Pr No: 00900030633941

Reg No: 2013/205784/07

EAGLES 911
Real Help, Real Fast

P.O BOX 3844 Thohoyandou 0950
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C: 084 561 9900
C: 073 710 0702
F: 086 670 9246

PRF NO: 10082

Pre/PostAuth No:	Date: 13/12/2018, 22:26:50

	Time	Odometer
Recieved	17:07	247668
Dispatched	17:07	2477668
Arrival Scene	17:14	247670
Depart Scene	17:35	247670
At Facility	19:42	247846
Available	22:34	248024
With Patent		
Without Patient		

Patient Name	Mamphiswana Tshifhiwa	Age	38
I.D No	8111190407087	Gender	Female
Physical Address	Stand no 444 Manini	P Code	0993
Postal Address	P.O. box 208	P Code	0993
Work Details		Work Tell	
Home Tell		Cell	0727693677
Medical Aid Name	Polmed 2	M/Aid No	64005824605
Principal Member	Mamphaswana T	MM I.D	8111190407087
Next of Kin	Rasilalume MJ	Tell	0815106477

Amb No: E4 at	Transport From: Dr Makulana T, unit 4 ,Metropolitan Centre, Thohoyandou 0950	Transport To:Limpopo medi clinic	CPRV No:

Crew 1: Maamogo LR	HPCSA Reg: ECT 0009970	ICD 10:
Crew 2: Nethengwe M	HPCSA Reg: BAA 1552953	Diagnosis: Placenta Previa
Crew 3:	HPCSA Reg:	
Level of Care: ILS	Priority: P2	Call Type: Medical
Remark/Motivation:		

Clinical Notes

Present History: Patient P3G4 ,39 weeks of gestation complaining of lower abdominal pains,pv bleeding and swollen feet
Primary Survey: A-patent, B-spontaneously, C- all pulses present
Secondary Survey: 39 weeks of gestation, pv bleeding, pedal edema and general body weakness
Ample History: A- none, M- none, P- c/section×2, L- morning,

	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			
17:18	Regular	Normal	Good	Central	R/air	97%	Alert	20	122	Regular	110 /80	Fair	3	36.4	3	3	Brisk	Brisk	15/15	-	4.8
17:35	Regular	Normal	Good	Central	R/air	99%	Alert	18	118	Regular	107 /80	Fair	3	36.4	3	3	Brisk	Brisk	15/15	-	4.8
18:05	Regular	Normal	Good	Central	R/air	98%	Alert	20	120	Regular	117 /82	Fair	2	36.4	3	3	Brisk	Brisk	15/15	-	4.8
18:35	Regular	Normal	Good	Central	R/air	90%	Alert	16	112	Regular	122 /84	Good	2	36.4	3	3	Brisk	Brisk	15/15	-	4.8
19:05	Regular	Normal	Good	Central	R/air	97%	Alert	18	120	Regular	120 /75	Good	3	36.4	3	3	Brisk	Brisk	15/15	-	4.8
19:42	Regular	Normal	Good	Central	R/air	97%	Alert	18	88	Regular	121 /75	Good	2	36.4	3	3	Brisk	Brisk	15/15	-	4.8

Fluid Type	Volume	Site	Time Start	Time Stop	Signature
Ringers lactate	1200ml	L/hand	17:20	19:42	

Drug Name	Dosage	Time	Route	Qualification	Signature
hghgjhhgh					

Management of Patient:

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

Treated by: Maamogo LR Signature: Qualification: ECT	Handed over to: Wilman Raath Signature: Qualification: RPN	**Patient refuses Treatment or Transport** Name: Signature: Date:	**WCA No**: **COC No**: Mamphiswana T

I the undersigned: Mamphiswana T I.D No 8111190407087 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: 14/12/2018, 00:08:13