

PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA BRAVO CHARLIE DELTA :

PATIENT NAME: *Abelena Abrillo*

AGE: *8*

SEX: Male Female

Patient Status: Check one before giving chart to Case Manager

<input checked="" type="checkbox"/>	Initial Diagnosis	<input checked="" type="checkbox"/>	Results In		Treatment Plan
<input checked="" type="checkbox"/>	Test Ordered	<input checked="" type="checkbox"/>	Final Diagnosis		Trial Selected

DIAGNOSTIC SPECIALISTS

Key Symptoms: (from Medical Chart)

Itching, blistering sores on back, chest, stomach, face, arms, and legs. Nausea and loss of appetite.

Initial Diagnosis : *chickenpox*

Selected in Medi-Net : YES NO

Test ordered (list below)	(✓) when ordered in Medi-Net	Test ordered (list below)	(✓) when ordered in Medi-Net
<i>Physical exam diagnosis</i>	<input checked="" type="checkbox"/>		

Signature: *c. Rogers*

Date:

MED-SURGE SPECIALISTS

Reviewed Key Symptoms and Initial Diagnosis: YES NO

Test ordered (list below)	Results: (Circle one)	Observation/Conclusion/Explanation
<i>Physical exam diagnosis</i>	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	

Final Diagnosis: *chickenpox*

Selected in Medi-Net : YES NO

Signature: *M. Calinger*

Date:

CLINICAL INTERVENTION SPECIALISTS

Reviewed Test Results and Confirmed Final Diagnosis: YES NO

Treatment Plan:

Recommended Clinical Trial:

Signature:

Date:

PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA BRAVO CHARLIE DELTA :

PATIENT NAME: *Josefina Consuelo*

AGE: *15*

SEX: Male *Female*

Patient Status: Check one before giving chart to Case Manager

<input checked="" type="checkbox"/>	Initial Diagnosis	<input checked="" type="checkbox"/>	Results In		Treatment Plan
<input checked="" type="checkbox"/>	Test Ordered	<input checked="" type="checkbox"/>	Final Diagnosis		Trial Selected

DIAGNOSTIC SPECIALISTS

Key Symptoms: (from Medical Chart)

Difficulty with breathing. Wheezing and coughing a lot. Has gotten much worse

Initial Diagnosis : *asthma*

Selected in Medi-Net : *YES* NO

Test ordered (list below)	(✓) when ordered in Medi-Net	Test ordered (list below)	(✓) when ordered in Medi-Net
<i>Peak flow measures</i>	<i>✓</i>		
<i>Chest x-ray</i>	<i>✓</i>		

Signature: *C. Rogers*

Date:

MED-SURGE SPECIALISTS

Reviewed Key Symptoms and Initial Diagnosis: *YES* NO

Test ordered (list below)	Results: (Circle one)	Observation/Conclusion/Explanation
<i>Peak flow measures</i>	Normal <i>Not Normal</i>	<i>Severe asthmatic conditions with constricted airways</i>
<i>Chest x-ray</i>	Normal <i>Not Normal</i>	<i>Very low</i>
	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	

Final Diagnosis: *asthma*

Selected in Medi-Net : *YES* NO

Signature: *M. Calinger*

Date:

CLINICAL INTERVENTION SPECIALISTS

Reviewed Test Results and Confirmed Final Diagnosis: YES NO

Treatment Plan:

Recommended Clinical Trial:

Signature:

Date:

PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA BRAVO CHARLIE DELTA :

PATIENT NAME: *Kathleen Danieles*

AGE: *32*

SEX: Male Female

Patient Status: Check one before giving chart to Case Manager

<input checked="" type="checkbox"/>	Initial Diagnosis	<input checked="" type="checkbox"/>	Results In		Treatment Plan
<input checked="" type="checkbox"/>	Test Ordered		Final Diagnosis		Trial Selected

DIAGNOSTIC SPECIALISTS

Key Symptoms: (from Medical Chart)

Mild soreness of right, front, lower let. Increase pain level and frequency of pain after one week. Hching, nausea, vomiting and diarrhea.

Initial Diagnosis : *infection*

Selected in Medi-Net : YES NO

Test ordered (list below)	(✓) when ordered in Medi-Net	Test ordered (list below)	(✓) when ordered in Medi-Net
<i>X-ray</i>	<input checked="" type="checkbox"/>		

Signature: *M. Callinger*

Date:

MED-SURGE SPECIALISTS

Reviewed Key Symptoms and Initial Diagnosis: YES NO

Test ordered (list below)	Results: (Circle one)	Observation/Conclusion/Explanation
	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	
	Normal / Not Normal	

Final Diagnosis:

Selected in Medi-Net : YES NO

Signature:

Date:

CLINICAL INTERVENTION SPECIALISTS

Reviewed Test Results and Confirmed Final Diagnosis: YES NO

Treatment Plan:

Recommended Clinical Trial:

Signature:

Date:

PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA BRAVO CHARLIE DELTA :

PATIENT NAME: *Kelly Murdock*

AGE: *36*

SEX: Male **Female**

Patient Status: Check one before giving chart to Case Manager

Initial Diagnosis

Results In

Treatment Plan

Test Ordered

Final Diagnosis

Trial Selected

DIAGNOSTIC SPECIALISTS

Key Symptoms: (from Medical Chart)

Initial Diagnosis :

Selected in Medi-Net : YES NO

Test ordered (list below)

(✓) when ordered
in Medi-Net

Test ordered (list below)

(✓) when ordered
in Medi-Net

Signature:

Date:

MED-SURGE SPECIALISTS

Reviewed Key Symptoms and Initial Diagnosis: YES NO

Test ordered (list below)

Results:
(Circle one)

Observation/Conclusion/Explanation

Normal / Not Normal

Normal / Not Normal

Normal / Not Normal

Normal / Not Normal

Normal / Not Normal

Final Diagnosis:

Selected in Medi-Net : YES NO

Signature:

Date:

CLINICAL INTERVENTION SPECIALISTS

Reviewed Test Results and Confirmed Final Diagnosis: YES NO

Treatment Plan:

Recommended Clinical Trial:

Signature:

Date:

PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA BRAVO CHARLIE DELTA :

PATIENT NAME: *Stephanie Holstein*

AGE: *22*

SEX: Male Female

Patient Status: Check one before giving chart to Case Manager

<input checked="" type="checkbox"/>	Initial Diagnosis	<input checked="" type="checkbox"/>	Results In		Treatment Plan
<input checked="" type="checkbox"/>	Test Ordered		Final Diagnosis		Trial Selected

DIAGNOSTIC SPECIALISTS

Key Symptoms: (from Medical Chart)

Headache, sore throat, tired all of the time. Has no appetite, muscles ache and general weakness all over.

Initial Diagnosis : *mononucleosis*

Selected in Medi-Net : YES NO

Test ordered (list below)	(✓) when ordered in Medi-Net	Test ordered (list below)	(✓) when ordered in Medi-Net
<i>CBC (complete blood count)</i>	<input checked="" type="checkbox"/>		
<i>Liver function test</i>	<input checked="" type="checkbox"/>		
<i>Monospot test</i>	<input checked="" type="checkbox"/>		
<i>Strep test</i>	<input checked="" type="checkbox"/>		

Signature: *M. Calinger*

Date:

MED-SURGE SPECIALISTS

Reviewed Key Symptoms and Initial Diagnosis: YES NO

Test ordered (list below)	Results: (Circle one)	Observation/Conclusion/Explanation
<i>CBC (complete blood count)</i>	Normal <u>Not Normal</u>	<i>WBC 15,000</i>
<i>Liver function test</i>	<u>Normal</u> / Not Normal	
<i>Monospot test</i>	Normal <u>Not Normal</u>	<i>Positive for mononucleosis</i>
<i>Strep test</i>	<u>Normal</u> / Not Normal	
	Normal / Not Normal	

Final Diagnosis: *mononucleosis*

Selected in Medi-Net : YES NO

Signature: *J. Schraml*

Date:

CLINICAL INTERVENTION SPECIALISTS

Reviewed Test Results and Confirmed Final Diagnosis: YES NO

Treatment Plan:

Recommended Clinical Trial:

Signature:

Date: