

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
07-16-03	Pt. C/O itching x 1 day. Pt. Says itching started after dinner yesterday. Itching is occuring in hands keeping @ ear @ eyes. There was no redness to Ears but a small red quarter size redness on @ hand. Pt. was given 25 mg of Benadryl. <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;">(b)(3):10 USC §130b,(b)(6)</div>
07/27/03	Pt. C/O H/A /GAA @. Pt. Says it has been going on for about 1 WEEK. Pt. WAS given 500mg of tylenol seen from OM 2 days ago - sent Tx <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;">(b)(3):10 USC §130b,(b)(6)</div>
July 27/03 1200	Reference seen in cell complaining of @ ear ache; ear examined @ otoscope and @ @/A of inspection TM which ear ear canal w/ no excessive wax build up; @ reco - medication @ this time <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;">(b)(3):10 USC §130b,(b)(6)</div>

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

D-693

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
28 JUL 03 1000	DETAINEE ON S/C LIST C/O "E/A IN SD", UPON ARRIVAL & QUESTIONING DET. PRESENTS C/O SD PR & REF. TX, & MEDS GIVEN C/O RECOMMENDED _____
21/3/03 1300	Dt. seen in cell complaints of (R) ear ringing; Dt. voices I've had this pain for 2 months now and it keeps getting worse; about a month ago I've started to hear a ringing noise that has increased; Now sometimes I can't hear anything out of my (L) ear, but ringing; Dt. unable to be examined due to being transported out of cell.
	Recommend f/u by PA and/or Eval by _____ Will eval in clinic.

(b)(3):10 USC §130b,(b)(6)

(b)(3):10 USC §130b,(b)(6)

(b)(3):10 USC §130b,(b)(6)

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PROGRESS NOTES

DATE

~~13 DEC 02~~ 10/30/02 1400 To clinic to find
 ear PUP from 10/29 10/29
 clo all pain - was clear, 9M
 intact @ red @ white
 cortisone 5gts TID x 7 days
 Ibuprofen 800mg PO BID PRN PRN

(b)(3):10 USC §130b,(b)(6)

(b)(3):10 USC §130b,(b)(6)

13 DEC 02 MA Note

T 100.4 Pt. notes gum recession + bleeding for several mos. Die Fern subp
 P 84 PE - that no box teeth, no pain
 R 20 severe toothy periodontal disease - not showing
 BP 146/102 MD: Severe periodontal disease - Add Cor 11. Aspirin 2mg qd for 1 month

(b)(3):10 USC §130b,(b)(6)

11/16/03 Detainee seen in cell c/c allergies to
 1/8/04 breakfast and lunch. Pt states his skin
 itches and has pressure in his head. (+)
 dizziness when standing (-) vomiting (+) lethargy
 "heat in eyes and mouth" Pt says he
 drinks approx. 30 cups of tea 1/2 a day
 and that after eating he has tachycardia
 and brea

(b)(3):10 USC

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; rank; rate; hospital or medical facility)

REGISTER NO.

WARD NO.

(b)(2)

PROGRESS NOTES
Medical Record

888-00-0013

PROGRESS NOTES

cont

DATE

and breathing problems. Pt would like to see doctor about this problem. Down road exam by H.O.

(b)(3):10 USC §130b,(b)(6)

? rest
? dehydration - Re assess
skin exam, Temp

(b)(3):10 USC §130b,(b)(6)

03 JUL 2003

DETAINED ON S/C LIST S/O PAIN @ EAR UPON ASSESSMENT AND

153# QUESTIONING THROUGH REEHER DETAINED. NOTED AD PAIN X 3/2 DAYS

⊕ PAPABLE ⊕ NOISE BENEATH MANDIBLE. STATES HEARING LOSS ⊕

⊕ ANUSITIS AND ⊕, ALSO L/O OF ITCHING IN OV. NOTED ⊕

S/S OF IRYTHYMA/INFECTION/EPIDERMAL. ⊕ DISCHARGE / POSSIBLE FURSTAKING,

TUBE INFECTION. NO MEDS GIVEN. RECOMMENDED IDC F/U IN CELL.

(b)(3):10 USC §130b,(b)(6)

F/u in clinic in 7d

(b)(3):10 USC §130b,(b)(6)

5 Jul 03

F/S Ear Infection

Admission seen ⊕ @ ear pain L/R. fever dull. + allergic symptoms
h. 6cc Wellapin "WAF"

HEENT: ⊕ ear dull purulent ⊕ measurement

Des: unknown.

(b)(3):10 USC §130b,(b)(6)

⊕ throat, granules & exudate

ALLERGIC DM - 2 pak to be prescribed

⊕ Allergin allegra (80mg) 10 QD
1 month

3/138/82
P=81
T=99.3
B=92.0

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10/29/02	To clinic for eval ear pain	
12/10	Interpreter @ bedside	
12/18/02	do ear pain - Bilat - was seen a few months ago - flush done - was good & now hurts again	
12/18	ear drum inspection - U ear mild buildup, TM intact	
	Do band now	
	Flush ear in AM 10/30	(b)(3):10 USC §130b,(b)(6)
12/45	Also do "acid" when he eats - Zantac 150mg PO BID x 30 days (Zantac 150mg PO now)	
	Recheck in 1 week to see if Zantac is effective	(b)(3):10 USC §130b,(b)(6)
		(b)(3):10 USC §130b,(b)(6)
30/01/02	DETAINEE PRESENTS FOR Bilat ear pain	
133/86 B/P	TM pink intact NO FURTHER TREATMENT	(b)(3):10 USC §130b,(b)(6)
81 PULSE 138		

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888-00-01983
F38

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 8-87)
Prescribed by GSA/ICMR
FORM 141 CFR 201-9.202-1

PROGRESS NOTES

DATE

5 OCT 02 (S) Called to (b)(2) for report of detainee passing out & falling to deck.

(D) Pt. unresponsive upon arrival. HR tachycardic. Resp: 8 per min. O₂ @ 15 Lpm By NRB administered for 5 minutes. CLINIC: IV & LR started. V/S stable p 5 minutes - Pt. alert, but still not speaking - even to Arabic interpreter.

EYES: PERRLA
 EARS: TM Visualized - Ø redness / swelling.
 NOSE: unremarkable
 Pt would not open mouth.

- (A) DEHYDRATION
- (P) (1) Rehydrate: IV: 2L LR
- (2) 1 Hand
- (3) Return to cell

(b)(3):10 USC §130b,(b)(6)

14 OCT 02 Psychology Note: Guard from (b)(2) report that pb. appears "aggressive and having lots of strength" despite missing 16 meals (per record). She noted that cell mates may be passing food to pb. Pb. has been generally uncooperative. Plan: Medical staff may refer to P if needed. Discussed to

(b)(3):10 USC §130b,(b)(6)

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PROGRESS NOTES

DATE	NOTES
12 July 02	Pt Refused Dressing Change
	(b)(3):10 USC §130b,(b)(6)
13 July 02	Pt. seen in clinic for drg Δ to (B) jaw s/p I&D. ⊕ old drg in place. ⊕ iodiform packed in wound. wound edges healed to gether & dry. Wound cleaned w NS & gauze. Dry bandaid appli. Pt. sent back to cell, will want to monitor
	(b)(3):10 USC §130b,(b)(6)

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER
	LAST	FIRST	MI	ISSN or Other
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Medical Record

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11 JUL 02 3: 23 yo ♂ flu on dressing L. to (P) mandible & also
 flu on dysuria. pt. stated (per interpreter) that
 he still continues to have pain urinating. pt. only drink
 P: 110 (normal) 6-10 cups H₂O yesterday, and stated that it really
 T: 99.7 didn't make any difference when he drank 15-20 cup
 R: 18 fluids Monday & Tuesday.

O: WO, NAD, VS noted, A & O x 3, slightly elevated temp
 & tachycardic noted
 old dressing noted to slight blood & sanguinous drainage
 circular wound approx 1/4" diameter, 1/4" deep noted
 on (P) mandibular region & bleeding, & active drain
 & pruritus & edema noted

Procedure Note:
 wound cleansed
 & sterile gauze &
 NSS
 packed & wet-dry
 2x2 (sterile)
 covered & band-aid
 pt. tolerated
 procedure well.

A: dressing L to (P) mandibular abscess wound
 P: - pt. sent back to his cell
 reiterated to pt. (per interpreter) to cont.
 15-20 cups of H₂O q.d.
 - will get hold of pt. when VA lab results comes back
 - changed dressing.



(b)(3):10 USC §130b,(b)(6)

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 Medical Record
 STANDARD FORM 600 (REV. 6-87)
 Prescribed by GSA/ICMR
 FPMR (41 CFR) 201-6.202-1 USAPPV V1.00

