Pr No: 00900030633941

Reg No: 2013/205784/07

EAGLES 911
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PRF NO: 10123

Pre/PostAuth No:	Date: 27/03/2019, 18:43:58

	Time	Odometer
Recieved	09:55	271892
Dispatched	09:55	271892
Arrival Scene	10:30	271919
Depart Scene	11:02	271919
At Facility	12:39	272069
Available	16:50	272250
With Patent		
Without Patient		

Patient Name	Chabalala Tintswalo	Age	32
I.D No	8702020693084	Gender	Female
Physical Address	Stand no 275 Hasani (Dakari)	P Code	0952
Postal Address	P.O. box 888 Kaalfontein	P Code	1632
Work Details		Work Tell	
Home Tell		Cell	0723845726
Medical Aid Name	Bonitas Primary	M/Aid No	27704817888
Principal Member	Chabalala Tintswalo	MM I.D	8702020693084
Next of Kin	Chabalala Nelly	Tell	0835751104

Amb No: E4	Transport From: Dr P.E Khwanda, Stand no 419 , Vuwani 0952	Transport To:Netcare Pholoso Hospital	CPRV No:
Crew 1: Maamogo LR	HPCSA Reg: ECT 0009970	ICD 10:	
Crew 2: Nethengwe M	HPCSA Reg: BAA 1552953	Diagnosis: Congested cardiac failure	
Crew 3:	HPCSA Reg:		
Level of Care: ALS	Priority: P2	Call Type: Medical	
Remark/Motivation:			

Clinical Notes

Present History: Patient complaining of palpitations, difficulty in breathing, tiredness and frequent urination
Primary Survey: No abnormalities detected
Secondary Survey: ill looking, bilateral crackles on ascultation, pedal edema and polyuria
Ample History: A- none , M- Art, P- RVD, L- Morning, E- Palpitations and difficulty in breathing

	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			
10:50	Regular	Crackles	Decreased	Central	R/air	89%	Alert	24	136	Regular	163/113	Good	0	35.7	3	3	Brisk	Brisk	15/15	-	5.2
11:02	Regular	Crackles	Decreased	Central	4l	90%	Alert	22	134	Regular	163/113	Good	0	35.7	3	3	Brisk	Brisk	15/15	-	-
11:32	Regular	Crackles	Decreased	Central	4l	92%	Alert	18	126	Regular	156/98	Good	0	36.0	3	3	Brisk	Brisk	15/15	-	-
12:02	Regular	Crackles	Decreased	Central	4l	92%	Alert	20	130	Regular	153/92	Good	0	36.0	3	3	Brisk	Brisk	15/15	-	-
12:32	Regular	Crackles	Good	Central	R/air	94%	Alert	18	126	Regular	146/83	Good	0	-	3	3	Brisk	Brisk	15/15	-	-
12:39	Regular	Crackles	Good	Central	R/air	95%	Alert	20	126	Regular	146/83	Good	0	36.1	3	3	Brisk	Brisk	15/15	-	-

Fluid Type	Volume	Site	Time Start	Time Stop	Signature
Sodium chloride	200ml	L/hand	10:05	12:39	

Drug Name	Dosage	Time	Route	Qualification	Signature
Lasix	80mg	11:08	ivi	ECT	

hghgjhhgh

Management of Patient:

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

Treated by: Maamogo LR Signature: Qualification: ECT	Handed over to: Mmakwene Signature: Qualification: EN	**Patient refuses Treatment or Transport** Name: Signature: Date:	**WCA No**: **COC No**: Chabalala Tintswalo

I the undersigned: Chabalala Tintswalo I.D No 8702020693084 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: 2019-03-27