

**RC Health Services EMS Academy**  
**Hospital Patient Care Report Narrative**

<b>Student Name:</b> Johnny Gage	<b>Date:</b> 12/24/13	<b>Report Ref:</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:12.5%; text-align:center;">X</td> <td style="width:12.5%; text-align:center;">1</td> <td style="width:12.5%; text-align:center;">2</td> <td style="width:12.5%; text-align:center;">3</td> <td style="width:12.5%; text-align:center;">4</td> <td style="width:12.5%; text-align:center;">5</td> </tr> <tr> <td style="text-align:center;">6</td> <td style="text-align:center;">7</td> <td style="text-align:center;">8</td> <td style="text-align:center;">9</td> <td style="text-align:center;">10</td> <td></td> </tr> </table>	X	1	2	3	4	5	6	7	8	9	10	
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**Differential Diagnosis/Field Impression**

1. Acute MI \_\_\_\_\_
2. Angina \_\_\_\_\_
3. Anxiety \_\_\_\_\_

**Narrative/Documentation**

42y/o F in wheelchair arrived via Triage area @ 0815 c/o chest pain. Pt was evaluated by ER Nurse Ratchet and placed in ER Bed 3.

S: Pt states, my pain started approximately 3 hours ago while watching TV. Pt also says that nothing he does makes the pain better or worse. He also says that this has never happened to him before. Pt describes the pain as a sharp pain that radiates down his left arm and rates it as an 8/10 on the pain scale. Pt also c/o nausea and states he has had no issues using the restroom. Pt has no other complaints. Pt also denies being in any recent trauma and is compliant on his meds. He also says that the last time he saw his doctor was about a month ago for a regular check up and got a clean bill of health. Pt said his last meal was two tacos and a coke at lunch time. Pt says he smokes one pack/day and drinks occasionally. He also says that he has never had any problems taking ASA and nitro.

O: Pt appears to be in a lot of pain and is cooperative. Head to Toe Assessment and vital signs as noted.

A: General Impression 1) Acute AMI 2) Angina 3) Anxiety

P: O2 via NC at 2 lpm applied at 0821 by RCHS Student Gage. Pt tolerated O2 well and said later that he felt better post O2. A 12 Lead EKG at 0824 was performed by EKG Tech and was interpreted as an inferior wall AMI at a rate of 82 bpm by Dr. Brackett. Dr. Brackett immediately notified the cath lab to prepare for the patient. IV was established at 0825 by RN McCall. Pt was administered a 1L IV NS bolus @ 0826. ASA 324mg was administered PO by RN McCall at 0831. Nitro 0.4mg was administered SL by RN McCall. A full set of labs was drawn by Lab Tech Dracula @ 0834. Pt was administered 300mg Plavix PO @ 0836, 5mg Atenolol IV @ 0837, 30mg Lovenox SQ @ 0839, 100mg Lopressor PO @ 0840 by RN McCall. A chest x-ray was performed by X-Ray Tech Bones @ 0842.

E: Cath Lab team arrived at patient bedside @ 0844 and took patient to the coronary catheter lab for PCI Treatment. Pt stated he felt better post treatments and his condition has improved.

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**Briefly describe what you have learned from observing/treating this patient.**

I learned how to treat a patient having an acute AMI. I also learned the signs/symptoms of an AMI and how to successfully treat them.

**Patient Demographics**

O = Observed A= Attempted Procedure U = Unsuccessful P = Performed Procedure Successfully							
Medical	O	Delivery		Cardiac	O	EKG	O
Abdominal		Respiratory		Psych		Meds	O
CPR/Arrest		Diabetes		OB/GYN		Oxygen	P
Trauma		Syncopy/AMS		ET		Team Leader	
CVA/TIA		Allergy		IV	O	Other	

Student Signature: Johnny Gage, RCHS EMT Student

Instructor Signature: \_\_\_\_\_

