Pr No: 00900030633941

Reg No: 2013/205784/07

EAGLES 911
Real Help. Real Fast

P.O BOX 3844 Thohoyandou 0950
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C: 084 561 9900
C: 073 710 0702
F: 086 670 9246

PRF NO: 10078

Pre/PostAuth No:	Date: 09/12/2018, 09:55:23

	Time	Odometer
Recieved	14:54	246859
Dispatched	14:54	246859
Arrival Scene	14:58	246860
Depart Scene	15:15	246860
At Facility	18:05	247035
Available	20:49	247210
With Patent		
Without Patient		

Patient Name	Netshivhera Vhahangwele	Age	37
I.D No	8206200504087	Gender	Female
Physical Address	Stand no 822 unit E Thohoyandou	P Code	0950
Postal Address	P.O. box 541 Sibasa	P Code	0970
Work Details		Work Tell	
Home Tell		Cell	0714589766
Medical Aid Name	Sizwe primary care	M/Aid No	04288801831
Principal Member	Netshivhera V	MM I.D	8206200504087
Next of Kin	Lukhwareni Ntungufhadzeni	Tell	0760547406

Amb No: E4	Transport From: Khathumed,Dr Hadzhi, 2/789 P-East Punda Maria Rd, Thohoyandou 0950	Transport To:Netcare Pholoso Hospital	CPRV No:
Crew 1: Maamogo LR	HPCSA Reg: ECT 0009970	ICD 10:	
Crew 2: Nethengwe M	HPCSA Reg: BAA 1552953	Diagnosis: Fever of unknown origin	
Crew 3:	HPCSA Reg:		
Level of Care: ALS	Priority: P2	Call Type: Medical	
Remark/Motivation:			

Clinical Notes

Present History: Patient complaining of headache,fever,neck stiffness and body weakness
Primary Survey: No abnormalities detected
Secondary Survey: Skin hot on touch,neck stiffness,appears ill,photophobia and body weakness
Ample History: A-none,M-none,P-2013-laparoscopy,L-last night,E-Fever and headache

	Breath Rythm						Vitals							Neoro						
Time	Breath Rythm	Breath Sound	Air Entry	Trachea Position	02 1/min	SPO2	Level of Consci..	Resp. rate	Heart Rate	Rhythm	BP	Perfusion	Pain Score	Temperature	Pupil Size		Pupil Reaction		GCS(E:4 V:5 M:6)	Apgar	HGT (mmol/l)
															L	R	L	R			
15:05	Regular	Normal	Good	Central	R/air	94%	Alert	20	102	Regular	119 /59	Good	3	39.5	3	3	Brisk	Brisk	15/15	-	4.4
15:15	Regular	Normal	Good	Central	R/air	94%	Alert	18	104	Regular	119 /59	Good	3	39.3	3	3	Brisk	Brisk	15/15	-	4.4
16:00	Regular	Normal	Good	Central	R/air	95%	Alert	20	112	Regular	122 /63	Good	3	39.0	3	3	Brisk	Brisk	15/15	-	4.4
16:45	Regular	Normal	Good	Central	R/air	97%	Alert	18	106	Regular	122 /60	Good	3	38.7	3	3	Brisk	Brisk	15/15	-	4.4
17:30	Regular	Normal	Good	Central	R/air	95%	Alert	20	96	Regular	124 /73	Good	3	38.5	3	3	Brisk	Brisk	15/15	-	4.4
18:05	Regular	Normal	Good	Central	R/air	96%	Alert	18	100	Regular	124 /73	Good	3	38.0	3	3	Brisk	Brisk	15/15	-	4.4

Fluid Type	Volume	Site	Time Start	Time Stop	Signature
Sodium chloride	200ml	R/hand	13:25	18:05	

Drug Name	Dosage	Time	Route	Qualification	Signature
Rocephine	2mg	13:30	Ivi	Doctor	
Panamor	75mg	13:32	Imi	Doctor	

hghgjhhgh

Management of Patient:

Equipment Used	Alignment	Airway	Breathing	Circulation	Other
			- SP 02	- Colloids - IV Access	

Treated by: Maamogo LR Signature: Qualification: ECT	Handed over to: Baloyi N Signature: Qualification: EN	**Patient refuses Treatment or Transport** Name: Signature: Date:	**WCA No**: **COC No**: Netshivhera V

I the undersigned: Netshivhera V I.D No 8206200504087 describe herein as the patient, princepal member or guarantor, acknowledge and accept liability for all costs involved for the services rendered by Eagles 911 Emergency Services, even though I am a member of aid.

Signature:

Date: 2018-12-08