Pr No: 00900030633941

Reg No: 2013/205784/07

EAGLES 911
Real Help, Real Fast

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PRF NO: 9987

Pre/PostAuth No: 18-0530613-E-01	Date: 08/11/2018, 02:17:15

	Time	Odometer
Recieved	01:02	240387
Dispatched	01:02	240387
Arrival Scene	01:19	240392
Depart Scene	01:50	240392
At Facility	02:46	240466
Available	04:15	240537
With Patent		
Without Patient		

Patient Name	Nethengwe mpfariseni	Age	74
I.D No	4409175173086	Gender	Male
Physical Address	House no 3204 makwarela	P Code	0970
Postal Address	P O Box 866 sibasa	P Code	0970
Work Details	Pensioners	Work Tell	
Home Tell		Cell	0810161867
Medical Aid Name	Gems emerald value	M/Aid No	000452834
Principal Member	Nethengwe mpfariseni	MM I.D	4409175173086
Next of Kin	Nethengwe tondani	Tell	0725675965

Amb No: E4	Transport From: House no 3204 makwarela 0970	Transport To:Zoutspansberg private hospital	CPRV No:

Crew 1: Ntsonda V	HPCSA Reg: ECT 0009954	ICD 10: R56.8/R73.9
Crew 2: Mukondeleli F	HPCSA Reg: BAA 1058347	Diagnosis: Convulsions/hyperglycemia
Crew 3:	HPCSA Reg:	
Level of Care: ILS	Priority: P2	Call Type: Medical

Remark/Motivation: Response delayed due to fog &Patient delayed on scene due to accessing patient on a confine room

Clinical Notes

Present History: Patient reportedly to have episodes of convulsions by his wife
Primary Survey: No abnormalities detected
Secondary Survey: Patient ill looking and weak,no sensation of the left side,Patient unable to walk and with inappropriate words
Ample History: A-none M-hypertension on treatment P-2014 Feb admitted for stroke & convulsions P-2018supper E-convulsions

	Breath Rythm						Vitals							Neoro						
Time	Breath Rythm	Breath Sound	Air Entry	Trachea Position	02 1/min	SPO2	Level of Consci..	Resp. rate	Heart Rate	Rhythm	BP	Perfusion	Pain Score	Temperature	Pupil Size		Pupil Reaction		GCS(E:4 V:5 M:6)	Apgar	HGT (mmol/l)
															L	R	L	R			
01:30	Regular	Normal	Good	Central	R.air	96%	Semi-Conscious	21	121	Regular	122/65	Good	0	36.4	3	3	Brisk	Brisk	13		16.5
01:45	Regular	Normal	Good	Central	R.air	95%	Semi-Conscious	20	119	Regular	128/72	Good	0	-	3	3	Brisk	Brisk	13		-
02:20	Regular	Normal	Good	Central	R.air	99%	Semi-Conscious	20	110	Regular	127/62	Good	0	-	3	3	Brisk	Brisk	13		13.5
02:46	Regular	Normal	Good	Central	R.air	97%	Semi-Conscious	21	107	Regular	130/89	Good	0	36.3	3	3	Brisk	Brisk	13		10.5

Fluid Type	Volume	Site	Time Start	Time Stop	Signature
Normal saline	1100ml	Right hand	01:34	02:46	

Drug Name	Dosage	Time	Route	Qualification	Signature
hghgjhhgh					

Management of Patient: Patient assessed,iv line sited up,vital signs monitored and recorded until at the facility

Equipment Used	Alignment	Airway	Breathing	Circulation	Other
			- SP 02	- IV Access	

Treated by: Ntsonda Signature: Qualification: ECT	Handed over to: Bebeda Signature: Qualification: EN	**Patient refuses Treatment or Transport** Name: Signature: Date:	**WCA No**: **COC No**: Madzunye T

I the undersigned: Madzunye T I.D No 7509010776089 describe herein as the patient, princepal member or guarantor, acknowledge and accept liability for all costs involved for the services rendered by Eagles 911 Emergency Services, even though I am a member of aid.

Signature:

Date: 12/11/2018, 12:46:14