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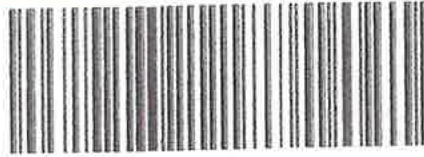
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CERTIFIED MAIL



7020 3160 0000 3941 1780

Cuyahoga County Sheriff
1215 West 3rd Street
Cleveland, Ohio 44113
Det. Myslowiec
SH-100185-54250



The MetroHealth System
Health Information Management Release of
Information (Subpoena); G108
2500 MetroHealth Drive
Cleveland, OH 44109

WP 2

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS; FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
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1. Article Addressed to:

*MetroHealth System
Health Management Release
of Information - G108
2500 MetroHealth Dr.
Cleveland, OH 44109*



9590 9402 6785 1074 5771 88

2. Article Number (Transfer from service label)

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PS Form 3811, July 2020 PSN 7530-02-000-9053

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Domestic Return Receipt

sent out

1-22-24



The MetroHealth System
2500 MetroHealth Drive
Cleveland, Ohio 44109-1998
216-778-7800
www.metrohealth.org

FAX

To: CUYAHOGA COUNTY SHERIFF'S **Fax Number:** 96983827
Phone Number: **Date:** 3/13/24 **Time:** 3:16:36 PM
Company:

From: Kelly Grimes **Fax Number:** 2167784344
Phone Number: 216-778-4344 **No. of pages:** 43
Company: The MetroHealth System (including cover page)

Subject: R. Perkins

**Message
Details:**

If there is a problem receiving this fax, please contact the above person, at the phone number listed.

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CERTIFICATE OF MEDICAL RECORDS

DATE: 01/23/24

STATE OF OHIO
COUNTY OF CUYAHOGA

I, Marcia Martin, RHIT, custodian, maker or Manager of the maker of the following relevant designated clinical record set records of Robert Perkins, MR# [REDACTED], hereby certify that the attached records are true and authentic copies of the relevant designated clinical record set, prepared in the usual course of business of said institution, and they were prepared by the employees of said institution on the dates endorsed thereon.

If you require any records not contained in this set, please file a request for the specific record you need. There may be further costs associated with providing those additional records.



Marcia Martin, RHIT
Supervisor, Health Information Management Department

SWORN TO AND SUBSCRIBED IN MY PRESENCE, this 23 day of JAN. 2024.



ABIGAIL BILINOVIC
Notary Public
State of Ohio
My Comm. Expires
October 17, 2026



Abigail Bilinovic

Notary Public, State of Ohio
My Commission Expires:
October 17, 2026
Recorded in Cuyahoga County

Please contact the Release of Information Services office at 216-778-4252 with any questions.

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3

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6225740

From:

To:2167782114

01/19/2024 13:59

#591 P.001/003

130742780



Sheriff Harold Pretel
Cuyahoga County Sheriff

Cuyahoga County Sheriff's Office

FACSIMILE TRANSMITTAL COVER SHEET

TO: MetroHealth Subpoena Response

FAX #: 216-778-2114

Phone #:

From: Det. Matthew Mysliweic

FAX #: 216-698-3827

Phone #:(216) 443-6130

Date: January 19, 2024

of Pages (Inc. Cover) 3

Please contact me if there is a problem with the receipt of this transmission.

Subpoena for the records of Robert James Perkins (DOB: [REDACTED])

CONFIDENTIALITY STATEMENT

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From:

To:2167782114

01/19/2024 13:59

#591 P.002/003

STATE OF OHIO
COUNTY OF CUYAHOGA

COURT OF COMMON PLEAS
CRIMINAL DIVISION

SS:

SEARCH WARRANT

TO: THE SHERIFF OF CUYAHOGA COUNTY AND/OR DETECTIVE MATTHEW K. MYSLIWIEC #78 AND ANY OTHER LAW ENFORCEMENT OFFICERS AS AUTHORIZED.

WHEREAS Affiant has exhibited probable cause necessary to search the below listed premises, as demonstrated in the incorporated affidavit attached hereto as Exhibit "A", wherein affiant avers that he has probable cause to believe, and does believe, that within the premises known as MetroHealth Systems, 2500 MetroHealth Drive, in the City of Cleveland, Cuyahoga County, Ohio, and further described as a health care provider facility/hospital, there is now being kept, concealed, and possessed the following evidence of a criminal offense:

Any and all medical records of Robert James PERKINS, DOB [REDACTED] who was treated on or about January 17, 2024 to January 18, 2024, including but not limited to: all photographs and statements; records, tests, and test results; the emergency department/room records; treating physician records; correspondence; x-rays; progress notes; practitioner notes; reports of follow-up appointments, and all other records relevant to the patient's care which are evidence of the following criminal offense and any other information that tends to establish a violation of the laws of the State of Ohio, to wit: Chapter 2903 and 2923 of the Ohio Revised Code.

I am satisfied that there is probable cause to believe that the property described is being maintained within the above-described premises and that grounds for issuance of this search warrant exist.

THEREFORE: You are hereby commanded in the name of the State of Ohio, with the necessary and proper assistance, including but not limited to medical professionals from the MetroHealth System, to serve this warrant and search forthwith within three days of the date hereof for the property specified at the above described premises, and if the property or any part thereof be found there, you

From:

To:2167782114

01/19/2024 14:00

#591 P.003/003

are commanded to seize it, and leaving a copy of this warrant and a receipt for the property taken, to prepare a written inventory of the property seized, to return this warrant to the undersigned or any Judge of the Court of Common Pleas, and to bring the property found on such search forthwith before said Judge, or some other judge or magistrate of the county having cognizance thereof.

Given my hand this 19 day of January 2024.


JUDGE, Court of Common Pleas
Cuyahoga County, Ohio

SL

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
[REDACTED] Sex: M
Visit date: 1/18/2024

01/18/2024 - E.D. Visit in MetroHealth Social Work

Reason for Visit

Chief Complaint [last edited by Reddick, Toshionna, LSW on 1/18/2024 0722]

- Trauma/complex Medical Situation

Visit Information

Provider Information

Encounter Provider
Reddick, Toshionna, LSW

Department

Name	Address
MetroHealth Social Work	2500 MetroHealth Drive Cleveland OH 44109

CSN: 1281414510

Medication List

Medication List

This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

Active at the End of Visit

None

Stopped in Visit

None

Clinical Notes

Progress Notes

Reddick, Toshionna, LSW at 1/18/2024 0722

Author: Reddick, Toshionna, LSW	Service: —	Author Type: Social Worker
Filed: 1/18/2024 7:42 AM	Encounter Date: 1/18/2024	Status: Signed
Editor: Reddick, Toshionna, LSW (Social Worker)		

CAT 1^[TR.1M]

Pt is a^[TR.1T] 31^[TR.1M] y/o male that presented to the ED via^[TR.1T] CEMS^[TR.1M] s/p^[TR.1T] multiple GSW to the chest, TRAUMA ARREST^[TR.1M]^[TR.1T]

Per CEMS, pt was involved in a 7 hour SWAT stand off at pt's home. CEMS stated that pt was unresponsive for 15 minuets prior to ED arrival and CPR was administered. Pt was reported to be in his window waving a sign that stated "Today is the day I die by cop". CEMS disclosed that pt is a Veteran.

CPD presented to the ED CAD: 24-015839. It was also reported that pt attempted to shoot out his window at CPD. Crisis intervention was attempted on scene, however, was unsuccessful. SW conducted a chart review and seen that pt was recently discharged from inpatient psychiatric services.

Pt was pronounced by^[TR.1M] Dr. Claridge^[TR.1C] TOD: 0306

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
MRN: 6225740, DOB: 4/6/1987, Sex: M
Visit date: 1/18/2024

01/18/2024 - E.D. Visit in MetroHealth Social Work (continued)

Clinical Notes (continued)

SW located pt's NOK (mother) [REDACTED] Pt's mother was notified by MD via phone due to her not being local. SW provided pt's mother with emotion support and explained next steps. SW also provided pt's mother with contact information for the medical examiners office.

Plan: Morgue^[TR.1M]

Toshionna R, MSW, LSW
ED Social Work^[TR.1T]

Electronically signed by Reddick, Toshionna, LSW at 1/18/2024 7:42 AM

Attribution Key

TR.1 - Reddick, Toshionna, LSW on 1/18/2024 7:22 AM
C - Copied, M - Manual, T - Template

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine

Reason for Visit

Visit Diagnosis [last edited by Schulte, Kirsten, DO on 1/18/2024 0739]

Name	Is ED?
Traumatic cardiac arrest (HCC) (primary)	Yes

Visit Information

Admission Information

Arrival Date/Time:	01/18/2024 0305	Admit Date/Time:	01/18/2024 0306	IP Adm. Date/Time:	
Admission Type:	Trauma 1	Point of Origin:	Non-healthcare	Admit Category:	
Means of Arrival:	Ems-cleveland	Primary Service:	Emergency Medicine	Secondary Service:	N/A
Transfer Source:		Service Area:	THE METROHEALTH SYSTEM	Unit:	MetroHealth Emergency Medicine
Admit Provider:		Attending Provider:	Lukens, Nicholas, MD	Referring Provider:	

ED Disposition

ED Disposition	Condition	User	Date/Time	Comment
Morgue	--	Miller, Julie A., LSW	Thu Jan 18, 2024 7:35 AM	--

Discharge Information

Date/Time: 01/18/2024 0803	Disposition: Expired In The Hospital	Destination: --
Provider: Cannady, Philip, MD	Unit: MetroHealth Emergency Medicine	

CSN: 1281413049

Treatment Team

Provider	Service	Role	Provider Team	Specialty	From	To
Cannady, Philip, MD	--	Attending	--	Emergency Medicine	01/18/24 0720	01/18/24 0803
Lukens, Nicholas, MD	--	Attending	--	Emergency Medicine	01/18/24 0305	01/18/24 0720
207-6366, Ip Team Trauma	--	Resident	Trauma IP CS	Trauma	01/18/24 0312	01/18/24 0520
Noles, Jontay	--	Emergency Medicine Representative	--	--	01/18/24 0308	--
Schulte, Kirsten, DO	--	Resident	--	Emergency Medicine	01/18/24 0307	01/18/24 0741

Events

ED Arrival at 1/18/2024 0305

Unit: MetroHealth Emergency Medicine
User: Noles, Jontay

Admission at 1/18/2024 0306

Unit: MetroHealth Emergency Medicine Room: TRAUMA14 Bed: 14
User: Noles, Jontay Patient class: Emergency

ED Roomed at 1/18/2024 0306

Unit: MetroHealth Emergency Medicine Room: TRAUMA14 Bed: 14
User: Noles, Jontay Patient class: Emergency

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Events (continued)

Transfer In at 1/18/2024 0402

Unit: MetroHealth Emergency Medicine	Room: RME 4	Bed: RME D
User: Medina, Jason, RN	Patient class: Emergency	

ED Transfer at 1/18/2024 0402

Unit: MetroHealth Emergency Medicine	Room: RME 4	Bed: RME D
User: Medina, Jason, RN	Patient class: Emergency	

Discharge at 1/18/2024 0803

Unit: MetroHealth Emergency Medicine	Room: RME 4	Bed: RME D
User: Streiner, Jennifer, RN	Patient class: Emergency	

Discharge at 1/18/2024 0803

Unit: MetroHealth Emergency Medicine	Room: RME 4	Bed: RME D
User: Streiner, Jennifer, RN	Patient class: Emergency	

Medication List

Medication List

This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

Prior To Admission

None

Discharge Medication List

None

Stopped in Visit

None

ED Provider Note

ED Provider Notes by Schulte, Kirsten, DO at 1/18/2024 0333

Author: Schulte, Kirsten, DO	Service: Emergency	Author Type: Resident
Filed: 1/18/2024 7:41 AM	Date of Service: 1/18/2024 3:33 AM	Status: Cosign Needed
Editor: Schulte, Kirsten, DO (Resident)		Cosign Required: Yes
Cosigner: Lukens, Nicholas, MD		

EMERGENCY DEPARTMENT - VISIT NOTE

HISTORY OF PRESENT ILLNESS [KS.1T]

No chief complaint on file. [KS.2T]

Interpreter: [KS.1T] not needed - patient preferred language is English. [KS.1M]

The history is provided by the [KS.1T] EMS [KS.1M] [KS.1T]

Robert Perkins [KS.2T] is a [KS.1T] 36 year old male [KS.2T] presenting to the ED for [KS.1T] trauma arrest, CAT 1. Multiple GSWs to chest, back neck. Down for 15 mins, PEA on monitor. S/p needle decompression in R chest. LMA in place. CPR in progress. [KS.1M]

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Provider Note (continued)

REVIEW OF SYSTEMS

Review of Systems^[KS.1T]

Unable to perform ROS^[KS.1M]; ^[KS.1T] Patient unresponsive^[KS.1M]

PAST HISTORY

Pertinent Past History^[KS.1T]

No past medical history on file.

There is no problem list on file for this patient.^[KS.2T]

Pertinent Social History:

PHYSICAL EXAM ^[KS.1T]

There were no vitals taken for this visit.^[KS.2T]

PRIMARY SURVEY:

AIRWAY: intact

BREATHING: bilateral breath sounds, trachea midline

CIRCULATION: 2+ radial and DP pulses

DEFICIT: motor and sensation grossly intact in BUE and BLE

GCS:^[KS.1T] 3^[KS.1M]

-- EYES:^[KS.1T] 1^[KS.1M]

-- VERBAL:^[KS.1T] 1^[KS.1M]

-- MOTOR:^[KS.1T] 1^[KS.1M]

SECONDARY SURVEY:

HEAD: no cephalohematomas, no Battles signs or racoon eyes

FACE: midface stable

EYES:^[KS.1T] fixed, dilated^[KS.1M]

EARS:^[KS.1T] no^[KS.1M] t examined^[KS.3M]

NOSE:^[KS.1T] no^[KS.1M] t examined^[KS.3M]

MOUTH:^[KS.1T] no^[KS.1M] t examined^[KS.3M]

C-SPINE:^[KS.1T] no^[KS.1M] t examined

NECK:^[KS.3M] penetrating injury x3^[KS.3C]

CHEST:^[KS.1T] approximately 6 penetrating wounds to the upper anterior R chest, 2 R axilla, 1 lower anterior R chest.^[KS.3C]

ABD: no abdominal tenderness or ecchymosis

PELVIS:^[KS.1T] no^[KS.1M] t examined^[KS.3M]

EXT:^[KS.1T] RUE:^[KS.3M] 2 penetrating wounds distal forearm, 1 wrist^[KS.3C] ^[KS.3M]

SKIN: no burns or road rash

BACK:^[KS.1T] 2 penetrating wounds inferior to R scapula^[KS.3C]

MEDICAL DECISION MAKING and ED COURSE ^[KS.1T]

Nursing triage and assessment notes reviewed and incorporated.^[KS.3M]

Evaluated by EM attending^[KS.1T] Lukens, Thomas^[KS.3M]

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
[REDACTED] Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Provider Note (continued)

Assessment & Plan:

36 year old male presenting to the ED for^[KS.1T] trauma arrest, CAT 1.^[KS.1M] Patient arrived unresponsive, GCS of 3. LMA was in place. Patient noted to have P a on monitor. Bedside ultrasound without cardiac activity. Patient with downtime >15 minutes. Time of death noted at 3:06 a.m..^[KS.3M]

----- IMPRESSION AND DISPOSITION -----^[KS.1T]

Clinical Impression

Diagnosis	Comment
Traumatic cardiac arrest (HCC) ^[146.8] ^[KS.2T]	

Morgue^[KS.3M]

Kirsten Schulte, DO^[KS.2T]

Electronically signed by Schulte, Kirsten, DO at 1/18/2024 7:41 AM

Attribution Key

- KS.1 - Schulte, Kirsten, DO on 1/18/2024 3:33 AM
- KS.2 - Schulte, Kirsten, DO on 1/18/2024 7:40 AM
- KS.3 - Schulte, Kirsten, DO on 1/18/2024 7:35 AM
- C - Copied, M - Manual, T - Template

ED Notes

ED Notes - Filed on 1/19/2024 1002

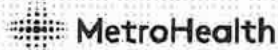
Scan on 1/19/2024 10:02 AM by User, Onbase (below)

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)



Emergency Department
TRAUMA FLOW SHEET

- Category 1
- Category 2
- Category 3

DATE: 1/18/24

Up/Downgrade to _____ by _____ at _____

EMS Timeout @ 0305 SUMMARY: 36 M involved w/ RW SWAT shooting
GSW to chest

NOTS#:

TRAUMA ALERT CALLED

MODE OF TRANSPORTATION

- Life Flight
- EMS
- Police / Fire Rescue
- Family / Self
- Other

TRANSPORT FROM

- Scene
- Home
- Hospital Name _____
- SNF _____

MECHANISM OF INJURY

Blunt Penetrating Burns

Motor Vehicle Occupant

- Driver
- Passenger - Front
- Passenger - Back
- Ejected

Motorcycle

- Driver
- Passenger

Bike

ATV

Other

Fall Feet

- Slips
- Standing

Pedestrian

Gunshot

Stabbing

Knife

Other _____

Industrial

Assault

Other _____

RESTRAINING / DEVICES

- Lap/Shoulder Belt Helmet
- Lap Belt Unknown
- Airbag None
- Child Seat

INTERACTION PTA

Time of Arrival: 0305

Time of Injury: _____

PRBC Transfusion prior arrival

ED Room: 14

AIRWAY

- Patent
- Nasal
- Oral
- # _____ E.T. Tube LMA
- # _____ N.T. Tube
- Cricothyroidotomy
- Tracheostomy
- Other _____

OXYGEN THERAPY

- 100% NRB Mask
- Other _____

FLUID RESUSCITATION

INTAKE:

_____ cc crystalloid/colloid

_____ cc blood

LINES/DRAINS:

10 Site _____ Size _____

Site _____ Size _____

DEVICES:

Foley _____ I/N/G

Chest Tube

Other _____

SPLINT

Backboard *removes*

C-Collar

Head Block/Rolls

Pelvic Binder / Sheet

Upper Ext. _____

Lower Ext. _____

PREHOSPITAL MEDS

ALLERGIES

Self epic

PERKINS, ROBERT
CSN: _____ MRN: _____
1/18/2024
11110/11111111
300
300

PAGE 1

SCORES

GLASGOW COMA SCALE	P/H	A			D/C
A. Eye Opening:					
Spontaneous = 4	4	4	4	4	4
To Voice = 3	3	3	3	3	3
To Pain = 2	2	2	2	2	2
None = 1	1	1	1	1	1
B. Verbal Response:					
Oriented = 5	5	5	5	5	5
Confused = 4	4	4	4	4	4
Inappropriate Words = 3	3	3	3	3	3
Incomprehensible Sounds = 2	2	2	2	2	2
None = 1	1	1	1	1	1
C. Motor Response:					
Obeys Commands = 6	6	6	6	6	6
To Pain:					
Purposeful Movement = 5	5	5	5	5	5
Withdraws = 4	4	4	4	4	4
Flexion = 3	3	3	3	3	3
Extension = 2	2	2	2	2	2
None = 1	1	1	1	1	1
TOTAL GLASGOW COMA SCORE: 13					

PUPILS	TIME	P/H	A		D/C
RIGHT	SIZE		4mm		
	RESPONSE		reactive		
LEFT	SIZE		4mm		
	RESPONSE		reactive		

PUPIL RESPONSE: N/R = NON REACTIVE S = SLUGGISH B = BRISK
 P/H: _____ NEOS: _____
 Self epic
 Self epic
 PS: _____ Ongs/ETOH: _____

03807701 (11/21)

Medical Records - Yellow Copy

Emergency Department - White Copy

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert

Sex: M

Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)

PRIMARY ASSESSMENT		PAGE 2								
PRIMARY ASSESSMENT	AIRWAY	<input type="checkbox"/> Patent	<input type="checkbox"/> Obstructed	<input type="checkbox"/> Nasal/Oral Airway	<input type="checkbox"/> Intubated	<input type="checkbox"/> Crico	<input type="checkbox"/> C Spine Immobilization			
	BREATHING	<input type="checkbox"/> WNL	<input type="checkbox"/> Spontaneous	<input type="checkbox"/> Shallow	<input type="checkbox"/> Non-Labored	<input type="checkbox"/> Labored	<input type="checkbox"/> Apneal	<input type="checkbox"/> EVM Assist.		
	BREATH SOUNDS	<input type="checkbox"/> WNL	<input type="checkbox"/> DIMINISHED	R L	<input type="checkbox"/> ABSENT	R L				
	CIRCULATION	<input type="checkbox"/> WNL	SKIN		PULSES					
			<input type="checkbox"/> Cool	<input type="checkbox"/> Diaphoretic	Carotid	R	L	Radial	R	L
			<input type="checkbox"/> Warm	<input type="checkbox"/> Cyanotic	Femoral	R	L	Dorsalis Pedis	R	L
			Cap Refill		Brachial	R	L	Post. Tib.	R	L
	DISABILITY/LOC	<input type="checkbox"/> Alert	<input type="checkbox"/> Verbal	<input type="checkbox"/> Pain	<input type="checkbox"/> Unresponsive	<input type="checkbox"/> C Spine Cleared by:				
		<input type="checkbox"/> Decerebrate	<input type="checkbox"/> Decorticate		<input type="checkbox"/> Flaccid	<input type="checkbox"/> Other				
	HEAD-ENT	<input type="checkbox"/> WNL	HEAD:		FACE:		EARS/EYES:			
<input type="checkbox"/> Drainage			<input type="checkbox"/> Deformity	<input type="checkbox"/> Swelling	<input type="checkbox"/> Unstable	<input type="checkbox"/> Drainage	<input type="checkbox"/> Wounds	<input type="checkbox"/> TM		
		<input type="checkbox"/> Wounds		<input type="checkbox"/> Wounds		<input type="checkbox"/> Edema	<input type="checkbox"/> Earplug in			
NECK	<input type="checkbox"/> WNL	<input type="checkbox"/> C-Spine Tenderness	<input type="checkbox"/> C-Spine Tenderness Level	<input type="checkbox"/> Wounds						
		<input type="checkbox"/> Tracheal Deviation R/L	<input type="checkbox"/> Step-off							
		<input type="checkbox"/> Distended Neck Veins R/L	<input type="checkbox"/> Swelling							
CHEST	<input type="checkbox"/> WNL	<input type="checkbox"/> Frib Segment R/L	<input type="checkbox"/> Contusions							
		<input type="checkbox"/> C-spilus R/L	<input type="checkbox"/> Wounds							
		<input type="checkbox"/> Sternal Tenderness								
ABDOMEN	<input type="checkbox"/> WNL	<input type="checkbox"/> Rigid	<input type="checkbox"/> Tender	<input type="checkbox"/> Wounds						
		<input type="checkbox"/> Distended								
		<input type="checkbox"/> RUQ	<input type="checkbox"/> RLQ	<input type="checkbox"/> LUQ	<input type="checkbox"/> U.C.					
GU/PELVIS	<input type="checkbox"/> WNL	PELVIS:		GU:		RECTAL:				
		<input type="checkbox"/> Stable	<input type="checkbox"/> Unstable	<input type="checkbox"/> Hematuria	<input type="checkbox"/> Prostate	<input type="checkbox"/> Schincter tone	<input type="checkbox"/> Present	<input type="checkbox"/> Absent		
		<input type="checkbox"/> Ecchymosis		<input type="checkbox"/> Normal	<input type="checkbox"/> Abnormal	<input type="checkbox"/> Not Assessed	<input type="checkbox"/> Gross Blood			
		<input type="checkbox"/> LMP		<input type="checkbox"/> Phapism						
EXTREMITIES	<input type="checkbox"/> WNL	MOTOR ABNORMAL		DESCRIPTION/DEFORMITY		<input type="checkbox"/> Wounds				
		<input type="checkbox"/> RUE	<input type="checkbox"/> LUE							
		<input type="checkbox"/> RLE	<input type="checkbox"/> LLE							
		SENSORY ABNORMAL								
		<input type="checkbox"/> RUE	<input type="checkbox"/> LUE							
		<input type="checkbox"/> RLE	<input type="checkbox"/> LLE							
BACK/SPINE	<input type="checkbox"/> WNL	<input type="checkbox"/> Spine Tenderness	<input type="checkbox"/> Step off	<input type="checkbox"/> Wounds						
		<input type="checkbox"/> Level	<input type="checkbox"/> Ecchymosis							
		<input type="checkbox"/> Backboard removed at								
						<input type="checkbox"/> TLS Spine Cleared by:				

PROCEDURES					
INTERVENTION	TIME	COMMENTS	INTERVENTION	TIME	COMMENTS
AIRWAY - NRB MASK			OPEN THORACOTOMY		
AIRWAY - INTUBATED	#		CHEST TUBE #1		
AIRWAY - CRICO	#		CHEST TUBE #2		
AIRWAY - TRACH	#		PFR CARDIOCENTESIS		
AMBUVENTILATOR		MODE RATE FIO2	GASTRIC TUBE N/G - O/C		
ABG			PCLEY		
END TIDAL CO2			PERITONEAL LAVAGE		
IV PERIPHERAL	#	SITE	X RAYS - C-SPINE		
IV PERIPHERAL	#	SITE	CX		
CENTRAL LINE	#	SITE	PELVIS		
WARMING INFUSER			FAST EXAM		
A-LINE	#	SITE	OTHER		
TRAUMA LABS			CTLS PRECAUTIONS		
EKG			SPLINTS		
OTHER			OTHER		
RLE ABI			TOURNIQUET	ON	OFF
LLF ABI			PELVIC BINDER	ON	OFF

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert

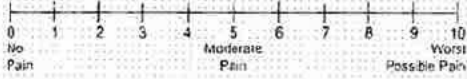
Sex: M

Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)

0-10 NUMERIC PAIN INTENSITY SCALE:
For use with over 13 years of age



MEDICAL RECORDS
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01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)


<p>Breathing/ Breath sounds - WNL Respirations regular with symmetrical chest rise Breathing unlabored & without signs of respiratory distress Breath sounds equal & clear bilaterally</p> <p>Circulation - WNL Pulses present to radial, femoral, DP, PT Skin warm and dry Normal cap refill No wounds or significant external bleeding</p> <p>Head / face/ ear/ eye - WNL No cephalohematoma No blood in nares, no hemotympanum, mid face stable No bony tenderness, ecchymosis, wounds EOM intact No periorbital swelling or ecchymosis No proptosis No septal hematoma</p> <p>Neck - WNL NO bony midline / spine tenderness No paraspinal tenderness No step-offs Trachea midline No wounds or hematoma</p> <p>Chest - WNL No chest tenderness No crepitus Equal chest rise No wounds / ecchymosis</p> <p>Abdomen - WNL Soft non tender Appropriate for gravid state No distention No ecchymosis or wounds</p> <p>GU/ Pelvis - WNL No bony tenderness and stable to compression No blood at the meatus No obvious vaginal bleeding on external exam No wounds or ecchymosis No gross blood per rectum Normal rectal tone - if indicated</p>	<p>Extremities - WNL No bony tenderness to upper and lower extremities Sensation intact to light touch No deformities, wounds, ecchymosis, swelling Full range of motion of all extremities</p> <p>Back - WNL No bony tenderness to T15 spine No ecchymosis, wounds No paraspinal tenderness No step-offs</p>
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MEDICAL RECORDS
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01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)



MetroHealth
Emergency Department
TRAUMA FLOW SHEET

PERKINS, ROBERT
M 1/18/2024
TRAUMA FLOW SHEET

SEE PAGE 5 YES

PROGRESS NOTES: PHOTOGRAPHS TAKEN YES NO BY WHOM

① IIC in progress on arrival EMS starts Down for 15 mins
EMS states PEA. EMS administered TXA w/ local in place pressure
bagging. Paused CPR @ 0305 for cardiac ultrasound.
No cardiac activity per Dr. W. T0306 called by
Dr. PL.

1 penetrating wound to ① capilla, 1 penetrating wound to ② thoracic
midline, 2 penetrating wounds to ③ maxilla, 1 anterior ④ chest
penetrating wound 1 lat chest penetrating wound, 1 ⑤ wrist
penetrating wound, 1 ⑥ dorsal hand wound 1 penetrating
⑦ deltoid hand. Needle decompression to ⑧ chest by EMS

Inpatient Admission Direct to OR _____ Date/Time _____ PIN _____
Physician Signature _____
Trauma Attending Signature _____

TRAUMA TEAM			
ED and Trauma Attending must be signed in and time of arrival documented			
SERVICE	NAME	CALLED	ARRIVED
TRAUMA ATTENDING	Cledge		305
ED ATTENDING	Lukins		0300
ED RESIDENT	Robottom/Shultz		0300
TRAUMA CHIEF RESIDENT			
NEUROSURGERY			
ORTHOPEDICS			
RESP THERAPY	J. Spive		
SOCIAL SERVICE	Reddick		

ADMITTING DIAGNOSIS _____

ADVANCE DIRECTIVES
 Patient/Family Quiescent And Does Not Have Advance Directive
 Patient Does Have Advance Directive As Follows
 Clinical Condition Precluded Discussion And No Bracket / Information Available

HANDOVER OF CARE
DISPOSITION TO: Morgue

CARE ASSUMED BY _____
ACCOMPANIED BY _____
REPORT CALLED TO _____ AT _____ BY _____

VALUABLES: ENVELOPE # _____
 GIVEN TO FAMILY ED SAFE
 CLOTHING inventoried w/pt

FAMILY/CAREGIVER NOTIFIED Y/N _____
ED ATTENDING: _____
TRAUMA NURSE #: Tatyana
PARAMEDIC: Anthony G
RECORDER: Christina P

MEDICAL RECORDS
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Cleveland OH 44109

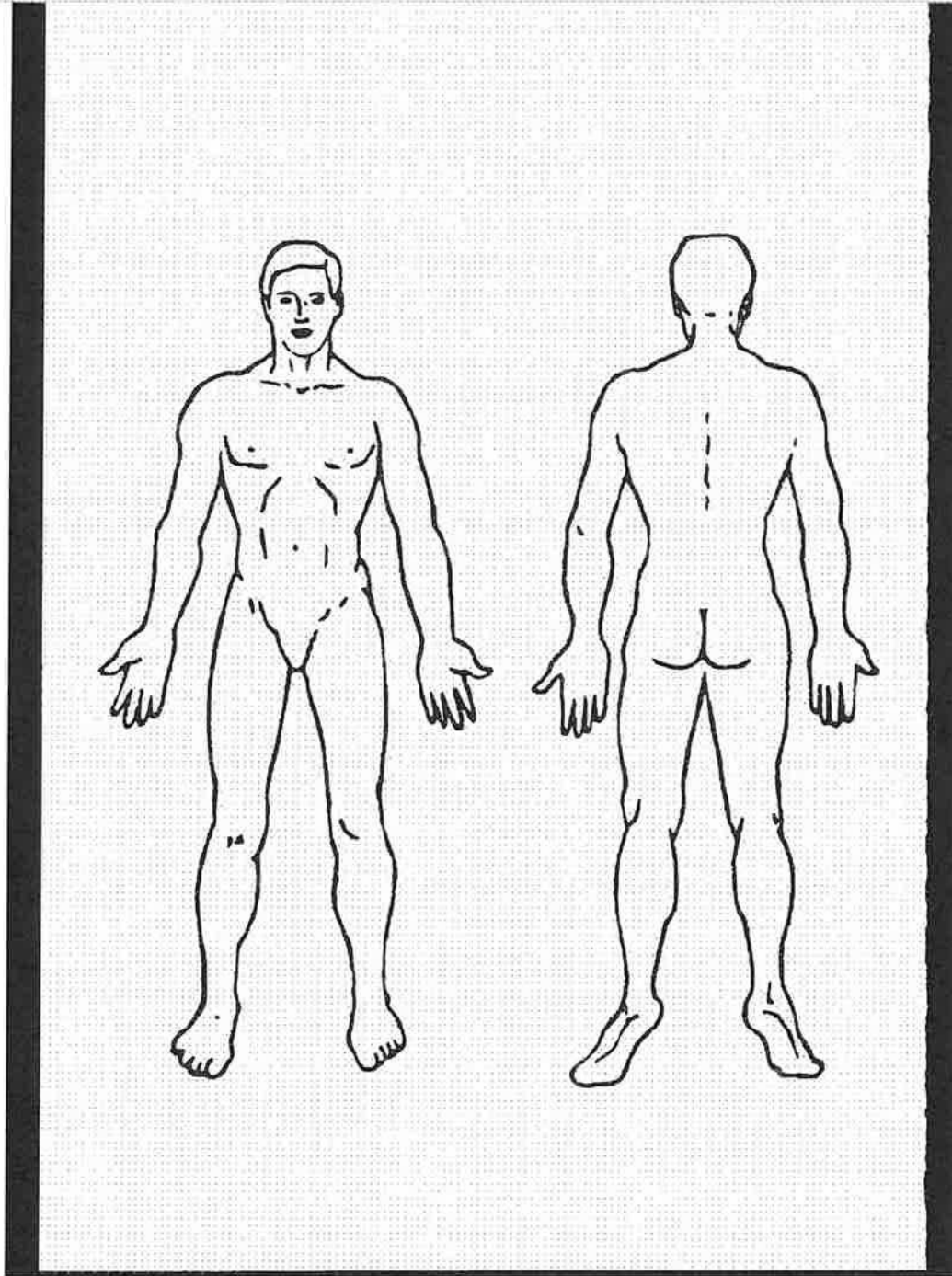
Perkins, Robert

Sex: M

Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)



Attribution Key

Attribution information is not available for this note.

ED Triage Notes by Platt, Christina, RN at 1/18/2024 0332

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
[REDACTED] Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Notes (continued)

Author: Piatt, Christina, RN Service: — Author Type: Registered Nurse
Filed: 1/18/2024 3:33 AM Date of Service: 1/18/2024 3:32 AM Status: Signed
Editor: Piatt, Christina, RN (Registered Nurse)

Prehospital Medications:[CP.1T]
EMS gave TXA (100ml fluid)[CP.1M]

Electronically signed by Piatt, Christina, RN at 1/18/2024 3:33 AM

Attribution Key

CP.1 - Piatt, Christina, RN on 1/18/2024 3:32 AM
M - Manual, T - Template

ED Care Timeline

Patient Care Timeline (1/18/2024 03:05 to 1/18/2024 08:03)

1/18/2024	Event	Details	User
03:05	Ongoing Rhythm Assessment	Other flowsheet entries CPR: STOPPED Pulses: ABSENT	Piatt, Christina, RN
03:05	Patient arrived in ED		Noles, Jontay
03:05	Assign Attending	Lukens, Nicholas, MD assigned as Attending	Lukens, Nicholas, MD
03:05:30	Emergency encounter created		Noles, Jontay
03:05:49	Arrival Complaint	GSW TO CHEST	
03:06	Patient roomed in ED	To room TRAUMA14	Noles, Jontay
03:07	Resident Assigned	Schulte, Kirsten, DO assigned as Resident	Schulte, Kirsten, DO
03:08:22	Team Member Assigned	Noles, Jontay assigned as Emergency Medicine Representative	Noles, Jontay
03:10:27	Trauma Category	Other flowsheet entries Trauma Category: Category 1	Piatt, Christina, RN
03:10:41	Acuity	Other flowsheet entries Acuity: I	Piatt, Christina, RN
03:10:48	Registration Completed		Noles, Jontay
03:12:10	Resident Assigned	207-6366, Ip Team Trauma assigned as Resident	Harmon, Allison, MD
03:12:10	Seen by provider		Harmon, Allison, MD
03:13:15	Charting Reminder Message Sent	Reminder Sent	Lukens, Nicholas, MD
03:18	Print Visit Labels	Other flowsheet entries Print Visit Labels: PRINT LABELS	Abdul-Alim, Asiya, EMR
03:18:40	ADT Labels Printed		Abdul-Alim, Asiya, EMR

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert

Sex: M

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01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Care Timeline (continued)

03:25:29	Belongings and Valuables	Patient Belongings at Bedside Belongings at Bedside: Clothing; Hearing aids Hearing Aid: (pt has B ear plugs in ears) Clothing: Shirt; Pants; Jacket/coat; Footwear; Socks; Other (comment) (ALL clothing cut except shoes and socks)	Piatt, Christina, RN
03:28:22	Staff Departed	Piatt, Christina, RN [Nurse] (Automatically marked out by Trauma End event); Ellis, Tatyana, RN [Nurse] (Automatically marked out by Trauma End event); Worley, David C [Paramedic] (Automatically marked out by Trauma End event); Claridge, Jeffrey A., MD [Other] (Automatically marked out by Trauma End event); Gandolfi, Anthony [Paramedic] (Automatically marked out by Trauma End event); Lukens, Nicholas, MD [Other] (Automatically marked out by Trauma End event); Schulte, Kirsten, DO [Resident] (Automatically marked out by Trauma End event); Rowbottom, Catherine, DO [Resident] (Automatically marked out by Trauma End event)	Piatt, Christina, RN
03:28:22	Trauma End		Piatt, Christina, RN
03:28:28	Postmortem Documentation	Postmortem Documentation Date of Death: 01/18/24 Time of Death: 0306 (Called by DR Claridge) Mortality Services: Notified Postmortem Care: Postmortem care provided; Other (comment) Social Work: Notified Disposition: Morgue Belongings: Inventoried Valuables: Inventoried	Piatt, Christina, RN
03:31:30	Patient Deceased		Piatt, Christina, RN
03:31:30	Morgue	ED Disposition set to Morgue	Piatt, Christina, RN
03:32:53	ED Triage Notes	Prehospital Medications: EMS gave TXA (100ml fluid)	Piatt, Christina, RN
03:35	BPA Flowsheet Action Data	iReferral to Lifebanc iReferral Trigger: Cardiac Death, Send Referral	Piatt, Christina, RN
03:37	iReferral to Lifebanc	Other flowsheet entries O2 Device: Bag ventilation O2 Flow Rate (l/min): 15 Humidified O2?: No	Piatt, Christina, RN
03:37	BPA Flowsheet Action Data	iReferral to Lifebanc Lifebanc Called Date: 01/18/24 Lifebanc Called Time: 0338	Piatt, Christina, RN
03:37:03	ED Reason for Visit	Postmortem Documentation LifeBanc Referral Number: 2024-001157 iReferral to Lifebanc Referral Record GUID: b0d4bd35-a6df-4042-9e8d-c79e9f8f5899 iReferral Status: Success	Piatt, Christina, RN
03:49	Print Visit Labels	Other flowsheet entries Print Visit Labels: PRINT LABELS	Abdul-Alim, Asiya, EMR
03:49:30	ADT Labels Printed		Abdul-Alim, Asiya, EMR

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

ED Care Timeline (continued)

03:51	Print Visit Labels	Other flowsheet entries Print Visit Labels: PRINT LABELS	Piatt, Christina, RN
03:51:18	ADT Labels Printed		Piatt, Christina, RN
04:02:14	Patient transferred	From room TRAUMA14 to room RME 4	Medina, Jason, RN
05:20:58	Resident Removed	207-6366, Ip Team Trauma removed as Resident	Witt, Martha Cassandra, MD
07:20:08	Remove Attending	Lukens, Nicholas, MD removed as Attending	Cannady, Philip, MD
07:20:08	Assign Attending	Cannady, Philip, MD assigned as Attending	Cannady, Philip, MD
07:35	Patient Deceased		Miller, Julie A., LSW
07:41:12	ED Provider Notes	Note filed at this time	Schulte, Kirsten, DO; Cosign required
07:41:12	ED Note Filed	ED Prov Note filed by Schulte, Kirsten, DO	Schulte, Kirsten, DO
07:41:17	Resident Removed	Schulte, Kirsten, DO removed as Resident	Schulte, Kirsten, DO
08:03	Patient discharged		Streiner, Jennifer, RN
08:03	LACE+ Score	Other flowsheet entries Lace+ Score: 8	Streiner, Jennifer, RN

H&P Notes

H&P by Claridge, Jeffrey A., MD at 1/18/2024 0312

Author: Claridge, Jeffrey A., MD Service: Trauma Surgery Author Type: Physician
 Filed: 1/18/2024 4:59 AM Date of Service: 1/18/2024 3:12 AM Status: Addendum
 Editor: Claridge, Jeffrey A., MD (Physician)



MetroHealth Medical Center
 Department of Surgery
 Division of Trauma Surgery, Acute Care Surgery, Critical Care, and Burns

TRAUMA SURGERY HISTORY AND PHYSICAL

Robert Perkins
 6225740

BASIC INJURY INFORMATION:

Level of activation:^[AH.1T] Category 1 Trauma^[AH.1M]
 Mode of transport:^[AH.1T] Ambulance: CEMS^[AH.1M]

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert

Sex: M

Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

R&P Notes (continued)

Mechanism of injury:^[AH.1T] GSW^[AH.1M]
Complicating features:^[AH.1T] Not applicable^[AH.1M]
Protective measures:^[AH.1T] Not applicable^[AH.1M]

Date of Injury:^[AH.1T] 1/18/2024^[AH.1M]
Time of Injury:^[AH.1T] Just PTA^[AH.1M]
Patient origin:^[AH.1T] Scene^[AH.1M]

HISTORY OF PRESENT INJURY:

Robert Perkins is a 36 year old male brought in by^[AH.1T] CEMS^[AH.1M] following^[AH.1T] GSW to R chest and neck.^[AH.1M] Incident happened at 0230. Patient was hit multiple times in the right chest. Patient was in traumatic arrest on scene brought in by EMS with CPR in progress. Intubated on scene.^[SK.1M]

Loss of consciousness:^[AH.1T] Yes^[AH.1M]

Initial interventions:^[AH.1T] Intubation and Other: CPR^[AH.1M]

Hemodynamic status in ED:^[AH.1T] Pulseless^[AH.1M]

PRIMARY SURVEY:

Airway:^[AH.1T] Intubated^[AH.1M]
Breathing:^[AH.1T] Assisted^[AH.1M]
Breath Sounds:^[AH.1T] Not assessed^[AH.1M]

Circulation:
Pulses:^[AH.1T] Absent^[AH.1M]
Skin:^[AH.1T] Pale and Cool^[AH.1M]

Disability:
Pupils:^[AH.1T] Not assessed^[AH.1M]
GCS:
Best Eyes:^[AH.1T] 1^[AH.1M]
Best Verbal:^[AH.1T] 1T^[AH.1M]
Best Motor:^[AH.1T] 1^[AH.1M]
Total:^[AH.1T] 3T^[AH.1M]

SECONDARY SURVEY:

There were no vitals taken for this visit.

Neurologic:^[AH.1T] Intubated^[AH.1M]

HEENT:

Head:^[AH.1T] Blood on lower face^[AH.1M]
Eyes:^[AH.1T] Not examined.^[AH.1M]
Ears:^[AH.1T] Not examined.^[AH.1M]
Nose:^[AH.1T] Not examined^[AH.1M]
Throat:^[AH.1T] Not examined.^[AH.1M]

Neck:^[AH.1T] Superficial injury, described as: penetrating injury x3^[AH.1M]

Chest:^[AH.1T] Superficial injury (abrasion, contusion, other): approximately 6 penetrating

MEDICAL RECORDS
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Cleveland OH 44109

Perkins, Robert
[REDACTED] Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

H&P Notes (continued)

wounds to the upper anterior R chest, 2 R axilla, 1 lower anterior R chest.^[AH.1M]

Pulmonary:

Cardiovascular:^[AH.1T] No cardiac activity on ultrasound^[AH.1M]

Pulses:^[AH.1T] Other: absent.^[AH.1M]

Abdomen:^[AH.1T] Not examined^[AH.1M]

Rectal:^[AH.1T] Not performed.^[AH.1M]

Pelvis/Perineum:^[AH.1T] Not examined^[AH.1M]

Musculoskeletal:

Back/Spine:^[AH.1T] Superficial injury, described as: 2 penetrating wounds inferior to R scapula, one mobile hard nodule medial to^[AH.1M]

Extremities:^[AH.1T] Right UPPER extremity abnormality: 2 penetrating wounds distal forearm, 1 wrist^[AH.1M]

Additional exam findings:^[AH.1T]

None^[AH.1M]

PAST MEDICAL HISTORY:^[AH.1T]

Unknown due to patient condition^[AH.1M]

PAST SURGICAL HISTORY:^[AH.1T]

Unable to obtain due to the patient's mental status or need for intubation.^[AH.1M]

PRE-ADMISSION MEDICATIONS:^[AH.1T]

Unable to obtain due to the patient's mental status or need for intubation^[AH.1M]

Anti-platelet use:^[AH.1T] Unknown^[AH.1M]

Anti-coagulant use:^[AH.1T] Unknown^[AH.1M]

ALLERGIES:^[AH.1T]

Unable to obtain due to patient's mental status or need for intubation^[AH.1M]

SOCIAL HISTORY:^[AH.1T]

Unable to obtain due to patient's mental status or need for intubation^[AH.1M]

Living status:^[AH.1T] Unknown^[AH.1M]

Primary language:^[AH.1T] Unknown^[AH.1M]

Functional status:^[AH.1T] Unknown^[AH.1M]

Impairments:^[AH.1T] Unknown^[AH.1M]

Assistive Devices Used:^[AH.1T] Unknown^[AH.1M]

FAMILY HISTORY:^[AH.1T]

MEDICAL RECORDS
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Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

H&P Notes (continued)

Unable to obtain due to the patient's mental status or need for intubation.^[AH.1M]

REVIEW OF SYSTEMS:^[AH.1T]

Unable to obtain due to the patient's mental status or need for intubation.^[AH.1M]

BASIC LABS

No results found for this or any previous visit.

RADIOLOGY:^[AH.1T]

Cardiac US: no cardiac activity^[AH.1M]

ASSESSMENT:

Robert Perkins is a 36 year old male^[AH.1T] with multiple penetrating wounds to R neck, R chest, R back. Absence of cardiac activity at time of death 0306^[AH.1M]

Final ED disposition:^[AH.1T] Morgue (Deceased)^[AH.1M]

Patient discussed with Attending Trauma Surgeon, Dr.^[AH.1T] Claridge^[AH.1M]^[AH.1T]

Trauma Evaluation Teaching Physician Note:

I saw and evaluated the patient in the ED. I was present within^[JC.1T] 1 minute^[JC.1M] of the patients arrival and examined him while he was in the ED. I personally obtained the key and critical portions of the history and physical exam as part of the trauma workup.. I reviewed the resident's documentation which is recorded in this note as his trauma team evaluation. I agree with the medical decision making as documented in this note, which are reflective in the Assessment and Plan in this Note. I directly communicated the plans with^[JC.1T] the team^[JC.1M]^[JC.1T]

Patient arrived greater than 15 minutes of CPR.

No cardiac signs of life.

Pronounced dead at 0306; he was DOA^[JC.1M]

Jeffrey A. Claridge, MD^[JC.2T]

Electronically signed by Claridge, Jeffrey A., MD at 1/18/2024 4:59 AM

Attribution Key

AH.1 - Harmon, Allison, MD on 1/18/2024 3:12 AM
JC.1 - Claridge, Jeffrey A., MD on 1/18/2024 4:52 AM
JC.2 - Claridge, Jeffrey A., MD on 1/18/2024 4:59 AM
SK.1 - King, Shannon, DO on 1/18/2024 4:20 AM
M - Manual, T - Template

MEDICAL RECORDS
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Perkins, Robert
Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Flowsheets

Acuity

Row Name	01/18/24 03:10:41				
OTHER					
Acuity	-CPIATT at 01/18/24 0310				

Belongings and Valuables

Row Name	01/18/24 03:25:29				
Patient Belongings at Bedside					
Belongings at Bedside	Clothing;Hearing aids -CPIATT at 01/18/24 0326				
Hearing Aid	pt has B ear plugs in ears -CPIATT at 01/18/24 0326				
Clothing	Shirt;Pants;Jacket/coat;Footwear;Socks Other (comment) ALL clothing cut except shoes and socks - CPIATT at 01/18/24 0326				

BPA Flowsheet Action Data

Row Name	01/18/24 0337	01/18/24 0335			
iReferral to Lifebanc					
iReferral Trigger	Cardiac Death, Send Referral - CPIATT at 01/18/24 0337				
Lifebanc Called Date	01/18/24 -CPIATT at 01/18/24 0338				
Lifebanc Called Time	0338 -CPIATT at 01/18/24 0338				

ED Reason for Visit

Row Name	01/18/24 03:37:03				
Postmortem Documentation					
LifeBanc Referral Number	2024-001157 - CPIATT at 01/18/24 0337				
iReferral to Lifebanc					
iReferral Status	Success -CPIATT at 01/18/24 0337				
Referral Record GUID	b0d4bd35-a6df-4042-9e8d-c79e9f8f5899 - CPIATT at 01/18/24 0337				

Initial Rhythm Assessment

Row Name	01/18/24 03:03:02				
OTHER					
Pulses	ABSENT -CPIATT at 01/18/24 0314				
Rhythm Analysis	PEA -CPIATT at 01/18/24 0314				

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Perkins, Robert
[REDACTED] Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Flowsheets (continued)

Interventions

Row Name	01/18/24 03:03:03				
OTHER					
CPR	CONTINUED - CPIATT at 01/18/24 0314				
Ventilation	Positive Pressure Ventilation - LMA - CPIATT at 01/18/24 0314				

Referral to Lifebank

Row Name	01/18/24 0337				
OTHER					
O2 Device	Bag ventilation - CPIATT at 01/18/24 0337				
O2 Flow Rate (l/min)	15 -CPIATT at 01/18/24 0337				
Humidified O2?	No -CPIATT at 01/18/24 0337				

LACE+ Score

Row Name	01/18/24 0803				
OTHER					
Lace+ Score	8 -JSTREINER at 01/18/24 0803				

Ongoing Rhythm Assessment

Row Name	01/18/24 0305				
OTHER					
CPR	STOPPED -CPIATT at 01/18/24 0325				
Pulses	ABSENT -CPIATT at 01/18/24 0325				

Postmortem Documentation

Row Name	01/18/24 03:28:28				
Postmortem Documentation					
Date of Death	01/18/24 -CPIATT at 01/18/24 0330				
Time of Death	0306 Called by DR Claridge -CPIATT at 01/18/24 0335				
Mortality Services	Notified -CPIATT at 01/18/24 0330				
Postmortem Care	Postmortem care provided;Other (comment) -CPIATT at 01/18/24 0330				
Social Work	Notified -CPIATT at 01/18/24 0330				
Disposition	Morgue -CPIATT at 01/18/24 0330				
Belongings	Inventoried -CPIATT at 01/18/24 0330				
Valuables	Inventoried -CPIATT				

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Perkins, Robert
[REDACTED] Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Flowsheets (continued)

at 01/18/24 0330

Print Visit Labels

Row Name	01/18/24 0351	01/18/24 0349	01/18/24 0318
OTHER	PRINT VISIT LABELS - CPIATT at 01/18/24 0351	PRINT VISIT LABELS - AABDULALIM1 at 01/18/24 0349	PRINT VISIT LABELS - AABDULALIM1 at 01/18/24 0318

Trauma Category

Row Name	01/18/24 03:10:27
OTHER	Trauma Category Category 1 -CPIATT at 01/18/24 0310

User Key

(r) = Recorded By, (t) = Taken By, (c) = Cosigned By

User ID	Name	Provider Type	Discipline
AABDULA LIM1	Abdul-Alim, Asiya, EMR	—	—
CPIATT	Piatt, Christina, RN	Registered Nurse	Nurse
JSTREINE R	Streiner, Jennifer, RN	Registered Nurse	Nurse

MEDICAL RECORDS
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Cleveland OH 44109

Perkins, Robert

Sex: M

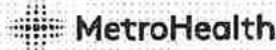
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Documents

MR - ED Chart - Scan on 1/19/2024 10:02 AM

Scan (below)



Emergency Department
TRAUMA FLOW SHEET

- Category 1
- Category 2
- Category 3

DATE: 1/18/24

Up/Downgrade to _____ by _____ at _____
EMS Timeout @ 0305 SUMMARY: 36 y.o. M involved w/ PD SWAT shooting
GSW to chest.

TRAUMA ALERT CALLED

MODE OF TRANSPORTATION

- Life Flight
- EMS
- Police / Fire Rescue
- Family / Self
- Other

TRANSPORT FROM

- Scene
- Home
- Hospital
- SNF

MECHANISM OF INJURY

- Blunt Penetrating Burns
- Motor Vehicle Occupant
 - Driver
 - Passenger - Front
 - Passenger - Back
 - Ejected
- Motorcycle
 - Driver
 - Passenger
- Bike
- ATV
- Other
 - Fall Foot
 - Steps
 - Standing
- Pedestrian
- Gunshot
- Stabbing
 - Knife
 - Other
- Industrial
- Assault
- Other

RESTRAINING / DEVICES

- Lap/Shoulder Belt Helmet
- Lap Belt Unknown
- Airbag None
- Child Seat

INTERACTION PTA

Time of Arrival: 6:40
Time of Injury: _____

PRBC Transfusion on arrival
ED Room: 14

AIRWAY

- Patent
- Nasal
- Oral
- # _____ E.T. Tube LMA
- # _____ N.T. Tube
- Cricothyroidotomy
- Tracheostomy
- Other

OXYGEN THERAPY

- 100% NR3 Mask
- Other

FLUID RESUSCITATION

INTAKE
_____ cc crystalloid/colloid
_____ cc blood

LINES/DRAINS
LO Snd BLE Size
Site _____ Size _____

DEVICES

- Foley J/N/G
- Chest Tube
- Other

SPLINT

- Backboard *removes*
- C-Collar
- Head Block/Rolls
- Pelvic Binder / Sheet
- Upper Ext.
- Lower Ext.

PREHOSPITAL MEDS

ALLERGIES

Self
epic

PERKINS, ROBERT PAGE 1



SCORES

GLASGOW COMA SCALE	P/H	A		D/C
A Eye Opening				
Spontaneous = 4	4	4	4	4
To Voice = 3	3	3	3	3
To Pain = 2	2	2	2	2
None = 1	1	1	1	1
B Verbal Response				
Oriented = 5	5	5	5	5
Confused = 4	4	4	4	4
Inappropriate Words = 3	3	3	3	3
Incomprehensible Sounds = 2	2	2	2	2
None = 1	1	1	1	1
C Motor Response				
Obeys Commands = 6	6	6	6	6
To Pain = 5	5	5	5	5
Purposeful Movement = 4	4	4	4	4
Withdraws = 3	3	3	3	3
Flexion = 2	2	2	2	2
Extension = 1	1	1	1	1
TOTAL GLASGOW COMA SCORE: 13				

PUPILS	TIME	P/H	A	D/C
RIGHT	SIZE		<i>Fixed</i>	
	RESPONSE		<i>sluggish</i>	
LEFT	SIZE		<i>Fixed</i>	
	RESPONSE		<i>sluggish</i>	

PUPIL RESPONSE: NR = NON REACTIVE S = SLUGGISH B = BRISK
 PMH: *Self epic* MEDS: *Self epic*
 PSY: _____ Drug/ETOH: _____

PRIMARY ASSESSMENT

SECONDARY ASSESSMENT

1303 AIRWAY Patent Obstructed Nasal/Oral Airway Intubated Cricoid C Spine Immobilization

BREATHING WNL Spontaneous Shallow Non-Labored Labored Apneal BVM Assist

BREATH SOUNDS WNL DIMINISHED R L ABSENT R L

CIRCULATION WNL Cool Diaphoretic Warm Cyanotic Cap Refill

PULSES Carotic R L Femoral R L Brachial R L Radial Dorsalis Pedis R L Post. Tib. R L

DISABILITY/LOC Alert Verbal Pain Unresponsive C Spine Cleared by Decerebrate Decorticate Flaccid Other

HEAD-ENT WNL

HEAD: Drainage Deformity Wounds Hematoma Edema

FACE: Stable Unstable Wounds

EARS/EYES: Drainage Wounds Ear Plugs in TM R L

NECK WNL C-Spine Tenderness Tracheal Deviation R L Distended Neck Veins R L C-Spine Tenderness Level Step-off Swelling

CHEST WNL Full Segment R L Crepitus R L Sternal Tenderness Costoverchondral Wounds

ABDOMEN WNL Rigid Tender Distended RUO RLO LUQ LLC Wounds

GU/PELVIS WNL

PELVIS: Stable Unstable Ecchymosis LMP

GU: Hematuria Prostate Normal Abnormal I/A Pharyngitis

RECTAL: Sigmoid Intestine Present Absent Not Assessed Gross Blood

EXTREMITIES WNL RUE LUE RLE LLE

MOTOR ABNORMAL DESCRIPTION/DEFORMITY Wounds

SENSORY ABNORMAL RUE LUE RLE LLE

BACK/SPINE WNL Spine Tenderness Level Backboard removed at Step off Ecchymosis Wounds

TLS Spine Cleared by: _____

PROCEDURES

INTERVENTION	TIME	COMMENTS	INTERVENTION	TIME	COMMENTS
AIRWAY - NPS MASK			OPENTHORACCTOMY		
AIRWAY - INTUBATED			CHEST TUBE #1		
AIRWAY - CRICOID			CHEST TUBE #2		
AIRWAY - TRACH			PERICARDIOCENTESIS		
AMBIVENTILATOR		MODE RATE FIO2	GASTRIC TUBE NEG - QIV		
ABG			FOLEY		
END TIDAL CO2			PERITONEAL LAVAGE		
IV PERIPHERAL		SITE	XRAY'S C-SPINE		
IV PERIPHERAL		SITE	CXR		
CENTRAL LINE		SITE	PELVIS		
WARMING INFUSER			FAST EXAM		
A-LINE			OTHER		
TRAUMA LABS		SITE	CTLS PRECAUTIONS		
EKG			SPLINTS		
OTHER			OTHER		
RLE ABI			TOURNIQUET	ON	OFF
LLE ABI			PELVIC BINDER	ON	OFF

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

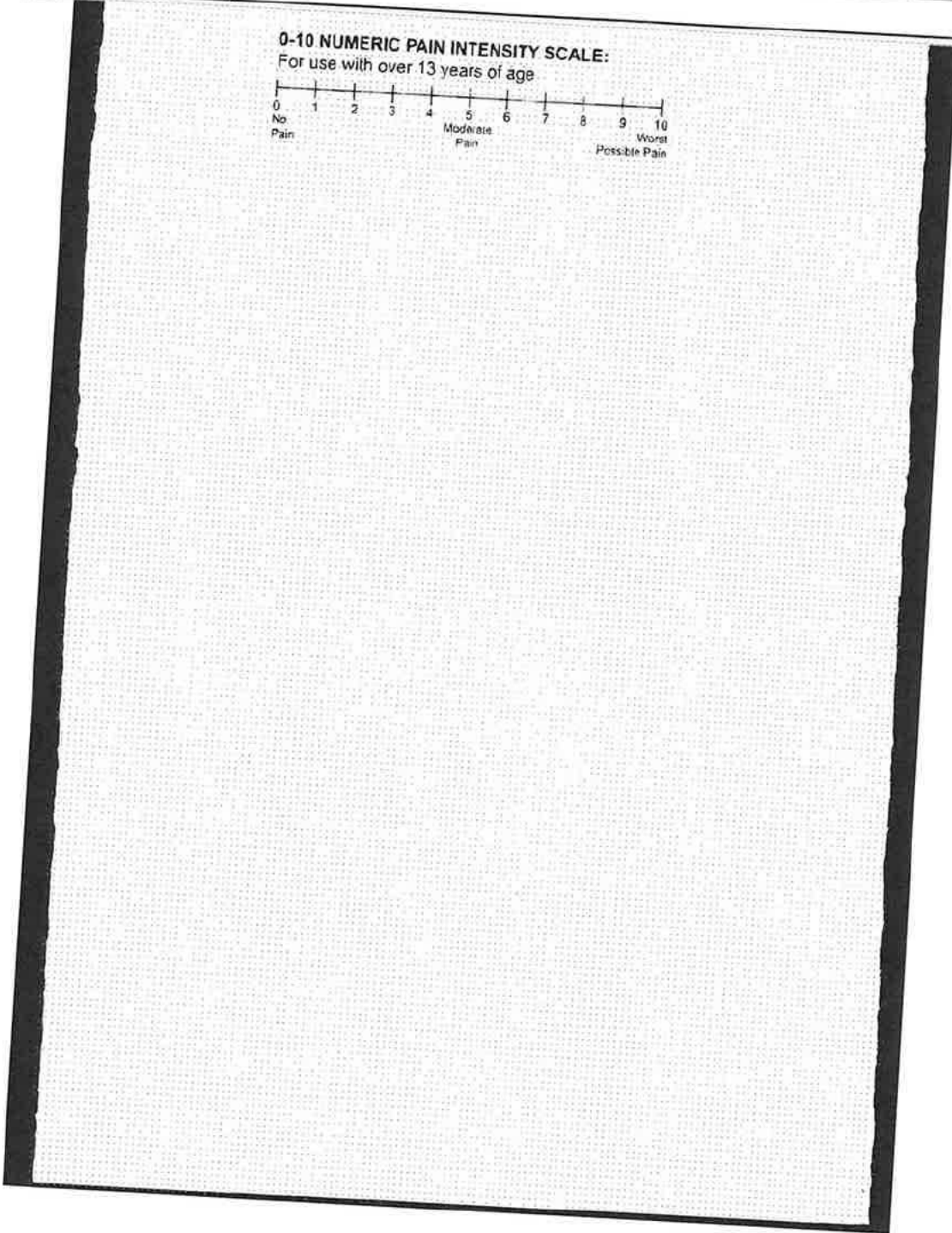
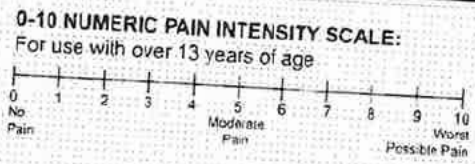
Perkins, Robert

Sex: M

Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Documents (continued)



01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Documents (continued)

Breathing/Breath sounds - WNL
Respirations regular with symmetrical chest rise
Breathing unlabored & without signs of respiratory distress
Breath sounds equal & clear bilaterally

Circulation - WNL
Pulses present to radial, femoral, DP/PI
Skin warm and dry
Normal cap refill
No wounds or significant external bleeding

Head / face / ear / eye - WNL
No cephalohematoma
No blood in nares, no hemotympanum, mid face stable
No bony tenderness, ecchymosis, wounds
EOM intact
No periorbital swelling or ecchymosis
No proptosis
No septal hematoma

Neck - WNL
NO bony midline c spine tenderness
No paraspinal tenderness
No step-offs
Trachea midline
No wounds or hematomas

Chest - WNL
No chest tenderness
No crepitus
Equal chest rise
No wounds / ecchymosis

Abdomen - WNL
Soft non tender
Appropriate for gravid state
No distention
No ecchymosis or wounds

GU/Pelvis - WNL
No bony tenderness and stable to compression
No blood at the meatus
No obvious vaginal bleeding on external exam
No wounds or ecchymosis
No gross blood per rectum
Normal rectal tone - if indicated

Extremities - WNL
No bony tenderness to upper and lower extremities
Sensation intact to light touch
No deformities, wounds, ecchymosis, swelling
Full range of motion of all extremities

Back - WNL
No bony tenderness to TLS spine
No ecchymosis, wound
No paraspinal tenderness
No step-offs

MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

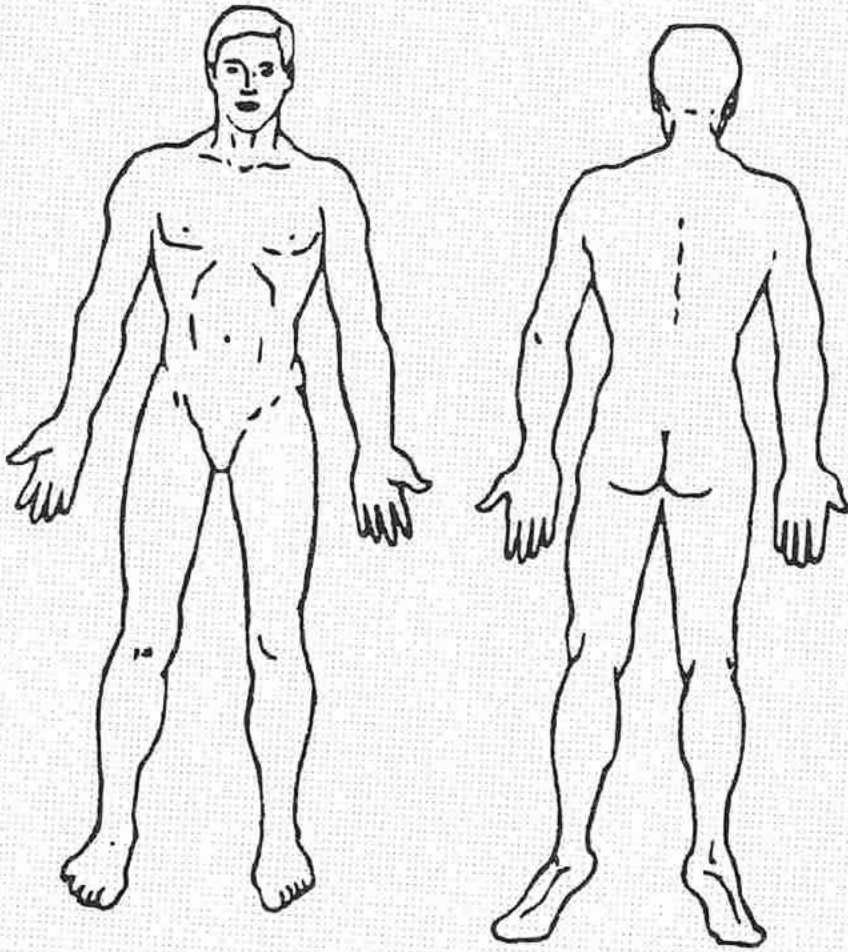
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01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Documents (continued)



MEDICAL RECORDS
2500 MetroHealth Drive
Cleveland OH 44109

Perkins, Robert
[Redacted] Sex: M
Adm: 1/18/2024, D/C: 1/18/2024

01/18/2024 - ED in MetroHealth Emergency Medicine (continued)

Documents (continued)

MR - EMS Run Sheets - Scan on 1/18/2024 6:49 AM

Scan (below)

INBOUND NOTIFICATION - FAX RECEIVED SUCCESSFULLY				
TIME RECEIVED	REMOTE CSID	DURATION	PAGES	STATUS
January 18, 2024 AT 6:24:25 AM EST	FAX	4:26	9	Received
1/18/2024 11:17 AM FROM: [Redacted]	TO: 412169570470	P 1		

Cleveland Emergency Medical Service

Tel #

Fax #: 216-623-4599

FACSIMILE COVER PAGE

To: METROHEALTH MEDICAL CENTER

Fax #: +1 (216) 957-0470

Subject: Patient Care Report for patient PERKINS, ROBERT Run Number 5613

Sent: 1/18/2024 6:17:40 AM

Pages: 9

Note: Patient care report being faxed to METROHEALTH MEDICAL CENTER from ZOLLS Field Data Fax Server