

## TRAUMA SURGERY [H&P]

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### ASSESSMENT:

**Primary Diagnosis | Mechanism:**

[].

**Injuries:**

[].

**Acute & Active Problems:**

[] [n/a].

**Resolved Problems:**

[] n/a.

**Chronic Medical Problems:** [none]

**DVT Prophylaxis:** SCDs. [Lovenox]

**GI Prophylaxis:** [H2B] [Diet]

**Lines | Foley | ETT** (placement dates): [n/a]

**Consultants:** [n/a]

**Procedures:** [n/a]

### PLAN:

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[] **Hypercoagulable state due to trauma.** Risk mitigation for DVT includes SCDs[ and Lovenox].

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**Total critical care time:** [] **minutes.** This time does not include time spent on separately billable procedures. The patient had a high probability of clinically significant, life-threatening deterioration secondary to the following: []; the patient required my highest level of preparedness to intervene emergently and I personally spent this critical care time directly and personally managing the patient. This critical care time included obtaining a history; examining the patient; pulse oximetry; ordering and review of studies; arranging urgent treatment with development of a management plan; evaluation of patient's response to treatment; frequent reassessment; and, discussions with other providers.

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**The patient was seen in [ED] at the request of Dr. []. Called: []. Arrived: [].**

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**CHIEF COMPLAINT:** []

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**HPI:** []

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**RESUSCITATION COURSE:** [n/a]

**FAST:** [n/a]

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**PAST MEDICAL HISTORY:** [as above]

**PAST SURGICAL HISTORY:** [as above]

**FAMILY MEDICAL HISTORY:** [] Neg for MI, CVA, Cancer, DVTs

**SOCIAL HISTORY:** Tobacco: [none]. EtOH: [none]. []

**ALLERGIES:** [NKDA]

**MEDICATIONS:** [None]

**ROS:** Pertinent positives— [] —and negatives as above, otherwise negative for the respective fields for the following: Neuro, eyes, ENT, CV, resp, GI, musculoskeletal, GU, skin, psychiatric

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**PHYSICAL EXAM:**

**General:** • Well nourished, well developed. NAD • 4 point VS reviewed

**Eyes:** • PERRL. • Sclera anicteric, lids without lesion

**ENT:** • No lesions/lacerations to ears or nose • Hearing intact • Oral membranes moist. • Tympanic membranes clear B/L • No nasal-septal hematoma

**Neck:** • Supple, Trachea midline • No thyromegaly

**Respiratory:** • Respirations even and unlabored • CTA B/L • No crepitus, no tenderness

**CV:** • Regular rate, regular rhythm. No murmur • [B/L] Rad pulses +2, [B/L] DP pulses 2+ • No edema. No varicosities

**GI/Abd:** • +ABS • Soft, Not distended, No tenderness. • No umbilical mass. No inguinal masses

**GU:** • Normal external genitalia • Normal sphincter tone. [Normal prostate]

**Musculoskeletal:**

- *Digits:* Non-tender to palpation. No clubbing. No cyanosis. Capillary refill <2 secs
- *Joints, bone and muscle:*
- **Pelvis:** stable
- **Extremities:** • No observed deformities x [4]. Normal to palpation x [4]. • Normal ROM x [4]. • Normal joint stability x [4]. • [B/L] Bicep 5/5, [B/L] Triceps 5/5, [B/L] Plantarflex 5/5, [B/L] Dorsiflex 5/5
- **Cervical Spine:** non-tender to palpation. Full ROM with no pain, no neuro symptoms.
- **Lumbar and Thoracic Spine:** normal to palpation without deformities.

**Skin:** • No rashes or lesions. Abrasions: [none]. Lacerations: [none]. • No palpable masses

**Neurological:** • GCS [].

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**LABS:** Reviewed. []

**RADIOLOGY:** I have reviewed the images and reports personally. []