Part 4 of
accident investigation
#980217CNE5086

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWBP 609-D 02005409
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 PEC
2751 GRAND CONCOURSE 10468
BRONX NY 718 584-4400
80460017 04/15/1997 A

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	Nursing: (7pm - 7Am) OBSERVATION
4-30-97 7pm	Received child in same unresponsive state. Continues to be in-
	tubated c̄ size 4.0 NTT & connected to servo ventilator on SIMV
	rate 3; Vt 92, rate 15; FiO2 21%. Capnic when off vent. O2
	sat maintained at 98%. Connected to C.P monitor c̄ alarms limits
	on. HR - 112/min. Pulses palpable. Cap refill 2 sec. BP - 89/51.
	NGT in site & receiving continuous feeding c̄ Sim 20cal/oz at 30cc/h.
	Abd. soft & non-distended. Voiding freely. No stool.
8pm	Temp. 36°C (R). Clothed c̄ warm over-alls & covered c̄ blankets.
	ETT suctioned & dry. nasal suctioned for minimal oral
9pm	secretions. mom took baby in her arms & cuddled for a good
	while in chair. Baby positioned for comfort while with mom.
10:30pm	Back to crib. Positioned on his (R) side c̄ pillow support.
12Am	Voided large amt. ETT suctioned for very minimal secretions.
	Turned to (L) side.
4Am	Diaper changed. Turned to (R) side & positioned for comfort. ETT suc-
	tioned & obtained mucus. HR stable. Neuro. no change.
7Am	Condition unchanged. Supportive care given. VS stable. O2
	sat coming down to 95% at times. Report given to on-coming
	shift. K C Brazil, N

109AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/1/97	Rotating Fellow
11[50] AM	6 month old male s/p Drowning.
	HD #17 Wt = 8 kg
	RESP SIMV Peep = 5 IMV = 15 MAP = 7 TV = 92
	FiO_2 = 21% ETT 4.0 cuffed ⊖ none
	Respiratory Rate coincides c̄ ventilator
	[illegible] B/L BS
	FEN [illegible] Continuous feeds Sim 20 30 cc/hr
	⊕ wet diaper
	Abdomen soft ⊕ BS
	HEME Ø
	CARDIO HR = 119
	BP = 91/34
	pulses 2+ cap refill < 2 sec S_1S_2 Ø murmur
	ID T: 36.5 ax
	NEURO Last flow study 4/23 ⊕ cerebral flow
	Apnea Test 4/18 ⊕
	Pupils fixed & dilated, unresponsive to painful stimuli
	Assessment. 6 month old
	Hypoxic Ischemic Injury
	Vegetative
	Plan. Supportive
	[illegible]

04144

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

80460017 04/13/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/1/97	PCW Attending
3 15 pm	
	No change in exam - No cardiac or transient Sx.
	On PN feeds.
	Plan:
	- Supportive care.
	[signature]
5/2/97	Resident Note
10:45 am	unchanged from yesterday
	① Resp RR=15 vent Peep=5 IMV=15 FIO2=25%
	92 ETV
	① No new issue
	② CVR: 112-103 84/49 - 94/37
	hemodynamically stable.
	③ ID: afebrile
	④ Fen/GI: full feeds 720/7x wet diaper
	Sim 20 30cc/cog 10
	① weekly weights
	⑤ Heme: No issues ① Ferrous
	⑥ Neuro: No changes
	[signature]
	petalik 649-9177

1180GAME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/2/97	Rotating fellow
1055 AM	6 month old male s/p Drowning
	HD # 18
	RESP SIMV PEEP = 5 TV - 93 Rate = 15 FiO_2 = 25%
	RR = 15 (ventilator)
	SaO_2 = 93-97% good breath sounds
	FEN Sim 2A 30 cc/hr 60 cal/kg/day
	no stool since 4/30 Abdomen soft BOS
	CARDIO HR = 105 BP = 84/49
	cap refill brisk SiS_2 Ø murmur
	ID T = 35' Tmax 37.4
	NEURO non responsive
	Assessment. 6 month old male
	s/p Drowning
	Vegetative
	Plan. Supportive Care
	JKR

0414

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS
OBSERVATION RECORD

[illegible] 612-A
[illegible] JONATHAN
[illegible] CIARA
M 10/23/1996
2711 GRAND CONCOURSE
BRONX NY 10468-4[illegible]
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/2/97	PCW Attending
11 20 AM	
	No change in examination - brain dead.
	Apneic - on mechanical ventilation.
	On full feeds
	Plan:
	Supportive care
	[signature]
5/3/97	PCC attending
9 20 a	no spontaneous movement or respiration
	Tolerating feeds
	A: clinically brain dead
	P: Cont supportive care [signature]

108ME REV.3/72

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 02005409
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 PEG
2751 GRAND CONCOURSE 10468
BRONX NY 718 584-4400
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	7P-7A Nsg OBSERVATION
4/1/97	Nsg Note
7-7AM	Turned pt. ⊖ ETO NPT → SONYO ventilator
	⊖ TV - 4.0 Resp 5 T 92, rate 5 FIO2 21/0 cm,
	Breating bilaterally, no wheezing. Tube
	patent, resp. spill 1-2 cc. Pupils equal
	fixed and dilated, ⊖ response to any factile
	stimuli. C/R monitoring CR alarm limit 80-190
	RR - 10-50 → tested & functioning well.
	NGT patent and intact for continuous feeding
	30 cc HF. abdomen soft & bowel sound.
8	→ Mother @ the bedside, oral suctioning by
	obtained some cloudy secretions
	→ T 37.4 BP 94/37 HR 15 on 146
8AM-9	cuddled by mother, V/S stable.
	→ mother crying @ times @ bedside.
	→ suctioned ⊖ large cloudy-brownish
	secretion, pitchy in connections.
10	→ tried to bed, ⊖ no acute distress
	→ alert, quiet home.
12	→ alert BP 100/60 HR 15,
	→ suctioned ⊖ copious secretion
24	→ NGT flush, feeding 0-150 per
	→ [illegible]

180SAME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
6	? Cervical injured prior to - Cervical cervical injury.
	? a.m. care rendered, ē NTT care - referred ō and nurse, O_2 sat 98%.
7	? NTT patent & intact. r [illegible]
5/3/97 9AM	RN (Cross Coverage)
	Pt [illegible] c/o c/o ↓ overnight HD#19
	resp: SIMV peep5 TV=93 IMV=15 FiO_2 25%
	RR=15 O_2 sats
	Lungs: good BE Bil occ wheezes
	CVS: HR= 93-103 BP 84-89/49
	exam S1 S2 RRR
	FEN/GI: Sim20 @ 30cc/hr
	Bowels
	ID: Tm=36.2
	Neuro: no change from previous exam
	O movement O neuro [illegible]
	HP: cont old rule 9p drowning
	cont current care.
	[illegible] MD/PA

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

0414

NNLP 603-A
TOSTER, JONATHAN
KING, DIANA
27[illegible] GRAND CONCOURSE
BRONX NY 10[illegible]
04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
	Aug - 19 - 1 p
5/2/97 7A	received c̄ # 4 NT tube to Neo SIMV PEEP - 5 Rate - 15 TV - 93 FiO2 - 25. Breathing bilaterally. O2 sat - 99%. on ETT position c̄ appropriate chest limits ↑ functioning. Extremities warm, pink, (+) pulses c̄ brisk cap refill. No spontaneous movement - unresponsive to stimulation. c̄ NGT to continuous feeds. bin xo @ 30 cc/hr.
8A	VS, BP taken + recorded. Skin care done - temp - 35°. Extremities warm to touch. Kept covered c̄ clothing + blanket. turned + repositioned. ~~that~~ PT + suctioned for moderate thick cloudy secretions.
10A	Suctioned for small thick cloudy secretions. turned + repositioned.
12N	Breathing bilaterally. temp 36.0°C. Suctioned for some secretions. turned + repositioned.
2p	Suctioned for some secretions. O2 sat 95 ↑ turned + repositioned - Mother phoned.
4p	Breathing bilaterally. O2 sat - 95 ↑ - Suctioned for some secretions. turned + repositioned.
6p	Suctioned as above. turned + repositioned - mother @ bedside. [illegible] to child — [illegible]

11805M/E REV.3/72

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 02005409
TURNER, JONATHAN
KING, CIANA
N 10/28/1996 PEC
2751 GRAND CONCOURSE 10468
BRONX NY 718 584-4400
80460017 04/15/1997 A

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
7P-7A)	5/2/97 NSG Note
7P-730P	Received pt. @ 4.0 NTT → SIMV @ 25% FIO2
	O2 sat 99%, SIMV, Resp's rate 15, breathing @ the
	ventilator. PTO response to any stimuli.
	Breath sound bilaterally - good no wheezing
	noted, NTT patent & intact.
	C/R monitoring CK alarm limit 90-150, HR 12-60
	tested & functioning well.
	Skin cool to touch T 36°C / rectally.
	abdomen soft & NGT intact for continuous
	feeding Similac 20 cal @ 30 cc/H
	bladder palpable not distended - diaper
	wet & good amount urine output.
	pulses palpable, cap refill 1-2 sec.
	pupils equal dilated & reactive to light
8	BP 89/49 HR 15 CR 99
	Suctioned a mod. amount of cloudy secretion
	sticky, some secretion from nose & mouth
	mother @ bedside, cuddled pt @
	bedside chair.
9	back to crib O2 sat 96-98%
10	bed bath given by mother at arranged
12	c/c [illegible] T 37°C NB aware awake & alert

BOSMIE REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
4	V/S stable, NOT monitored @ same formation, continuous pumping [illegible]
6	Kept clear & dry, NOT potent continue pumping injecting well.
7	V/S stable. [illegible]

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

80460017

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
	Nursing Note 7A/7p
5-3-97	Received Turner in incub c̄ rails up.
	Intubated c̄ # 4.0 NTT cuff is @ nare. Connected
7A	to Siemens 900C Servo WP = 60 Settings SIMV mode
	peep/5 Imv 15 TV 93 Flow 25/min Color pink Lips
	& nailbeds. Aerating bil c̄ vent rate, c̄ ncs.
	Wheezing. CPT & suction via NTT for sm white secretions.
	Mouth care pmv & repositioning 3 hrs. On cardiac/apnea
	monitor alarm limits set & on, tested functional.
	V/s 90-100's HR BP 70/38/ Skin cool to touch
	Temp ↓ 36 Rectal 140/30. Abd soft & flat passing stools &
	voiding: NGT via nare, patient receiving similac 20 cal
	FS @ 30cc/hr via Kangaroo pump. Neuro-pupils
	fixed & dilated, & spontaneous breathes or movements
	& response to pain stimuli. Cont. c̄ plan of care.
8	V/s 36.3 114 93/51 R. Wet diaper c̄ stool & ed.
	Skin care done. Suction via NTT & mouth for
	small white secretions. Mouth care done (L) side position
9A	V/s stable No visitors or calls.
10A	V/s unchanged - Neuro status same. Fentanyl & Sec
	NG given skin care done - Rt side position.
	No changes - aerating c̄ vent settings. Suction
	for sm white secretions. No visitors OR calls

160SAME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5-8-97 12 noon	V/S stable. wet diaper changed, skin care done.
	Position Rt side. Neuro status unchanged
1 PM	Suction for minimal secretions mouth care done
1 pm	V/S stable No changes. Color pink sat 96-97%
2 P	V/S stable No changes, No changes Neuro status
	& visitors or calls. Position Rt side.
3	CPT & suction via NTT & nasal for some
	secretions mouth care done & skin care
	Neuro status unchange. Mother & grandma
	visiting at bedside.
4 P	CPT & suction via NTT & nasal for some secretions
	position on back. Overall ↓ vent. settings
	Neuro status unchange - stable
6 - 6 P30	V/S stable Ferrosol o-sat via NC guess. Complete
	bed bath given by mother + skin care
	done. Clp mother holding
	and cuddling pt. Use communication
	skills to help parent vent/ate her feelings
	and cont to provide emotional support
	Report given to Relief RN — [illegible]

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 02005409
TURNER, JONATHAN
KING, DIANA
R 10/28/1996 F
2751 GRAND CONCOURSE 104
BRONX NY 718 584-44
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
7/3-4/97	Nursing 7P-7A
7P.	Sister intubated ⊼ 4.0 cuffed ET tube
	~~to lung~~, SIMV P5 R15 TV 93 O2 25%.
	Coarsing well bilaterally ⊼ O2 Sats 97%
	On Cardiac Monitor HR 100's NSR ⊼
	alarms set and functioning. Abdomen
	soft NG tube in place ~~for continuous~~
	feeds H.F. 20 calories at 30cc hr.
	Nards in deeper. Pupils fixed and
	dilated. No spontaneous movement.
8PM	T.35° Voided. Hearing sheepes &
	covered ⊼ blankets. Pupils dilated
	non reactive. N.G. feeds continue at
	30cc hour. Repositioned. Non pitting
10P	Continues as above. NG feeds 30cc hr.
	Jacking ⊼ M.S. Voided
7A.	Suctioned for small amount of
	secretions. Aerating well. Pupils
	remain dilated non reactive, No
	spontaneous movement noted F.C.S.
	Continue 30 hr. Repositioned Voided
2AM	Continues as above NG. feeds
	continue.

NR1806AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
4AM	Repositioned. Suctioned for small to
	moderate amount of white
	secretions. NG feeds continue.
6AM	Suctioned for small amount of white
	secretions. Vitals stable. Repositioned
7AM	Report given J. McEvoy, RN
5/4/97	PCO [illegible]
9:00 a	Unresponsive
	agonies
	on SIMV
	tolerating ventilator
	A: clinically brain dead
	P: Cont supportive care as
	Mom refuses ventilator w/c
5/4/97	Resident Progress Note
2pm	No Events. No changes
	Resp: SIMV Peep-5 ITV=92 IMV=15 FIO2=25%
	No spontaneous breaths. lung clear (B)
	CVR: 108-119 93/51-105/55
	RR S1S2 ⊖m/g/R
	Hemodynamically stable
	ID: Afebrile - No lines. No cultures
	Heme: No known issues. No signs of
	bleeding
	GI/GU: [illegible] 5cm 2mm 30cc/o. [illegible]

MONTEFIORE MEDICAL CENTER

SOCIAL WORK SERVICES
DISCHARGE PLANNING

NWGP 610-B 0200540
TURNER, JONATHAN
KING, DIANA
M 10/23/1996 PE
2751 GRAND CONCOURSE 104
BRONX NY 718 584-4400
80460017 04/15/1997 A

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	
5/3/97	It is a big decision to make. Pt was found food, cam, malnutrition, neglective. Pt's presently on full life support. Mother continues to visit pt. Child. Mother did make CA-Conference. Talked to the physicians at the bedside. We talked with mother on other sibling, the future. Mother decides intensive psychotherapy. It was not been decided if life support will continue. Mother-pt. Jessica, not the assistant director of the shelter will get back to me. Mother spoke to her family and her visitation rights. Chief physician was planning to arrange a book for an hour. Mother was pleased with this. Mother is holding on to the belief "God will save my child" statements specific but indicates to mother are and she pt. states. Will continue to provide pt/mother therapeutic support.
	HSA Ramsey

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

EVERY ENTRY MUST BE DATED & SIGNED

NWGP 609-D 0200540
TURNER, JONATHAN
KING, DIANA
R 10/22/1996
2751 GRAND CONCOURSE 104
BRONX NY 718 584-44
80460017 04/15/1997

If no plate, patient's name, adm no., sex & Doctor

DATE	OBSERVATIONS
5/4/97	CCM Note
Support	Mask CPAP / Mech Vent / CVP Line / Art Line / Swan Ganz / Catchol Pressor / TPN / Dialysis
Clinical	Jonathan is s/p [illegible] surgery, still [illegible] after study showed [illegible] in part of the brain but patient [illegible]
	B/S: T=37°C BP 104/63 HR=15 RR=115
	Resp: SIMV: PEEP=5 FiO2=92 FiO2=28 RR=15
	[illegible]
	ID: ⊘ [illegible]
	CVS: ⊘ [illegible]
	FEN: CGF [illegible]
	[illegible]
	Home: [illegible]
	Neuro: [illegible]
Rx/Meds	[illegible]
	[illegible]
Summary and Plan	1. Continue supportive care
	2. Will plan for long term care

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

EVERY ENTRY MUST BE DATED & SIGNED

2241 GRAND CONCOURSE
BRONX NY 71
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

DATE	OBSERVATION
	Nursing Note 7A/7P
5-4-92	Received Turner in small T-piece c/p. Intubated 2 T ⅢⅣ ETT cuff 15 @ nare Connected to Siemens 900C Servo Vent signs note pupils Imo-15 TV 93 Freq 83%. Peds pt. tips & neck beds Breathing Trend settings, spontaneous SAT's 95-97%. NPT suction via NT for med mucous secretions, suction nasal pharynx for med thick yellowish green secretions Mouth care PRN & reposition q 2hrs. On cardiac/apnea monitor alarm limits set on, tested functionals V/S stable Neuro status unresponsive pupils fix dilated, spontaneous movements & response to painful stimuli. NGT in place & patent receiving CNF Feeds Similac 20cal @ 3cc/hr via Kangaroo pump. Abd soft flat bowel & passing stools.
7A	V/S 37.8 R 119 104/63 15. CPT & suction via NT for med mucous secretions, suction Nasal pharynx for thick yellow green mucous mouth care done Esmond WP diaper Bed skin care done. Lett S.C. pain
10A	V/S stable No visitors or calls. Tunnel O.S. a/N given - natural bowel to OU. Pulse sats 96-97%. Pacemaker

VR1606AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
12 Mn	Pt's stable, no changes. Resp support same. No visitors or calls. Telephone same status
2P	CPT & suction via NTT for some secretions mouth care done. Rt side position
4P	Complete bath given. Neuro status unchanged. CPT & suction via NTT for some secretions. Mouth care, Rt side position. No feeds
6-6P	Suctioned & retapped. Resp support unchanged. Respiratory. [illegible]

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-0 0200540
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 P
2751 GRAND CONCOURSE 104
BRONX NY 718 584-44
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
4-5-97	Nursing TP-7A
7P	Pt. intubated c 4.0 cuffed N.T. tube to Vent, SIMV P 5 T.V. 90's R 15 O_2 25%. Operating Ventilator c O_2 Sats 90's. Color good. O.R. being led by Mom. Grandma visiting. On Cardiac Monitor HR 110-120's NSR. Alarms set and functioning. Abdomen soft. N.G. tube in place for continuous feeds. Since 2a cc Vol 30 cc hr. Voids in diaper. Pupils dilated, not reactive. No spontaneous movement noted. Pulses +++.
8PM	Afebrile, voided. Suctioned via trach for small amount of white secretions. Operating well. O2 Sat 98%. N.G. feeds continue 30 hr. Repositioned.
9PM	O.R. held by Mom. Visited 9:30 P.M.
10PM	In crib. Positioned for comfort. Suctioned as above. Voided. Feeds continue 30 hr. Diuretics to Lasix.
MN	Repositioned. Voided. Feeds continue at 30 hr. Suctioned for small amount of white secretions.

1 BOSLIVE REV 3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
4AM	Continues as before. Repositioned. Suctioned small amount white secretions. Voided
6AM	Suctioned as above. Repositioned. Feds continue 30cc/hr. Voided.
7AM	Report given (Le Mc Cy RN)
5/5/97	Rotating fellow
10^{45} AM	6 month old male s/p Drowning.
	HD # 21
	RESP. Resp = 5 FiO_2 = 26% IMV = 15 TV = 93
	SaO_2 = 97% good BS
	breaths ē vent
	FEN Wt = 8kg
	NG for continuous feeds Stm 20 30 cc/hr
	@ stool yesterday
	CARDIO HR = 97 - 120
	BP = 80/52
	cap refill < 2sec SiO_2
	ID T = 36 Tmax = 37°
	NEURO non responsive
	Assessment. 6 month old male
	s/p near drowning
	Plan. Supportive Care
	CKR

0414

MONTEFIORE MEDICAL CENTER
- HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

ADMP 609-A 02006
TORRES, JONATHAN
RIOS, DIANA
M 1/28/1996
2751 GRAND CONCOURSE
BRONX NY 10468
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/5/97	Resident Note
	No events overnight
	Mom concerned about dry skin on fingers
	Resp: same vent settings - Peep 5 FIO2=25% IMV=15 TV=93
	Clear lung bilaterally SaO2 98%
	CVS: RRS S1S2 0 m/g/r Not tach (97-120)
	80/52
	good perfusion
	ID/Heme: No issues
	Fen/GI: continue to tolerate feeds well.
	Belly soft - Non distended 0 H/S megaly
	Neuro: No change
	Optalal
	putalik
5/5/97 3 PM	PCW Attending
	No change in condition.
	On feeds.
	Apneic / on ventilator.
	Plan:
	- Supportive care
	- Will consider placement nasogastric tube

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 0200540
TURNER, JONATHAN
KING, DIANA
N 10/28/1976 PS
2751 GRAND CONCOURSE 104
BRONX NY 718 584-44
80460017 04/15/1997 A
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	Nsg Notes OBSERVATION
5/5/96 7A	Received Jonathan in the crib c̄ side rails up. Remains intubated c̄ 4.0 NTT ⇒ Siemens 900C Ventilator, SIMV, peep 5, Insp Am 1A V.O. 1.38, breaths 30 TTV 92, IMV 15, PL 15, FiO2 21%. O2 sat 97-100%. Aerating bilaterally, BS coarse, no spontaneous breaths noted. Remains on cpk monitor c̄ alarm limits set and functioning. Apical HR 94, NSR, pulses palpable, extremities warm. Cap refill 2 seconds. Abdomen is soft, nontender and nondistended. NGT feeding q HF @ 30 cc/hr infusing. Voiding via diaper, no bm yet. Pupils 4mm non reactive. Nonverbal.
6pm	Suctioned ETT for small loose yellowish secretions. Pt was repositioned. Cpk monitor
10pm	Received medication as ordered no changes in status.
HN	Suctioned ETT for same, no changes
2am	No changes in status
4am	Mother at bedside. Bed bath given. No changes in neuro status

NR1808ME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
6pm	ETT retaped as per policy. BS clear, Suctioned ETT and name for same. Pt was repositioned.
7pm	No further changes in status MMeller
5/6/97	Rotating Fellow.
9:35 AM	Jonathan is a 6 month old male s/p Drowning
	RESP SIMV PEEP = 5 TV = 92 IMV = 15 FiO_2 = 25%
	good aeration SaO_2 = 98%
	FEN Wt. 8 kg
	Sim 20 at 30 cc/hr via NGT
	100 cal/kg/day Abdomen soft ⊕ BS ∅ HSM
	Fenisol 0.5 cc BID ⊖ UO ⊕ stool
	CARDIO HR = 107 BP = 91/50
	cap refill < 2sec S_1S_2 ∅ murmur
	ID T = 35°
	NEURO non-responsive - no change
	Assessment: 6 month old male s/p Drowning
	Vegetative
	Plan: Supportive Care
	JBC

0414

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NLCP 609-A 02005
TURNER, JONATHAN
MIGC, DIANA
M 10/23/1996
2751 GRAND CONCOURSE
BRONX NY 71
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/6/97: 10:15 AM	PICU Attending
	No change in condition.
	Met with mother regarding plans for future l.t.c. placement.
	[signature]
5/6/97	Resident Note
	No changes → persistent vegetative state
	Resp: peep = 3 ITV = 97 IMV = 15 25% FIO2
	lungs clear (B)
	(P) No Δ
	CR: 107
	91/54 – 74/27
	RRS1S2 ⊖m/g/r
	- (A) hemodynamically stable
	Fen/gi: wt ~8 kg
	tolerating full feeds Sim 20 @ 30 ml/°
	Ø stools yet today
	ID afebrile
	Neuro: No change
	[signature]
	pediatric

NR1005M/E REV.3/72

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 020054
TURNER, JONATHAN
KING, DIANA
N 10/28/1970
2751 GRAND CONCOURSE
BRONX NY 718584--
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/6/97	Nursing Note 7P-7P
7P-	Received Jonathan on small cub - Pt remains unresponsive. ~~to~~ stimulus. Remains intubated c # 4.0 cuffed NTT → Servo ventilator; setting SIMV mode; peep = 5; TV 93; IMV rate 15; FiO2 25%. Oxsat 100%. Pt aerating bilaterally c coarse BS. Pt on C/P monitor c alarm limits set appropriately. HR 103-107. Extremities warm (pt swaddled in blankets) capillary refill ~2 secs. Abdomen soft + non-distended. NGT patent → CVG feeding. Seen to void c 30 cc/hr in progress.
8P-9P.	VS T 35.9 @ HR 107 B/P 91/54 c spontaneous resp. Suctioned for small amount of cloudy secretion via NTT c moderate amount of cloudy secretion briefly. Ox sat 98-100%. Repositioned. V/S had wet diaper - zinc oxide applied to buttocks.
10P-11PM	Ox sat 98% c spontaneous respiration. No changes in neuro status. - remains unresponsive. Pupils fixed + dilated.
11PM-12.	Suctioned for secretion as before - repositioned. Ox sat 98-99%.

R1600SME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
7p-3p	Repositioned q 2 hrs bilaterally - O2 sat 98% ∅ Δ in neuro status ∅ spontaneous movements. CNS feeding in progress.
4p-5p	T37.3 Suctioned for secretion as before - repositioned. Bed bath given & linens changed. ∅ spontaneous movements.
6p-7p	Mother visited - made aware of no changes in pt's condition. Pupils remain fixed and dilated. Remains on ventilator setting as before O2 sat 95%. Remains on CNS feeding @ 30 ml/hr.
7p	O2 sat 97%. Kept pt. Journal entry

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 02005409
TURNER, JONATHAN
KING, DIANA
N 10/28/1996 FE
2751 GRAND CONCOURSE 104E
BRONX NY 718 584-4400
80460017 04/15/1997 A

If no plate, patient's name, adm. no., sex & Doctor

EVARY ENTRY MUST BE DATED & SIGNED

DATE	70-75°A OBSERVATION
6/5/97 7a	Received Jonathan sacrally intubated c a 4.0 cuffed NTT → breaths set c the ventilator mode: SIMV, FiO2 .35, TRV 15, FIO2 .27, freq 5. On-ETT monitor & pulse ox monitoring, O2 sats 98-100%, monitor alarm limits set & functioning. Ds inclusions [illegible] LM fully c Sim. scalp at 30 cm/hr, abdomen soft & nondistended.
8a	→ VS taken, temp 34.3, chest cast & length, kept warm c sheets. Breathing well bilaterally c some occasional rhonchi. Foot clean after nursing. CPT & nutrient for moderate thick white secretions, suctioned. Had care & eye care done. Temp 36, kept warm c sheets. Mom updated c pt. condition. Capillary refill brisk & peripheral pulses equal. Abdomen soft & nondistended, bowels patent. Voiding in the diaper, c soiled diaper cast, Betadine jelly applied. Reposition
9:30	Cuddled by Mom in her arms.
11	→ Back in the crib, no changes noted.
12A	→ Breathing well bilaterally c CPT & nutrients for moderate thick.

R1809ME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	sensation for the EH, responsive.
	eye care & oral care done. —
4	- no changes noted.
4A	- Aurally well bilaterally, CPT & irritant for moderate fluid retention sensation, responsive. Eye care & ~~oral care~~ done.
6	- Irritant - for moderate fluid retention, responsive. — Jtd
7	- stable, dentist, no changes noted — JR

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWEP 609-0 0200540
TURNER, JONATHAN
KING, DIANA
M 10/28/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-44
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	7P-7^{30}A OBSERVATION
5/6/97 7P	Received infant nasally intubated c̄ a 4.0 NTT → transported c̄ the ff settings: mode: SIMV, freq 5 TV 9 cc, PIP, FiO2 .15. On CR monitor & continuous pulse ox monitoring c̄ alarm limits set & functioning. On continuous NS feeding c̄ SMA 20 mL/H & feeding tube. Abdomen soft & non-distended, +BS
8P	Vitals, airway, and bilaterally c̄ equal breath sounds, CPT & suctioned for moderate thick white secretions, repositioned. Oral care & eye care done. Mild diaper rash noted, zinc oxide applied. Cap refill brisk, peripheral pulses good, color pink, Pupils fixed & dilated, no spontaneous movement noted, no spontaneous respiration noted. Abdomen soft & nondistended, +BS, tolerating feeds.
9A	Charted by Mom. Mom has been asking questions about plans for the baby.
10A	CPT & suctioned for moderate thick secretions, repositioned. Tolerating feeds. Oral care & eye care done.
1A	Suctioned for moderate thick white [illegible]

IR1 806AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	reactions, asymptomatic.
6A	CM & initiated for moderate reactions, asymptomatic.
	weighed, oral cavity & eyes cleaned
7A	~~VS~~ ~~etc~~ VS stable, report given to

0414

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS
OBSERVATION RECORD

HOSP CODE-A
TYPE OF ADMIT-A
BED CLASS
N 10/28/1990
2751 GRAND CONCOURSE
BRONX NY
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/7/97	Resident off Service Note Admit 4/15/97
10:30A	This is the extremely tragic story of
	Jonathan (Joachin now Turner) who is a 7 mo
	old boy who had a near drowning episode
	on 4/15/97, and he has become SEVERELY impaired
	2° to this incident.
	Mom left him in the bath in a plastic
	flotation device under the care of his ~2yr old
	brother. She left him alone (went to kitchen)
	~5min later her two year old came to find her -
	She found Jonathan unresponsive in the tub.
	EMS → to ER → resuscitated. Round #3
	of Epi → captured HR.
	Total down time by charting is ~50min.
	The child has minimal brain flow
	(See below) and has a dismal prognosis.
	See below.
	Pty Systems: The child initially had
	① Resp: No sig resp effort from the begning
	Currently on vent settings:
	SIMV mesure 5 TV=192 MV=15
	FiO_2 = 21%
	Satts 100%. Does not Breathe

R1605MVE REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	above the vent clear lungs ①
	Apnea test on 4/18 → showed retention
	of CO_2 to 101 at 5 min → NO SPONT
	breathing.
	① May require trach if swab
	can identify an institution that
	will accept this clinically Brain
	dead child for long term care.
	② CVR: RRS, S, ⊖ m/g/R
	HR = 110–120 BP = 102/63
	No issues.
	Hemodynamically stable
	③ Fen/GI: has been on full feeds for
	Quite some time NW (Since 20 at 30 c/o
	Cog per feeding tube.
	is 780 cc/kg = 62 kcal/kg/day.
	adequate fuel this child in a
	persistent vegetative state
	① may do gtube (see prop above - plan)
	if plan to ship to long term
	care facility
	④ Heme: on Tenormin (0.5 a Mg BID) 3 mag/kg/day
	B - Blood type 4/18 most recent CBC
	9.7 / 31.8 10.5 MCV 79 142 platelets
	255 278 IBM 480
	[illegible]

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

041497

NW6P 609-D 02005409
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 PEO
2751 GRAND CONCOURSE 10468
BRONX NY 718 584-4400
80460017 04/15/1997 A
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
	initial CBC 4/15 > 12.8 / 39 429K
	transfused on 4/18.
	① No need to ✓ CBC
	② continue ferrous
	TD: He is afebrile. No obvious signs of
	infection. Full sepsis work up done
	at intake → got 3 days of ABX (ceftriaxone)
	⊖ Blood, urine, CSF culture
	① got VZIG during period of limit
	chicken pox exposure
	② got 6 mo immunizations (? consider
	whether flu ought to be done).
	③ Surveillance trache cultures
	periodically (most recently 4/18 + cardiac)
	④ Nystatin oral solutn.
	Neuro: pupils fixed & dilated
	⊖ oculocephalic
	⊖ gag
	⊖ No mov't to painful stimuli.
	Clinical Brain death, with ⊖
	apnea study. HOWEVER, 2° to
	flow studies on
	4/22/97 4/21/97 4/22/97 →

1005ME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	at nuclear medicine → that demonstrate "some cerebral flow", we cannot declare this child brain dead officially.
	① Neuro had followed — call upon them as necessary
	② Discuss utility of some time repeating cerebral flow study — ? benefit.
	Social - Mom is 18, seems to have had not any intention of causing this injury. However, she is entirely unrealistic about this situation & the pt prognosis.
	① initially she wanted a brain transplant for her child, offering her own
	② Then she requested that her son's brain be cloned.
	③ Despite CONSTANT, DAILY, Reiteration that her son has NO brain function that has any meaning she says that ~~she~~ we don't know that he doesn't have function, that he does think & feel and that we can't tell.
	Denial is VERY pronounced → her
other	son is not currently in her custody as no family members would take [illegible] and she is young

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

8046001 7 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
	to ~~be taken~~ lose her shelter residential
	spot. She wants to learn how to handle
	the rest of Julie Jonathan's home - but she
	HAS NO HOME, AND will NOT likely
	get CUSTODY of him AGAIN.
	Many many many hours are spent with
	her reviewing the situation, but it appears
	that the guilt she feels for this error
	of omission will not permit her to
	see the situation as it stands.
	* I told her today that we will NOT ~~repeat~~ do an EEG
	as it will yield NO further meaningful info - unless
	neuro wants it done.
	Gp
	Gp Gp
	Pitalik 649

180SMVE REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/7/97 4pm	PCW Attending
	No change in neurologic condition.
	Apneic / tolerating feeds.
	Plan:
	- Supportive care.
	- Will schedule for tracheostomy & gastrostomy if long-term care placement seems to be an option.
	- Social Services will let us know as soon as they are informed about placement.
	[signature]

04149

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-0 0200540C
TURNER, JONATHAN
KING, DIANA
N 10/28/1996 F
2751 GRAND CONCOURSE 1C4
BRONX NY 718 584-44
80460017 04/15/1997 A
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
	NSG note
5-7-97	Received Mr Turner in crib side raised up. PT is on a cardio resp monitor alarm limits set on [illegible] HR 110-120 sinus rhythm noted. PTs skin is [illegible] to touch T 38.8. BP 102/63 Cap refill less good pulses noted. PT is hooked a 4.0 cuffed ETT L (L) nare SIMV resp 5 TV 106 Rate 21 rate 15 PT has good breath sounds O2 sat 98-100%. PT has NGT infusing STM 20 cal @ 30cc/h PTs abdomen is soft to touch PT is voiding well. skin is intact.
8a	PT was turned positional (R) side. Chest PT an suctioning done small secretions removed. good breath sounds noted. O2 sat 98-100%. PTs nares suctioned for large amt of green colored secretions pt noted to have redness to Rt corner of nares aspect of nare with outside nares chafed. Decision applied skin care done NGT repaired. Oropharyngeal secretions to green noted
10	PT was turned + positioned on back. Chest PT + suctioning done mouth care done pt has large amt of green colored secretions from back of mouth bowel movement is intact. Oropharyngeal eye care done.
6a	PT was turned + positioned on (L) side. Capillary blood bilirubin + reticulocytes noted skin care done. O2 saturation sat good. O2 sat 96-100%

IR1605M/E REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	2 blankets placed on pt. pt's skin is cool & dry. T 36.5.
8p	PT was placed on back. Chest PT an sorting done lungs have rales. O2 sats 96%. Dressing dry. PT had a small hard stool. pt's abdomen is soft to touch. Eye care done.
4-	PT was placed on 2 pillows. Chest PT + suctioning done. Evaluation of secretions removed. O2 sats 97%. Dressing dry. pt is working well. Pulse oximeter probe. Air bed.
8p	Report given — Charge RN

0414

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS
OBSERVATION RECORD

AWEP 609-A 0200545
TUCKER, JONATHAN
KING, DIANA
M 10/23/1946
2701 GRAND CONCOURSE
BRONX NY 7124-4
00140017
If no plate, patient's name, adm. dg., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
3/7-8/97	Nursing
7P	Jonathan intubated c 4.0 ET tube to [illegible] 51 mv PI TV 92 R 15 O2 21%. Coarse breath bilaterally c Q. Sats 90's Color good. Voiding in diaper On Cardiac Monitor HR 110's-120's NSR. Q alarms set and functioning. Pulse ox NG tube in place for continuous feeds Similac 20 Cal 30 cc hr.
8PM	Apneic episode. Suctioned for small amount of white secretions. Resting well. NG feeds continue. Repositioned. Mom visiting. Expressed
12A	Suctioned as above. NG feeds continue 30 hr. Voided. Eye care done
4AM	Repositioned. NG feeds continue at 30 cc hr. Voiding. Pupils dilated but reactive
8AM	Report given. Pupils fixed and dilated, not reactive. J. McCoy R

NR1605ME REV.3/72

050497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW&P 610-B 020054
TURNER, JONATHAN
KING, DIANA
10/29/197
2751 GRAND CONCOURSE
BRONX NY 10468
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	Morning 7A-7P OBSERVATION
7-8	Received Jonathan lying in stretcher crib, side rails H.O.B elevated on pillow. He is unresponsive to any stimuli. Pupils are fixed and dilated #4.0 dilated. N.T.T. patient and stored, connected to servo-vent delivering 15 SIMV breaths c̄ 25% O2 Peep 5 TV 92. Resp rate 15 c̄ bilateral = b.s. audible. Continuous pulse oximetry present O2 sats 100%. H.R. 112 c̄ regular rhythm noted. Skin warm to touch T 36.3 - Cap refill 1-2 seconds. Diaper in place. NGT patent c̄ formula 20 cal infusing. Abdomen soft and non distended B.S (+)
8-9A	Turned and repositioned. Suctioned for moderate amts of white exudate. Pupils continue F:D.
10-11A	Turned and repositioned - Suctioned for small amts of white exudate. Pupils F:D No spontaneous respirations.
12-1P	T 36.8 - Suctioned for moderate amts of exudate - wet diaper Δd. Feeds continue at 30cc/hr. Pupils F:D No spontaneous respirations - Unresponsive - Marian Mattson

NR1605AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/12/97 2:50 p.	NURSING
	HR NOTED TO BE ↓. DR. WEINGARTEN
	AWARE, AMBUED = 100 %, CHEST
	COMPRESSIONS BEGUN, RECEIVED
	ATROPINE 0.16 mg VIA ETT. IV ACCESS
	ATTEMPTED, BUTTERFLY PLACED IN (R)
	HAND, O2 SATS 40-60 %. ATROPINE
	0.16 mg (IV) repeated, EPINEPHRINE 1:1000
	0.8 mg VIA ETT, CONTINUES ∓ RESPONSE
	EPINEPHRINE 0.8 cc 1:1000 IV g.
	O2 SATS ↓ 48, CHEST COMPRESSIONS
	CONTINUED, NAHCO3 12 meq IV AND
	CaCl2 100 mg IV. HR REMAINS ∓
	RESPONSE. ATROPINE 0.16 mg IV,
	EPINEPHRINE 0.8 cc 1:1000 IV. ATROPINE
	0.16 mg IV followed by EPINEPHRINE 0.8 cc
	1:1000 IV. NO RESPONSE TO MEDICATIONS,
	IV FUNCTIONING WELL ∓ FLUSH. PT.
	DECLARED @ 3:06 pm BY DR. WEINGARTEN.

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWGP 609-0 020054
TURNER, JONATHAN
KING, CIANA
N 10/23/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-4
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
	Mng 7a-7p
5/8/97 7A	Received c̄ #3.0 cuffed NT tube to Servo SIMV PEEP-5 F_{IO_2}-25% Rate-15 TV-93. Auscultating bilaterally. O2 sat-98% RR-15. On CIA monitor c̄ appropriate alarm limits on & functioning. Extremities warm, pink, (+) pulses c̄ brisk cap refill. No movement noted to stimulation. Pupils non reactive to light 3-4mm. Abdomen soft non distended. c̄ NGT to continuous feeds for 20 cal @ 30 cc/hr.
8a	VS, BP taken & recorded. Auscultating bilaterally. CPT & suctioned for small thick cloudy secretions. Skin care done. Turned & repositioned.
12noon	O2 sat-98%. RR-15
	auscultating bilaterally. O2 sat-98%. CPT & suctioned for large thick cloudy yellowish secretions.
2p	Bed bath done. Turned & repositioned
4p	Mother in - participating in care of child. O2 sat-97%. RR-15 Pupils same - Reposition
5p	Nares c̄ slight redness. NT tube changed per policy & skin cleaned. Vaseline applied after
7.	

R1605M/E REV.3/72

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 02005409
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 FEC
2751 GRAND CONCOURSE 10468
BRONX NY 718 584-4400
80460017 04/15/1997 A

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/8/97	Resident On Service Note
	read the service note + appreciated. Jonathan is a 7mo old boy who is s/p near drowning episode on 4/15/97. Pt is subsequently severely impaired.
	By systems:
	Respiratory: vent settings: SIMV 15, Peep 5, Pressure 9 FiO2 21%
	Lungs: CTA
	no spontaneous breathing
	CVS: HR 110 BP 100/50
	no pressors. stable.
	GI/NUT: on full feeds. Similac 20 cal/oz
	Simzo 30 cc q6h via feeding tube.
	Total cals = 62 cal/kg/day
	Heme: most recent CBC 4/18 9.7 \ 105/31 \ 142
	conventional ferrous 3mg/kg/day
	transfused on 4/18.
	stable.
	ID: full sepsis work-up done x2. Received 3 days of Ceftriaxone. Afebrile
	Neuro: pupils fixed + dilated. (-) cough reflex.
	Clinically brain dead but still has some brain stem activity individual via nuclear medicine

VR1605MVE REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/2/97	Studies dated 4/17, 4/21 & 4/23/97
	Social: mom is very involved c̄ patient's care.
	[redacted] members expressed that she would like "everything" done for her child including tracheostomy & G-tube. A meeting will be held to review c̄ mom, social work & myself regarding plan for long term facility.
	J. Weingarten / G. Bini PL-2
5/6/97	Peds Neuro
	Chart reviewed & pt seen. (as of service)
	Pt w/o seizures or further events
	VSS: afebrile ⊖resp'ns support.
	lying w/o movement, nasal ETT in place.
	Neuro unresponsive to deep pain
	CNS pupils fixed at 3-4 mm,
	disc pale (⊖vessels seen).
	previous documentation of absent eye movements ⊖doll's. absent corneals
	⊖gag reflex (fluid pooling in
	retropharynx.
	Motor ↓↓ tone throughout
	⊖spont movements
	⊖WD to pain.
	Diminished reflexes throughout.
	Imp 7mo ♂ near drowning
	with brain death exam since
	3rd day of hosp'n. Cerebral flow

041497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 609-D 02005400
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 F
2751 GRAND CONCOURSE 10
BRONX NY 718 584-44
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/8/97	Studies x3 have shown minimal flow, therefore unable to confirm ~~basis death~~, though clinically no Δ. EEG may help to confirm & document + for re-iteration to mother, if ~~EEG~~ shows cerebral silence. Will discuss w Dr. Spyro the brain death protocol, as 2 clinical exams documented @ 24 and 48° substantiate this w apnea test. Mother's denial certainly predetermining factor. Will F/U. H Rayner PCP 917 424 0693.
5/8/97	
3:40 PM	Rotating fellow
	Jonathan is a 6 month old drowning victim.
	RESP SIMV PEEP = 5 TV = 93 IMV = 15
	FiO_2 = 25 %
	SaO_2 = 95 - 98 %
	FEN Wt = 7.78 kg
	Sim 20 ss 30 cc/hr via NGT
	Ferinsol
	⊕ wet diaper
	abdomen soft ⊕BS

VR1605ME REV.3/72

MONTEFIORE MEDICAL CENTER

SOCIAL WORK SERVICES
DISCHARGE PLANNING

NWGP 610-3 02005
TURNER, JONATHAN
KING, DIANA
M 10/29/19
2751 GRAND CONCOURSE
BRONX NY 718 584-
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	
5/9/97	Mother mother said she can't stay at this shelter because it is for women only. Mother has a hearing on Monday to see what kind of shelter she will be placed in. We explored and discussed mother's concerns regarding mother is sad about losing all her things and will miss them a great deal. She said she understands why she cannot stay there. Mother said she spoke to Mrs Peter, coordinator for agency, and Mr. Peter is taking the parenting class [illegible] to Mr. Peter and she is trying to find anything a person who will provide shelter for Mother. Mrs Peter said we could visit before she is going to contact us. I said the sooner this was finalized the better. Mother needs to make arrangements for the hospital. Mother told me she got a job at Wendy's in Lower Manhattan. She said she explained her situation to the manager and he said his mom was a single mother. Mother said she needs the money. I stated mother will concern about the job. If cancer mother might be scared herself to think. She has a lot of things going on in her life and a lot of pressure to be [illegible]

050497

MONTEFIORE MEDICAL CENTER

SOCIAL WORK SERVICES
DISCHARGE PLANNING

NNCP 610-8 0200540
TURNER, JONATHAN
KING, DIANA
R 10/23/1996
2751 GRAND CONCOURSE 10-
BRONX NY 718 584-44
80460017 04/15/1997
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	
5/9/97	Mattie deceased. I spoke to Anita last and she feels it also made too much for Mattie. She will speak to her about this. I will continue to provide therapeutic support for pt/Mattie. — Lisa Fuchs
	Update: I spoke to Mattie about a nursing facility. She said the nurses had mentioned this to her. We discussed what a nursing facility is and that it might be placed in Mt. Vernon NY. Mattie said she understands. She would like to visit the place before it would be mentioned. Hold for this could be arranged. — Lisa Fuchs

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

XWBP 609-D 0200540
TURNER, JONATHAN
KING, DIANA
M 10/23/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-44
30460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/8-9/97	Nursing 7P-7A
7P	Together intubated c 4.0 N.T. tube to Servo,
	SIMV R5 R15 TV 90 O_2 25%. Breathing
	bilaterally c O_2 sats 90's. Color
	good. On Cardiac Monitor HR 90-100's
	NSR c alarms set and functioning.
	Pupils dilated, non reactive. No
	spontaneous movement. Non positive
	held baby 1½. NG tube in place
	for continuous feeds, Similac 20 at
	60 cc/hr.
8PM	Afebrile. Suctioned for small to moderate
	amount of clear colored mucus.
	Breathing well. Tube continue
	Repositioned
12A	Continues as above. Pupils non-
	reactive. Suctioned. Repositioned
4AM	Repositioned. Suctioned. Extremities
	cold covered c blanket. Hct 9
7AM	Report given [illegible]

R1605ME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/9/97	Resident Patrick note
2PM	7mo old of near drowning presentation
	comatose state.
	By systems:
	Respiratory: remains on vent settings:
	SIMV rate 15, PEEP 5, ITV 93, FiO2 25%
	trachs — CPT
	CVS: HR 108-113
	BP 84/55
	RRR ∅ murmur
	Renal/GI: I/O: 713/ wet diapers
	on Similac 20 cal/oz at 30 cc/hr
	Total cals = 62 cal/kg/day
	Abd: soft, flat, nontender
	Skin: continues on Flexiseal
	Neuro: unchanged since
	comatose state
	(OP) 7mo old of near drowning
	- continue current management
	CB, RN-2

050497

MONTEFIORE MEDICAL CENTER.
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWCP 610-B 02005400
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 P
2751 GRAND CONCOURSE 104
BRONX NY 718 584-44
80460017 04/15/1937

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/9/97	Robbing fellow
	Jonathan is a 7 month old male s/p Drowning.
3:30 pm	RESP
	~~SIMV~~
	IMV = 15 Peep = 5 TV = 90 FIO2 = 25%
	FEN
	wt = 7.70kg
	feeds Sim 20 30 cc/kg
	ferinsol
	HEME Ø
	ID T = 35.2
	CARDIO HR = 104 BP = 126/84
	cap refill < 2 sec
	NEURO no change
	Assessment. 7 month male s/p Drowning
	Plan. Supportive Care
	J. Weinberg
5/9/97 4:30 pm	DCCM Attending Note
	Jonathan remains with no cortical or brainstem function. No response to any stimulation
	Imp 7 month old s/p near drowning with no evidence of brain activity
	Pl...

R1605MVE REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	Position 16.
	Social worker attempting to find placement
	Weingarten mp

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NW6P 610-B 0200540
TURNER, JONATHAN
KING, DIANA
M 10/23/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-44
80480017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/9/97 935a	Received patient nasally intubated c̄ size 4.0 cuffed @ 15 nare with
	vent. settings of SIMV, rate of 15, Pip 5, FIO2 25% and O2
	saturation of 100%, no spontaneous respiration, equal chest
	expansion, auscating well, NEURO - patient is unresponsive, c̄ movement, pupils about 4→5 mm. fixed, CV → HR 104, very weak
	pulse, had a difficulty taking BP via cuff in the lower
	extremities, able to get a reading in the (R) arm ~~126~~/84
	post ductal (820a) after 3 attempts, capillary refill of 3-4 seconds
	cool extremities, temperature of 35.8 °C, layers of cover provided, GI & GU → an NJT feed of similac c̄ low fe 3 cal.
	infusing well at 30 cc/hour, abdomen soft and non
830 am	distended, x1 small formed yellow stool @ 830a, wet
	diaper, voiding spontaneously clear and light yellow
2 pm	1230pm NTT suctioned @ 4h, NS instilled and did CPT,
	got small to moderate amt. of clear to yellow with
	secretion, O2 sat - remains good 99% no change done
5p - 645 pm	in vent. and med/feeding, 645pm around 5p pt's rales
	heard in the (R) side of chest Dr. J. King notified, CPT'd and
	suctioned patient and positioned in his (R) side, breath sound
	improved & rales, O2 sat. had risen to 98%, patient's mother
	is in the process of giving him a bath, mother asking questions
	very concern. — [illegible]

1606ME REV.3/72

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

050497

NNC Peen

NVSuite-B 0200540C
TURNER, JONATHAN
KING, DIANA
N 10/28/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-44
If no patient patient's name, date of birth

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/9/97	Nursing
730p	Naturally intubated w/ 4.0 NTT with cuff deflated. On Servo Vent. SIMV. PEEP = 5
	HR = 92 Rate = 15 FiO_2 = 21%. Ten ck monitor
	w/ alarm limit set & operation.
	Mom on the process of bathing grandchild
8p	T = 37.4°C. HR = 92/min RR = 15/min. Being
	cuddled by present grandmother. HR remains
	@ 90's O_2 Sat = 100%. Lungs clear on
	auscultation. Doesn't need suctioning at
	present. Swaddled.
930	Back in crib. T = 35.8°C. Remains swaddled
	HR = 91/min BP: 89/60 RR = 15/min. Lungs clear.
	NP suctioned & scanty white secretion.
	UVC in place, running IV 20 cal/oz at 30 cc/h.
	Abdomen flat, soft on palpation. ⊘ BM.
	Wet pamper changed. Urine. No spontaneous
	movements noted; pupils ~ & un equally
non	reactive. Doesn't respond to any stimuli.
	Positioned to his side w/ towels.
10p	~~Sh Sh~~ Natural tears ↓ gtt on applied.
11p	T = 34°C. Infant warmer turned on
	at 7:30 p 10:30 T = 35°C. ⊘ warm. T 36°C

1605MR REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
2.30	T= 36.5° C. BT monitored c scanty urine production; alkaline urine; ecg leads on 2 mond; extremities warm to touch.
3.30	Swaddled & repositioned. Kept dry & comfortable.
6.00	T= 36.5°C. Lungs clear & alkaline urine, ~~[illegible]~~ gastric. Stomach empty & non distended. BT monitored c scanty urine production. Repositioned
7	Report given — [illegible]

050497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWGP 610-B 02005409
TURNER, JONATHAN
XIAO, DIANA
M 10/28/1996 PEC
2751 GRAND CONCOURSE 10468
BRONX NY 718 584-4400
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/10/97 7AM	Resident Note +
	6 month of s/p drowning
	Resp: SIMV. Resp 5. TV 93. PMV-15
	FiO_2 25%. Sat 97-100%
	Chest CTA. No spontaneous resp.
	Cardiac HR 91-104. BP Sys 80s-120s
	Dias. 60s to 80s. ~~Not~~ well perfused
	cap refill 3-4"
	FEN2 On 20 cal. full vol. feeds NG
	On Jevinol supp. urinev. stool
	90% T-35.2 to 35.5
	At 6 mth of s/p drowning
	Pt supportive care. looking for
	long term placement. If stable
	will get extube and trach.
	J. Weingart (L. Bachrach) PL2

R1608A/E REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/10/97 10 am	Peds attending Note.
	6 month old with no clinical brain function s/p near drowning. On ventilator support & nutrition. Pt's exam is unchanged.
	Neurology service to evaluate usefulness of a continued ultimate EEG in the evaluation of brain death.
	Plan: Continue present care
	J. Dewaggoner
5/10/97 10 45 am	Rotating fellow
	Jonathan is an almost 7 month old male s/p Drowning.
	Ventilator settings remain the same as do feedings.
	HR = 114 BP = 114/40 No changes in physical exam.
	Continue NG feedings and Ventilator Support...
	J. Dewaggoner

050441

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

AWCP 609-0 02005
TURNER, JONATHAN
KING, DIANA
N 12/29/19
2751 GRAND CONCOURSE
BRONX NY 71 8 99
80460017 04/15/199

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/10/97	Nursing Note 7A-7P
	Rec'd Jonathan in crib c̄ side rail ↑↑
	Color pink. Lips & nailbeds pink. Skin
	warm & dry to touch. Conts Ventilated
	c̄ #4.0 cuffed ETT to Servo 900c vent →
	ETT securely taped to face. IMV rate=15,
	PEEP=5, TV=90, FiO2=35%. Generally bilat
	c̄ clear sounds throughout. Continuous
	oximetry reading 98-100% on CA monitor
	c̄ alarms set. Vital (H-150, L-80)
	functioning well. HR 110's. Perfusion
	good c̄ warm extrems & palpable dis. pulses. CVP feeds cont c̄ Dx 5% @ 30cc/hr →
	tolerating. I&O via pamper count -
	dribbling urine. Pupils cont non-
	reactive & dilated (fixed). Ø spontaneous
	movement / breaths noted.
8A	VSS. T=36.5 ⓡ. Bundled in blankets to
	maintain temp.
10A	Suct'd ⅋ CPT for mod thick yellowish
	mucous. Mod amt from mouth
	& nares. Repositioned. Artificial tears instilled
12N	T=36.9 ⓡ Suct'd for mod amt of same.

R1605AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
5/10/97	Repositioned.
3P	Suctd for sm amt of cloudy sl yellow mucous from ETT. Sm amt same from mouth & nares. Repositioned
4P	T=37.5. Passed mod formed yellowish stool. Suctd for mod amt of same. Butt & skin care given. Mouth care done. Linens D'd & repositioned. Tolerating feeds. ETT taped D'd s difficulty
6P	Suctd for sm amt of same. Repositioned. Mom did not visit on this shift. — or call.
7P	~~[illegible]~~ Condition remains unchanged.
	[illegible]
5/11/97 7am	PCCM Turnover Note
	Status unchanged.
	Exam ± response to any stimuli
	Plan - continue present care
	[illegible]

051297

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS
OBSERVATION RECORD

NWCP 610-8 0200540C
TURNER, JONATHAN
RIC, DIANA
M 10/29/1996 P:
2751 GRAND CONCOURSE 104
BRONX NY 718 584-44
80460017 04/15/1997
Turner J
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	Nsg 7P - 7 3/4 OBSERVATION
5/10/97:	Baby received in crib, siderails are
	up. His head is elevated approx thirty
	degrees and he appears comfortable.
	Pupils are dilated & not reacting to
	light. He is flaccid & is totally
	unresponsive to tactile stimulation
	No gag. Intubated nasally with a
	size 4.0 cuffed ET tube, pt is being
	ventilated by the Servo ventilator
	SIMV Rate 15 TV92 PEEP 5 O_2 25%.
	No spontaneous breaths being taken,
	he is aerating bilaterally & is pale
	pink throughout. O_2 saturation is 96-
	97%. No rales or rhonchi heard on
	auscultation. He feels cool to touch,
	has palpable pulses and brisk
	cap refill. On C/A monitor & is
	in NSR. Abdomen is soft and flat
	NG tube in place & he is having
	H/Strength 20 calorie H/Formula 30 cc
	per hour.
8pm	Pt remains unresponsive V/S done
	T 36.8(R) HR 115 R 15 BP 95/55. Position

NR1805AME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	changed. Suctioned for scant secretion
	from E.T tube & mouth and moderate
	amt of Blood tinged mucus from
	nares.
10pm	Artificial tears instilled in eyes.
	Mother is visiting
5/11/97 12A	Repositioned & Suctioned, secretion from
	E.T tube is yellow & from nares its
	loose brown.
2A	Cared for as above, no change
	in his general condition.
4A	Suctioned & repositioned secretion as
	above. Absorption of feed is good
6A	Eye drops instilled & baby given a
	bath. ET tapes changed
7A	Report given to RN

050497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWCP 610-B 02005409
TURNER, JONATHAN
KING, DIANA
R 10/28/1996 PE
2751 GRAND CONCOURSE 104E
BRONX NY 718 584-440
80460017 04/15/1997 A

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/11/97 10:45	PCCU Fellow Progress Note - Dr. Lee
	Remains unchanged. Will continue
	supportive care.
5/11/97	PL-2 Note - Weekend
	7 month old boy w/ s/p Drowning incident.
	Resp - SIMV 15 PEEP=5 TV=92 FIO2=25 96-100%
	CV - 119 HR BP = 95-114/55-70
	Heme - Ø
	FEN/GI - SIM 20 30cc/hr cont.
	I=712 O's=7 Urine BMx2
	Ø lytes
	Neuro - Ø meds exam unchanged
	Plan: Cont. supportive care
	Karen Chen PL-2

JR1606M/E REV.3/72

0594

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

AMGP 607-0 02003495
TURNER, JONATHAN
KING, DIANA
M 10/23/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-44
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	OBSERVATION
5/11/97	Nursing 7P-7A
7:30a	Received infant in infant Crib - side lying position on C/O monitor, audible alarms - limits set and recorded on flow sheet - NSR - Good pulses x4 extremities capillary refill brisk - Orally intubated 7.5 cuffed ETT - on a Servo Vent - PIMV mode - TV 92 F_{IO_2} 25% - IMV 15 - Peep 5 - Oxygenating well bilaterally ⊖ BS - No spontaneous respiration CMV feed @ HF 20cc/hr at 30 cm/hr - abdomen soft - not distended - skin intact - Pupils F+D.
8P-	V/ss - afebrile - CPT & suctioned for large amt. of thick white secretion from ET - NP & OP - passive ROM done - PM bath - mouth care and skin care done by MOMC assistance. Tolerate feed well - No BM - MOM held Infant for 2½ hrs.
10PM	Condition unchanged & Sounded - O_2 sats 100 - same vent. settings - CV status stable - Tolerate feed well - Remains on HOG's Cap - Artificial Tears instilled OU.
12Am	Infant is back to bed - respiratory and CV status unchanged & Sounded - Auscultated. Passive Range of Motion done - wet diaper. D'ed @ PM. →

4R1606M/E REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
3rd	Condition unchanged - Respiratory and CV status unchanged - O_2 Sats 100 - Lungs clear (=) BS - CV status unchanged - Artificial tears OU instilled - Volumes feed well. NO BM - Wet diaper D^cd
4th	Afebrile - Temp. 36.7 - Respiratory and CV status stable - feed continued at 30 ml/hr - CPT & suctioning done for moderate amt. of loose white secretions - mouth care given - Repositioned for comfort - MOM in family room.
6th	Infant repositioned - wet diaper D^cd - Tears instilled OU - Pupils F+D - Feed continue at 30 ml/hr.
7th	Condition unchanged. Report given — Mode of delivery.

050497

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

NWCP 610-B 02005405
TURNER, JONATHAN
KING, DIANA
M 10/28/1996 F
2751 GRAND CONCOURSE
BRONX NY 718 584-44
80460017 04/15/1997

If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	(Note Continued) OBSERVATION
5/12/97	NEURO
	no ↑ in exam - no response/movt
	breathes ⊂ ventilator
	Assessment: 6 month old male s/p drowning
	Vegetative
	Plan: Continue supportive care
	J. Weingarten MD
5/12/97 10:15	Pcem attending note
	6 month old s/p near drowning
	No brain function on examination.
	On pressor and vent support
	awaiting placement.
	J. Weingarten MD
5/12/97 3:30 pm	Pcem attending Arrest Note
	Called to Jonathan's bedside for acute
	onset of a heart rate of 40. O_2
	sat reading 60. Chest compressions and
	Ambu ⊂ 100% initiated. He received atropine
	and epinephrine via ETT without response
	HR dropped to 0. He subsequently
	received 3 rounds of intravenous

11905ME REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	Pt also received $CaCl_2$ and $NaHCO_3$ during resuscitation.
	Arrest was called at 3:00 pm.
	pupils remained fixed and dilated
	Efforts made to reach pt's mother who apparently is at work. The shelter director is also trying to reach the mother.
	No answer at the grandmother's grandfather's number.
	Case referred to medical examiner #1629 since initial event was near-drowning.
	Neurology, child protection and Risk management informed of arrest.

MONTEFIORE MEDICAL CENTER
HENRY AND LUCY MOSES DIVISION
THE JACK D. WEILER HOSPITAL OF THE
ALBERT EINSTEIN COLLEGE OF MEDICINE

PATIENT PROGRESS OBSERVATION RECORD

MRLP 610-3 02005405
TURNER, JONATHAN
FIC, DIANA
M 10/29/1996
2751 GRAND CONCOURSE
BRONX NY 718 584-44
80460017 04/15/1997
TURNER, JONATHAN
If no plate, patient's name, adm. no., sex & Doctor

EVERY ENTRY MUST BE DATED & SIGNED

DATE	NURSING OBSERVATION
7-9a	RECEIVED JONATHON LYING IN STRETCHER BED SIDERAILS
5.11.97	HE CONTINUES UNRESPONSIVE TO ANY TYPE OF STIMULI
	Pupils are fixed AND dilated. # 4.0 Cuffed ETT
	PATENT AND secured. CONNECTED TO SERVO-VENT
	delivering 15 SIMV breaths c̄ 25% O2 PEEP 5
	T.V. 90 RESP rate 15 c̄ NO SPONTANEOUS breaths
	noted. LUNGS SOUNDS clear to AUSCULTATION
	CONTINUOUS pulse OXIMETRY O2 SATS 99-100%.
	Continuous MONITORING via HEWLETT PACKARD. H.R. 106-116
	c̄ regular wave formation noted. SKIN warm to
	touch Cap refill 2seconds. Slight dependent
	edema noted of extremities. Voiding into diaper.
	Housetormula infusing at 30cc/hr into NGT
	Abdomen soft AND full Stool noted in diaper.
8A	T° Afebrile - V.S. 100/62 · CONTINUES c̄ NO
	SPONTANEOUS respirations. SUCTIONED FOR moderate
	amts of white exudate. Mouth AND NARIS SUCTIONED
	for thick clear exudate.
10A	Turned and repositioned. SUCTIONED FOR
	moderate AMTS of same type exudate.
12N	Tolerating feeds - Voiding into diaper.
2P	CONTINUES UNRESPONSIVE to ANY type of stimuli.
	Pupils are fixed AND dilated. · No [illegible]

31005AWE REV.3/72

PLEASE DATE AND SIGN ALL ENTRIES

DATE	OBSERVATIONS
	noted when suctioned.
4P	Bath and skin care given - Mouth care, eye care given Suctioned for moderate amts of cream colored exudate - Breath sounds continue's wheezing or rales - Intermittant congestion audible.
5-6	Continues unresponsive. Pupils fixed and dilated. Mom did not visit today.
7P	Report given to relief nurse - Remains unresponsive. Turned and repositioned frequently to prevent breakdown - M. Lynch
9/12/97 10 AM	Rotating fellow
	Jonathan is a 6 month old male s/p Drowning...
	RESP
	SIMV Peep = 5 TV = 92 Rate = 15 FiO_2 = 25%
	SaO_2 = 98%
	Lungs clear
	FEN wt = 7.78 Med - Ferinsol
	Sim 20 30 cc/hr 62 kcal/kg/day
	Abdomen soft
	1 stool
	CARDIO HR = 112
	cap refill < 2 sec
	S_1S_2 ⊘ murmur