10 McLaren THUMB REGION

McLaren Thumb Region
1100 S. Van Dyke
Bad Axe, MI 48413 • 989-269-9521

EMERGENCY PHYSICIAN RECORD
♦ ☐Hip Injury / Pain ♦

DATE:_____ TIME SEEN:_____ on arrival RM:____ *EMS Arrival*
HISTORIAN: patient spouse paramedics_____
__HX / __EXAM LIMITED BY:_____
☐ unable to obtain

HPI

chief complaint: injury / pain to: R / L *hip* *pelvis*

onset / duration:
just prior to arrival
today yesterday_____
_____ min / hrs / days ago

where occurred:
home school park
street nursing home

severity of pain:
mild moderate severe
(1/10)_____

*worse / persistent since*_____
*pain intermittent / lasting*_____

context: fall (tripped / slipped / lost balance) fainted

associated symptoms prior to fall: none
dizziness / light-headedness_____ vomiting / diarrhea_____
rapid heart rate_____ seizure_____
chest pain_____ fever / chills_____
headache_____ sweating_____

other injuries: none head face neck back chest
abdomen extremities_____
lost consciousness: *yes* *no* *unknown* *duration:* _____*sec / min*
remembers: event *coming to hospital*_____

subsequent symptoms:
sensory loss *(R / L)*_____ motor loss *(R / L)*_____
numbness *(R / L)*_____ weakness *(R / L)*_____
bowel / bladder problem_____

Similar symptoms previously_____
Recently seen / treated by doctor / hospitalized_____

ROS

CONST
recent illness_____
RESP
shortness of breath_____
cough_____
MS
neck pain_____
GI
abdominal pain_____
black stools_____
GU
problems urinating_____
*LNMP*_____ *preg* *post- menop*

EYES
problems with vision_____
ENT
sore throat_____
LYMPH
ankle swelling *(R / L)*_____
swollen glands
SKIN
rash_____
NEURO
confusion_____
weakness *(R / L)*_____
PSYCH
anxiety / depression _____

☐ except as marked positive, all systems above reviewed and found negative

▪ *CONST / CVS / GI / NEURO / MS components also addressed in HPI*

PAST HX __no chronic diseases

cardiac disease *Afib* *CAD* *CHF* *MI*
diabetes *Type I* *Type 2*_____
*diet / oral / insulin*_____
hypertension_____
hip fracture *(R / L)*_____
osteoporosis_____
DVT / PE risk factors: *cast* *cancer*
recent surgery *leg swelling* *bedridden*
paralysis *prior DVT/PE*

asthma / COPD_____
CVA / TIA *deficit* *(R / L)*_____
dementia_____
hepatitis / HIV_____

__old records reviewed / summary:_____

Surgeries / Procedures __none
appendectomy_____
cardiac bypass / stent_____
cholecystectomy_____

hip surgery *(R / L)*_____
fracture repair *replacement*
pacemaker_____
tonsillectomy_____

Tetanus immun. *UTD / given in ED*_____

Medications __none see nurses note
aspirin coumadin clopidogrel NSAID
acetaminophen_____

Allergies __NKDA
see nurses note

SOCIAL HX
smoker___ppd / never / past / quit: _____ago
tobacco: *use / dependence* nicotine: *use / dependence*
drugs_____ alcohol *(recent / heavy / occasional)* *screening*_____

FAMILY HX __negative_____

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Circle (positives), backslash negatives, check √ normals

☐ Nursing Assessment Reviewed ☐ Vitals Reviewed _____
V/S BP_____ HR_____ RR_____ Temp_____

PHYSICAL EXAM

General Appearance

__no acute distress
__alert
__c-collar / backboard *(PTA / in ED)*
__mild / moderate / severe distress
__anxious

EXTREMITIES

__non-tender
__nml ROM
__no pedal edema
__no obvious injury / deformity to knee
__nml tendon exam
__shortening of leg *(R / L)*
__external rotation of leg *(R / L)*
__hip pain on leg movement *(R / L)*
__hip / knee tenderness *(R / L)*
__pedal edema / ecchymosis *(R / L)*
__erythema / soft tissue injury *(R / L)*
__positive Homan's sign *(R / L)*

EENT

__eyes nml inspection
__nml ENT inspection
__pharynx nml
__EOM palsy *(R / L)* / anisocoria
__tenderness / swelling
__pharyngeal erythema

NECK

__nml inspection
__non-tender
__thyromegaly
__vertebral point-tenderness

RESPIRATORY

__chest non-tender
__no resp. distress
__breath sounds nml
__tenderness / ecchymosis
__crepitus / subcutaneous emphysema
__wheezes / rales / rhonchi *(R / L)*

CVS

__reg. rate & rhythm
__nml heart sounds
__no pulse deficit
__irregularly irregular rhythm
__extrasystoles *(occasional / frequent)*
__PMI displaced laterally
__JVD present
__murmur *grade ___ /6 sys / dias*
__decreased pulse(s)
R / L fem___ dors ped___ post. tib

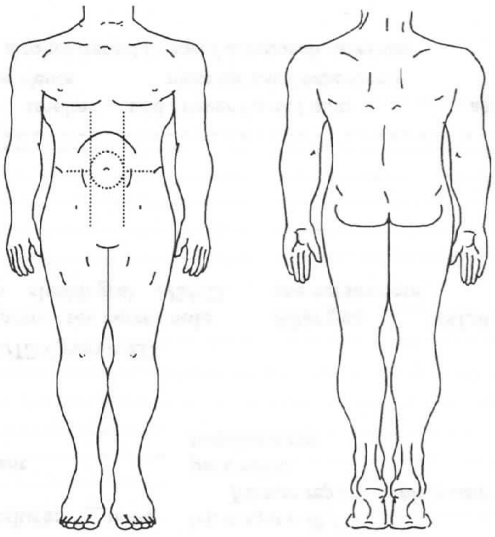
ABDOMEN / GU

__non-tender
__pelvis stable
__see diagram
__guarding / rebound / tenderness :
generalized RUQ LUQ RLQ LLQ
__hepatomegaly / splenomegaly / mass
__catheter present

BACK

__non-tender
__see diagram
__vertebral point tenderness
__CVA tenderness *(R / L)*

A=Abrasion
B=Burn
C=Contusion
E=Ecchymosis
L=Laceration
M=Muscle Spasm
PtT=Point Tenderness
R=Rebound
S=Swelling
T=Tenderness
Ø=without
m=mild
mod=moderate
sv=severe



SKIN

__color nml, no rash
__warm, dry
__intact
__cyanosis / diaphoresis / pallor
__skin rash
__ecchymosis
__pressure ulcer: *location*
depth / stage: 1 2 3 4

RECTAL

__non-tender
__heme neg stool
__tenderness
__black / bloody / heme pos. stool *trace*

NEURO / PSYCH

__oriented x4
__neuro grossly intact
__mood / affect nml
__disoriented to: *person place time situation*
__weakness / sensory loss
__depressed mood / flat affect

PROGRESS

*Time*_____ unchanged improved re-examined

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XRAYS / CT

Xrays done: *R / L hip femur pelvis chest abdomen*

Interpretation: ☐ By me ☐ Viewed by me ☐ Discsd w/ radiologist

__nml / NAD __no fracture __nml alignment _____

abnml: fracture / dislocation (see below) _____

CT done: *R / L hip femur pelvis abdomen head*

Interpretation: ☐ By me ☐ Viewed by me ☐ Discsd w/ radiologist

__nml / NAD _____

abnml: _____

Fracture:

Femur: R / L head: *articular surface* neck: *subcapital transcervical base* intertrochanteric greater troch lesser troch subtroch shaft: *transverse oblique spiral segmental comminuted* distal: supracondylar: *w/ intercondylar* condyle: *medial lateral* transcondylar n / d _____

Pelvis: R / L pubic: *superior ramus inferior ramus* R / L ischium: avulsion ramus tuberosity : *displaced* R / L acetabulum: ant wall medial post dome : *displaced* R / L illium: wing ant sup spine ant inf spine : avulsion comminuted linear : *displaced* _____

Sacrum: transverse: displaced: *ant post* upper-comminuted vertical fx thru: ala foramen spinal canal : displaced: *mild sv* _____

Dislocation:

R / L **Hip**: central posterior anterior: *obturator pubic iliac* _____

(n=nondisplaced d=displaced)

LABS

CBC	**Chemistries**	**UA**	ETOH_____
normal except	*normal except*	*normal except*	TOX_____
WBC_____	Na_____	_____	_____
Hgb_____	K_____	_____	PT/PTT_____
Hct_____	CO2_____	HCG	INR_____
Platelets_____	Gluc_____	serum / urine	_____
_____	BUN_____	POS NEG	_____
_____	Creat_____	_____	_____

EKG

RHYTHM STRIP Rate:_____ Rhythm: *NSR* _____

EKG ☐ Interp. by me ☐ Viewed by me ☐ Discsd w/ cardiologist

__nml / NAD __nml intervals __nml axis __nml QRS __nml ST/T

Rate:_____ Rhythm: *NSR sinus tach A-fib* _____

_____

not / *changed from:*_____ *repeat EKG: unchanged /* _____

PROGRESS

*Time*_____ unchanged improved re-examined

_____

_____

_____

_____

_____

♦ **A-Fib / A-Flutter** - ≥ *18 y / oral anticoagulant* _____

♦ **BP Screen** - ≥ *18 y / screening / follow-up documented* _____

__measure exclusions: *not eligible / refused / not indicated / contraindicated*

__referred to / discussed with Dr._____ Time:_____

will see patient in: ED / hospital / office in _____ *days*

Counseled patient / family regarding: *lab / rad. results diagnosis need for follow-up*

Additional history from: *family caretaker paramedics*

__Rx given_____

_____

__Tobacco cessation: *discussed: plan / trigger / challenges / gave Rx*_____

__Alcohol cessation: *discussed: plan / risk / coping measures*_____

CRIT CARE TIME *(excluding separately billable procedures)* _____ *min*

Initial visit unless marked:

CLINICAL IMPRESSION ☐ subsequent ☐ sequelae

Skin *(**R / L ; FB ; specify anatomy)*

Laceration: _____

_____

Abrasion: _____

_____

Contusion: _____

_____

Strain

R / L Hip

R / L Hip flexor / groin / gluteus

_____

_____

Sprain

R / L hip: *iliofemoral lig. ischiocapsular lig.*

_____

Ortho *(See Xrays / CT)*

Fracture / Dislocation : *closed / open*

_____

_____

CV

♦ Arrhythmia: *A-fib, paroxysmal PSVT V-tach sick sinus sinus brady 2nd HB 3rd HB*

Acute MI: STEMI NSTEMI *anterior inferior lateral post*

Pulm embolism *w/ cor pulmonale*

Neuro

TIA: involving: *carotid vertebro-basilar*

Epilepsy: *focal complex partial generalized idiopathic poorly controlled*

Seizure

Other

Syncope

_____

_____

_____

_____

_____

_____

_____

_____

DISPOSITION DECISION TIME-_____ ☐ home ☐ transfer_____

☐ admit __**POA** *pressure ulcer / UTI (foley)* _____

CONDITION- ☐ unchanged ☐ improved ☐ stable_____

Care transferred to Dr_____ Time:_____

_____ *MD / DO*

☐ Template Complete ☐ See Addendum (Dictated / Template #_____)

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PROCEDURES

Wound Description / Repair: *Time:*_____
length_____**cm** **location**_____
linear stellate irregular flap avulsuion into: subcut / muscle
clean contaminated *moderately / heavily* _____
distal NVT: neuro / vasc intact no tendon injury
anesthesia: local topical _____ lidocaine / bupivacaine epi / bicarb
digital block _____
prep: Betadine / other_____
irrigated with saline debrided: *mod. /extensive*
wound explored: wound margins revised
to base / in bloodless field multiple flaps aligned
foreign body identified: _____
*wood glass metal other*_____ _____
foreign material removed _____
repair: *superficial deep complicated* _____
Wound closed with: adhesive / Dermabond / steri-strips
no closure required
SKIN- #_____ _____-0 nylon / prolene / staples / silk / ethilon / dexon_____
SUBCUT- #_____ _____-0 vicryl / chromic_____
OTHER- #_____ _____-0 _____

For documentation purposes only:

PECARN RULE: ≥2y to 18y
__GCS<15 __Signs of basilar skull fracture
__Altered mental status
(if yes to any above recommend CT)
__Any LOC __Severe mechanism of injury
__History of vomiting __Severe headaches
(if yes to any above-OBS. Vs CT based on other clinical factors including:)
- Physician experience
- Multiple vs. isolated findings
- Worsening symptoms or signs after ED obs
- Parental preference

Based on PECARN validated prediction rules

PROGRESS - Continued

*Time*_____ unchanged improved re-examined

_____ *MD / DO*

☐ Template Complete ☐See Addendum (Dictated / Template #)

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