

MARY
GNOSIS:

Acute Psychotic Depression

298.0

Valium Sustic

Elavil 75mg

Consultations: 1. _____ 2. _____ 3. _____

Transferred To: 1. DATE: _____

RESULTS:	☐ RECOVERED	☐ AUTOPSY	☐ NOT TREATED	☐ DX ONLY	☐ TRANSFERRED	DATE DISCHARGED	TIME	NO. DAYS IN HOSPITAL
	☐ DIED	YES ☐ NO ☐	☐ IMPROVED	☐ UNIMPROVED	☐ LEFT WITHOUT PERMISSION	6/23/83	09:45	0

med

J. J. J. J.

PHYSICIAN SIGNATURE

ORIGIN

SOC. SEC. NO.

T. JOSEPH HOSPITAL, Nashua, N.H. 03061 - ADMISSION FORM

ACCOUNT NO.	LAST NAME	FIRST	M.I.	(MAIDEN)	F.C.	SEX	AGE	BIRTH DATE	BIRTHPLACE	MED. REC. NO.
8734725	SNOW	MARIE	P		45	F	59	4/1/24	UNKNOWN	N
DATE OF ADMISSION	TIME	ADM. BY	ROOM/BED	PT	SVCE	DR. NO.	ATTENDING M.D.	PREV. ADMIT DATE	PREV. NAME ON PRIOR ADMISSION	
6/13/83	17:01	CHM	534B	S	MED	041	HUGHES, B. DENNIS			

PATIENT ADDRESS	CITY, STATE	ZIP CODE	OWN	TELEPHONE	MAR. STAT.	RELIGIOUS
3 JEWELL LANE	NASHUA NH	03060		6038892232	M	PREF? N

PATIENT'S EMPLOYMENT INFO	NAME	ADDRESS	CITY	STATE	OCCUPATION	LENGTH	REL.	PAR/CONG
NOT EMPLOYED								

TEXT OF KIN - LAST NAME, FIRST, M.I.	ADDRESS	CITY, STATE	ZIP CODE	TELEPHONE
H: HARRY	SAME (SANDERS CANAL	ST		885-5293

TEXT OF KIN - LAST NAME, FIRST, M.I.	ADDRESS	CITY, STATE	ZIP CODE	TELEPHONE
S: OTTO E	SAME	SAME	03060	6038892232

GUARANTOR NAME - FIRST, M.I., LAST	GUAR. ADDRESS	CITY, STATE	ZIP CODE	TELEPHONE
MARIE P SNOW	3 JEWELL LANE	NASHUA NH	03060	6038892232

GUAR. REL.	GUARANTOR OCCUPATION	LT OF EMP.	1ST GUAR. EMPLOYMENT INFO - NAME OF COMPANY ADDRESS	TEL. NO.
OT			N/E H; SANDERS	

B.C./S.S. INFO	NH/VT CERT NO.	GROUP NO.	BC SUBSCRIBER FULL NAME	DX	TYPE	PAT TO SUB	SUB TO GUAR
					3	K	

OTHER B.C. PLANS	CERTIFICATE NUMBER	PLAN #	GROUP NO.	COMPLETE PLAN ADDRESS
		200 IF MASS. B.C./B.S.		

MEDICARE NUMBER (HIC)	MEDICAID NO. 13 DIGIT NH	COMMERCIAL INS. OTHER THAN B.C./B.S. - MEDICARE - N.H. MEDICAID
		150 LIBERTY MUTUAL SNOW, HARRY

POLICY NUMBER	ADDRESS OF INSURER	GROUP
01581	PO BOX 1500 SMITHTOWN NY 11787	G

OTHER COMMERCIAL INSURANCE

LTH 111

ACCIDENT DATE	PLACE OF ACCIDENT	TYPE	AUTO INSURANCE

ATTENDING DIAGNOSIS	CLEAN CD.	DATE DISCHARGED	IS PAT. BRINGING DRUGS INTO THE HOSPITAL?	DOES PATIENT SMOKE?
SEVERELY DEPRESSED	MC		N	Y

MEDICAL RECORD

SNOW, MARIE P
ADMIT DATE- 6/13/83

Date _____

I, the undersigned, a patient applying for admission to the above named Hospital believe that I am in a condition of abortion. I hereby declare that neither the attending physician nor any person employed by or connected with the said hospital has knowingly performed any act which may have contributed to the induction of the abortion.

Witness _____

Witness _____

PERMIT FOR STERILIZATION

The undersigned hereby consents to the performance of an operation involving sterilization of _____ according to the judgement of the surgeon in charge. I recognize that such operation will make further pregnancies impossible.

Witness _____

Signed: Self _____

Signed: Husband or Wife or Parents or Guardian _____

All authorizations must be signed by the patient, or by the nearest relative in the case of a minor; or when patient is physically or mentally incompetent.

AUTHORITY FOR AUTOPSY

Date _____

I, _____ bearing the relationship of _____

_____ a patient recently deceased in Hospital, hereby authorize the representative of said hospital to make such examination of the body of said deceased and of its tissues as may be necessary to determine the cause of death.

Witness _____

Signature of relative or friend _____

Witness _____ Relationships _____

AUTHORIZATION FOR ASSIGNMENT OF PHYSICIAN

I hereby agree to accept the care of the physician assigned by the hospital during my hospital stay and to accept any change in the assignment of physicians as may be made by the hospital during my stay.

Date _____

Signed _____

(Patient)

(Nearest Relative)

Relationship to Patient _____

PHARMACY RELEASE

I hereby state that I am not bringing into the Hospital, nor will I have brought to me, any prescriptions, medications or drugs. I understand that any medications needed during my stay in this Hospital will be prescribed by my attending physician and will be supplied by the St. Joseph Hospital Pharmacy.

Date _____

Signed ☒ _____

(Patient)

AUTHORIZATION FOR MEDICAL AND/OR SURGICAL TREATMENT, AND FOR RELEASE OF INFORMATION.

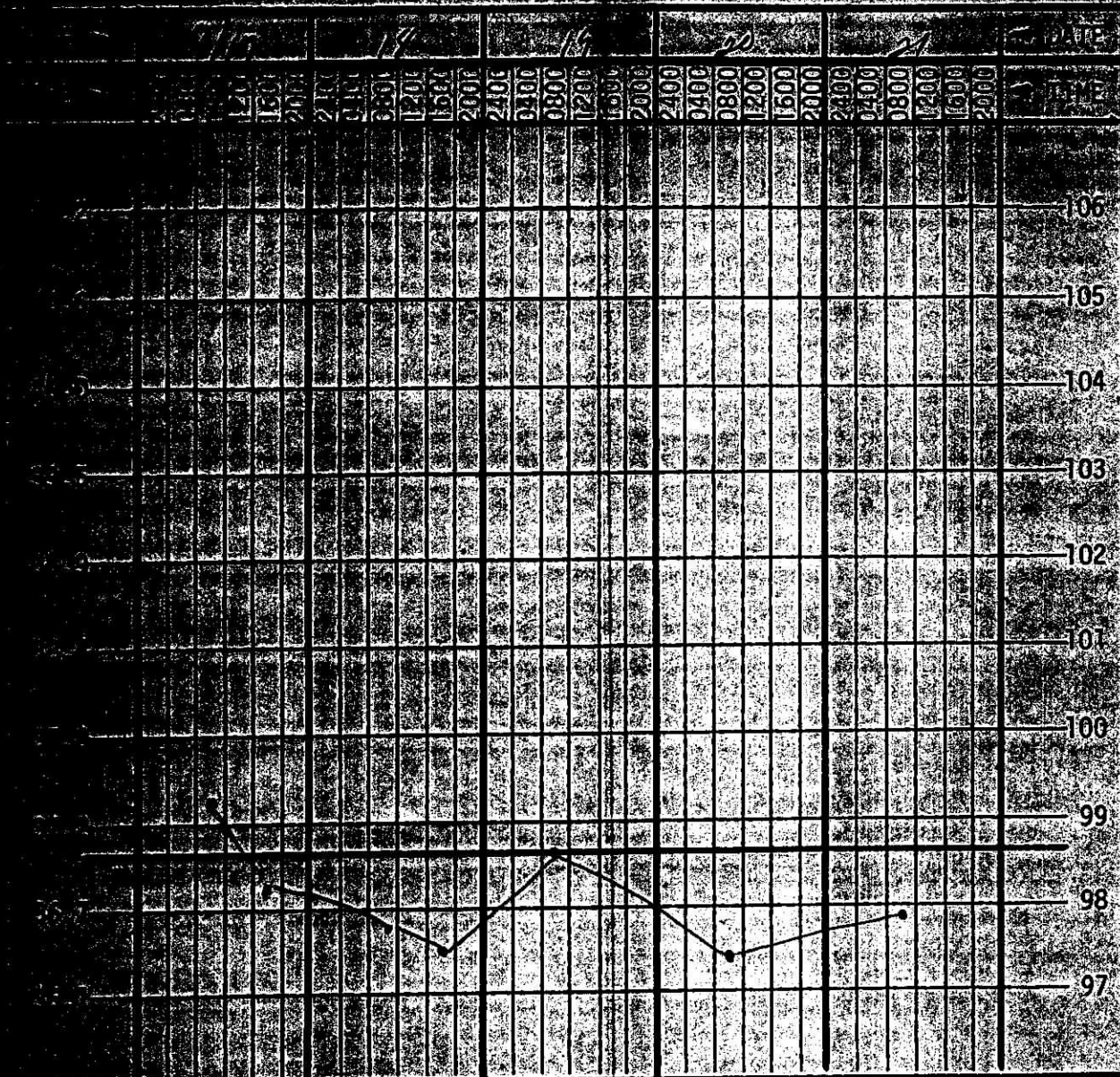
I hereby authorize the performance of any Medical or Minor Surgical Procedure, including the administration of local anesthesia, which may be deemed necessary or advisable by attending physicians or surgeons during my stay at ST. JOSEPH HOSPITAL. I further authorize the Hospital to RELEASE INFORMATION necessary for the completion of hospital claims, and authorization for payment directly to ST. JOSEPH HOSPITAL for benefits due from my/our Blue Cross, Blue Shield or other insurance carrier for this treatment. I understand that I am financially responsible for charges not contractually covered.

Date 06/13/83

Signature of Patient or Responsible Party ☒ her mark

Witness ☒ Cornelia H. Miller

GRAPHIC TEMPERATURE



MODE Temperature = ●

GRAPHIC SHEET

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
NURSING ACTIVITIES

ADDRESSOGRAPH

GPC

7821028

00-37-96

SNO, MARIE P.

3 JEWELL LANE NASHUA

P 59 04-02-24 NRP

07-06-83 DR. HUGHES

45 HARRY

SR

ST. JOSEPH HOSPITAL

Nashua, N. H.

Discharge Summary

NAME: SNOW, MARIE

DOCTOR: HUGHES

ADMITTED: 06/13/83

DISCHARGED: 06/23/83

DIAGNOSIS: Acute psychotic depression.

This 59 year-old white female was well known having always been an extremely anxious nervous and depressed female maintained on Elavil 25 mg.b.i.d. together with occasional Valium. She had recently been having lots of difficulties at home. She was seen one week prior to admission and had seemed perfectly well. On the day of admission, she was brought up by her son having been behaving, bizarrely saying that she was losing her mind and that she couldn't identify people who were well known to her. She insisted that the end of the world was coming soon, that she was dirty, that she was extremely wicked and was due to be punished. She had not been eating or sleeping for the past four days. She was seen in the office and admitted directly.

Family history was essentially negative. She had one son, Otto, who was extremely bizarre and had been diagnosed by myself as schizophrenic. This son had never worked, but did write strange poetry and thought that he had the cures to many illnesses and wrote to various agencies offering them his cures.

Physical examination on admission revealed an extremely depressed slow-speaking female in a low monotonous voice who only insisted that she was dirty and that she was going to be punished and that she ought to be punished. NO abnormalities were found in the cardiovascular or respiratory system. Blood pressure 120/70. The abdomen was relaxed with two scars over the abdomen--the site of a previous appendectomy and removal of ovarian cysts. Meticulous CNS examination was negative. The diagnosis of psychotic depression was made.

Chest X-ray was negative. EEG suggested a right posterior parietal slow-wave focus, but CAT scan of the head was completely normal. EKG was normal. VDRL was negative. CBC urinalysis and Chem-25 were all essentially negative. Electrolytes were normal. A drug screen was negative. Sedimentation rate was 1.

The patient remained extremely disturbed, muttering to herself continually--"I am dirty, I am wicked, I have told lies, the police are coming". She had apparently become very upset prior to her admission when she had found ants infesting her house. Her house was also up for sale and in deed had been sold and they were due to leave the home by Augsut 1st. It was noted also that the husband had started drinking very heavily and he had subsequently to be admitted for alcoholism. Later the patient became more and more disturbed and complained that dogs were chasing after her. She ran about her room saying that she could hear a child being beaten. Later she thought that the child was Otto. She accused myself of having taken Otto and beaten him as she could hear his screams continually. She claimed that her food was poisoned and insisted that she would have to die before the end of the world came very shortly. Much of the time, she would refuse to answer questions directly. "You told me to eat human beings and dogs", "Your face is like a monster's", "You have been beating Otto", "There have been four men in white behind my bed all morning". Certainly she was grossly psychotic. The possibility of DT's was considered, but it appeared that she had had only a very

(Continued Over)

DISCHARGE SUMMARY, Con't.

SNOW, MARIE

Adm.06/13/83, Disch.06/23/83 -- Dr. Hughes

small amount to drink and it appeared that there had only been one bottle of Vodka available to her. She continued to mutter to herself and persistently talked about the dogs coming after her. On the 17th of June, she amazingly suddenly became clear, rational and sensible. This sudden abrupt change again seemed more reminiscent of DT's. She had a few further periods of slight confusion and then developed very bad nightmares and dreams. She remained totally amnesic for the events of her admission. Much trouble was had with her son, Otto, who always tried to direct her treatment and had his own ideas on parapsychology and medical treatment. He wanted to try the affect of various drugs including tryptophan on his mother and didn't like any of the medications suggested by myself. Finally, she was discharged seeming very well on Valium 5 mg.t.i.d. and Elavil 75 mg.at night. She was told to report to the office in one week's time.

B. D. Hughes

B. D. Hughes, M.D./klg

D/T: 02/17/84

D/D: 02/06/84

Family History: Parents, Brothers, Sisters, Relatives—living or dead, Ages, Diseases

Past History: General Health, Habits, Diseases and Injuries from Childhood with Dates, Cerebration, Marriage, Children

Sister - Frances

Son - Otto

Schizophrenic

Former Operations:

Present Illness: How long sick, chief complaint, and history of all functions

Always anxious, nervous depressed - main trouble on about 25 bid and ore value. Having lots of difficulties at home. Seen recently, I never ago - seemed fine. Brought up by son today, having been behaving badly - talking & loudly saying that her mind had gone couldn't remember who people were, said the end of the world was coming soon, that she was dirty, been very involved - not sleeping, not eating. Seen in office admitted directly.

Physical Examination:

Negative Findings (check): Skin Teeth Tonsils Pupils Glands Thyroid Breasts Heart Lungs
 Abdomen Liver Kidney Spleen Pelvis Rectum Genitalia Inguinal & Femoral Rings Spine Joints
 Kneejerks Extremities Blood Pressure $\frac{S}{D}$ Weight (loss)

Positive Findings:

Extremely depressed, speaks in slow low monotonous voice - repeats that she is dirty, is going to be punished somehow.

ENT - u.s. Breasts neg. No glands.

BP $\frac{120}{70}$ Heart N.A.D. J.V.P. No edema.

As. Good A.E. No adenopathy

△ = Psychotic

Abdo } (No masses. No tenderness.

Depression

CNS Chemistry - Fund: - N.A.D.

?? D.T.'s.

No myoclonus.

Tone P.d.

GENERAL HISTORY AND
PHYSICAL EXAMINATION

Cordichin

8134125 60-37-96
 SNOW, MARIE P.
 3 EVELL LANE NASHUA NH
 F 59 4/1/24 HRP
 06/13/63 HUGHES
 45 MARIE P.

CHH

PROGRESS NOTES

DATE	TIME	NOTE PROGRESS OF CASE, COMPLICATIONS, CHANGE IN DIAGNOSIS, CONDITION ON DISCHARGE, INSTRUCTIONS TO PATIENT:
5-14		Extremely disturbed - muttering to herself - "I'm dirty --- I'm involved --- I've told lies - the police are coming ---" Became very upset apparently because when she had found out it was the house - also house is up for sale - sold - have to leave by Aug 1st --- Husband has started drinking heavily. Seems acute depressive psychosis. J D H.
6-15		Hallucinated H+. "The dogs are coming after me --- I keep hearing a child being beaten - it's Otto --- you have been beating him - talks to herself continually - claims her food is poisoned --- I must die before the end of the world - soon" Put in seclusion room. J D H.
6-16		Very disturbed "You told me to eat human beings and dogs" --- "Your face is like a monster's --- you've been beating Otto ---" (Husband was admitted yesterday) "There were 4 men in white behind here all morning" J D H.

PROGRESS NOTES

DATE	TIME	NOTE PROGRESS OF CASE, COMPLICATIONS, CHANGE IN DIAGNOSIS, CONDITION ON DISCHARGE, INSTRUCTIONS TO PATIENT:
5/12		Still mumbling to herself. No CNS signs No tremor. No myoclonus. CT scan neg. Persistently talks about "the dog" D. P. H. H. pm Amazighy - became clear after lunch - cheerful - talkative, sensible!!! This makes the diagnosis seriously look like DT's - but she certainly drank very little (verified several times) Cogn. med. S. B. D. H. H.
6/18/83		Complained today. Couldn't find the bathroom "Wrote a poem for Sander"
6/14/83		Fees well. Looks very good. Alert & orientated.
20		Remains extremely well. Had some episodes of paranoia - and nightmares, bad dreams etc. Otto doing well at home. Amused by events of admission etc. ? Could have been DT's - but she would only have had very little drink. - sure

[illegible]

DISPENSING BY NON-PROPRIETARY NAME IS
AUTHORIZED UNLESS CHECKED IN THIS BOX

[illegible]

DATE		HOUR		STARTED		DISCONTINUED	
DATE		HOUR		DATE		HOUR	
13/83	1800	CBC. 08004					
		drug screen 08003					
		Chem 25 02949					
		Ekg - Wroblewski 02995					
		Chem 4-ray 08008					
		serum analysis					
		CDK 08002					
		Reg diet					
		May ambulate		T.O. Dr. Hughes / E. Conlin RN			
		22, 145		DDH.			
6.13.		Observation throughout the night.					
		EEG. 0800					
		CT SCAN of head. 0800					
		No med, except Tylenol 500 x 4 hrs.					
		200.					
		22 0800					
		DDH					

AUTOMATIC STOP ORDER: The following drugs will be stopped unless renewed by: /

RENEW

DRUG

DRUG

YES

 $\mathbb{R}_2(\cdot)$

RENEW

DRUG

DATE: _____

YES:

 $P_i(t)$

ME

ALLERGIES:

☐ NONE

Snow, Marie P.

534 B

Records on microfilm

STOP ORDERS MUST BE WRITTEN AS A NEW SPECIFIC ORDER

DATE HOUR

6-14 Mellair 25mg. t.i.d.

Norpramine 25mg. t.i.d.

Sinequan 100mg h.s. every night.

MOM 30mls po PRN

order by [signature] D.D.H. [signature]

6-14⁵⁰

6-15 Dexamethasone 1mg at 11 pm

✓ Plasma Cortisols at 11 pm tonight,

4 pm tomorrow 105555

11 pm tomorrow 105608

✓ Security Km if needed (order by [signature] D.D.H. [signature])

105555

AUTOMATIC STOP ORDER: The following drugs will be stopped unless renewed by: / /

RENEW

DRUG

DRUG

YES

NO

RENEW

DRUG

DATE

YES

NO

M.D.

ALLERGIES:

☐ NONE

THE HOSPITAL IS NOT RESPONSIBLE FOR UNSIGNED ORDERS.

St. Joseph Hospital
Nashua, New Hampshire

STOP ORDERS MUST BE WRITTEN AS A NEW SPECIFIC ORDER

DATE HOUR

DRUGS TO BE
STARTED

DRUGS TO BE
DISCONTINUED

DATE

HOUR

DATE

HOUR

6-15 Valium 10mg p.o. q 4 h.s. - may
Repeat every 6 hrs. p.o. for agitation
by I.M.I. if necessary.
B.D. 11/24

6-16 IV. Ringer Lactate, 2 amps of Kerosene C
in each liter / 100 cc. / hr. continuous.
D.C. Sinequan ✓
D.C. Mellaril ✓
D.C. Norpramin ✓
Valium Sup. T.i.d. and 10mg q 4 h.s. ✓
Elavil 75mg q 4 h.s. ✓
C.B.C. Lys BUN. Sed rate in AM.
B.D. 11/24

AUTOMATIC STOP ORDER: The
following drugs will be stopped
unless renewed by:

RENEW

DRUG: _____

DRUG: _____

YES

NO

RENEW

DRUG: _____

DATE: _____

YES

NO

M.D.

ALLERGIES:

☐ NONE

THE HOSPITAL IS NOT RESPONSIBLE FOR UNSIGNED
ORDERS.

St. Joseph Hospital
Nashua, New Hampshire

7

STOP ORDERS MUST BE WRITTEN AS A NEW SPECIFIC ORDER

DATE HOUR

6/18 0325

Valium 30 mg now

T.O. Mr. Hughes / D. Hughes R

D H Hughes

0330
alt

6/19/52 (W) D / C

IV

Beroca Plus T tabs

10/5/52

599 A

RENEW NARCOTIC YES NO

DRUG

RENEW SEDATIVE YES NO

DRUG Valium

RENEW ANTIBIOTIC YES NO

DRUG D D Hughes

Please
renew

Est

6/20

AUTOMATIC STOP ORDER: The following drugs will be stopped unless renewed by: / /

RENEW

DRUG: _____

DRUG: _____

YES

☐

☐

NO

☐

☐

RENEW

DRUG: _____

DATE: _____

YES

☐

☐

NO

☐

☐

ALLERGIES:

☐ NONE

THE HOSPITAL IS NOT RESPONSIBLE FOR UNSIGNED ORDERS.

St. Joseph Hospital
Nashua, New Hampshire

25

PHYSICIAN'S ORDER SHEET

STOP ORDERS MUST BE WRITTEN AS A NEW SPECIFIC ORDER

**DRUGS TO
STARTED**

DATE	HOUR
------	------

DATE	HOUR
------	------

3-22 Discharge in river

70 lbs

AUTOMATIC STOP ORDER: The following drugs will be stopped unless renewed by: /

RENEW

YES

NO

RENEW

YES

NO

DRUG:

11

1

DRUG

11

L

DRUG

11

1

DATE _____

—

ALLERGIES:

NONE

THE HOSPITAL IS NOT RESPONSIBLE FOR UNSIGNED ORDERS.

St. Joseph Hospital
Nashua, New Hampshire

172 KINNEY ST.
NASHUA, N.H. 03061

6/14/83
CHEST:

PA and lateral films of the chest show both lung fields to be clear of active disease from apex to base. The costophrenic sulci are clear. The heart and great vessels are normal. There are no mediastinal deviations nor enlargements. The bony thorax is normal.

CONCLUSION: Normal chest.

Larry W. Denmark, M.D./mbm

CHEST

24234

4.20

ER # 03008
E-TIME REQUESTED: 6/13/83 18:35
E-TIME NEEDED BY: 6/14/83 IN AM RAUDONIS, C
TINE TEST VIA WHEELCHAIR
IT. PHYS. - HUGHES, B. DENNIS
ULT. PHYS. - WROBLESKI, WALTER JR

NAME: SNOW, MARIE F
ADDRESS: 3 JEWELL LANE
NASHUA NH
03060

ACCT NO: 8734725 I/P - 5418
MED. REC.: N 003796
AGE: 59 SEX: F

DIAGNOSIS: DEPRESSION

507A

6/14/83

CT SCAN OF THE HEAD WITHOUT CONTRAST:

There are no abnormal intra or extra axial masses, and there are no abnormal fluid collections. All visualized ventricles, cisterns, and sulci are of normal size and contour for a patient in this age group. There is no shift of the midline structures. There are no abnormal intracranial calcifications.

IMPRESSION: Normal CT scan of the head.

Larry W. Denmark, M.D./mbm

F
S
C/T-HEAD

CT 3684

loss of balance

24734
6-14-83
ADD
DER # 03110
TE-TIME REQUESTED 6/13/83 20:23
TE-TIME NEEDED BY 6/14/83 IN AM RAUDONIS, C
ROUTINE TEST VIA WHEELCHAIR
MIT. PHYS. - HUGHES, B. DENNIS
CONSULT. PHYS. - WROBLESKI, WALTER JR
FINDINGS: GROSSLY DEPRESSED

M
NAME: SNOW, MARIE F
ADDRESS: 3 JEWELL LANE
NASHUA NH
03060
ACCT NO: 8734725 I/P - 507A
MED. REC.: N 003796
AGE: 59 SEX: F

St. Joseph Hospital
Nashua, N. H.

Electroencephalography Laboratory

Name: ^{Marie} Snow, ~~Maurice~~
Date: 6-15-83

Room: ^{519A} ~~507~~
Age: 59

Doctor: Hughes/Wroblewski
EEG: 83-411J

REPORT:

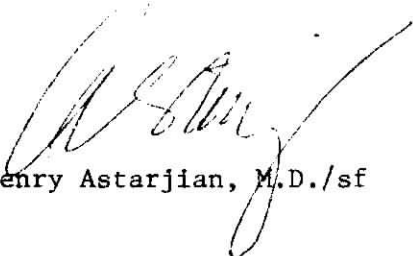
Marked amount of somatic interference obscured the majority of this record. However the basic pattern is 11 cps low voltage wave activity.

A well defined 4 to 5 cps high voltage Theta focus is noted in the right posterior parietal-occipital leads. On occasion bursts of short wave activity are also seen in the same region however these fail to measure up to spikes.

Hyperventilation and photic stimulations were not performed.

IMPRESSION:

Abnormal EEG. There is a right posterior parietal slow wave focus. Pattern is compatible with a structural disease.


Henry Astarjian, M.D./sf

ACCT 8734725 INPATIENT 511B
SNOW, MARIE P
3 JEWELL LANE
NASHUA NH

02975

AGE 59

6/14/83

ACCT 8734725
DEPRESSION

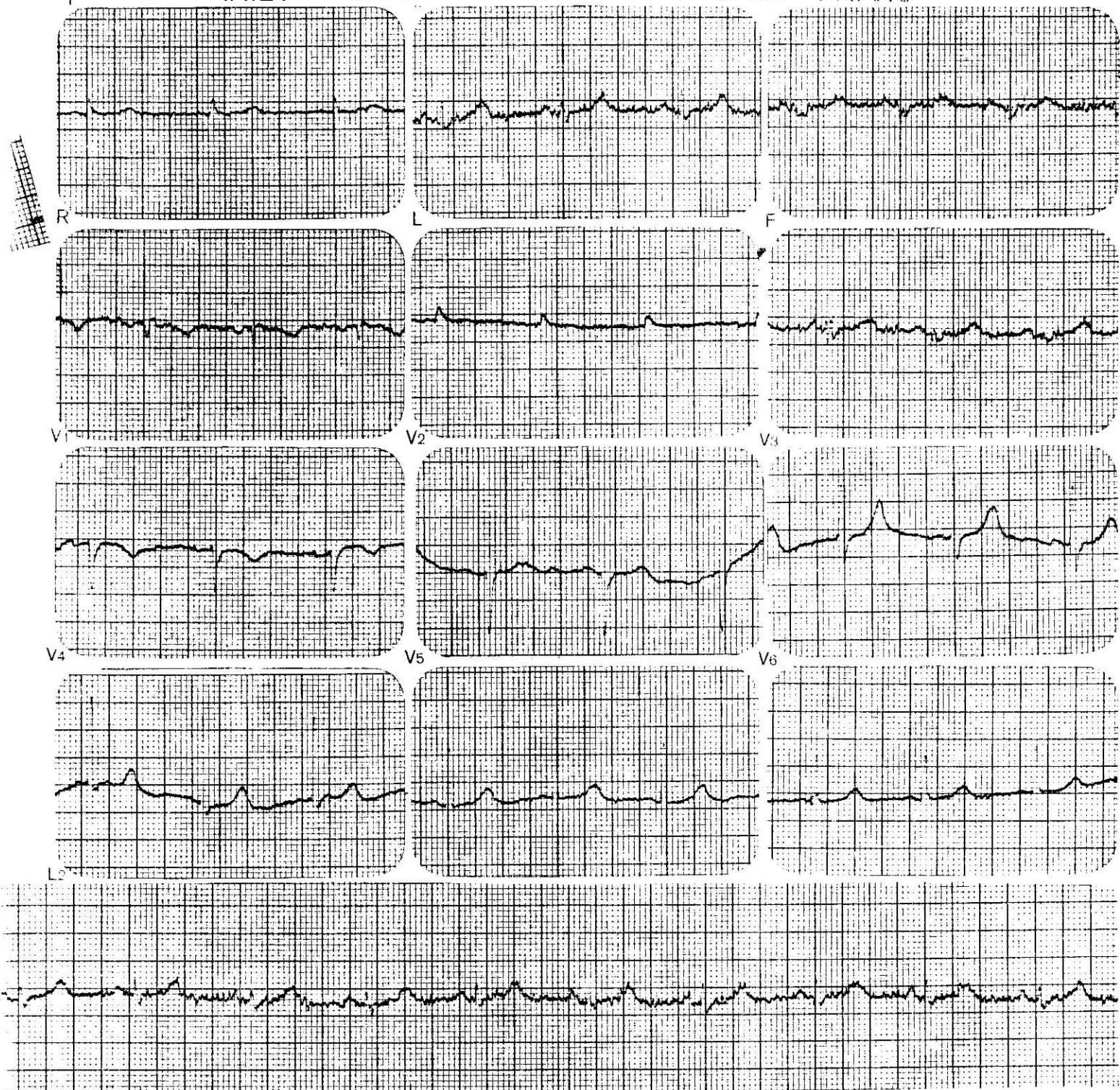
ORDER 62775

RE

DR HUGHES, B. DENNIS
DR WROBLESKI, WALTER JR
B/P AT ORDER 144/078NO
NO
NO

4/1/24

NEEDED

INTERPRETATION: RATE 76 RHYTHM Sinus P 0.14 QRS 0.08 AXIS 0

CARDIOGRAPH DIAGNOSIS:

Somatic interference

MD

6/14/83 416

MEDICAL RECORDS

511B
 03006-1 N 003796 2734725 F 52
 DEPRESSION
 ORDER TYPE: ROUTINE
 ADDRESS: 3 JEWELL LANE
 DATE DRAWN: R-... L-...

NASHUA, NH
 DRAWN BY

SNOW, MARIE F
 DR. HUGHES, B. DENNIS
 DR. WROBLESKI, WALTER JR

REQUESTED: 6/13/83 IN PM
 2:42/83 4:34

DATE COLLECTED:

DATE REPORTED: 6/15/83

EC

PTE

***** RESULT AND REVIEW

NR

ORDER TYPE: ROUTINE
 SPECIMEN VOIDED
 DATE COLLECTED:

DATE REPORTED: 6/13/83

CHELSEA, MA

J. R. / J. R.

RESULTS

RESULTS

ROUTINE URINALYSIS

COLOR: *yellow*
 CLARITY: *clear*
 SPECIFIC GRAVITY: *1.010*
 PH: *5*
 KETONE BODIES: */*
 BILIRUBIN: */*
 UROBILIN: */*
 UROBILINOGEN: */*
 BLOOD: */*
 BACTERIA: */*
 YEAST: */*
 TRITEST: */*

SEDIMENT
 0-1 few squamous; rare renal

☐ CBC ☐ HCT ☐ HGB ☐ RETIC
☐ DIFF ☐ TOT. EOS. ☐ SED. RATE

03006 N 003796
 DEPRESSION
 ORDER TYPE ROUTINE
 SPECIAL NOTE -

8734725 F 52

SNOW, MARIE F
 DR. HUGHES, B. DENNIS
 DR. WROBLESKI, WALTER JR
 REQUESTED 6/13/83 12:38

TEST NO.	OP CODES	NORMAL VALUES
06/13/83	WBC	M 7.8 ± 3
	RBC	M 5.4 ± 0.7
	Hgb	M 16.0 ± 2
	Hct	M 47.5
	MCV	M 87.7
	MCH	M 29.2
	MCHC	M 35.2
	RDW	M 10.1 ± 1.5
	PLT	M 30-400
	MPV	M 89 ± 15

ORDERED BY	DATE TIME
RAUDONIS, C	6/13/83 IN PM
DRAWN BY	PERFORMED BY
6/13/83	J. R. / J. R.
DIFFERENTIAL	PERCENTAGE
SEG	MORPH
BAND	RBC NORM
LYMPH	POLYCHROM
ATYP	HYPOCHROM
LYMPH	POIK
MONO	ANISO
EOS	MICRO
BASO	MACRO
MET	BASO STIP
MYELO	TOXIC GRAN
PROS	
BLAST	
1. SLIGHT	MORPHOLOGY SYMBOLS
2. MODERATE	3. MOD TO MARKED
3. MARKED	
4. MARKED	
5. MARKED	
6. MARKED	
7. MARKED	
8. MARKED	
9. MARKED	
10. MARKED	
11. MARKED	
12. MARKED	
13. MARKED	
14. MARKED	
15. MARKED	
16. MARKED	
17. MARKED	
18. MARKED	
19. MARKED	
20. MARKED	
21. MARKED	
22. MARKED	
23. MARKED	
24. MARKED	
25. MARKED	
26. MARKED	
27. MARKED	
28. MARKED	
29. MARKED	
30. MARKED	
31. MARKED	
32. MARKED	
33. MARKED	
34. MARKED	
35. MARKED	
36. MARKED	
37. MARKED	
38. MARKED	
39. MARKED	
40. MARKED	
41. MARKED	
42. MARKED	
43. MARKED	
44. MARKED	
45. MARKED	
46. MARKED	
47. MARKED	
48. MARKED	
49. MARKED	
50. MARKED	
51. MARKED	
52. MARKED	
53. MARKED	
54. MARKED	
55. MARKED	
56. MARKED	
57. MARKED	
58. MARKED	
59. MARKED	
60. MARKED	
61. MARKED	
62. MARKED	
63. MARKED	
64. MARKED	
65. MARKED	
66. MARKED	
67. MARKED	
68. MARKED	
69. MARKED	
70. MARKED	
71. MARKED	
72. MARKED	
73. MARKED	
74. MARKED	
75. MARKED	
76. MARKED	
77. MARKED	
78. MARKED	
79. MARKED	
80. MARKED	
81. MARKED	
82. MARKED	
83. MARKED	
84. MARKED	
85. MARKED	
86. MARKED	
87. MARKED	
88. MARKED	
89. MARKED	
90. MARKED	
91. MARKED	
92. MARKED	
93. MARKED	
94. MARKED	
95. MARKED	
96. MARKED	
97. MARKED	
98. MARKED	
99. MARKED	
100. MARKED	

MEDICAL RECORDS



Hospital Reference Laboratory Services

PATIENT: [NAME] E0903 [DATE] DATE DRAWN: [DATE] DATE REC'D: [DATE] DATE OF REPORT: [DATE]
SEX: [] AGE: 36 I.D. NO. [] ACCT. NO. []
M.D. [NAME] HOSPITAL NO. [] SPEC. NO. []

CHOL-CHOLESTEROL
SODIUM
POTASSIUM
CHLORIDE
BUN
CREATININE
BUN/CREATININE RATIO
URIC ACID
PHOSPHATE
CALCIUM
MAGNESIUM
INOLESTEROL
TOTAL PROTEIN
ALBUMIN
GLOBULIN
ALB/GLOB RATIO
HCT ON RBC

One Malcolm Avenue • Teaneck, New Jersey 07608
60 Commerce Way • Hackensack, New Jersey 07606 (201) 288-3600 • (212) 736-0640

PAUL A. KRIEGER M.D. *Joseph E. O'Brien M.D.*
JOSEPH E. O'BRIEN M.D.



Hospital Reference Laboratory Services

PATIENT: [NAME] E0903 [DATE] DATE DRAWN: [DATE] DATE REC'D: [DATE] DATE OF REPORT: [DATE]
SEX: [] AGE: 36 I.D. NO. [] ACCT. NO. []
M.D. [NAME] HOSPITAL NO. [] SPEC. NO. []

*** CONDENSED PANEL ***
TOTAL PROTEIN
ALBUMIN
GLOBULIN
ALB/GLOB RATIO
BUN
CREATININE
BUN/CREATININE RATIO
URIC ACID
PHOSPHATE
CALCIUM
MAGNESIUM
INOLESTEROL
TOTAL PROTEIN
ALBUMIN
GLOBULIN
ALB/GLOB RATIO
HCT ON RBC

ST RESULTS OF THIS TEST ARE AVAILABLE
ADHOCASE (GAL)
THROMBOCYTES

METPATH

PATIENT: [] DATE DRAWN: 11/1 DATE REC'D: 11/1 DATE OF REPORT: 11/1/83
 SEX: [] AGE: [] ACCT NO: 44112A
 PATIENT SOC SEC. NO. [] SPEC. NO. []

TEST NAME: [] SULT: [] REFERENCE RANGE: []
 GROUP IX, 5530H []

ST. JOSEPH HOSPITAL NASHUA, N.H. HEMATOLOGY I
 8734725 F 59 SNOW, MARIE P
 DR HUGHES, J. DENNIS
 DR WROBLESKI, WALTER JR
 REQUESTED: 6/16/83 21:25

- ☐ PLATELET ☐ RETIC
☐ HCT ☐ HGB
☒ CBC ☐ WBC ☐ DIFF
☐ TOT EOS. ☒ SED RATE

TEST NO	OP CODES	NORMAL VALUES
8.9	WBC	M 78 ± 3
3.76	RBC	M 547 ± 7 F 481 ± 6
12.6	Hgb	M 180 ± 2 F 140 ± 2
35.8	Hct	M 47 ± 5 F 42 ± 5
9.1	MCV	M 87 ± 7 F 90 ± 9
33.5	MCH	M 28 ± 2
30.2	MCHC	M 35 ± 2
11.5	RDW	M 10 ± 1.5
263	PLT	M 130-400
8.7	MPV	M 89 ± 15

ORDERED BY: FORRESTER, K
 DRAWN BY: []
 PERFORMED BY: []
 DATE: 6/17/83 IN AM
 MORPH: []
 RBC NORM: []
 POLYCHROM: []
 HYPOCHROM: []
 POIK: []
 ANISO: []
 MICRO: []
 MACRO: []
 BASO ST P: []
 TONIC GRAN: []
 PLATELET ESTIMATE: []
 SED RATE: []
 RETIC COUNT: []
 TOTAL EOS COUNT: []

ROUTINE
 DATE REPORTED: 6/17/83
 COLLECTED: []
 DIFFERENTIAL: []
 MEDICAL RECORDS: []

MEDICAL RECORDS

DATE: 01-003795 0104117 7 Y
 ADDRESS: 00
 ROUTINE
 IN IV R-... L-...

BLOOD DRAWN: R-... L-... DRAWN BY: ...

DATE COLLECTED: ...

DATE RECEIVED: ...

6 17

70

14 DONOR'S NITROGEN
 100N/4000/20L 7 - 22

14.8

ACTAPATH

NAME: MARIE

PATIENT

AGE

DATE DRAWN

ST. JOSEPH'S HOSPITAL
 CHIN: ...
 100 ...
 ANALYSIS

1070

04607

PATIENT SOC. SEC. NO

TELLING COO

467070

TEST NAME

EIGHT

REFERENCE RANGE

GROUP IX, LITM

ADULT F T 01

1. TESTS PERFORMED BY
 4. 7. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 846. 847. 848. 849. 850. 851. 852. 853. 854. 855. 856. 857. 858. 859. 860. 861. 862. 863. 864. 865. 866. 867. 868. 869. 870. 871. 872. 873. 874. 875. 876. 877. 878. 879. 880. 881. 882. 883. 884. 885. 886. 887. 888. 889. 890. 891. 892. 893. 894. 895. 896. 897. 898. 899. 900. 901. 902. 903. 904. 905. 906. 907. 908. 909. 910. 911. 912. 913. 914. 915. 916. 917. 918. 919. 920. 921. 922. 923. 924. 925. 926. 927. 928. 929. 930. 931. 932. 933. 934. 935. 936. 937. 938. 939. 940. 941. 942. 943. 944. 945. 946. 947. 948. 949. 950. 951. 952. 953. 954. 955. 956. 957. 958. 959. 960. 961. 962. 963. 964. 965. 966. 967. 968. 969. 970. 971. 972. 973. 974. 975. 976. 977. 978. 979. 980. 981. 982. 983. 984. 985. 986. 987. 988. 989. 990. 991. 992. 993. 994. 995. 996. 997. 998. 999. 1000. 1001. 1002. 1003. 1004. 1005. 1006. 1007. 1008. 1009. 1010. 1011. 1012. 1013. 1014. 1015. 1016. 1017. 1018. 1019. 1020. 1021. 1022. 1023. 1024. 1025. 1026. 1027. 1028. 1029. 1030. 1031. 1032. 1033. 1034. 1035. 1036. 1037. 1038. 1039. 1040. 1041. 1042. 1043. 1044. 1045. 1046. 1047. 1048. 1049. 1050. 1051. 1052. 1053. 1054. 1055. 1056. 1057. 1058. 1059. 1060. 1061. 1062. 1063. 1064. 1065. 1066. 1067. 1068. 1069. 1070. 1071. 1072. 1073. 1074. 1075. 1076. 1077. 1078. 1079. 1080. 1081. 1082. 1083. 1084. 1085. 1086. 1087. 1088. 1089. 1090. 1091. 1092. 1093. 1094. 1095. 1096. 1097. 1098. 1099. 1100. 1101. 1102. 1103. 1104. 1105. 1106. 1107. 1108. 1109. 1110. 1111. 1112. 1113. 1114. 1115. 1116. 1117. 1118. 1119. 1120. 1121. 1122. 1123. 1124. 1125. 1126. 1127. 1128. 1129. 1130. 1131. 1132. 1133. 1134. 1135. 1136. 1137. 1138. 1139. 1140. 1141. 1142. 1143. 1144. 1145. 1146. 1147. 1148. 1149. 1150. 1151. 1152. 1153. 1154. 1155. 1156. 1157. 1158. 1159. 1160. 1161. 1162. 1163. 1164. 1165. 1166. 1167. 1168. 1169. 1170. 1171. 1172. 1173. 1174. 1175. 1176. 1177. 1178. 1179. 1180. 1181. 1182. 1183. 1184. 1185. 1186. 1187. 1188. 1189. 1190. 1191. 1192. 1193. 1194. 1195. 1196. 1197. 1198. 1199. 1200. 1201. 1202. 1203. 1204. 1205. 1206. 1207. 1208. 1209. 1210. 1211. 1212. 1213. 1214. 1215. 1216. 1217. 1218. 1219. 1220. 1221. 1222. 1223. 1224. 1225. 1226. 1227. 1228. 1229. 1230. 1231. 1232. 1233. 1234. 1235. 1236. 1237. 1238. 1239. 1240. 1241. 1242. 1243. 1244. 1245. 1246. 1247. 1248. 1249. 1250. 1251. 1252. 1253. 1254. 1255. 1256. 1257. 1258. 1259. 1260. 1261. 1262. 1263. 1264. 1265. 1266. 1267. 1268. 1269. 1270. 1271. 1272. 1273. 1274. 1275. 1276. 1277. 1278. 1279. 1280. 1281. 1282. 1283. 1284. 1285. 1286. 1287. 1288. 1289. 1290. 1291. 1292. 1293. 1294. 1295. 1296. 1297. 1298. 1299. 1300. 1301. 1302. 1303. 1304. 1305. 1306. 1307. 1308. 1309. 1310. 1311. 1312. 1313. 1314. 1315. 1316. 1317. 1318. 1319. 1320. 1321. 1322. 1323. 1324. 1325. 1326. 1327. 1328. 1329. 1330. 1331. 1332. 1333. 1334. 1335. 1336. 1337. 1338. 1339. 1340. 1341. 1342. 1343. 1344. 1345. 1346. 1347. 1348. 1349. 1350. 1351. 1352. 1353. 1354. 1355. 1356. 1357. 1358. 1359. 1360. 1361. 1362. 1363. 1364. 1365. 1366. 1367. 1368. 1369. 1370. 1371. 1372. 1373. 1374. 1375. 1376. 1377. 1378. 1379. 1380. 1381. 1382. 1383. 1384. 1385. 1386. 1387. 1388. 1389. 1390. 1391. 1392. 1393. 1394. 1395. 1396. 1397. 1398. 1399. 1400. 1401. 1402. 1403. 1404. 1405. 1406. 1407. 1408. 1409. 1410. 1411. 1412. 1413. 1414. 1415. 1416. 1417. 1418. 1419. 1420. 1421. 1422. 1423. 1424. 1425. 1426. 1427. 1428. 1429. 1430. 1431. 1432. 1433. 1434. 1435. 1436. 1437. 1438. 1439. 1440. 1441. 1442. 1443. 1444. 1445. 1446. 1447. 1448. 1449. 1450. 1451. 1452. 1453. 1454. 1455. 1456. 1457. 1458. 1459. 1460. 1461. 1462. 1463. 1464. 1465. 1466. 1467. 1468. 1469. 1470. 1471. 1472. 1473. 1474. 1475. 1476. 1477. 1478. 1479. 1480. 1481. 1482. 1483. 1484. 1485. 1486. 1487. 1488. 1489. 1490. 1491. 1492. 1493. 1494. 1495. 1496. 1497. 1498. 1499. 1500. 1501. 1502. 1503. 1504. 1505. 1506. 1507. 1508. 1509. 1510. 1511. 1512. 1513. 1514. 1515. 1516. 1517. 1518. 1519. 1520. 1521. 1522. 1523. 1524. 1525. 1526. 1527. 1528. 1529. 1530. 1531. 1532. 1533. 1534. 1535. 1536. 1537. 1538. 1539. 1540. 1541. 1542. 1543. 1544. 1545. 1546. 1547. 1548. 1549. 1550. 1551. 1552. 1553. 1554. 1555. 1556. 1557. 1558. 1559. 1560. 1561. 1562. 1563. 1564. 1565. 1566. 1567. 1568. 1569. 1570. 1571. 1572. 1573. 1574. 1575. 1576. 1577. 1578. 1579. 1580. 1581. 1582. 1583. 1584. 1585. 1586. 1587. 1588. 1589. 1590. 1591. 1592. 1593. 1594. 1595. 1596. 1597. 1598. 1599. 1600. 1601. 1602. 1603. 1604. 1605. 1606. 1607. 1608. 1609. 1610. 1611. 1612. 1613. 1614. 1615. 1616. 1617. 1618. 1619. 1620. 1621. 1622. 1623. 1624. 1625. 1626. 1627. 1628. 1629. 1630. 1631. 1632. 1633. 1634. 1635. 1636. 1637. 1638. 1639. 1640. 1641. 1642. 1643. 1644. 1645. 1646. 1647. 1648. 1649. 1650. 1651. 1652. 1653. 1654. 1655. 1656. 1657. 1658. 1659. 1660. 1661. 1662. 1663. 1664. 1665. 1666. 1667. 1668. 1669. 1670. 1671. 1672. 1673. 1674. 1675. 1676. 1677. 1678. 1679. 1680. 1681. 1682. 1683. 1684. 1685. 1686. 1687. 1688. 1689. 1690. 1691. 1692. 1693. 1694. 1695. 1696. 1697. 1698. 1699. 1700. 1701. 1702. 1703. 1704. 1705. 1706. 1707. 1708. 1709. 1710. 1711. 1712. 1713. 1714. 1715. 1716. 1717. 1718. 1719. 1720. 1721. 1722. 1723. 1724. 1725. 1726. 1727. 1728. 1729. 1730. 1731. 1732. 1733. 1734. 1735. 1736. 1737. 1738. 1739. 1740. 1741. 1742. 1743. 1744. 1745. 1746. 1747. 1748. 1749. 1750. 1751. 1752. 1753. 1754. 1755. 1756. 1757. 1758. 1759. 1760. 1761. 1762. 1763. 1764. 1765. 1766. 1767. 1768. 1769. 1770. 1771. 1772. 1773. 1774. 1775. 1776. 1777. 1778. 1779. 1780. 1781. 1782. 1783. 1784. 1785. 1786. 1787. 1788. 1789. 1790. 1791. 1792. 1793. 1794. 1795. 1796. 1797. 1798. 1799. 1800. 1801. 1802. 1803. 1804. 1805. 1806. 1807. 1808. 1809. 1810. 1811. 1812. 1813. 1814. 1815. 1816. 1817. 1818. 1819. 1820. 1821. 1822. 1823. 1824. 1825. 1826. 1827. 1828. 1829. 1830. 1831. 1832. 1833. 1834. 1835. 1836. 1837. 1838. 1839. 1840. 1841. 1842. 1843. 1844. 1845. 1846. 1847. 1848. 1849. 1850. 1851. 1852. 1853. 1854. 1855. 1856. 1857. 1858. 1859. 1860. 1861. 1862. 1863. 1864. 1865. 1866. 1867. 1868. 1869. 1870. 1871. 1872. 1873. 1874. 1875. 1876. 1877. 1878. 1879. 1880. 1881. 1882. 1883. 1884. 1885. 1886. 1887. 1888. 1889. 1890. 1891. 1892. 1893. 1894. 1895. 1896. 1897. 1898. 1899. 1900. 1901. 1902. 1903. 1904. 1905. 1906. 1907. 1908. 1909. 1910. 1911. 1912. 1913. 1914. 1915. 1916. 1917. 1918. 1919. 1920. 1921. 1922. 1923. 1924. 1925. 1926. 1927. 1928. 1929. 1930. 1931. 1932. 1933. 1934. 1935. 1936. 1937. 1938. 1939. 1940. 1941. 1942. 1943. 1944. 1945. 1946. 1947. 1948. 1949. 1950. 1951. 1952. 1953. 1954. 1955. 1956. 1957. 1958. 1959. 1960. 1961. 1962. 1963. 1964. 1965. 1966. 1967. 1968. 1969. 1970. 1971. 1972. 1973. 1974. 1975. 1976. 1977. 1978. 1979. 1980. 1981. 1982. 1983. 1984. 1985. 1986. 1987. 1988. 1989. 1990. 1991. 1992. 1993. 1994. 1995. 1996. 1997. 1998. 1999. 2000. 2001. 2002. 2003. 2004. 2005. 2006. 2007. 2008. 2009. 2010. 2011. 2012. 2013. 2014. 2015. 2016. 2017. 2018. 2019. 2020. 2021. 2022. 2023. 2024. 2025. 2026. 2027. 2028. 2029. 2030. 2031. 2032. 2033. 2034. 2035. 2036. 2037. 2038. 2039. 2040. 2041. 2

3

TOP OF REPORT # 3 HERE

TOP OF REPORT # 2 HERE



Hospital Reference Laboratory Services

| | | | | | | | |
|--------------|-----|------------|--|------------|--|----------------|--|
| PATIENT NAME | | DATE DRAWN | | DATE REC'D | | DATE OF REPORT | |
| SEX | AGE | ID NO | | ACCT NO | | SPEC NO | |
| HOSPITAL NO | | | | | | | |

TEST NAME

PORTAL VITRO
CONTINUED WORK
A.M.
A.M.

One Malcolm Avenue • Teterboro, New Jersey 07608
60 Commerce Way • Hackensack, New Jersey 07606

(201) 288-3600 • (212) 736-0640

PAUL A. KRIEGER M.D.

Joseph E O'Brien M.D.
JOSEPH E O'BRIEN M.D.

Press lightly to attach temporarily. Press firmly to attach securely and permanently.

3

TOP OF REPORT # 3 HERE



Hospital Reference Laboratory Services

| | | | | | |
|--------------|-----|--------------|------------|-------------|----------------|
| PATIENT NAME | | PATIENT ID | DATE DRAWN | DATE REC'D. | DATE OF REPORT |
| SEX | AGE | HOSPITAL NO. | | I.D. NO. | ACCT. NO. |
| HOSPITAL NO. | | SPEC. NO. | | | |

TEST NAME

TEST RESULT

TESTED BY

TESTED ON

One Malcolm Avenue • Teterboro, New Jersey 07608
60 Commerce Way • Hackensack, New Jersey 07606

(201) 288-3600 • (212) 736-0640

PAUL A. KRIEGER M.D.

JOSEPH E. O'BRIEN M.D.

press the report over one two collective areas.

Press lightly to attach temporarily. Press firmly to attach securely and permanently.

XX *Mossley Depressed*

ALLERGIES
1. *Mary Baker*
2. *5/4/75*

3.

SCHEDULED MEDICATIONS

PHARMACY CHARGES

| ORDER DATE | MEDICATION - DOSE - FREQ. - RT. OF ADMINISTRATION | HR. | 17 | 18 | 19 | 20 | 21 | 22 | 23 | QTY. | UNIT COST | DOLLAR AMT. |
|------------|---|-----|----|----|----|----|----|----|----|------|-----------|-------------|
| 6/14 | <i>Mossley 10mg TID</i> | 14 | | | | | | | | | | |
| 6/14 | <i>Mossley 10mg TID</i> | 20 | | | | | | | | | | |
| 6/14 | <i>Mossley 10mg TID</i> | 20 | | | | | | | | | | |
| 6/14 | <i>Mossley 10mg TID</i> | 22 | | | | | | | | | | |
| 6/14 | <i>Valium 10mg po HS</i> | 22 | | | | | | | | | | |
| 6/14 | <i>Valium 5mg po</i> | 08 | | | | | | | | | | |
| 6/20 | | 14 | | | | | | | | | | |
| 6/20 | | 18 | | | | | | | | | | |
| 6/14 | <i>Elavil 75mg po HS</i> | 22 | | | | | | | | | | |
| 6/19 | <i>Berocca Plus T daily</i> | 08 | | | | | | | | | | |

Diach
6/23

| SIGNATURE | TITLE | INIT | SIGNATURE | TITLE | INIT |
|--------------------|----------------|---------------|--------------------|----------------|---------------|
| <i>[Signature]</i> | <i>RN</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |
| <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> | <i>[Signature]</i> | <i>[Title]</i> | <i>[Init]</i> |

MAR TOTALS
NON UNIT DOSE TOTALS
PRN TOTALS
TOTAL PHARMACY CHARGES

507A
519A

8734725
SNOW, MARIE P.
3 ELL LANE NASHUA NH
F 59 4/1/24 HRP
06/13/83 HUGHES CHART COPY

PATIENT NAME:

CHRONOLOGICAL LIST OF PATIENT MEDICATIONS

1. Started medication: Transcribe Doctor's order, entering the order date, medication and route of administration. Include I.V. and Resp. Therapy medications. Hyperal medications will not be listed in full. Enter the word "Hyperalimentation" under "Medications" when applicable.
2. Stopped medications: In Stop column, enter date. Use yellow highlighter through the medication order.

| ORDER DATE | MEDICATION | STOPPED DATE |
|------------|----------------------------------|--------------|
| 6/17 | Teloneal 250 9:40 pm | |
| 6/17 | Teloneal 250 1:40 pm | |
| 6/17 | Teloneal 250 1:40 pm | |
| 6/17 | Teloneal 100 1:40 pm | |
| | MIM 35 11:11 pm | |
| | Valium 10 mg 10:45 | |
| | Valium 10 mg IM 9:40 pm agitated | |
| 6/16 | Valium 5 mg po t.i.d. | |
| 6/16 | Elavil 25 mg po q.s. | |
| 6/19 | Berocca Plus 1 daily | |

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE

THIS IS NOT A PHYSICIAN'S
ORDER SHEET

Revised: 10/82

Rev. 1/29/73

CLOTHING AND VALUABLES RECEIPT (Cont'd)

(Cont.)

V. Admission:

I assume all responsibility for personal articles left in my unit, and articles or valuables brought to me, or taken home while a patient in this hospital, which are not surrendered to the hospital for safekeeping.

Signature of Patient: X Marie Snow

Signature of Nurse: J. McDermott RN

If patient is unable to sign, state reason and have witness co-sign.

Reason: _____ Witness: _____

Date: _____ Signature of Nurse: _____

Clothes and/or valuables taken home at time of admission.

Received By: _____ Relationship: _____
(Signature)

Signature of Nurse: _____ Date: _____

VI Transfer:

Transfer # 1

Transferred from Floor _____ Room # _____
to Floor _____ Room # _____

By: _____

Received By: _____

Date: _____

☐ - DENTURES

☐ - VALUABLES TAG

☐ - GLASSES

Transfer # 2

Transferred from Floor _____ Room # _____
to Floor _____ Room # _____

By: _____

Received By: _____

Date: _____

☐ - DENTURES

☐ - VALUABLES TAG

☐ - GLASSES

VII Discharge:

I hereby certify that I have received all personal articles and valuables from St. Joseph's Hospital.

Signature of Patient: Marie P. Snow

Signature of Nurse: C. Hall RN

If patient is unable to sign, state reason and have witness co-sign.

Reason: _____ Signature of Nurse: _____

Date: _____

N. B. Hospital will not be responsible for articles left 30 days after discharge date.

To + friend my sister
that was the middle of last
week

I went to Hammar Hardware
and talk with a white
hair man

9-17-82
He told me that clodaine
was against the law to use
then I went back a few
days later and this same
men told me that the
acnts and all the tree were
gone were in the houses so
so he told me I had
problems that I would have
the house gone or something
like that, then the next day
I gess I panic and went
crazy like I call for help but
I could even see a place to
dial

That event I calld Elaine ^{deputy}
I was in shock like and
that why I called you, but
nobody called back, if I saw
the men I would recognize him,
and she never called back, I told
her I needed help

then I could remember
anything I could even find
anything in the house
My husband is an alcoholic ^{attends}
and I hide any liquor. But
the last 3 weeks he it has been
worse.

-no known allergies

NURSING HISTORY & ADMISSION DATA BASE

DATE 6/13/83 TIME 17¹⁵ ADM. DX. Grossly Depressed
TPR 36° 112-20 R/P 144/78 WT 107 1/2# PROPERTY DISPOSITION
CURRENT MEDICATIONS (check if taken today) (can't remember in + to home) Dentures partial bottom - (not here)
Plavix 75 - 1 tab - qd pm Glasses yes - here
Valium 5 mg PO - 1. BID ALLERGIES (yes but, photo, but doesn't remember for what)
Elavil Tetracycline 500mg 1. Tid - Elavil 1. Bid
DISPOSITION OF MEDS son brought in + took some
PREVIOUS HOSPITALIZATION(S) yes (doesn't remember when)

PRESENTING PICTURE - PHYSICAL STATUS

| | |
|---|---|
| SUBJECTIVE DATA: Chief Complaint and Precipitating Factors
<u>asked pt if she knew why</u>
<u>you're here - she replied</u>
<u>"because I can't remember"</u>
<u>gait unsteady - new stated son -</u>
<u>Mom also has "high anxiety attacks</u>
<u>& blackouts" x3 past few years</u> | OBJECTIVE DATA: General Appearance
<u>Color gel. - skin w/d. -</u>
OBSERVATIONS RELATING TO CHIEF COMPLAINT
<u>Thin - face flushed</u>
<u>Very vague</u>
OBSERVATIONS OF OTHER PERTINENT PHYSICAL FACTORS
<u>mumbles when verbalizing</u>
<u>wee py</u>
<u>poor eye contact</u> |
|---|---|

PRESENTING PICTURE - PSYCHOLOGICAL STATUS

| | |
|---|--|
| SUBJECTIVE DATA: Patient's and/or Significant Other's perception of his problems and most pressing concern
<u>Concerned about "husband</u>
<u>@ home - he's been drunk</u>
<u>for three days; he's been</u>
<u>an alcoholic for many years"</u>
<u>difficulty remembering</u>
<u>"my sister is coming 600 miles" - pt</u>
<u>keeps repeating the above</u> | OBJECTIVE DATA: Patient's Behavior
<u>oriented to person only - not place, time or</u>
<u>things. -</u>
<u>Trying to help + assessment</u>
<u>but + memory loss, unable</u>
<u>to help much. -</u>
<u>keeps repeating "I'm so dirty"</u> |
|---|--|

ADDRESSOGRAPH

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
NURSING ACTIVITIES

I. ACTIVITIES OF DAILY LIVING

- A. DIETARY HABITS neg
- B. EXERCISE
Usual Source _____
Limitations _____
Aids (crutches, braces, etc.) _____
- C. SLEEPING HABITS
Usual Pattern _____
If Interrupted, explain _____
- D. ELIMINATION
Bowel constipated
Bladder _____
- E. SMOKING HABITS yes - can't remember how much
- F. DRINKING HABITS
Alcohol? YES ☒ NO ☐
Frequency & Amount can't remember
- G. ADL WITH WHICH PT. NEEDS ASSISTANCE

II. PSYCH-SOCIAL DATA

- A. MARITAL STATUS yes
OCCUPATION _____
- B. LIVING SITUATION
Place of Residence Nashua
Lives with family
Responsibilities at home _____
- C. PROBLEMS POSED BY HOSPITALIZATION _____
- D. COPING MECHANISM _____

III. HEALTH DATA

- A. OTHER HEALTH PROBLEMS/LIMITATIONS
(including senses, skin, etc.)
tumor in abd removed when 13
thyroidectomy
polio in childhood = paralysis - RT
- B. PERTINENT FAMILY HISTORY
impaired hearing - mother
father deceased heart trouble
- C. HEALTH PRACTICES: BSE no
Routine Dental L PAP no
Routine Physical ✓
- D. INVOLVEMENT OF OTHER HEALTH AGENCIES _____

V. INITIAL NURSING ASSESSMENT FROM THIS DATA BASE (include strengths and goals) no

quiet withdrawn pt. pt. has no verbal communication
of herself. Goal is providing pt. with
what she can do. She is not able to
communicate. She has a plan for the
future.

L. K. Anderson, R.N.
Nurse's Signature

6/19/89
Date

PATIENT PROBLEM LIST

[illegible]

ADDRESSOGRAPH

PATIENT PROBLEM LIST

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE

NURSING ACTIVITIES

MEDICAL/SURGICAL FLOW SHEET

| NURSING OBSERVATION | | DATE | 6/13 | | | 6/14 | | | 6/15 | | | 6/16 | | | 6/17 | | |
|--|---|-------|------|---|------|------|------|------|-------|------|------|-------|------|------|-------|------|------|
| Initial only those that apply | | SHIFT | N | D | E | N | D | E | N | D | E | N | D | E | N | D | E |
| DETAILS in PPR; crutch walking, etc. | Bedrest | | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| | Ambulatory-Self | | | | | | | | | | | | | | | | |
| | Ambulated (#times/initial) | | | | X/Gm | | | | | | | X3/PO | | | | | |
| | Up in Chair (#times/initial) | | | | | | X/PO | | | | | | | | | | |
| | B.R.P. (#times/initial) | | | | X/Gm | | | | X2/PO | | | X2/PO | | | X2/PO | | |
| PPR for posey, etc. | Side Rails (up or down/initial) | | | | M/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm |
| | | | | | | | | | | | | | | | | | |
| PPR for special other | GOOD | | | | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO |
| | | | | | | | | | | | | | | | | | |
| PPR for other | GOOD | | | | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO | PO |
| | | | | | | | | | | | | | | | | | |
| DETAILS in PPR; e.g. reddened area, etc. | Bedbath | | | | | | | | | | | | | | | | |
| | Bath with Assistance (in PPR how much) | | | | | | | | ✓ | | | ✓ | | | | | ✓ |
| | Tub Bath | | | | | | ✓ | | | | | | | | | | |
| | Shower | | | | | | | | | | | | | | | | |
| | Back Care (#times/initial) | | | | | | | | | | | X1/PO | | | X1/PO | | |
| | Oral Care (#times/initial) | | | | | | | | | | | | | | | | |
| | Denture Care | | | | | | | | | | | | | | | | |
| | Shampoo | | | | | | | | | | | | | | | | |
| | Cath Care (#times/initial) | | | | | | | | | | | | | | | | |
| | Peri Care (#times/initial) | | | | | | | | | | | | | | | | |
| NATION | Shave | | | | | | | | | | | | | | | | |
| | Bowel Movement (#times/initial) describe in PPR | | | | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm |
| | Voided | | | | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm | X/Gm |
| PHYSICIAN'S VISITS (document in PPR) | | | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ |

Use Patient Progress Record (PPR) for explanation as necessary; identify use of PPR with an asterisk (*) and initials.

ADDRESSOGRAPH

MEDICAL/SURGICAL FLOW SHEET

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
NURSING ACTIVITIES

| DATE | 6/13 | | | 6/14 | | | 6/15 | | | 6/16 | | | 6/17 | | |
|----------------------|------|---|---|------|----|---|------|----|---|------|----|----|------|---|---|
| THERAPEUTIC MEASURES | N | D | E | N | D | E | N | D | E | N | D | E | N | D | E |
| V10
A | | | | ✓ | ✓ | | ✓ | ✓ | | ✓ | ✓ | ✓ | ✓ | | |
| INITIALS | | | | PA | PP | | MF | PP | | MF | PP | IS | MF | | ✓ |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |

| DATE | INITIALS | NAME & STATUS | DATE | INITIALS | NAME & STATUS | DATE | INITIALS | NAME & STATUS |
|------|----------|-----------------|------|----------|------------------|------|----------|---------------|
| 13 | GM | Phyllis McGuade | 6/16 | MO | M. Green RN | | | |
| 14 | PH | Phyllis McGuade | 6/17 | JS | Joan Sugawski | | | |
| 15 | MF | M. Green | 6/17 | JS | Joan Sugawski RN | | | |
| 15 | PP | Phyllis McGuade | | | | | | |
| 16 | MF | M. Green | | | | | | |
| 16 | B | Karen Sugawski | | | | | | |

MEDICAL/SURGICAL FLOW SHEET

| NURSING OBSERVATION
Initial only those
that apply | | DATE | 18 | 19 | 20 | 21 | 22 |
|---|---|------|-------|---------|-------|-------|-------|
| SHIFT | | | N D E | N D E | N D E | N D E | N D E |
| ACTIVITY
details in PPR;
crutch walking,
etc. | Bedrest | | ✓ | ✓ ✓ ✓ ✓ | ✓ ✓ | ✓ | ✓ ✓ |
| | Ambulatory-Self | | | | | AS | KC ✓ |
| | Ambulated (#times/initial) | | | ✓ | ✓ | ✓ | ✓ |
| | Up in Chair (#times/initial) | | ✓ | ✓ | ✓ | ✓ | ✓ |
| | B.R.P. (#times/initial) | | ✓ | ✓ | ✓ | ✓ | ✓ |
| SAFETY
PPR for
posey,
etc. | Side-Rails (up or down/
initial) | | ✓ | ✓ | ✓ | ✓ | ✓ |
| | | | | | | | |
| DIET
PPR for
special
other | GOOD | | gms | gms | gms | gms | gms |
| | | | | | | | |
| SLEEP
PPR for
other | GOOD | | 3/8 | 8/8 | 6/8 | 8/8 | 8/8 |
| | | | | | | | |
| PERSONAL HYGIENE
details in PPR; e.g. reddened
area, etc. | Bedbath | | | ✓ | ✓ | | |
| | Bath with Assistance
(in PPR how much) | | | | | | |
| | Tub Bath | | | | | | |
| | Shower | | | | | | |
| | Back Care (#times/initial) | | ✓ | ✓ | ✓ | ✓ | ✓ |
| | Oral Care (#times/initial) | | ✓ | ✓ | ✓ | ✓ | ✓ |
| | Denture Care | | | | | | |
| | Shampoo | | | | | | |
| | Cath Care (#times/initial) | | | | | | |
| | Peri Care (#times/initial) | | | | | | |
| ELIMINATION | Bowel Movement (#times/in-
ital) describe in PPR | | ✓ | ✓ | ✓ | ✓ | ✓ |
| | Voided | | ✓ | ✓ | ✓ | ✓ | ✓ |
| PHYSICIAN'S VISITS (document in PPR) | | | | | | | |

Use Patient Progress Record (PPR) for explanation as necessary; identify use of PPR with an asterisk (*) and initials.

MEDICAL/SURGICAL FLOW SHEET

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
NURSING ACTIVITIES

| DATE | 18 | | | 19 | | | 20 | | | 21 | | | 22 | | |
|----------------------|---------------------------|----|----|---------------------------|----|-----------|---------------------------|---|---|---------------------------|----|---|---------------------------|---|----|
| THERAPEUTIC MEASURES | SHIFT AND TIMES PERFORMED | | | SHIFT AND TIMES PERFORMED | | | SHIFT AND TIMES PERFORMED | | | SHIFT AND TIMES PERFORMED | | | SHIFT AND TIMES PERFORMED | | |
| | N | D | E | N | D | E | N | D | E | N | D | E | N | D | E |
| ✓ 81° | ✓ | | | ✓ | ✓ | | ✓ | | | ✓ | ✓ | | ✓ | | ✓ |
| INITIALS | BT | | | BT | DE | | MT | | | BT | BT | | BT | | BT |
| I.V. | ✓ | ✓ | ✓ | ✓ | ✓ | RET
OK | NO | | | D.C. | | | | | |
| INITIALS | BT | JS | EC | BT | DE | | MT | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |
| INITIALS | | | | | | | | | | | | | | | |

| INITIALS | NAME & STATUS | DATE | INITIALS | NAME & STATUS | DATE | INITIALS | NAME & STATUS |
|----------|----------------|------|----------|---------------|------|----------|-----------------|
| BT | Wynne Rn | 6/19 | EC | E. Conner Rn | 6/20 | BT | Sue McQuinn |
| JS | Joan Sugar Rn | 6/20 | MT | M. Green | 6/21 | BT | E. Haynaka |
| EC | E. Conner Rn | 6/20 | JS | Joan Sugar Rn | 6/22 | BT | Rene Swenson Rn |
| BT | E. Haynaka | 6/21 | BT | E. Haynaka | | | |
| DE | D. Eldredge Rn | 6/21 | BT | Emily Frank | | | |
| GW | Wynne Rn | 6/21 | | | | | |

MEDICAL/SURGICAL FLOW SHEET

| NURSING OBSERVATION | | DATE | 23 | 24 | 25 | 26 | 27 |
|--|---|-------|------|----|----|----|----|
| Initial only those that apply | | SHIFT | D | N | D | N | D |
| ACTIVITY
details in PPR; crutch walking, etc. | Bedrest | | ✓ | | | | |
| | Ambulatory-Self | | | | | | |
| | Ambulated (#times/initial) | | / | / | / | / | / |
| | Up in Chair (#times/initial) | | / | / | / | / | / |
| | B.R.P. (#times/initial) | | ✓ | / | / | / | / |
| SAFETY
PPR for PPR for posey, etc. | Side-Rails (up or down/initial) | | 11/2 | / | / | / | / |
| | | | | | | | |
| DIET
PPR for special other | GOOD | | | | | | |
| | | | | | | | |
| SLEEP
PPR for other | GOOD | | 8/8 | | | | |
| | | | | | | | |
| PERSONAL HYGIENE
details in PPR; e.g. reddened area, etc. | Bedbath | | | | | | |
| | Bath with Assistance (in PPR how much) | | | | | | |
| | Tub Bath | | | | | | |
| | Shower | | | | | | |
| | Back Care (#times/initial) | | / | / | / | / | / |
| | Oral Care (#times/initial) | | / | / | / | / | / |
| | Denture Care | | | | | | |
| | Shampoo | | | | | | |
| | Cath Care (#times/initial) | | / | / | / | / | / |
| | Peri Care (#times/initial) | | / | / | / | / | / |
| BOWEL
NATION | Bowel Movement (#times/initial) describe in PPR | | / | / | / | / | / |
| | Voided | | ✓ | / | / | / | / |

PHYSICIAN'S VISITS (document in PPR)

Use Patient Progress Record (PPR) for explanation as necessary; identify use of PPR with an asterisk (*) and initials.

ADDRESSOGRAPH

MEDICAL/SURGICAL FLOW SHEET

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
NURSING ACTIVITIES

[illegible]

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE

PATIENT DISCHARGE INSTRUCTIONS

| MEDICATION(S) | TIMES TO BE TAKEN | SPECIAL INSTRUCTIONS FOR MEDICATION(S) |
|---------------|---------------------|--|
| Valium 5mg | 1 three times daily | |
| Clavil 25mg | 1 at bedtime | |
| | | |
| | | |
| | | |

PHYSICAL THERAPY

n/a

RESPIRATORY THERAPY

n/a

SOCIAL WORK SERVICE

n/a

DIETETICS SERVICE

Discharge Diet
Ordered by Physician

Reg.

ACTIVITIES

SPECIAL INSTRUCTIONS

Get out a socialize more.

FOLLOW-UP

Next Week - Call for appointment

I have received these instructions and understand them.

ADDRESSOGRAPH

Maria P. Snow

Signature of Pt. and/or S.O./Relationship

Call NW

6/23/83
Date

Signature of Nurse

TIME

PATIENT PROGRESS RECORD

3/83 17⁵-23²² - 36⁷-112-20 - 144/78 - 107 1/2²² (our scales) - It was admitted to room 534 B via w/c - transferred to room 511 B to room 507 because of smoking + roommates. No known allergies. - (color good) - Skin w/d - Thin - face flushed. - Very vague. - Poor eye contact. - Weepy - Mumbles when verbalizing. Oriented to knowing certain people only - not place, time or things - It trying to help a assessment, but memory loss, unable to help much. - It keeps repeating "I'm dirty". Asked if she knew "who you are here". She replied "because I can't remember". It is concerned about "husband @ home, his inebriated for three days; he's been an alcoholic for many years". "My sister is coming 600-miles" (muffled & low). - It keeps repeating the above, especially "I'm dirty". Difficultly remembering - now states "this is all new after past 10 days". - "My husband gets up to drink @ 5:30 AM, I pick him up afraid of him". - It she replied, "he's trying to drive me to insanity". - Don verbalize in 12¹⁵ - It started verbalizing around 19⁰⁰ slowly. - speech vague. - Poor eye contact. - Urine spec obtained for routine + one for drug screen + sent to lab. - Hair shampooed for EEG analysis; Dr. Hughes 15. - It talked to sister briefly; she got the same response as me did. - "I'm ashamed of my son & his beard". - Many flighty ideas, & broken thoughts. - 23²⁰

PATIENT PROGRESS RECORD

PHOTOGRAPH

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE

NURSING ACTIVITIES

Admitted: 4/81
Discharged: 6/81

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
DEPARTMENT OF NURSING

| DATE | TIME | PATIENT PROGRESS RECORD |
|------|-----------|---|
| 4-83 | 0001-0700 | Q. c/o headache. Tylenol given a relief affect. Flat. Has pronounced speech. Observed lip to be a assist. States she is "very dirty" while washing hands. A. Voluntary most of night. Siderails up upon request of patient. Allowing G-N |
| 4/83 | 0730-1500 | Very quiet. Gone for chest X-ray. Satisfied with lab. battery. Apparent nervous. Told her to relax. Don't forget. No c/o pain. No hearing. Children & older people crying out. Dr. Hughes visited. He has some more of same. I stated "she has not been too happy for 3/19 in a few days. Apparent more relaxed. Apparent |
| | 1430 | Color pale. |
| | 1445 | Color pale. |
| | 1523 | Had great difficulty getting thoughts communicated. would display agitation. Hand arm tremor. Speech very slow - one word at a time. Then would lose thought. Timid. Crying but considerably calmer in later PM. Unstable and erratic. Took Tripple later. Apparent |
| 4/83 | 0551 | Thought process very slow. Siderails up. Flight of ideas. Hearing people crying. Afraid of water and fire. Will be killed. Stating she would kill herself. Also says she has a husband. Recently past year. Husband has been turned in. Hands very pale. Put in hall. Very weak. Can't get away. Allowing G-N |
| 4/83 | 0100 | Dr. Hughes notified of pt's hallucinations & delusions. Regarding need for closer observation. Phlebotomy state. pt secure in that coma present. Allowing G-N |
| 4/83 | 0730-1500 | 130/54-72. Temp 36.4. Color pale. Experiencing auditory hallucinations. States "days are after" |

| DATE. | TIME. | PATIENT PROGRESS RECORD |
|---------|-----------|--|
| 1/15/83 | | her & will eat her." Dr. Hughes visited. Eating poorly. Visitors @ bedside, & Gene FEG & family members. Returned from FEG @ 1430. Appears tense & apprehensive. Broom |
| 1/15/83 | 2330 | Increasing agitation - Verbalized sexual hallucinations of seeing people & food - expressed fear of them eating her. Family assurances had no effect. Tried to get OB & nurse away - family present - holding onto her. Shaking all over - eyes full of fear. Dr. Hughes notified. Trans to 525 pm Dr. Hughes @ 2030 - became more calm & transfer. Ato good support & much fear encouragement. Calling out husband's name for help. Son & sister here all PM. Dr. Hughes @ 2500. Much calmer. Delirium @ 2300 pm. At 2300 sexual & auditory hallucinations noted very agitated out of room wandering in hall brought back to room with assistance passed. 0020 out of period hand tremors noted. talking just french. valium 10mg given pm for agitation. ^{at 0030} calling out loudly flight of ideas. one up to BK. voiding 9:5 |
| 1/16/83 | 0001 | Slept in short naps. calling out thru night. confused & disoriented. M. Keenan |
| 1/16/83 | 0730-1500 | 1300 96. T. 96. 36. #1 - nervous & apprehensive. Up to bathroom & can't to void. Patient exhibits flight of ideas - speaks of "being born again - got by dogs". Also stated that "he feels like he's poisoning". Broom removed during day time. Color pale. Anorectic. |

PATIENT PROGRESS RECORD

ADDRESSOGRAPH

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE

NURSING ACTIVITIES

Developed: 4/81
Revised: 6/81

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
DEPARTMENT OF NURSING

| DATE | TIME | PATIENT PROGRESS RECORD |
|---------|-------------|--|
| 11/6/83 | 1445 | poor - Sister @ bedside. Son @ bedside. Apparent more color. This afternoon: (Room) |
| 11/6/83 | 1530 → 2300 | Family members remained in pt. until 2030. Verbalizing "visual & auditory hallucinations" "There are rats in the cellar..." "Who will take care of the baby?" "Frightened to leave bed & go to BR but will not" "Much reassurance. Became agitated when family left but calmed down in 20'. Dr. Hughes in this pm. K. Swenson. Slept in long naps. no tremors noted. IV patient & infusing HNK quiet thru night. M. Heenan |
| 11/6/83 | 0700 | Continues to have auditory & visual hallucinations - hears her son crying sees dogs and hears them - "The big dogs are coming after me" Became very nappy in AM - Valium 10 mg PO @ 1030 medication helped her - Sister and son in to visit, conversing fairly well and smiling with family - up to BR |
| 11/6/83 | 1500 | no patient. Indigam |
| 11/6/83 | 15-2300 | pt's affect seems lighter. Smiling. ate all of dinner & did not express concern over her physical appearance. AM to BR x III voided 600 cc clear yellow urine. IV patient infusing LK @ 2 amps Berocca @ 100 cc/o total hrs 750 po fld intake 270. Pt did not experience any hallucinations re: dogs vs family most of shift. However @ 4s pt thought son was in hospital 2° pt stated she heard him wheezing. Stated son is an asthmatic. Reality reinforced that son + friend are gone + visiting hours are over. Pt was not sleepy! & agitation this shift. Excellent noc. (Kusulis RN) |
| 11/6/83 | 0001-0600 | awake - talking fuzzy about son - becoming more restless & agitated - Dr. Hughes called - returned call @ 0325 - medicated Valium 30mg @ 0330 - slept restlessly till AM - (Kusulis RN) |

TIME

PATIENT PROGRESS RECORD

18-83 0700 #1 thinking is much clearer today. no visual hallucinations - some auditory hallucinations - "I hear my sister over there" pointing to over side of hall. - assured that her sister was not there, but would be in later - Sister in all afternoon - pt enjoying her company. Husband in room to visit - pt laughing, joking - eating most of food on tray - I.V. patient.

1500 J. S. G. L. L.

8/83 1500 #1 lucid this evening. ambulated in room & 2 - also well. no complaints - good evening - E. Conklin M.D.

2300

7-83 0800 Slept well - st. unsteady when walking to B.D. - I.V. patient uneventful see J. S. G. L. L.

14-83 0800 #1 Alert and Oriented, no visual or auditory hallucinations, Verbalizing freely & appropriately, States, "My memory is much better today." 1030 I.V. of 1000 ccingers lactate & 2 amms Berocca. C. De from @ arm, Husband visited x2, Playfied and talked to husband. Cooperative appropriate behavior for entire shift. Sister visiting. D. Eldridge SRN

19/83 1500 Sister visiting all shift - #1 more apprehensive this evening - states she is feeling more depressed today - appears to be affected by today's room change - anxious about police officer in corridor - states she always feels police are after her - general appearance more anxious - E. Conklin M.D.

2300

20/83 0800 Slept in short naps unsteady gait walking 95. M. H. M. H.

PATIENT PROGRESS RECORD

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE

NURSING ACTIVITIES

Developed: 4/81
Revised: 6/81

ST. JOSEPH HOSPITAL
NASHUA, NEW HAMPSHIRE
DEPARTMENT OF NURSING

| DATE | TIME | PATIENT PROGRESS RECORD |
|-------|-----------------------------|--|
| 20-83 | 0700 | #1 some gasoria noted - no irritations
sister in to visit - walking in
halls. - did well & over ADL's
put on make up - thinking is
much improved - visit with
her husband - feels she is making
progress |
| 20/83 | 1500
16-23 ⁴⁰ | 37-116-18 - Rob #1: I (lost) & irritated. - No
inappropriate or bizarre behavior noted. Dr. Hughes vs. - Husband & sister vs. frequently
during evening - John McQuade |
| 1/83 | 0800 - 2400 | Slept well - uneventful night |
| 1/83 | 0730 | #1 Independent ADL's - Ambulation in room &
up Corridor - good steady - Verbalized about life
situation stated "I feel better about things
I'm not as weak as I was" good eye
contact, smiling. Volunteered to assist in
bedmaking - no complaint. Applied make up
today |
| 1/83 | 1530 → 2330 | #1 Independent ADL's. Sub in hall & sister. Playing
cards in room. Spirits cheerful. "I feel better."
Dr. Hughes in to SS. K. Swenson |
| 1/83 | 0800 - 2400 | Slept well - uneventful night |
| 1/83 | 07-1530 | #1 Independent ADL's. Make up applied, walking
about in room, son & husband in to see pt
before husband's discharge. Section in, amb
in hall. Speech slow, words clear,
thought processes improving playing cards, eye
contact good. No cl. words. J. Cravalier |
| 2/83 | 1530 → 2300 | #1 Up & about in halls. Verbalizing about husband's discharge
& about taking it one day at a time for herself.
Eye contact gd. speech remains slow but clear & gd
Thought process. Smiling & joking w/ staff. 2:00 Dr. Hughes
in. Participating daily in AM |

