

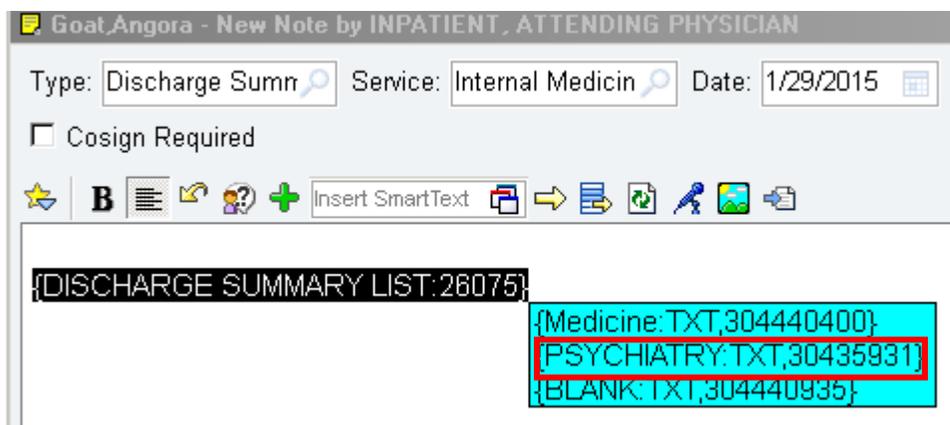
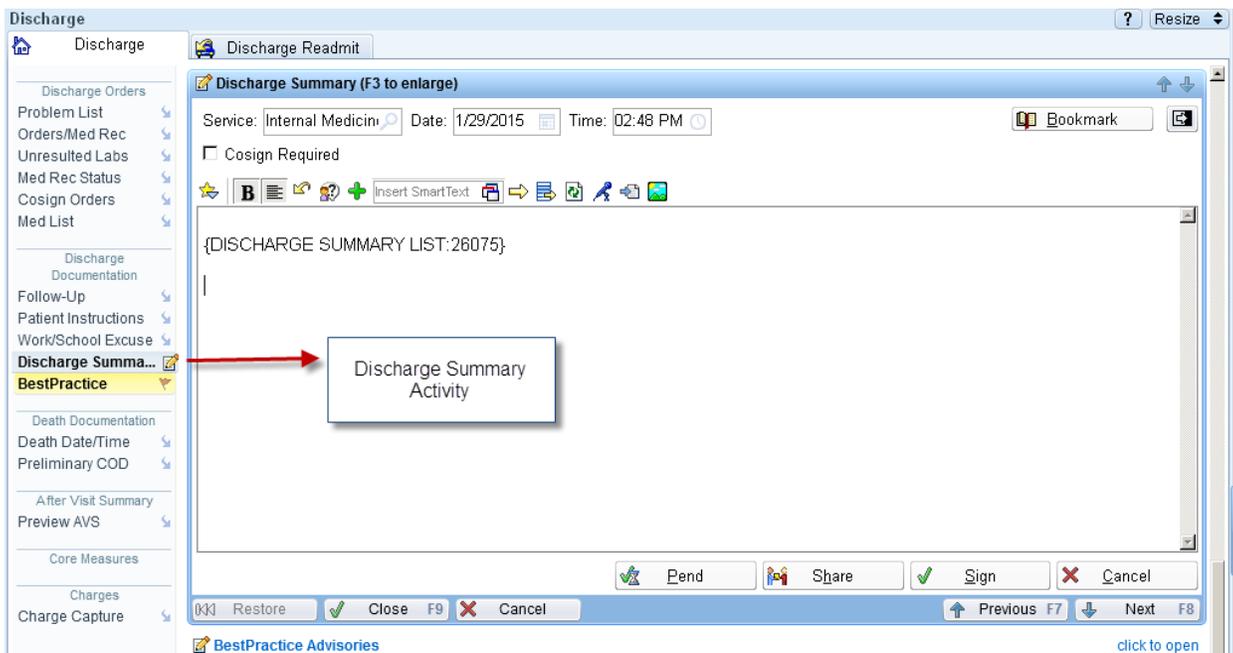
Psychiatry Discharge Summary

Smart Links currently contained in the discharge summary:

- Name, date, admitting physician, MRN, age, date of birth, admit date, discharge diagnoses (separated out by Axis), labs, EKG results, brain scan results, consult orders, follow up and discharge medication list.
- More links are under development

Finding the Discharge Summary:

The discharge summary is auto populated from the discharge summary activity in the discharge navigator. It is also populated automatically if you go to the notes activity and choose the note type of "Discharge Summaries".



PSYCHIATRY DISCHARGE SUMMARY AND POST DISCHARGE CONTINUING CARE PLAN

Date/Time: 2/2/2015 5:18 PM
Patient Name: GOAT, BILLY BOB
MRN#: 11025424
Age: 55 y.o.
Date of Birth: 5/1/1959

Date of Admission: 9/15/2014
Date of Discharge: ***
Admitting Physician: David Charles Weintritt, MD
Discharge Physician: {Discharge Physician:23328}

Event leading to hospitalization:

 See Admission note by *** on *** for additional details.

Discharge Diagnoses:

• Axis I as of 2/2/2015		
		ICD-9-CM
Axis I		
•	*Schizophrenia, acute	295.80
•	Depression with suicidal ideation	311
		V62.84
• Axis II as of 2/2/2015		
	None	
• Axis III:		
• Past Medical History		
Diagnosis	Date	
• Bilateral pneumonia	7/22/2014	
• Axis IV: ***		
• Axis V: GAF at Admission ***. GAF at Discharge ***.		

Labs/Scans/EKG

{Labs/scans/EKG:30426392}

Consults:

Consult Orders

Start		Ordered
02/02/15 1715	Inpatient consult to Interventional Radiology Once Provider: (Not yet assigned) Question: Reason for Consult? Answer: Needs a brain scan	02/02/15 1714
02/02/15 1706	Inpatient consult to nutrition services Once Provider: (Not yet assigned) Question: Reason for Consult? Answer: Patient has very specific tastes	02/02/15 1705

Mental Status Evaluation:

PSYCHIATRIC SPECIALTY EXAMINATION
<i>(1-5 bullets- Problem Focused; at least 6 bullets Expanded Problem Focused; at least 9 bullets - Detailed; all bullets- Comprehensive Exam)</i>
• <input type="checkbox"/> Vital Signs see RN assessment that I have reviewed.
General Appearance and Manner: <input type="checkbox"/> age appropriate <input type="checkbox"/> bearded <input type="checkbox"/> casually dressed <input type="checkbox"/> deviant <input type="checkbox"/> cooperative <input type="checkbox"/> disheveled <input type="checkbox"/> older than stated age <input type="checkbox"/> overweight <input type="checkbox"/> piercings <input type="checkbox"/> tattooed <input type="checkbox"/> thin & gaunt looking <input type="checkbox"/> well dressed <input type="checkbox"/> younger than stated age <input type="checkbox"/> good eye contact <input type="checkbox"/> avoidant eye contact <input type="checkbox"/> hesitant
Musculoskeletal: <input type="checkbox"/> normal <input type="checkbox"/> rigidity <input type="checkbox"/> flaccid <input type="checkbox"/> akathisia <input type="checkbox"/> choreoathetoid movt <input type="checkbox"/> tics Gait: <input type="checkbox"/> normal gait <input type="checkbox"/> gait abnormality_____
• Speech: <input type="checkbox"/> Normal pitch <input type="checkbox"/> normal volume <input type="checkbox"/> articulation error <input type="checkbox"/> delayed <input type="checkbox"/> increased latency of response <input type="checkbox"/> loud <input type="checkbox"/> pressured <input type="checkbox"/> profane <input type="checkbox"/> soft <input type="checkbox"/> perseveration
• Thought processes: <input type="checkbox"/> Normal <input type="checkbox"/> goal directed <input type="checkbox"/> logical <input type="checkbox"/> illogical <input type="checkbox"/> flight of ideas <input type="checkbox"/> goal directed <input type="checkbox"/> concrete <input type="checkbox"/> associations intact <input type="checkbox"/> abstract reasoning intact
• Description of associations <input type="checkbox"/> loose <input type="checkbox"/> circumstantial <input type="checkbox"/> concrete <input type="checkbox"/> tangential <input type="checkbox"/> intact
• Description of abnormal or psychotic thoughts <input type="checkbox"/> hallucination <input type="checkbox"/> delusions

Hospital Course:

Suicidal Status on Discharge:

Discharge Instructions:

Discharge Disposition: ***

Discharge Instructions given to: {Instruction given to:23337}

Questions that may arise between hospital discharge and your first follow-up appointment should be directed to ***

Case discussed with: {Case discussed:23338}

Discharge Plan:

Follow-up Information

Follow up with Scripps, Matthew D, DO .
Specialty: Family Medicine
Contact information: 13575 Heathcote Blvd 210 Gainesville VA 20155 571-248-4620

Attestation:

{IP Psychiatry DC Attestation:23339}

Patient discharged on more than 1 antipsychotic medication? {antipsychotic:30426393}

On discharge, was the patient on any psychotropic medication off label? {PSYCHOTROPIC OFF LABEL:26627}

Minutes spent coordinating discharge and reviewing discharge plan: *** minutes

Discharge Medications:

Discharge Medication List

Taking

clozapine 25 MG tablet

Dose: 25 mg

Commonly known as: CLOZARIL

Take 1 tablet (25 mg total) by mouth Every night at bedtime.

Signed by: Thomas M Fogarty, MD

2/2/2015 5:18 PM