

Pr No: 00900030633941

Reg No: 2013/205784/07



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PRF NO: 10031

Pre/PostAuth No: 18-0602359-E-01	Date: 18/12/2018, 12:47:35
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	Time	Odometer
Recieved	11:38	393376
Dispatched	11:38	393376
Arrival Scene	11:40	393377
Depart Scene	12:03	393377
At Facility		
Available		
With Patent		
Without Patient		

Patient Name	Khashane Thizwihangwi6	Age	35
I.D No	8411190831082	Gender	Female
Physical Address	No 136 Mavunde Makuya	P Code	0971
Postal Address	P O BOX 889	P Code	0971
Work Details		Work Tell	
Home Tell		Cell	0792424123
Medical Aid Name	Gems Sapphire	M/Aid No	001083014
Principal Member	Rambauli M	MM I.D	7406176116087
Next of Kin	Rambauli Lucky	Tell	0725911460

Amb No: E2	Transport From: Dr Makulana unit 4 metropolitan centre thohoyandou CBD 0950	Transport To: Zoutpansberg private hospital	CPRV No:
Crew 1: Masevhe ZR	HPCSA Reg: ANA0153079	ICD 10:	
Crew 2: Nematodzi F	HPCSA Reg: BAA1381199	Diagnosis:	
Crew 3:	HPCSA Reg:		
Level of Care: ILS	Priority: P2	Call Type: Medical	
Remark/Motivation:			

Clinical Notes

Present History: Patient is para3 gravida 4 at33 weeks gestation complaining of persisting abdominal pain, dizziness and decreased fetal movement.
Primary Survey: No abnormalities detected
Secondary Survey: Pregnant, Pedal Edema, poor skin turgor, delayed capillary refill.
Ample History: A-unknown M Metformin P-known diabetic L-morning E-persisting lower abdominal pain

	Breath Rythm						Vitals							Neuro							
Time	Breath Rythm	Breath Sound	Air Entry	Trachea Position	O2 1/min	SPO2	Level of Consci..	Resp. rate	Heart Rate	Rhythm	BP	Perfusion	Pain Score	Temper ature	Pupil Size	Pupil Reaction		GCS(E:4 V:5 M:6)	Apgar	HGT (mmol/l)	
11:45	Regular	Normal	Good	Central	Room 2	98%	Alert	19	84	Regular	99/46	Fair	2	36.4	L 3	R 3	L Brisk	R Brisk	15/15		4.6
12:00	Regular	Normal	Good	Central	Room air	99%	Alert	18	80	Regular	98/50	Fair	1		3	3	Brisk	Brisk	15/15		
12:30	Regular	Normal	Good	Central	Room air	%	Alert	18	81	Regular	114/54	Fair	1		3	3	Brisk	Brisk	15/15		
	Regular	Normal	Normal	Central	Room air	97%	Alert	19	83	Regular	135/68	Good	2		3	3	Brisk	Brisk	15/15		

Fluid Type	Volume	Site	Time Start	Time Stop	Signature
Sodium chloride	800ml	Left hand	11:48		

Drug Name	Dosage	Time	Route	Qualification	Signature
hghghhgh					

Management of Patient: Patient assessed, calmed and reassured, iv line put up, patient transported on left lateral position during transportation, vital signs taken and monitored until handover at hospital

Equipment Used	Alignment	Airway	Breathing	Circulation	Other
			- SP O2	- IV Access	

Treated by: Masevhe ZR Signature: Qualification: ILS	Handed over to: Negeli Signature: Qualification: Rena	Patient refuses Treatment or Transport Name: Signature: Date:	WCA No: COC No: Khashane T
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I the undersigned: Khashane T I.D No 8411190831082 describe herein as the patient, principal 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: 2018-12-18