time out: Immediately prior to procedure a "time out" was called to verify the correct patient, procedure.

equipment, support staff and site/side marked as required.

Indications: respiratory failure Intubation method: direct Patient status: unconscious Laryngoscope size: Miller 4

Tube size: 8.0 mm
Tube type: cuffed
Number of attempts: 1

Patient tolerance: Patient tolerated the procedure well with no immediate complications.

MDM

Pt arrived in asystole

CPR continued

Epi x1

Trauma line placed by trauma resident

Pt was asystole throughout resuscitation in ED, no heart movement on US.

TOD 0626



THOMAS, QUARDIOUS MRN: 0791771 DOB: 4/3/1993, Sex: M

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Clinical Impression

Final diagnoses:

Cardiac arrest - asystole Gunshot wound

Plan

ED Disposition

Expired

Date: 7/12/2013 Patient: Jo Fm Doe

Admitted: 7/12/2013 6:35 AM

Attending Provider: James C Kolb, MD

Jo Fm Doe was pronounced dead at 0626 by Dr. James C Kolb, MD.

Discharge information if applicable:

Follow-up Information

None

New Prescriptions

No medications on file

Jason R. Schwanebeck, MD Resident 07/12/13 0728

Jason R. Schwanebeck, MD Resident 07/12/13 1004

I performed a history and physical examination of Quardious Thomas and discussed his management with Dr. SCHWANEBECK, JASON R.. I agree with the history, physical, assessment, and plan of care, with the following exceptions: None

I was present for the following procedures: intubation (without RSI medications) and continued cardiopulmonary resuscitation. Multiple holes in his back and on left arm. Asystole for 10-15 minutes prior to arrival and continued in asystole here with no rhythm at all to work with on sonogram No cardiac movement