Cayuga Medical Center LIVE

Page: 1 101 Dates Drive Date: 02/07/21 02:33 PCS Summary - Archived

Ithaca, NY 14850

Blayk, Bonzeanne R

Fac: Cayuga Medical Center Loc: ENDO CAYUGA ENDOSCOPY CENTER Bed:-

64 F 05/01/1956 Med Rec Num: M000597460 Visit: A00109611111

Reg Date: 01/28/21

Attending: Brent D Lemberg

Reason: ROUTINE SCREENING

Allergies

ampicillin Allergy (Verified 01/22/21 14:31)

Unknown Reaction Details

hydrochlorothiazide Allergy (Verified 01/22/21 14:31)

Unknown Reaction Details

latex Allergy (Verified 01/22/21 14:31)

Unknown Reaction Details

Active (Home) Medications

Medication	Instructions	Recorded	Confirmed	Last Taken	Type
estradiol	1 mg PO DAILY	01/22/21	01/22/21	Unknown	History
spironolactone	200 mg PO DAILY	01/22/21	01/22/21	Unknown	History

Diagnoses

Nicotine dependence, other tobacco product, uncomplicated (01/28/21)

Polyp of colon (01/28/21)

Encounter for screening for malignant neoplasm of colon (01/28/21)

Allergy status to penicillin (01/28/21)

Allergy status to other drugs, medicaments and biological substances (01/28/21)

Latex allergy status (01/28/21)

Medications Given

Discontinued Medications

Fentanyl Citrate (Fentanyl 100 Mcq/2 MI) Confirm Administered Dose 100 mcg .ROUTE .STK-MED ONE

Stop: 01/28/21 10:43

Midazolam HCl (Versed 10mg/10ml) Confirm Administered Dose 10 mg .ROUTE .STK-MED ONE

Stop: 01/28/21 10:43

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Blayk,Bonzeanne R

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Nursing Notes

01/27/21 13:31 Nursing Note by Olcott, Carol

24 Hour pre procedure telephone call made. Name, DOB confirmed and procedure. Covid test with undetected results and all covid questions with negative responses. Discussed arrival time and location. She will arrive at 1015. She absolutely has no driver and is going to do procedure un-sedated.

Medication, allergies and surgeries discussed. Colonoscopy prep instructions reviewed. Has eaten early this AM but will remain on clear liquids now. Encouraged to leave personal items at home and to dress in layers for warmth. Time provided for questions.

Initialized on 01/27/21 13:31 - END OF NOTE

Orders

01/28/21 10:42

Midazolam 10 mg/10 ml [Versed 10mg/10ml] 10 mg .ROUTE .STK-MED ONE fentaNYL 100 mcg/2 ml 100 mcg .ROUTE .STK-MED ONE

01/28/21 11:00 Colonoscopy Routine

Reason For Exam: ROUTINE SCREEN

ED Visit information

Last Name: Blayk Status:
First Name: Bonzeanne Priority:
Middle: R Condition:

Birthdate: 05/01/1956 Arrival Date/Time: Age: 64 Arrival Mode: Sex: F Triaged At:

Language: ENGLISH Time Seen by Provider:

Stated Complaint: Chief Complaint:

ED Location:

Area: Station: Group: ED Provid

ED Provider:

ED Midlevel Provider:

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ED Visit information - Continued

ED Nurse:

Primary Care Provider: Midura, Alan T

Procedures

ENDOSC POLYPECTOMY OF LG INTEST (04/11/11)

Group Psychotherapy (09/24/18)

Individual Psychotherapy, Cognitive-Behavioral (12/25/16)

OTHER LOCAL DESTRUC SKIN (02/09/94)

Reposition Left Shoulder Joint, External Approach (09/19/18)

Assessments and Treatments

Endo: Case Documentation Start: 01/28/21 10:54

Freq: Status: Discharge

Protocol:

Document. 01/28/21 10:55 MEL0079 (Rec: 01/28/21 11:21 MEL0079 ENDOC-C03)

Endo: Case Documentation

Case Information

Room Number Room 2

Harris, Melissa Nurse 1 Nurse 2 Burke, Melissa A Performing Physician Lemberg, Brent D

Scope Information

Adult Colonoscopes CF H180AL 2805464

Procedure Information

Procedure Colonoscopy

Sedation

Sedation No Sedation

Colonoscopy Quality Data

Benchmark Patient Yes Polyp Detected Yes Number of Polyps Detected 2 Polyp Removed Yes Number of Polyps Removed

Bowel Prep Adequate

Extent of Exam Terminal Ileum

Procedure Times

Procedure Start Time 1100 Extent of Exam Time 1107 Withdrawal Time 1118

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Clinical Data

PREFERRED LANGUAGE (MU) ENGLISH Visit Reason ROUTINE SCREENING

Language ENGLISH

Diagnosis Code	Name	
Z12.11	Encounter for screening for malignant neoplasm of colon	

Discharge Information

Referred Discharge Date/Time: 01/28/21 11:30

Referred Discharge Disposition: HOME

Referred Discharge Comment:

Instructions:

Stand-Alone Forms:

Prescriptions:

Visit Report

- Forms:

- Referrals:

User Key

Monogram	Mnemonic	Name	Credentials	Provider Type
	MEL0079	Harris, Melissa	RN	Registered Nurse

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