

Pr No: 00900030633941

Reg No: 2013/205784/07



P.O BOX 3844 Thohoyandou 0950

E: eaglesambu@gmail.com

C: 084 561 9900

C: 073 710 0702

F: 086 670 9246

PRF NO: 10094

Pre/PostAuth No: 19-0047983-E-01	Date: 28/01/2019, 13:03:50
----------------------------------	----------------------------

	Time	Odometer	Patient Name	Mathoni Loveleni	Age	69
Recieved	11:41	393245	I.D No	5005300078080	Gender	Female
Dispatched	11:41	393245	Physical Address	No 125 shayandima	P Code	0945
Arrival Scene	11:44	393246	Postal Address	P.O.Box 76 shayandima	P Code	0945
Depart Scene	12:02	393246	Work Details	Pensioner	Work Tell	
At Facility	13:59	393424	Home Tell		Cell	0824713776
Available	17:00	393605	Medical Aid Name	Gems ruby	M/Aid No	001484485
With Patient			Principal Member	Mathoni Lovelani	MM I.D	5005300078080
Without Patient			Next of Kin	Mathoni Edward	Tell	0823691007

Amb No: E1	Transport From: Dr Hadzhi 2/789 block p east Thohoyandou 0950	Transport To: Limpopo Medi Clinic	CPRV No:
Crew 1: Masevhe ZR	HPCSA Reg: ANA0153079	ICD 10:	
Crew 2: Mundalamo D	HPCSA Reg: ECP	Diagnosis:	
Crew 3:	HPCSA Reg:		
Level of Care: ALS	Priority: P2	Call Type: Medical	
Remark/Motivation: Patient referred to Dr Nkwashu at Limpopo Medi Clinic Because the is no specialist at zoutspansberg private hospital			

Clinical Notes

Present History: Patient complains of persisting pain on left lower limb, together with stiffness and inability to fully flex the knee.
Primary Survey: No abnormalities detected
Secondary Survey: Swelling on left lower limb, poor skin tutor, dry nail beds, unable to walk, redishness colour on left lower limb
Ample History: A- Unknown M- metformin 850mg, lasix40mg, bilcon10mg, P- laparotomy L-morning E- persisting pain on left lower limb

	Breath Rythm						Vitals							Neuro							
Time	Breath Rythm	Breath Sound	Air Entry	Trachea Position	O2 1/min	SPO2	Level of Consci..	Resp. rate	Heart Rate	Rhythm	BP	Perfusion	Pain Score	Temper ature	Pupil Size		Pupil Reaction		GCS(E:4 V:5 M:6)	Apgar	HGT (mmol/l)
11:50	Regular	Normal	Good	Central	Room air	98%	Alert	17	116	Regular	114 /71	Fair	5	37.1	3	3	Brisk	Brisk	15/15		4.8
12:05	Regular	Normal	Good	Central	Room air	99%	Alert	17	112	Regular	128 /80		4	37.1	3	3	Brisk	Brisk	15/15		6.1
12:35	Regular	Normal	Good	Central	Room air	97%	Alert	18	115	Regular	130 /81	Fair	3	36.9	3	3	Brisk	Brisk	15/15		6.2
13:05	Regular	Normal	Good	Central	Room air	98%	Alert	19	110	Regular	124 /81	Fair	1	36.7	3	3	Brisk	Brisk	15/15		
13:35	Regular	Normal	Good	Central	Room air	98%	Alert	17	109	Regular	131 /86	Fair	1	37	3	3	Brisk	Brisk	15/15		
13:59	Regular	Normal	Good	Central	Room air	96%	Alert	18	114	Regular		Fair	1	36.9	3	3	Brisk	Brisk	15/15		6.1

Fluid Type	Volume	Site	Time Start	Time Stop	Signature
Sodium chloride	1200ml	Left hand	11:35	13:59	Doctor

Drug Name	Dosage	Time	Route	Qualification	Signature
Clexane	80mg	11:38	Ivi	Doctor	reter PRF
Tramadol	100mg	11:40	Ivi	Doctor	reter PRF
Maxalon	10mg	11:55	Ivi	Ecp	reter PRF

hghgjhhgh