



# PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA  BRAVO  CHARLIE  DELTA

PATIENT NAME: <i>Abelena Abrillo</i>	AGE: <i>8</i>	SEX: Male <input type="radio"/> Female <input checked="" type="radio"/>
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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 : <i>chickenpox</i>	Selected in Medi-Net : <input checked="" type="radio"/> YES <input type="radio"/> NO
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Test ordered (list below)	(✓) when ordered in Medi-Net	Test ordered (list below)	(✓) when ordered in Medi-Net
<i>Physical exam diagnosis</i>	✓		

Signature: <i>c. Rogers</i>	Date:
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**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	

Final Diagnosis: <i>chickenpox</i>	Selected in Medi-Net : <input checked="" type="radio"/> YES <input type="radio"/> NO
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Signature: <i>M. Calinger</i>	Date:
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**CLINICAL INTERVENTION SPECIALISTS**

Reviewed Test Results and Confirmed Final Diagnosis: YES NO

Treatment Plan:	Recommended Clinical Trial:

Signature:	Date:
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# PATIENT CHART

TEAM (CIRCLE ONE):

ALPHA  BRAVO  CHARLIE  DELTA

PATIENT NAME: <i>Josefina Consuelo</i>	AGE: <i>15</i>	SEX: Male <input type="radio"/> <input checked="" type="radio"/> Female
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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)	<input checked="" type="checkbox"/> when ordered in Medi-Net	Test ordered (list below)	<input checked="" type="checkbox"/> when ordered in Medi-Net
<i>Peak flow measures</i>	<input checked="" type="checkbox"/>		
<i>Chest x-ray</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>Peak flow measures</i>	Normal <input checked="" type="radio"/> Not Normal	<i>Severe asthmatic conditions with constricted airways</i>
<i>Chest x-ray</i>	Normal <input checked="" type="radio"/> Not Normal	<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: <i>Kathleen Danieles</i>	AGE: <i>32</i>	SEX: Male <u>Female</u>
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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

<b>DIAGNOSTIC SPECIALISTS</b>	<b>Key Symptoms:</b> (from Medical Chart)
<i>Mild soreness of right, front, lower let. Increase pain level and frequency of pain after one week. Hching, nausea, vomiting and diarrhea.</i>	

Initial Diagnosis : <i>infection</i>	Selected in Medi-Net : <u>YES</u> NO
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Test ordered (list below)	(✓) when ordered in Medi-Net	Test ordered (list below)	(✓) when ordered in Medi-Net
<i>X-ray</i>	✓		

Signature: <i>M. Callinger</i>	Date:
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<b>MED-SURGE SPECIALISTS</b>	Reviewed Key Symptoms and Initial Diagnosis: YES NO
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Test ordered (list below)	Results: (Circle one)	Observation/Conclusion/Explanation
	Normal / Not Normal	

Final Diagnosis:	Selected in Medi-Net : YES NO
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Signature:	Date:
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<b>CLINICAL INTERVENTION SPECIALISTS</b>	Reviewed Test Results and Confirmed Final Diagnosis: YES NO
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Treatment Plan:	Recommended Clinical Trial:

Signature:	Date:
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# 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

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