

Consultation Report at PAH- ein Erfahrungsbericht

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Consultation report: Grundstruktur

S- Subjective

O- Objective

A- Assessment

P- Plan

Consultation report: Gliederung I

CC/HPI

PMHx, PSHx

FHx, SHx

Allergies

Medication

Consultation report: Gliederung I

CC/HPI (Chief complaint/History of present illness)

PMHx, PSHx

FHx, SHx

Allergies

Medication

HPI- Beispiel

„Pt is a 73 y/o M w/ laryngeal SCC and a PMHx of T2DM, HTN, CKD (baseline Creat: ~1.6), prior CVA, CAD, PAD, OSA (on home CPAP), ED and GERD. He is POD#3 s/p laryngectomy w/ thyroidectomy, BLND and reimplantation of removed parathyroid tissue in SCM after relapse of laryngeal SCC and developed worsening Hypocalcemia. He denies muscle cramping or twitching. Denies palpitations. Denies perioral paraesthesia. Denies SZ (and no SZ per family or nursing staff) ...“

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Consultation report: Gliederung II

ROS (Review of systems)

PE

Results

A/P

Consultation report: Gliederung II

ROS

PE (Physical examination)

Results

A/P

Consultation report: Gliederung II

ROS

PE

Results

A/P

Results Beispiel

Labs:

Na	Cl	BUN	Glucose
K	HCO ₃	Krea	

~~Hb~~
Leukos Thrombos
~~Hkt~~

Ca: 6.8 mg/dl (corrected 7.68)

Mg: 1.8 mg/dl

Phos: 3.6 mg/dl

Albumin: 2.9 g/dl

Results Beispiel

Labs:

139	107	42	138
4.1	26	1.64	

	10.7	
9.4		254
	36	

Ca: 6.8 mg/dl (corrected 7.68)

Mg: 1.8 mg/dl

Phos: 3.6 mg/dl

Albumin: 2.9 g/dl

Consultation report: Gliederung II

ROS

PE

Results

A/P (Assessment and plan)

A/P Beispiel

**„1) Hypocalcemia: 2/2 Hypoparathyroidism: ?
Transplanted parathyroid tissue function vs.
parathyroid “stunning” ; renal component unlikely
(onset directly after neck surgery);
Cont Ca-Carbonate 1500mg q8hr, mix in OJ when
administering Ca-Carbonate via NG tube to
increase absorption as pt is on PPI; increase
Calcitriol to 0.5mcg q6hr
2) Postsurgical Hypothyroidism: can be started at
full dose Levothyroxine 125mcg(1.6mcg/kg) as pt
was euthyroid prior to surgery...“**

Haben Sie noch Fragen?