ARKANSAS STATE CLAIMS COMMISSION

FEB 2 5 2011

Piesse Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION Of the State of Arkansas

RECEIVED

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Mr.		Do Not	Write in These Space	
Mrs.		Claim No.	11-0554-CC	
3 Ms. 3 Miss			bruary 25,	2011
Florence West INF Chalre	s West, an Ciai	mant (Me		(Year)
Incapacitated Person, and Jim V	'erschoyle, Guardian Ad Li	.tem Amount of Claim	s ?	
· ***		Fund UAMS		
State of Arkansas, Respondent				
University of AR Medi	cal Sciences	Negligenc	e/Personal	 Injury/ Pain &
	COMPI	AINT Sufferin	g/Mental :	Anguish, Etc.
				anguist, nec.
Florence West (Name)	, the above named Claimant, of	433CR3114 New Bos	iton	(Chy)
TX,75570 903.667-4536				
(State) (Zip Code) (Daytime Pione l	County of Bowie	represented by Jack N	cursel, if any, for Claim)	Birgess,IIP
of 2301 Moores Lane Texar	kana TX 75503	903/838	_	
of 2301 Moores Lane Texar (Street and No.)	(City) (State)	(Zip Code) (Phone No.)	(Pax N	1/832=84 89
State agency involved: <u>University</u> o	of Arkansas	Amount sought: Unde	termined at	this time
Month, day, year and place of incident or service				
Replanation: Please see attac		Original Complain	H.	
Applianting Flease see accae		OLLANDIA GOMPLON	<u> </u>	
				
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No ; when? N/A	- to whom	/A		
(Yes or No) (Month) (De	ny) (Year) and that the following action was taken th		erinat)	
and that S_N/A was paid:	thereon: (2) Has any third person or corpo	ration on interest in this claim? Ye:	5; if so, at	ste name and address
Charles West See Ad	dress Above			
(Name) and that the nature thereof is as follows: Floren	(Street or R.F.D. & No.) ace West brings this	claim on behalf o	(State) (Zi f and next.t.	b Code) friend
of Charles J West	:endwas acquired on			thefollowing mamer:
an incapacitate	al person			
THE UNDERSIGNED states on cath the	at he or she is familiar with the matter	and things out forth in the above	complaint, and that he c	r she verily believes
that they are true.	-	Λ	,	
Florence West		loience We	at .	·
(Print Claimant/Representative	Name)	1	Islinint/Representat	
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STEPHANIE BOYD CRANE NOTARY PUBLIC	מחד	day of Februa	(Month)	
STEPHANIE BOYD CRANE NOTARY PUBLIC STATE OF TEXAS	on this (Date)	shari Boy	(Month)	2011
STEPHANIE BOYD CRANE NOTARY PUBLIC STATE OF TEXAS My Commission Expires 9-11-2014	on this (Date)	share Boy	(Month) (Notary Public)	2011
STEPHANIE BOYD CRANE NOTARY PUBLIC STATE OF TEXAS My Commission Expires 9-11-2014	on this (Date)	shari Boy	(Month)	2011

BEFORE THE STATE CLAIMS COMMISSION OF THE STATE OF ARKANSAS

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian *ad litem* for CHARLES J. WEST

CLAIMANTS

VS.

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES; UAMS MEDICAL CENTER UNIVERSITY HOSPITAL; NANCY HOGUE, NURSE; CASEY R. SCALES, RESPIRATORY THERAPIST; CHRISTINA GARNES, R.N.; JANE/JOHN DOE I, licensed nurse; JANE/JOHN DOE II, licensed nurse; JANE/JOHN DOE III, licensed nurse; JANE/JOHN DOE IV, respiratory therapist; and JANE/JOHN DOE V, respiratory therapist ARKANSAS STATE CLAIMS COMMISSION FEB 2 5 2011

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RESPONDENTS

ORIGINAL COMPLAINT

Claimant, FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, An Incapacitated Person, through her undersigned counsel brings this action against Respondents UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, UAMS MEDICAL CENTER UNIVERSITY HOSPITAL, NANCY HOGUE, NURSE, CASEY R. SCALES, RESPIRATORY THERAPIST, CHRISTINA GARNES, R.N., JANE/JOHN DOE I, licensed nurse, JANE/JOHN DOE II, licensed nurse, JANE/JOHN DOE IV, respiratory therapist, and JANE/JOHN DOE V, respiratory therapist, and JANE/JOHN DOE V, respiratory therapist, and hereby alleges and states:

CLAIMANTS

- FLORENCE WEST resides in New Boston, Bowie County, Texas. She is married to CHARLES J. WEST.
- CHARLES J. WEST resides in Sunny Acres Nursing Home, 12520 FM 1840, Dekalb,
 Bowie County, Texas 75559. He resides in a nursing home as a direct result of the negligence of the Defendants named herein.

3. JIM VERSCHOYLE is the duly appointed guardian *ad litem* for CHARLES J. WEST as evidenced by the Order Appointing Guardian *ad litem*, attached hereto as Exhibit A and incorporated by reference.

RESPONDENTS

- 4. Respondent UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES is a part of the University of Arkansas, which is a body politic and corporate, organized under the laws of the State of Arkansas. See Ark. Code Ann. §§ 6-64-202 & 6-64-401. Pursuant to Ark. Code Ann. § 6-64-402(b)(1), Respondent UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, through its Board of Trustees, "shall employ all necessary supervisors, professors, teachers, agents and servants" to ensure that its medical department is "operated in a first-class manner." Respondent UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES may be served through its Board of Trustees, namely B. Alan Sugg, President, at 240 North University, Little Rock, Arkansas 72207.
- 5. Upon information and belief, Respondent UAMS MEDICAL CENTER UNIVERSITY HOSPITAL is a hospital operated by UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES. Respondent UAMS MEDICAL CENTER UNIVERSITY HOSPITAL may be served through its Chief Operating Officer, Melissa Fontaine, at 4301 W. Markham, Little Rock, Arkansas 72205.
- 6. Respondent NANCY HOGUE, NURSE, is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 7. Respondent CASEY R. SCALES, RESPIRATORY THERAPIST, is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 8. Respondent CHRISTINA GARNES, R.N., is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER

UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.

- 9. Respondent JANE/JOHN DOE I is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of the filing of this Original Complaint, Claimant is not aware of the identity and location of this Respondent.
- 10. Respondent JANE/JOHN DOE II is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of the filing of this Original Complaint, Claimant is not aware of the identity and location of this Respondent.
- 11. Respondent JANE/JOHN DOE III is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of the filing of this Original Complaint, Claimant is not aware of the identity and location of this Respondent.
- 12. Respondent JANE/JOHN DOE IV is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of the filing of this Original Complaint, Claimant is not aware of the identity and location of this Respondent.
- 13. Respondent JANE/JOHN DOE V is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of the filing of this Original Complaint, Claimant is not aware of the identity and location of this Respondent.

ACTS OF AGENTS

14. Whenever in this Complaint it is alleged that any of the Respondents did any act or thing, it is meant that the particular Respondent referred to, either personally or through their respective employees or representatives, did such act or thing, and that, at the time such act or thing was done, it was done in the ordinary course and scope of employment of that Respondent's officers, agents, servants, or representatives, and Respondents are responsible for the acts of their/its

officers, agents, servants, employees, or representatives through the doctrine of respondeat superior.

FACTUAL ALLEGATIONS

- 15. CHARLES J. WEST ("West"), a victim of a motor vehicle accident, was admitted to UAMS MEDICAL CENTER UNIVERSITY HOSPITAL on February 11, 2009, after being airlifted by helicopter from Christus St. Michael Health System, Texarkana, Texas. West's medical records for his treatment at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL are voluminous (1,600 plus pages). Claimant is in possession of those records and submits a portion of those records attached hereto as Exhibit B and incorporated by reference. Claimant will provide all records upon request.
- 16. West's diagnoses included traumatic pneumohemothorax, multiple rib fractures, lung contusion, spleen laceration, liver laceration and subarachnoid hemorrhage. At UAMS MEDICAL CENTER UNIVERSITY HOSPITAL, he underwent a left major thoracotomy for bleeding and control of lung lacerations.
- 17. West experienced progressive improvement until March 1, 2009. At or about 1335 that day, while undergoing a respiratory therapy treatment known as intrapulmonary percussive ventilation ("IPV"), his condition suddenly deteriorated. He stopped breathing, and a "code" was called.
- 18. West's entire healthcare team, consisting of physicians, nurses and respiratory therapists, failed to recognize, diagnose and treat his obvious tension pneumothorax for more than one hour.
- 19. The placement of an essential chest tube was not performed until at least 1500, only after an inexplicably delayed review of unnecessary chest x-rays.
- 20. As a result of such actions and inactions identified in paragraphs 15-19 herein, West suffered hypoxia, hypotension, bradycardia and acidosis, which, in turn, caused decreased cerebral perfusion and brain injury. The ultimate result was anoxic brain damage as documented by the hospital-coding summary of March 13, 2009.
- 21. Moreover, laboratory evidence indicated that West suffered from severe malnutrition. This severe malnutrition, the result of negligent medical care, contributed to West's need for mechanical ventilation and helped to prevent West from being weaned off this respiratory assistance prior to March 1, 2009. This severe malnutrition, in turn, exposed West to a greater

risk for the development of a pneumothorax (a well-recognized complication of mechanical ventilation).

22. West was discharged from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL on March 9, 2009. Since his hospital discharge, West has been confined to nursing homes. West will not be able to function as an independent adult for the remainder of his life.

CAUSES OF ACTION

NEGLIGENCE

- 23. Claimant restates the allegations of paragraphs 1 through 22 of this Claimant's Original Complaint, as if fully set forth herein.
- 24. Respondent, UAMS MEDICAL CENTER UNIVERSITY HOSPITAL, is responsible for the acts of its employees under the doctrine of respondent superior and is responsible for its own acts, which include the following:
 - a. Failing to properly train, instruct and supervise its employees who provided medical services to West;
 - b. Credentialing and providing hospital privileges negligently to the physicians and hospital personnel who provided care to West;
 - Failing to require as part of protocol, policy or procedure the timely diagnosis and treatment of a patient with tension pneumothorax;
 - d. Operating its intensive care unit, nursing department, radiology department and supervisory/administrative staff negligently, in a manner that denied standard-of-care diagnosis and management for West as he was experiencing a tension pneumothorax;
 - e. Failing to have a physician immediately available with training and knowledge to clinically diagnose tension pneumothorax and then perform emergency thoracic decompression;
 - f. Failing to implement appropriate policies and procedures to assure that injuries such as experienced by West do not occur while patients are receiving medical care from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL;
 - g. Failing to use the degree of skill and care required by the standard of care for hospitals in the same or similar circumstances; and
 - h. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 25. Respondent, UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, is responsible for the acts of its employees under the doctrine of respondent superior and is liable for its own acts, which include the following:
 - Failing to teach the resident physicians and fellowship physicians who attended West on March 1, 2009 how to diagnose tension pneumothorax by clinical assessment and criteria;

- b. Failing to train the resident physicians and fellowship physicians who attended West on March 1, 2009 how to promptly perform thoracic decompression by needle thoracostomy, use of surgeon's finger as temporary "vent", and especially by chest tube placement; and
- c. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 26. Respondent, NANCY HOGUE, NURSE, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - b. Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
 - Failing to document required clinical data on "focus notes" or other form of nurses' notes other than eleven (11) lines of handwritten observations from 1330 to 1530 on March 1, 2009;
 - d. Failing to relay and/or communicate chest x-ray findings, interpretations, and any other telephoned or transmitted information to West's attending physicians;
 - e. Failing to relay and/or communicate chest x-ray findings, interpretations, and any other telephoned or transmitted information to West's attending physicians in a timely manner; and
 - f. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 27. Respondent, CASEY R. SCALES, RESPIRATORY THERAPIST, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - Selecting Intrapulmonary Percussive Ventilation as an appropriate modality of respiratory care for West;
 - b. Failing to have high index of suspicion for tension pneumothorax when West's clinical condition suddenly deteriorated during IPV treatment;
 - c. Failing to examine for and to detect unilateral absence of breath sounds;
 - d. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410 on March 1, 2009;
 - e. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax; and
 - f. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts or omissions.
- 28. Respondent CHRISTINA GARNES, R.N., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";

- b. Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
- c. Failing to document required clinical data on "focus notes" or other forms of nurses' notes, other than eleven (11) lines of handwritten observations from 1330 to 1530 on March 1, 2009; and
- d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 29. Respondent, JANE/JOHN DOE I, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - Failing to document required clinical data on a "code sheet" during West's "code";
 - Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
 - Failing to document required clinical data on "focus notes" or other forms of nurses' notes, other than eleven (11) lines of handwritten observations from 1330 to 1530 on March 1, 2009; and
 - d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 30. Respondent, JANE/JOHN DOE II, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
 - c. Failing to document required clinical data on "focus notes" or other forms of nurses' notes, other than eleven (11) lines of handwritten observations from 1330 to 1530 on March 1, 2009; and
 - d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 31. Respondent, JANE/JOHN DOE III, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - b. Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
 - Failing to document required clinical data on "focus notes" or other forms of nurses' notes, other than eleven (11) lines of handwritten observations from 1330 to 1530 on March 1, 2009; and
 - d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.

- 32. Respondent, JANE/JOHN DOE IV, respiratory therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - Failing to document required clinical data on a "Vent/O2 Device Flow Sheet" anytime after 1410 on March 1, 2009;
 - b. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surround the episode of tension pneumothorax; and
 - c. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 33. Respondent, JANE/JOHN DOE V, respiratory therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "Vent/O2 Device Flow Sheet" anytime after 1410 on March 1, 2009;
 - b. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surround the episode of tension pneumothorax; and
 - c. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.

PROXIMATE CAUSE

- 34. Claimant restates the allegations of paragraphs 1 through 33 of this Claimant's Original Complaint, as if fully set forth herein.
- 35. As a direct and proximate result of the combined and/or singular acts of negligence of the Respondents and their breach of duties owed to West, Claimant suffered damages more fully described below for which the Respondents are jointly and severally liable.

WILLFUL AND WANTON CONDUCT

- 36. Claimant restates the allegations of paragraphs 1 through 35 of this Claimant's Original Complaint, as if fully set forth herein.
- 37. Respondents' actions and omissions set forth above, when viewed objectively from the standpoint of the Respondent at the time of the occurrence, involved an extreme degree of risk

considering the probability and magnitude of the potential harm to West. Such acts and commissions constitute willful and wanton conduct and demonstrate a conscious indifference to the consequences to West and his loved ones, such that malice can be inferred.

DAMAGES

- 38. Claimant restates the allegations of paragraphs 1 through 37 of this Claimant's Original Complaint, as if fully set forth herein.
- 39. West suffered damages, and Claimant FLORENCE WEST, Individually and on behalf of West, is entitled to recover from Repondents the following:
 - a. Past hospital and extended care facility expenses, and those reasonably expected to be occurred in the future (A true and correct copy of the Patient Statement of Account from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL regarding its treatment of West is attached hereto as Exhibit C and incorporated by reference);
 - b. Past medical and nursing expenses, and those reasonably expected to be incurred in the future (A true and correct copy of all invoices from Sunny Acres Nursing Home regarding its treatment of West is attached hereto as Exhibit D and incorporated by reference);
 - Loss of love, comfort, society and companionship of CHARLES J. WEST due to his debilitating injuries;
 - d. Loss of reasonable contributions of a pecuniary value that Claimant FLORENCE WEST, in reasonable probability, would have received from CHARLES J. WEST, had he not been injured; and
 - e. Mental anguish suffered in the past, and mental anguish reasonably expected to be suffered in the future.

WITNESSES

- 40. Upon information and belief, the following individuals are witnesses to the negligent medical care performed by Respondents UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and UAMS MEDICAL CENTER UNIVERSITY HOSPITAL as alleged herein:
 - a. Ronald Robertson, M.D.;
 - b. Giriprakash Srikanthan, M.D.;
 - c. Mark P. Wright, M.D.;
 - d. Rachel R. McKinzie, M.D.;
 - e. Jay M. Cheek, M.D.;
 - f. John B. Cone, M.D.;

Carey L. Guidry, M.D.;

Manila Bagherzadeh-Azar, M.D.;

Nancy Hogue, Nurse;

Casey R. Scales, Respiratory Therapist; and

k. Christina Garnes, R.N.

This list of witnesses will be supplemented as information regarding additional witnesses becomes available to Claimant.

PENDING LITIGATION

Claimant has filed a lawsuit regarding the transaction or occurrence giving rise to 41.

Claimant's injuries as alleged herein. A file-marked copy of Plaintiff's First Amended

Complaint and Demand of Jury Trial, Case No. 60-CV-2011-0643 In the Circuit Court of Pulaski

County, Arkansas, Little Rock District, 12th Division is attached hereto as Exhibit E and

incorporated by reference.

EXHAUSTION OF REMEDIES

Since Respondents' negligence on March 1, 2009 as alleged herein, Claimant has 42.

exhausted all remedies against insurers, including West's insurer, in that Claimant has sought

coverage from those insurers, where applicable, for the expenses incurred as a result of the

events that took place on March 1, 2009.

WHEREFORE, Claimant prays that she be awarded damages sufficient to compensate her

for the damages described above and for all other relief to which she may be entitled, and that

the Arkansas State Claims Commission draw a negative inference against the Respondents as

spoliators/falsifiers.

Respectfully submitted,

Jack N. Boyd, Jr.

BOYD, POFF & BURGESS, LLP

2301 Moores Lane

P.O. Box 6297

Texarkana, Texas 75505-6297

Telephone: 903-838-6123

Facsimile: 903-832-8489

Jack N. Boyd, Jr. Wpennissin
AR Bor # 90150

AR Bar # 90150

PAGE 10 OF 10

Authorized by:

JAMES H. VERSCHOYLE Attorney at Law P. O. Box 568 Atlanta, Texas 75551

Phone: (903) 796-4187 Fax: (903) 796-6522

TSBN: 20554000

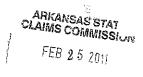
ATTORNEY AD LITEM

AKKANSAS STATE CLAIMS COMMISSIC... NON VEHICLE PROPERTY DAMAGE/PERSONAL INJURY INCIDENT REPORT FORM

SECTION 1	Florence West:		ADDRES	S 4330R3114
New Rogton		CITY & STATE Texas		ZIP GODE 75570
DATE OF IN	CIDENT: Marc	ch 1 2009	TIMI	
Give a brief	description of i and/or injury to	noident, showing how i	ncident happ	ened, exact loss and extent of damage
Please	e See Attache	d Plaintiff's origi		
		·		
		(if personal injury claim	only, move on	to Section IV)
SECTION II Has this pro	perty been rep	aired? Yes () No ()	if repairs hav	e been made, give the following
information:	: Amount: \$		Have yo	ou paid for the repairs? Yes () No ()
	ch a copy of re	*		,
if repairs ha		ade, list three estimate ADDRE	s below and g SS	attach copies of each of them. AMOUNT
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NAME OF	INSURANCE C	ARRIER ADD	ILE92	RECEIVED
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		wa	****	
SECTION I				
-		ical insurance? Yes (X		•
If yes, what	t is the deductil	ble? \$ <u>Unknown</u>		
NAME OF	INSURANCE C			ters for Medicare & Medicaid Servic
Medicare		7500	Security B	lvd Baltimore, MD 21244-1850
		d by the police or by so	ime other ag	ency, give name and title of officer/person

SECTION The under statement.	signed states o	n cath that he/she is fa e verily believes that th	millar with the ey are true,	e matters and things set forth in the above Alorence West
STEPH	HANIE BOYD CRANE		-	Signature of Claimant
	OTARY PUBLIC TATE OF TEXAS	Sworn to and subscri	oed before m	
Notary Sa	ission Expires 9-11-201	on thisdey of		
		day	month	year
My Commi	ssion Expires _	9-11-2014		Slephenbyl Com
				Signature of Notery Public.





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DEC-09-00 14:45 FROM-Green& Miller,LLP

+903-791-9301

T-563 P.002/002 F-277

CAUSE NO. 09-C-453

FLORENCE WEST, INDIVIDUALLY	§	IN THE 5th DISTRICT COURT
And as NEXT FRIEND of	§	
CHARLES WEST, an Incapacitated Person	Ś	_
•	§	7 8 3 C
Plaintiffs / Counter-Defendants	§	ASS 9 DS PISS
	5	
vs.	S	OF
	§	
JOHN R. JOHNSON, JR. and	§	
T & J HAULING, INC.	Š	
·	§	7 6 5 8
Defendants / Counter-Plaintiffs	5	CASS COUNTY, TEXAS

ORDER APPOINTING GUARDIAN AD LITEM

ON THIS DAY came forward to be considered the Unopposed Motion for Appointment of Guardian Ad Litem, filed with the Court by the Defendants and Counter-Plaintiffs and unopposed by the Plaintiffs and Counter-Defendants, and the Court having examined the Unopposed Motion for Appointment of Guardian Ad Litem finds the motion well-taken and in the best interest of the parties hereby GRANTS it and APPOINTS Jim Verschoyle, an attorney of the Cass County Bar and well known to this Court, as Guardian Ad Litem to act on behalf of Charles West, an Incapacitated Person, in conformity with the role and duties of a Guardian Ad Litem as enumerated in Rule 173 of the Texas Rules of Civil Procedure and to advise the Court thereon.

IT IS SO ORDERED this 3 day of Dac. 2009

HONORABLE RALPH BURGESS



UAMS Medical Center UAMS Document Review History and Physical



ratient: West,

West, Charles

MRN: 001519680

DOB:

E

66y

Acet#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Gender:]

Admit Date: 02-11-2009 19:50

84

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

02-11-2009 19:00

REVISED

History and Physical Authored:02-11-2009 19:00

By: Bishop, Jennifer E (7701) (MD) [Entered: 02-12-2009 05:22:47.50]

Patient History

Chief Complaint MVA.

History of Present Illness

66y/o WM transferred from Texarkana after suffering injuries in a MVA, car vs. 18wheeler. Pt was driver of the car and was broadsided by the 18wheeler. Unknown if seatbelts were used or air bags were deployed. Pt was conscious and talking at the scene but required extrication from his vehicle. He was transferred to an OSH where a L CT was placed due to multiple rib fractures and a hemothorax. He also required intubation at OSH. A CT performed at the OSH showed the following injuries: Left rib fractures 1-9 with pneumohemothorax, Probable left pulmonary contusions, Small liver and spleen lac with mild intra-abd fluid, No obvious long bone or pelvic fractures. He was transferred to UAMS via helicopter for further management of his injuries. On transport, his CT put out approx 800ml, and he received 3u pRBC and approx 3L of crystalloid. On arrival, his VS were stable and was sedated/intubated.

Additional Information (Optional)

PMHx, PSHx, Social, Fam, Meds unable to be obtained due to pt being sedated/intubated and no family present on arrival.

Allergies

· morphine; Unknown

CLAIMS COMNISSION
FEB 25 2011

Review of Systems

Constitutional

ROS unable to be obtained due to sedation/intubation.

RECEIVED

Physical Exam

Vital Signs

Temperature 33.1. Pulse 50's. Respirations 12.

Constitutional Symptoms sedated, intubated with 8.0 ETT.

Eyes

pupils pinpoint and fixed.

Ears, Nose, Mouth, Throat
No gross abnormalities, EII in place.

eck C-collar in place.



Requested by: SCM, Report Scheduler (UAMS IT)

Mar-13-2009 20:20 UAMS_002EPF_DocRev_HP.pt DATE.

/ 1 Printed from: UAMS Med Catr

<mark>1BPB</mark>'W 0013

UAMS Medical Center **UAMS Document Review History and Physical**



ARKANSAS STATE

CLAIMS COMMISSION

FEB 25 26 11 RECEIVED

Patient:

Attending:

West, Charles

MRN: 001519680

DOB:

66y

Acct#: 015196807-9042

Robertson, Ronald D (3258)

Gender:

02-11-2009 19:50 Admit Date:

Discharge Dtm: 03-09-2009 13:00

02-11-2009 19:00

Respiratory

Breath sounds equal b/1.

Cardiovascular

Gastrointestinal

FAST exam reveals fluid around kidneys.

no rectal tone, no gross blood.

Intequmentary

abrasions to L shoulder, L buttocks.

unable to assess due to sedation.

ther Findings

Pertinent Imaging Data

*Assess*ment

66y/o WM s/p MVA involving car vs. 18 wheeler. Transferred from OSH with multiple

traumatic injuries. Sedated and intubated with L CT in place.

Plan

1. Admit to SICU

- 2. Continue to monitor CT output
- 3. monitor CBC/INR
- 4. Transfusions as needed
- 5. Rest per primary team.

Addendum Section

Feb-25-2009 14:18

Entered By: Robertson, Ronald D (3258)

Patient seen and examined with the resident. I agree with the assessment and plan as outlined in the note on this date.

Signatures

Bishop, Jennifer E (7701) (MD) [Signed Feb-12-2009 13:05]

Authored: Patient History, Allergies, Review of Systems, Physical Exam, Other

indings, Assessment, Plan

Robertson, Ronald D (3258) (MD)[Signed Feb-25-2009 14:18]

Authored: Addendum Section

Requested by: SCM, Report Scheduler (UAMS IT)

PRINTED RY: gdoster_UAMS_002EPF_DocRev_HP.npt Mar-13-2009 20:20

Printed from: UAMS Med Cutr

BPB W 0014

16

H4-409-01 Location:

Sinus brady, no m/r/g.

Genitourinary

Neurological

CT results from OSH as above.

Assessment

Plan

UAMS Medical Center UAMS Document Review History and Physical



ratient:

West, Charles

MRN: 001519680

DOB:

Robertson, Ronald D (3258)

Acct#: 015196807-9042

Revised Signed

Attending:

Admit Date: 02-11-2009 19:50

02-25-2009 14:19 Robertson, Ronald D (3258)

Gender:

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

02-11-2009 19:00

Authored: Addendum Section

Document Status History

Date Modified Modified By	Type of Modification	Reason
02-12-2009 05:22 Bishop, Jennifer E (7701)	Entered Signed	Create
02-12-2009 12:54 Bishop, Jennifer E (7701)	Revised Signed	Edit
02-12-2009 12:59 Bishop, Jennifer E (7701)	Revised Signed	Edit
02-12-2009 13:05 Bishop, Jennifer E (7701)	Revised Signed	Edit
02-12-2009 13:07 Rishop, Jennifer E (7701)	· ·	Revised Signed

66y

CLAIMS COLUMNISSION FEB 20 (A)

UAMS Medical Center UAMS Document Review

Assessment and Intervention Flowsheet

Patient:

West, Charles

MRN: 001519680

Acct#: 015196807-9042

DOB:

Attending:

Robertson, Ronald D (3258)

Gender:

Admit Date: Location:

02-11-2009 19:50

H4-409-01

Discharge Dtm: 03-09-2009 13:00

Assessment and Intervention Flowsheet

Authored:03-01-2009 13:35

By: Scales, Casey R (RT)

66y

[Entered: 03-01-2009 18:19:41.58]

Comment: RT PRE TX

Respiratory Assessments

Respiratory [**WDL Definition: Regular rate, depth and pattern; nailbeds and mucous membranes pink; breath sounds clear and equal bilaterally; no cough or productive sputum; no shortness of breath]: WDL Respiratory Respiratory Rhythm and Pattern: Regular

Breath Sounds Throughout all lung fields: COARSE SLIGHTLY DIMINISHED

Respiratory Interventions

Suction: Done, Suctioned via tracheostomy

Medication Therapy: Given, IPV

Type: due neb

Respiratory Care Note: PT STARTED ON IPV TX UNABLE TO TOLERATE. TX STOPPED IMMEDIATELY PLACED BACK ON TRACH COLLAR; PT STOPPED BREATHING BAGGED, CALLED CODE. ABGS DRAWN, PT PLACED BACK ON VENT, CHEST XRAY ORDERED. PT DISCOVERED TO HAVE PNEUMO ON RIGHT CHEST. CHEST TUBE PLACED. PT SATURATION AT 100% ON VENT SETTINGS

Document Status History

Modified By Date Modified 03-01-2009 18:19 Scales, Casey R

Type of Modification Entered Signed

Reason

Create

BPB W 0296

Requested by: SCM, Report Scheduler (UAMS IT)

PRINTED RY: gdoster_DocRev_AIFS.tpt Mar-13-2009 22:13

3/15/2011

UAMS Medical Center UAMS Document Review Progress Note



Patient:

Variet Charles

MRN: 001519680

DOB:

66y

Acet#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Gender:

Admit Date:

02-11-2009 19:50

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

03-01-2009 14:18

Progress Note

Authored:03-01-2009 14:18

By: Srikanthan, Giriprakash (7453) [Entered: 03-01-2009 14:28:02.07]

Progress Note

Progress Note

Called to the patients bedside desats to the low 70s, hypotensive, bradycardic, 1mg atropine pushed, abdomen noted to be distended, NGT decompression initiated. Bagged patient with 100% O2, sats returned to mid 90's, hemodynamics normalized. ABG as follows 7.04/86.7/80.8/22.9. Patient on trach collar for 4 hours, will return to CMV mode for now and normalize CO2. PE studies and cardiac biomarkers pending. Dr. Wright present and Dr. Cone aware.

Signatures

Srikanthan, Giriprakash (7453) (MD) [signed Mar-01-2009 14:18]

Authored: Progress Note

Document Status History

Date Modified Modified By

Type of Modification

Reason

03-01-2009 14:28 Srikanthan, Giriprakash (7453)

Progress Note

Authored:03-01-2009 15:19

By: Srikanthan, Giriprakash (7453) [Entered: 03-01-2009 15:25:05.66]

Progress Note

Progress Note

After reviewing CXR, evident that Mr. West had a large pneumothorax on the right noted. Patient was prepped and draped in sterile fashion, chest tube placed midaxillary line at T4 level, saturation returned to 100%. Dr. Wright performed the procedure.

Signatures

Srikanthan, Giriprakash (7453) (MD) [Signed Mar-01-2009 15:19]

Authored: Progress Note

Document Status History

Date Modified Modified By

Type of Modification

Reason

03-01-2009 15:25 Srikanthan, Giriprakash (7453)

BPB W 0470

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-13-2009 20:33 PRINTED RY: gdosfer 002EPF_DocRev_Progress.pt

3/1 Printed from: UAMS Med Cutr



PATIENT DIAGNOSTIC REPORT

Verified

PATIENT NAME: WEST, CHARLES

MRN# ID TYPE

ACCOUNT#

RACE

ORDER# 3339698

MRN

1519680

151968079042

ADMISSION DATE

Exam Date/Time

BIRTHDATE

AGE@EXAM

LOCATION H4 ROOM 409 BED

2/11/2009

SEX

19:50

15:00 3/1/2009

01

ADMITTING PHYSICIAN: JOHN, JR. R. BROADWATER, M.D. R

REQUESTING SERVICE

ATTENDING PHYSICIAN: RONALD ROBERTSON, M.D.

H4

REQUESTING PHYSICIAN: GIRIPRAKASH SRIKANTHAN

REASON:

pt with resp distress and low heart rate;

EXAMS:

CHEST.FRONTAL

COMPARISON: Chest radiograph on 03/01/2000 09/06 and 09/08.

TECHNIQUE: Portable frontal chest radiograph.

FINDINGS: Interval development of a large right-sided pneumothorax is noted with complete collapse of the right lung. No significant shift of cardiomediastinal structures are identified. Median sternotomy wires are again noted. Left-sided PICC line is again noted with tip projecting in the region of the cavoatrial junction. Tracheostomy tube is in stable position. Airspace opacities and pleural reaction involving the left hemithorax appear unchanged. Post left thoracotomy changes are again noted and appears stable.

IMPRESSION:

1. INTERVAL DEVELOPMENT OF LARGE RIGHT-SIDED PNEUMOTHORAX WITHOUT

SIGNIFICANT SHIFT OF CARDIOMEDIASTINAL STRUCTURES.

2. STABLE POST THORACOTOMY CHANGES WITH AIRSPACE OPACITIES AND PLEURAL

REACTION INVOLVING THE LEFT HEMITHORAX.

CODE ORANGE

REASON: Large right pneumothorax.

TIME DISCOVERED: 1449 hours DICTATING RESIDENT: CAREY L. GUIDRY, MD

ICTATING STAFF RADIOLOGIST: 09P M BAGHERZADEH-AZAR

I HAVE PERSONALLY REVIEWED THE IMAGE(S), AND WAS PRESENT DURING THE PHYSICIAN SERVICES ASSOCIATED WITH THE PROCEDURE AND AGREE WITH THE FINDINGS.

VERIFIED BY:

09P M BAGHERZADEH-AZAR

RESULT ID / ADDENDUM: 2762568 / 0

VERIFIED ON:

2900-03-04-45:58,20.00 doster



PATIENT DIAGNOSTIC REPORT

Verified

PATIENT NAME: WEST, CHARLES

MRN#

ACCOUNT #

RACE SEX

ORDER# 3339698

ID TYPE MRN

1519680

151968079042

ADMISSION DATE

Exam Date/Time

BIRTHDATE

AGE@EXAM

LOCATION H4 ROOM 409 BED

2/11/2009

01

19:50

15:00 3/1/2009

ADMITTING PHYSICIAN: JOHN, JR. R. BROADWATER, M.D. R

REQUESTING SERVICE

H4

ATTENDING PHYSICIAN: RONALD ROBERTSON, M.D.

REQUESTING PHYSICIAN: GIRIPRAKASH SRIKANTHAN

DATE DISCOVERED: 03/01/2009

CALLED: Nancy Hogue 4H nurse WHO READ BACK MY FINDINGS

TIME CALLED: 1450 hours

DATE CALLED: 03/01/2009

DICTATING RESIDENT: CAREY L. GUIDRY, MD ICTATING STAFF RADIOLOGIST: (99P M BAGHERZADEH-AZAR

I HAVE PERSONALLY REVIEWED THE IMAGE(S), AND WAS PRESENT DURING THE PHYSICIAN SERVICES ASSOCIATED WITH THE PROCEDURE AND AGREE WITH THE FINDINGS.

VERIFIED BY:

09P M BAGHERZADEH-AZAR

RESULT ID / ADDENDUM: 2762568 / 0

VERIFIED ON:

2000/01/04 15:58/20.00 dost er

DATE



PATIENT DIAGNOSTIC REPORT

Verified

PATIENT NAME: WEST, CHARLES

MRN#

ACCOUNT #

STE RACE ORDER# 3339733

ID TYPE MRN

1519680

151968079042

ADMISSION DATE

Exam Date/Time

AGE@EXAM

LOCATION H4 ROOM 409 BED

19:50 2/11/2009

16:20 3/1/2009

ADMITTING PHYSICIAN: JOHN, JR. R. BROADWATER, M.D. R

REQUESTING SERVICE

ATTENDING PHYSICIAN: RONALD ROBERTSON, M.D.

114

REQUESTING PHYSICIAN: GIRIPRAKASH SRIKANTHAN

REASON:

s/p chest tube;

EXAMS:

CHEST.FRONTAL PORTABLE

3/1/2009

COMPARISON: Chest radiograph on 03/01/2009 at 02:58 p.m..

TECHNIQUE: Portable frontal supine chest radiograph.

FINDINGS: The cardiomediastinal silhouette is stable in size. Median sternotomy wires are again noted. Tracheostomy tube, gastric tube, and left-sided PICC line appear in stable position. Interval placement of right-sided chest tube is noted with tip projecting in the right mid lung laterally. The side-hole of the chest tube is not identified and may be outside of the pleural space. Subcutaneous emphysema is noted along the right lateral chest wall. There appears to be resolution of previously described large right pneumothorax. Small residual pneumothorax cannot be totally excluded on this supine radiograph. Airspace opacities in the right lung base are most consistent with atelectasis. Post thoracotomy changes with surgical skin staples are again noted involving the left hemithorax.

IMPRESSION:

1. INTERVAL PLACEMENT OF RIGHT-SIDED CHEST TUBE WITH INTERVAL RESOLUTION OF LARGE RIGHT-SIDED PNEUMOTHORAX. A SMALL RESIDUAL PNEUMOTHORAX CANNOT BE EXCLUDED ON THIS SUPINE RADIOGRAPH. RECOMMEND

REPEAT UPRIGHT FRONTAL RADIOGRAPH. THE CHEST TUBE SIDE HOLE IS NOT IDENTIFIED ON THIS RADIOGRAPH AND MAY BE OUTSIDE OF THE PLEURAL SPACE.

2. RIGHT-SIDED BASILAR ATELECTASIS.

DICTATING RESIDENT: CAREY L. GUIDRY, MD

ICTATING STAFF RADIOLOGIST: 09P M BAGHERZADEH-AZAR

I HAVE PERSONALLY REVIEWED THE IMAGE(S), AND WAS PRESENT DURING THE PHYSICIAN SERVICES ASSOCIATED WITH THE PROCEDURE AND AGREE WITH THE FINDINGS.

VERIFIED BY:

09P M BAGHERZADEH-AZAR

RESULT ID / ADDENDUM: 2762570 / 0

VERIFIED ON: 2999/03/05 69:94/21.00 doster



PATIENT DIAGNOSTIC REPORT

Verified

PATIENT NAME: WEST, CHARLES

MRN#

ACCOUNT #

SEX RACE ORDER # 3339733

ID TYPE MRN

1519680

151968079042

ADMISSION DATE

Exam Date/Time

BIRTHDATE

AGE@EXAM

LOCATION H4 ROOM 409 BED

2/11/2009 19:50 3/1/2009 16:20

01

ADMITTING PHYSICIAN: JOHN, JR. R. BROADWATER, M.D. R

REQUESTING SERVICE

H4

ATTENDING PHYSICIAN: RONALD ROBERTSON, M.D. REQUESTING PHYSICIAN: GIRIPRAKASH SRIKANTHAN

3. STABLE LEFT POST THORACOTOMY CHANGES.

DICTATING RESIDENT: CAREY L. GUIDRY, MD

ICTATING STAFF RADIOLOGIST: 09P M BAGHERZADEH-AZAR

I HAVE PERSONALLY REVIEWED THE IMAGE(S), AND WAS PRESENT DURING THE PHYSICIAN SERVICES ASSOCIATED WITH THE PROCEDURE AND AGREE WITH THE FINDINGS.

VERIFIED BY:

09P M BAGHERZADEH-AZAR

RESULT ID / ADDENDUM: 2762570 / 0

VERIFIED ON:

2909/03/05 09:04/21.00 doster

Patient Sample Result

UAMS Medical Center Arterial Blood Gas Report 4301 W. Markham St/Slot 593 Little Rock, AR 72205 526-5973 CLIA #04D0698507 Dir John Keller Med Dir Paula Anderson, M D.

3/1/2009 2·09 PM

Page 1 of 1

Patent History	Patient Information Medical Record Number	r				Last Name			First Name		
Sample Demographics Order Number 001007PVF Device Date & Time 3/1/2009 2 07 PM 3/1/2009 2 08 PM Artenial 8G + Co-Ox CVRep to CPAP(cmH₂O) PIP(cmH₂O) Press Support(cmH2O) Sample Results PH 7 04041 PH/L T-H/L PIP(cmH₂O) Press Support(cmH2O) Press Support(cmH2O) Sample Results PH 7 04041 PCO₂ 86 711 mmlhg [35 0 - 45 0] pAtm 764 mmlhg O2Hb 89 54 % [94 0 - 97 0] PCO₂ 86 711 mmlhg [75 0 - 100 0] PACO₃ at 22 9 mmol/L COHb 0 7 % [0 5 - 1 5] PABENT History Analyzed PH PCO₂ PO₂ HCO₃ at MODE RR PRIOZ Vt. PEEP CtHb Normaly mmlhg mmol/L COHb 0 7 % [0 5 - 1 5] Methib 0 3 % [0 0 - 1 5] 3/1/2009 2 25 AM 7 363 49 5 113 3 27 5 CPAP/PS 40 60 0 50 60 50 10 4 3/1/2009 2 25 AM 7 363 49 5 113 3 27 5 CPAP/PS 40 60 0 50 60 50 10 4 3/1/2009 2 25 AM 7 363 52 1 56 1 34 2 SIMV/PS 10 0 45 600 0 50 91 Legend ↑ Value above reference range ↑ 11 Value above cribcal range ──11 Above reporting range △ Value out of delta limits	01519680					West			Charles		A ~
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Sample Results							•		•	•	Device
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Sample Results pH 7 04044 [7 350 - 7 450] BE(8) -8 6 mmol/L ctHb 10 44 g/dL [12 0 - 18 0] pCO₂ 86 711 minHg [35 0 - 45 0] pAtm 764 mmHg O2Hb 89 54 % [94 0 - 97 0] pCO₂ 80 8 mmHg [75 0 - 100 0] COHb 0 7 % [0 5 - 1 5] pCO₃ act 22 9 mmol/L MetHb 0 3 % [0 0 - 1 5] pComments Pabent History Analyzed pH pCO₂ pO₂ HCO₃ act mode b/minHg mmHg mmHg mmHg mmHg mmHg mmHg mmHg m			tory Rate(b/min)	600 0		100			, (O)	CPAP(cm	H ₂ O)
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COHb 0.7 % [0.5 - 1.5] Methol 0.3 % [0.0 - 1.5]		mmHa	-			-					•
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Rapidcomn®PB W 0685

DATE

3/15/2010

UAMS Medical Center UAMS Document Review Respiratory Care Evaluation



REVISED

Patient:

West. Charles

MRN: 001519680

DOB:

66y

Acct#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Gender:

Admit Date: 02-11-2009 19:50

Discharge Dtm: 03-05-2009 13:00

Location:

H4-409-01

[Entered: 03-01-2009 16:10:05.75]

Respiratory Care Evaluation

By: Link, Kristen A (RRT)

Problem List

Authored:03-01-2009 15:50

HEAD BLEED: Feb-11-2009 ; Inactive

Admit Reason; HEAD BLEED

TRAUM SUBARACHNOID HEM: 852.00 (19); Active

Admit Reason; TRAUM SUBARACHNOID HEM

TRAUM PNEUMOHEMOTHOR-CL: 860.4 (ICD9); Active

Principal DX

LONG-TERM ANTIPLATELETS: V58.63 (ICD9) ; Active

Secondary DX

LIVER HEMATOMA/CONTUSION: 864.01 (ICD9); Active

Secondary DX

LUNG CONTUSION-CLOSED: 861.21 (ICD9) ; Active

Secondary DX

SPLEEN INJURY NEC-CLOSED: 865.09 (ICD9); Active

Secondary DX

FX EIGHT/MORE RIB-CLOSED: 807.08 (ICD9) ; Active

Secondary DX

LIVER LACERATION NOS: 864.05 (ICD9); Active

Secondary DX

History and Results

Results & History

- Previous Hospital Admission

- Significant History

0-3 Months

MVA from outside hospital, liver laceration, spleen taken out, cabg in past, left rib fracture, left

pulmonary contusion, spleen

laceration. Developed Right pneumo today, CT placed, back on cmv on

vent

LoA and Oxygen Requirement

LoA & O2 Requirements

- Level of Activity - Oxygen Requirement

Bed only

Mechanical Ventilator

Respiratory Care Orders

Respiratory Care

BPB W 0704

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-13-2009 23:15

3/15/20 Printed from: IT Analyst PRINTED RY: GOOSTEF DOCROV RESP. DATE

UAMS Medical Center UAMS Document Review Respiratory Care Evaluation



Patient:

West, Charles

MRN: 001519680

Acet#: 015196807-9042

DOB:

Robertson, Ronald D (3258)

Attending: 02-11-2009 19:50 Gender:

Discharge Dtm: 03-09-2009 13:00

Admit Date: Location:

H4-409-01

Respiratory Care

Ventilator Protocol; Reason for Request: Mechanical Ventilation, Feb-16-2009, Active

66у

Adult Ventilator; Mode: SIMV/PS

Tidal Volume(ml): 500

Rate(bpm): 20 PS(cmH20): 10 PEEP(cmH2O): 5

FIO2: 40%

Additional Information: Please do CPAP/PS trials 10/5 at 40% as tolerated., Feb-27-2009, Active

Respiratory Plan

Respiratory Care Plan

- Respiratory Care Goals

Relieve bronchospasm/inflamation,

Mobilize secretions, Improve

ventilation

- Respiratory Care Plan

Will DC IPV and begin combivent mdi

Q4 with Q4 sx via ambu bag.

Continue to follow per protocol.pt

needed suction lavage Q4

Signatures

Link, Kristen A (RRT) [Signed Mar-01-2009 16:05]

Authored: Problem List, History and Results, LoA and Oxygen Requirement,

Respiratory Plan

Wolfe, William W (CRT) [Signed Mar-04-2009 17:22]

Authored: Respiratory Care Orders, Respiratory Plan

Document Status History

Date Modified Modified By

Type of Modification

Reason

03-01-2009 16:10 Link, Kristen A 03-04-2009 17:25 Wolfe, William W Entered Signed

Entered Signed

Revised Signed

BPB W 0705

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-13-2009 23:15

PRINTED RY gaster DOZEPF_Dockev_RESP.pt DATE.

3/15/20 Printed from: IT Analyst

UAMS Medical Center

UAMS Final Order Summary



Patient:

West, Charles

ббу

MRN: 001519680

DOB:

Acct#: 015196807-9042

Attending: Robertson, Ronald D (3258)

Admit Date: 02-11-2009 19:50

Gender: L

Discharge Dtm: 03-09-2009 13:00

Location: H4-409-01

Gluc, POCT

001007KWY

Entered 03-01-2009 10:49

Entered By: SCM, Interfaces

Filler Order ID: <E7010875PCGLU> Filler Facility ID: <LAB> Requested: 03-01-2009

Stop Date:

Stop Time:

Requested By: Robertson, Ronald D (3258)

Signed Order

Entered 03-01-2009 12:39

Glue, POCT

001007NDM

Filler Order ID: <E7011010PCGLU> Filler Facility ID: <LAB>

Entered By: SCM, Interfaces

Requested: 03-01-2009

Stop Date:

Stop Time:

Requested By: Robertson, Ronald D (3258)

Signed Order

Entered 03-01-2009 13:26

Glue, POCT

001007PDX

Filler Order ID: <E7011069PCGLU> Filler Facility ID: <LAB>

Requested By: Srikanthan, Giriprakash (7453) Source: 01 Verbal

Entered By: SCM, Interfaces

Requested: 03-01-2009

Stop Date:

Stop Time:

Requested By: Robertson, Ronald D (3258)

Signed Order

Entered 03-01-2009 14:00

Chest Xray, Frontal

001007PSX

STAT; Portable Exam. Brief Clinical Hx: pt with resp distress and low heart rate. Requesting MD Contact Number: 5263400

<Session:>Standard;*Auto Activate.

Entered By: Warmack, Monique B Requested By: Srikanthan, Giriprakash (7453) Source; 01 Verbal

Requested: 03-01-2009 STAT

Stop Date: 03-01-2009 Stop Time: 3:22 PM

Signed Order

Order ID: 001007PSX History

Function

Acknowledged 03-01-2009 17:29

EnteredBy

New Status

Reason

Signed 03-02-2009 06:23

Games, Christina Robertson, Ronald D (3258) Performed

Order signed ID 101

AAS with PA Chest

Performed

001007PTF

Entered 03-01-2009 14:00

Routine; Portable Exam. Brief Clinical Hx: pt with resp distress and low heart rate. Requesting MD Contact Number: 5263400 Additional information: to be done at bedside in H4

<Session:>Standard;*Auto Activate.

Entered By: Warmack, Monique B

Requested: 03-01-2009 Routine

Stop Date: 03-01-2009 Stop Time: 3:20 PM

Signed Order

Order ID: 001007PTF History

Function

EnteredBy

New Status Performed

Reason

Acknowledged 03-01-2009 17:29

Games, Christina

Signed 03-02-2009 06:23

Robertson, Ronald D (3258)

Performed

Order signed ID 101

BPB W 1342

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-13-2009 21:01

UAMS_001EPF_OrdSamm.rpt PRINTED RY: adost

DATE

3/15/20 Printed from: IT Analyst



Patient:

West, Charles

DOB:

Attending:

Location:

Admit Date:

Robertson, Ronald D (3258)

66y

02-11-2009 19:50 H4-409-01

MRN: 001519680

Acct#: 015196807-9042

Gender:

Discharge Dtm: 03-09-2009 13:00

REVISED

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Discharge Summary Note-Discharge Summary SICU

By: Friedman, Adva B (7810) (MD) [Entered: 03-09-2009 06:46:42.31]

Authored:03-09-2009 6:39 Discharge Data

Discharge

Admission Date: Feb-11-09 Discharge date Mar-09-09.

Attending physician responsible for the patient's discharge Robertson. Will the Discharge Summary and/or Hospital Course be dictated? No.

Problems Addressed/Managed This Admission

TRAUM PNEUMOHEMOTHOR-CL: 860.4 (ICD9) ; Active

Principal DX

LUNG CONTUSION-CLOSED: 861.21 (ICD9) ; Active

Secondary DX

SPLEEN INJURY NEC-CLOSED: 865.09 (ICD9); Active

econdary DX

FX EIGHT/MORE RIB-CLOSED: 807.08 (ICD9) ; Active

Secondary DX

LIVER LACERATION NOS: 864.05 (ICD9); Active

Secondary DX

History and Hospital Course

Patient history: 66y/o WM transferred from Texarkana after suffering injuries in a MVA, car vs. 18wheeler. Pt was driver of the car and was broadsided by the 18wheeler. Unknown if seatbelts were used or air bags were deployed. Pt was conscious and talking at the scene but required extrication from his vehicle. was transferred to an OSH where a L CT was placed due to multiple rib fractures and a hemothorax. He also required intubation at OSH. A CT performed at the OSH showed the following injuries: Left rib fractures 1-9 with pneumohemothorax, Probable left pulmonary contusions, Small liver and spleen lac with mild intra-abd fluid, No obvious long bone or pelvic fractures. He was transferred to UAMS via helicopter for further management of his injuries. On transport, his CT put out approx 800ml, and he received 3u pRBC and approx 3L of crystalloid. On arrival, his VS were stable and he was sedated/intubated.

Hospital Course

Hospital Course: Patient continued to have high output from chest tube. Taken to the OR on 2/11/09. Underwent L major thoracotomy for control of bleeding and lung lacerations. Two L sided chest tubes were placed at that time. Patient admitted to the ICU. Neurosurgery consulted for small R parietal punctuate hemorrhage seen on CT at OSH. Patient was neurologically stable and no interventions were needed er team. Spine films were attained at this time. Cardiology was also consulted for elevated cardiac enzymes. They believed this to be secondary to myocardial stress. Cardiac enzymes were followed and trended down. Echo was not diagnostic.

Requested by: SCM, Report Scheduler (UAMS IT)

PRINTED RY: gdost er Docker/Day.pt DATE Mar-16-2009 23:21

3/15/20 Printed from: IT Analyst BPB W 0007



ratient: West, Charles MRN: 001519680

DOB:

66y

Acet#: 015196807-9042

Attending: 02-11-2009 19:50

Robertson, Ronald D (3258)

Gender:

Discharge Dtm: 03-09-2009 13:00

Admit Date: Location:

H4-409-01

Chest tubes were placed to water seal as output had decreased. On 2/16/09 patient had green discharge from nose, Levaquin started for sinusitis. Sedation weaned on 2/17/09. Spine films returned negative and patient was taken off precautions. 2/17/09 an MRI of the brain and C spine were done. Patient was also started on Tube feeds. Trial of weaning off vent was attempted, patient was unable to tolerate this. Patient received a tracheostomy and PEG tube on 2/20/09. Posterior chest tube was D/Ced on 2/23/09 when patient was beginning to be weaned off the vent. Patient had episode of respiratory distress on 2/23/09 but after secretions suctioned, patient's sats increased and stabilized. Second chest tube D/Ced on 2/27/09. Patient continued to be weaned from SIMV to CPAP and trach collar. 3/1/09 patient had episode of respiratory distress and bradycardia required atropine. Found to have large Right sided pneumothorax. Chest tube was placed and patient improved. Repeat head CT on 3/3/09 was negative. Neurology was consulted on 3/4/09 for evaluation of mental status. They believed mental insult to be secondary to hypoxia. Weaning off vent continued. Patient tolerating CPAP at night and trach collar at 40% during the day. On day of discharge patient's mental status had improved, he was tolerating PO, having BMs, good UOP.

Inpatient Orders

Pharmacy/Medications

Metoprolol Tab; (Lopressor Tab), 12.5 mg, Orogastric, two (2) times a day,

Feb-12-2009, Active

Balsam-Trypsin Oint; (Kenaderm) Apply to perianal skin, every eight (8) hours, PRN for irritated skin, Feb-16-2009, Active

Famotidine Tab; (Pepcid Tab), 20 mg, Dobhoff Tube, two (2) times a day,

Feb-24-2009, Active

Acetaminophen Elixir; (Tylenol), 325 - 650 mg, PEG Tube, every six (6) hours, PRN for Fever, Feb-24-2009, Active

Docusate Syrup; 100 mg, Oral, two (2) times a day, Mar-02-2009, Active

• Enoxaparin Inj; (Lovenox), 40 mg, Subcutaneous, daily, Mar-02-2009, Active • Bisacodyl Supp; (Dulcolax), 10 mg, Rectal, every four (4) hours, PRN for

Constipation, Mar-03-2009, Active

Oxycodone Soln; (Roxicodone), 5 mg, PEG Tube, four (4) times a day, PRN for Pain, Mar-04-2009, Active

Albuterol/Ipratropium Updraft; 3 ml, Inhaled via: Nebulizer, every six (6) hours Indication: Bronchospasm/Wheezing., Mar-06-2009, Active

Insulin Glargine; (Lantus), 20 unit(s), Subcutaneous, daily, Mar-08-2009, Active

Insulin (Human-R) to scale; Blood Glucose 0-150, No Insulin

3 unit(s) if Blood Glucose 151 - 180

5 unit(s) if Blood Glucose 181 - 200

7 unit(s) if Blood Glucose 201 - 250 9 unit(s) if Blood Glucose 251 - 300

10 unit(s) if Blood Glucose 301 - 350

12 unit(s) if Blood Glucose 351 - 400

Blood Glucose greater than 400, Call Physician, Subcutaneous, every six (6) hours, Mar-08-2009, Active

ischarge Medication Instructions

Medication Instructions

Requested by: SCM, Report Scheduler (UAMS IT)

PRINTED RY: gdoster 005EPF_DocRev7Day.pt Mar-16-2009 23:21

DATE

3/15/20 Printed from: IT Analyst

BLR M 0008



Patient:

West, Charles

MRN: 001519680

DOB:

Acct#: 015196807-9042

Robertson, Ronald D (3258)

Gender:

Attending: Admit Date:

02-11-2009 19:50

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

- Medication instructions given to

the patient

Patient should continue current medications received as inpatient, but copy of outpatient medications

will be given to LTAC.

Medication Reconciliation Attestation

Medicaton reconciliation

I have compared the patient's medication orders to the list for discharge and made the appropriate updates.

Discharge Condition

Condition on Discharge

Patient's condition at discharge was Stable.

Discharge to

The patient is being discharged to

- This patient is being discharged LTC/Nursing home

Location details

Promise Shreveport, LA

Physician Discharge Instructions

Discharge instructions

- Diet at discharge

Tube feed Pivot 1.5 cal @60/hr, flush 20mL H2O every 2 hours and Proteinex Liquid 30mL once daily,

flush 30 mL H2O after

- Activity on discharge

Limit to light, non-stressful

- Wound care

Cover with a dry sterile dressing. Observe daily for signs and symptoms of infection. Maintain R chest dressing x 48 hours and then may

cover with dry dressing for

drainage.

Seek medical attention for:

Any unusual chest pain Any

shortness of breath Chills or fever greater than 101 degrees Excessive pain Incisional redness, warmth,

swelling or drainage

- Additional instructions for the

patient

Patient may be on CPAP at night and Trach collar during the day. CPAP settings are CPAP: 5 PS: 10 Fi02: 40% and Trach collar at 40%. If pateith does not tollerate Trach collar may be placed back on CPAP.

Core Measures

Requested by: SCM, Report Scheduler (UAMS IT)

Adoster Docker/Day.pt DATE Mar-16-2009 23:21

3/15/20 Printed from: IT Analyst BPB W 0009

30



Patient:

West, Charles

MRN: 001519680

DOB:

Robertson, Ronald D (3258)

Acet#: 015196807-9042

Attending:
Admit Date:

02-11-2009 19:50

Gender:

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

Core Measures

CHFor ACS/MI

- Does the patient have either CHF Neither

or ACS/MI?

Pneumonia

- Did this hospitalization involve No

pneumonia?

Smoking Cessation

Smoking Cessation

- Is the patient a current smoker? No

Signatures

Friedman, Adva B (7810) (MD) [Signed Mar-09-2009 10:29]

Authored: Discharge Data, Problems Addressed/Managed This Admission, History and Hospital Course, Inpatient Orders, Discharge Medication Instructions, Medication Reconciliation Attestation, Discharge Condition, Discharge to, Physician Discharge opstructions, Core Measures, Smoking Cessation

)

Document Status	History		
	Modified By	Type of Modification	<u>Reason</u>
	Friedman, Adva B (7810)	Entered Signed	Create
	Friedman, Adva B (7810)	Revised Signed	Edit
	Friedman, Adva B (7810)	Revised Signed	Edit
	Friedman, Adva B (7810)	Revised Signed	Edit
	Friedman, Adva B (7810)	Revised Signed	Edit
	Friedman, Adva B (7810)	Revised Signed	Edit

Authenticated by Ronald Robertson, M.D. On 03/17/2009 10:43:15 AM CLAIMS COMMISSION

FEB 25 THE

PECEIVED

UNIVERSITY HOSP OF ARK CODING SUMMARY DATE 03/13/09

PAGE: 1 BAB

) NAME	WEST CHARLES	ACCT 015190 1/09 DIS/DEPART DATE 03/09	68079042 ME	D REC NO 00	1519680
DATE	OF BIRTH	1/09 DIS/DEPART DATE 03/09 AGE SEX' AN 003258 ROBERTSON, RONALI	LOS 0026 D	ROOM/BED SCH DISP 63	
MDC	000				
DRG	003	CHARGES 153901.45	REIMB	122376.	52
	TEN DIAIOD				
ADMI	TTING DIAGNOS 852.00 TRA	IS UM SUBARACHNOID HEM			
DRTN	CIPAL DIAGNOS	TS			POA
		CORTEX CONTUS-LOC NOS			Y
anao		p.c		TYPE	POA
SECO	NDARY DIAGNOS	LD ting LACERATION-CLOSED		S	Y
3	518.5	LUNG LACERATION-CLOSED POST TRAUM PULM INSUFFIC TRAUM PNEUMOHEMOTHOR-CL		S	
4.	860.4	TRAUM PNEUMOHEMOTHOR-CL		S	
5.	864.05	LIVER LACERATION NOS		C	Y
6.	286.7	ACQ COAGUL FACTOR DEFIC		C	Y
7	ያበ7 በያ	FX FIGHT/MORE RIB-CLOSED		C	Y Y
8.	865.09	SPLEEN INJURY NEC-CLOSED		C C	Y.
).	864.01	SPLEEN INJURY NEC-CLOSED LIVER HEMATOMA/CONTUSION ACIDOSIS ANOXIC BRAIN DAMAGE		C	N
10.	276.2	ACIDOSIS		C	Ϋ́
11.	348.1	ANOXIC BRAIN DAMAGE		· č	1
12.	V46.11	RESPIRATOR DEPEND STAT LUNG CONTUSION-CLOSED		Č	Y
13.	050 7	TRAUM SUBCUTAN EMPHYSEMA		C	Y
14. 15	414 N1	CORNARY ATHERO-NATY VESL		S	Y
16.	E812-0	CORNARY ATHERO-NATV VESL MV COLLISION NOS-DRIVER ABDOM AORTIC ANEURYSM		S	1
17.	441.4	ABDOM AORTIC ANEURYSM		S	Y
18.	401.9	HYPERTENSION NOS		S	Y
19.	250.00	DIABETES UNCOMPL TYPE II		S	Y
20.	272.4	HYPERLIPIDEMIA NEC/NOS		S	Y Y
21.	427.89	CARDIAC DYSRHYTHMIAS NEC		S S	Y
	372.73	CONJUNCTIVAL EDEMA		5 S	Ϋ́
	473.9	CHRONIC SINUSITIS NOS LONG-TERM USE ASPIRIN		S	ī
24. 25.	V58.66 V58.63	LONG-TERM OSE ASPIRIN LONG-TERM ANTIPLATELETS		S	1
20.	430.05				
nnoc	CEDITOR C		рнүз	BICIAN	DATE
1.	CEDURES 33.43	LUNG LACERATION CLOSURE		OZDEMIR, AY	
2.	31.1	TEMPORARY TRACHEOSTOMY		CONE, JOHN	B 02/20/09
ã.	99.04	PACKED CELL TRANSFUSION		ROBERTSON,	RO02/11/09
4.	99.05	PLATELET TRANSFUSION		ROBERTSON,	RO02/11/09
5.	99.07	SERUM TRANSFUSION NEC		ROBERT SON,	
6.	96.72	CONT INV MECH VENT->96HR		ROBERTSON,	
) <u>-</u>	96.04	INSERT ENDOTRACHEAL TUBE		ROBERTSON, ROBERTSON,	
8.	96.71 43.11	CONT INV MECH VENT-<96HR PERCUTANEOUS GASTROSTOMY		CONE, JOHN	
9.	4つ・1.1.	ENVOCATIVATION GUNTANTI			

10. 3 11. 3 12. 9	38.93 96.6	VENOUS CATHETER NEC	H YTILLMAN, 02/11/09 JAFFAR, MUHAM02/17/09 ROBERTSON, RO02/17/09 ROBERTSON, RO02/13/09
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U N I V E R S I T Y H O S P I T A L UAMS MEDICAL CENTER PATIENT STATEMENT OF ACCOUNT - DETAIL

PAGE 1 01/05/11 11:50 STF

PATIENT NAME: WEST, CHARLES

ACCOUNT NBR: 015196807-9042 ADMIT/DISCHARGE:02/11/09 03/09/09

BILL TO CHARLES WEST

57

TX . ___

SRV DATE REF NBR	DESCRIPT	ION	
02/11/09 01623100	INTENSIVE CARE		1260.00
02/11/09 15031569	COLLAR, ASPEN ADULT REGULAR		
02/11/09 15031585	CUFF, BP SOFT ADULT		28.67
02/11/09 15300235	NORMAL SALINE 250CC		30.00
02/11/09 15300240	NORMAL SALINE 500CC	(QTY OF 0002)	60.00
02/11/09 15300245	NORMAL SALINE 1000CC	(QTY OF 0003)	90.00
02/11/09 12013754	MIDAZOLAM INJ 5MG PER ML	,	55,90
02/11/09 12020050	CULLAR, ASPEN ADULT REGULAR CUFF, BP SOFT ADULT NORMAL SALINE 250CC NORMAL SALINE 500CC NORMAL SALINE 1000CC MIDAZOLAM INJ 5MG PER ML D5W INJ, 100ML FENTANYL INJ 50 MCG/ML, 20 MI		30.00
02/11/09 12012315	FENTANYL INJ 50 MCG/ML.20 M	L (QTY OF 0020)	11.35
02/11/09 12020060	DSW INJ, 250ML	,	30.00
02/11/09 12011095	CALCIUM CL INJ 100MG/ML 10M	L_	10.20
02/11/09 12020048	DSW INJ, SOML		30.00
02/11/09 70071010	CHEST, SINGLE FRONTAL		100.05
02/11/09 70000009	X-RAY DONE AT BEDSIDE		0.00
02/11/09 70072170	PELVIS, 1 OR 2 VIEWS		97.35
02/11/09 70000009	DSW INJ, 250ML CALCIUM CL INJ 100MG/ML 10MI DSW INJ, 50ML CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE PELVIS, 1 OR 2 VIEWS X-RAY DONE AT BEDSIDE CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE BLOOD GASES WITH SATURATION		0.00
02/11/09 70071010	CHEST, SINGLE FRONTAL		
02/11/09 70000009	X-RAY DONE AT BEDSIDE	CLAMIS COMMISSION FEB 25 2011	0.00
02/11/09 23058135	BLOOD GASES WITH SATURATION	CLATTANO	118.00
02/11/09 23058137	CARBOXYHEMOGLOBIN	PECEIVED	53.00
	METHEMOGLOBIN	The Milliante	53.00
02/11/09 23058135	BLOOD GASES WITH SATURATION	TEB 9 5 SION	118.00
02/11/09 23058137	CARBOXYHEMOGLOBIN METHEMOGLOBIN	2011	53.00
	METHEMOGLOBIN	AFA.	53.00
	BLOOD GASES WITH SATURATION		118.00
	CARBOXYHEMOGLOBIN	- 1 V & D	53,00
02/11/09 23058138	METHEMOGLOBIN		53.00
02/11/09 23058135	BLOOD GASES WITH SATURATION		118.00
02/11/09 23058138	METHEMOGLOBIN		53.00
02/11/09 23058140	BLOOD POTASSIUM; PLASMA/WHL E	ILD	51.00
02/11/09 23058144	CHLORIDE; BLOOD		51.00
02/11/09 23058137	CARBOXYHEMOGLOBIN		53.00
02/11/09 23058139	BLOOD SODIUM; PLASMA OR WHL B	LD	51.00
02/11/09 23058143	CALCIUM, IDNIZED		51.00
02/11/09 23058157	GLUCOSE - BLOOD		40.00
02/12/09 01623100	INTENSIVE CARE		1260.00
02/11/09 96086900	BLOOD TYPING, ABO		18.90
02/11/09 96086901	BLOOD TYPING, RH (D)	RECEIVED	19.10
02/11/09 96086032	ANTIBODY SCRN/INDIRECT METHO	0	42.40



U N I V E R S I T Y H O S P I T A L UAMS MEDICAL CENTER PATIENT STATEMENT OF ACCOUNT - DETAIL

PAGE 2 01/05/11 11:50 STF

PATIFNT	NAMF:	WEST.	CHARLES
((: : : : : : : : : : : : : : : : : :	15 F1 17 La. a	F 4	W11811 E. E. C.

ACCOUNT NBR: 015196807-9042

CDH BATE	oce was	CROSSMATCH, IMMEDIATE SPIN PLATELET APHERESIS PROCESSING RED BLOOD CELL PROCESSING RED BLOOD CELL PROCESSING BLOOD TYPING, ABO BLOOD TYPING, RH (D) CROSSMATCH, IMMEDIATE SPIN CROSSMATCH, IMMEDIATE SPIN PLATELET APHERESIS PROCESSING ANTIBODY SCRN/INDIRECT METHOD RED BLOOD CELL PROCESSING RED BLOOD CELL PROCESSING CROSSMATCH, IMMEDIATE SPIN CROSSMATCH, IMEDIATE SPIN CROSSMATCH, IMMEDIATE SPIN CROSS			
74 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. ቪፎዮ የወዘ ነ ስራላስራስባል	DESCRIPTION OF CONCENTRATE OFFI			
02/11/03	, 30000340 , 000000340	CRUSSMHICH, IMMEDIATE SPIN			60.00
	, <u>ენ</u> სინეგს , ფლგილებებ	CDOCCRVICH INNCDIATE OFTH			60.00
V2/11/03	, 300000340 , 050000340	COOCCEATOR TRACETATE COTA			60.00
02/11/02	. 30000320 . 02002300	BLATELET ADMERENCE BRADESCHUS			50.00
VZ/11/V2	07400000	TEN DIOGR CTI: DROCECCING			1613.65
02/11/02	. 01000041 . 01000000	NED BLOOD CELL BROCECCING			509.15
02/11/02	0/V0042/ 0/A0/0AA	DIGON TYPING AND			509.15
V 2 / 11 / V 2	20000200	DIDOO TYDIMO DO 200			18.90
- V&/ 11/V3	36456341	CDOCCMATCH TWESTATE CDTM			19.10
02/11/02	20000220	CROSSMATCH TEMPEDIALE STIN			60.00
02/11/09	20000220	DIATELET ADMEDICTE BROCECCTUC			50.00
02/11/09	9609699	AMTTOANY CODMITMENTS TRUCESSING			1613.65
02/11/02	20000002	ANTIBODE CELL BROCECCING			42.40
02/11/03	97096427	MED BLOOD CELL PROCESSING			203.12
02/11/09	87086427	PED BLOOD CELL (ROCEGOIRG			UVJ.LU EAO 1E
02/11/09	87086427	PEN BLOOD CELE INCCESSING			200 45
02/12/09	96086920	CROSSMOTCH TWMENTATE SDYN			20 00
02/12/09	96086920	CENCEMOTOH, IMMEDIATE COIN			50 VV
02/12/03	96086920	CROSCHATCH THMEDIATE COTH			50.00 60.00
02/12/09	96086920	CROSSANTON, INMEDIATE SPIR			50.00
02/12/09	96086920	CROSCHATCH THMEDIATE SPIN			60.400
02/12/09	96086920	CROSSMOTCH THREDIATE SPIN			60 a V V
02/12/09	96086920	CROSSMOTCH IMMEDIATE CRIM			60 kVV
02/12/09	96086920	CRASSMATCH IMMEDIATE SPIN			50 VV
02/12/09	87086143	CELL CORES SOUCHAIDE			ዕህ ፣ ህህ
02/12/09	87086166	CELL SAVER PLOOD PAG			900.00
02/12/09	15192073	STOCKING KNEE MED / LONG			12.00
02/12/09	15192209	SIFFUE, SON MEN KNEE COMPRESS			77 = 70
02/12/09	15300240	NORMAL SALTNE SOOCE			27 400
02/11/09	12020060	DSW TNA. 250MI			20.00
02/11/09	12012315	FENTANYL INJ 50 MCGZML 20 ML	COTY OF	00201	11 25
02/11/09	12020060	DSW INJ, 250ML	(4) (0)	30207	24 44
02/11/09	12012315	FENTANYL ING 50 MCG/ML 20 ML	COTY OF	ስለኃላነ	11 25
02/11/09	12013754	MIDAZOLAM INJ 5MG PFR MI	(4)	00207	55 90
02/11/09	12020050	DSW INJ, 250ML FENTANYL INJ 50 MCG/ML,20 ML MIDAZOLAM INJ 5MG PER ML DSW INJ, 100ML MIDAZOLAM INJ 5MG PER ML			30 70
02/11/09	12013754	MIDAZOLAM INJ 5MG PER ML			55.90
02/11/09	12020050	D5W INJ, 100ML			30.00
02/11/09	12014385	PHENYLEPHRINE INJ 10MG	(QTY OF	00021	10.20
02/11/09	12020060	DSW INJ, 250ML		00021	30.00
02/12/09	12012505	FUROSEMIDE INJ 20MG			10.20
		LUBRICATING DINT EYE 3.5G			17.70
02/12/09	12012330	FAMOTIDINE INJ. 20MG (PEPCID)			10.20
02/11/03	12011095	CALCIUM CL IND 100MG/ML 10ML			10.20
02/11/09	12011210	CEFUROXIME 1.5 6M INJ			39.30
02/11/09	12010133	CISATRACURIUM INJ 2MG/ML,10ML			70.10
02/11/09	12015025	SHOHL'S SOL MODIFIED OZ			2.75
02/11/09	12020280	SET IV, REGULAR 70 IN			15.10
		•			** *** N. 46 %**

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER PATIENT STATEMENT OF ACCOUNT - DETAIL

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PATIENT NAME: WEST, CHARLES ACCOUNT NBR: 015196807-9042

SRU DATE	REE NRP	DESCRIPTION				
02/11/09	12020230	DINGER'S ACTOR OF CARACT	7077	nΕ	ΛΛΛΩΝ	58.50
02/11/09	12014385	RINGER'S LACTATE INJ 1L PHENYLEPHRINE INJ 10M6	2.00.1.1	O1	00027	10.20
02/11/09	12017303	FENTANYL IND SOMCG/ML 5ML	(ATV	οt	00041	11.35
- A 2 / 1 1 / A 2	しょうひょうりゅう	KINATOLAK THI IMPINI A MIJIMA	ノベザジ	~1 C	A A A A A	4 4 (7) [**
00/10/00 V2/11/V2	12010/02	UTAUVATUUDAEN GROO JOERU UTAUVATUU TUA TROVUE ⁴ 5 MCVIMO	ነψίῖ /ጠቸሪ	U.F	00027	00.11
	- またいまりせんち	CHROCCMING THE SOME SELFO	(1911	UF	0002)	4,00
- VZ/ 12/ V2	12012303	ACETAMINOPHEN SUPP 325MG FUROSEMIDE INJ 20MG ALBUTEROL INHALER-1 PUFF OSW INJ, 250ML FENTANYL INJ 50 MCG/ML,20 ML METOFROLOL 25 MG TAB	/679	0.5	AAAAA	10.20
- VZ/ 12/ V2 - 02/12/02	17010700	MEDUICKUL INUHLEK-I FUFF	(414	Ur	0008)	4.50
- 02/12/02 - 02/12/02	12020000	FENTANNI TUR BA MAATUL AA MI	7870	4% t	A A C A S	30.00
02/12/03	12012212	RETURNAL INJ DV MUDYML 420 ME	(Gri Y	Ur	00207	11.35
02/12/02	10040444	FENTANYL INJ 50 MCG/ML,20 ML METOFROLOL 25 MG TAB ACETAMINOPHEN SUPP 325MG CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE	1078	0.5		1.10
VZ/12/V2	12010411	CUTCT CINCLE PROMING	(U) Y	UF	00027	4.00
02/12/03	70071010	VERAL BONE AT DEBOTAGE				100.05
02/12/02	70000000	ATRHY DURE HI BEUSIDE				0.00
02/12/03	72070430	CT CERMIN WALL CRIVE WAS CONT				789-05
AS/13/03	72072120	CITCERVICHE SPINE W/U CUNI				1233.80
02/12/09	72072128	CI-IHURACIC SPINE W/U CONT				1043.35
05/15/03	72072131	CI-LUMBAK SPINE W/U CUNI				948.50
02/12/09	72071260	ACETAMINOPHEN SUPP 325MG CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CT-BRAIN W/O CONTRAST CT-CERVICAL SPINE W/O CONT CT-THORACIC SPINE W/O CONT CT-LUMBAR SPINE W/O CONT CT-THORAX WITH INFUSION OMNIPAQUE 300/500 PER ML CT-PELVIS WITH CONTRAST				1134.40
03/12/09	/2000161	UMNIPAQUE 300/500 PER ML	(QTY	OF	0100)	282.00
02/12/09	72072193	CT-PELVIS WITH CONTRAST				858.45
02/12/09	72074160	CT-ABDOMEN WITH CONTRAST				1134.40
02/12/09	70071010	CHEST, SINGLE FRONTAL				100.05
02/12/09	70000009	X-RAY DONE AT BEDSIDE				0 0 0
02/12/09	70071010	OMNIPAQUE 300/500 PER ML CT-PELVIS WITH CONTRAST CT-ABDOMEN WITH CONTRAST CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE ELECTROCARDIOGRAM BLOOD GAS ONLY BLOOD POTASSIUM; PLASMA/WHL BLD CHLORIDE; BLOOD ELOOD SODIUM; PLASMA OR WHL BLD CALCIUM, IONIZED BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHEMOGLOBIN BLOOD GASES WITH SATURATION METHEMOGLOBIN BLOOD POTASSIUM; PLASMA/WHL BLD CHLORIDE; BLOOD CARBOXYHEMOGLOBIN				100.05
02/12/09	70000009	X-RAY DONE AT BEDSIDE				0.00
02/12/09	03020002	ELECTROCARDIOGRAM				86.45
02/12/09	23058132	BLOOD GAS ONLY				81.00
02/12/09	23058140	BLUUD PUTASSIUM; PLASMA/WHL BLD				51.00
02/12/09	23058144	CHLORIDE; BLOOD				51.00
02/12/09	23058139	BLOOD SODIUN; PLASMA OR WHL BLD				51.00
02/12/09	23058143	CALCIUM, IONIZED				51.00
05/15/09	23058135	BLOOD GASES WITH SATURATION				118.00
02/12/09	23058137	CARBOXYHEMOGLOBIN				53.00
02/12/09	23058138	METHEMOGLOBIN				53.00
02/12/09	23059135	BLOOD GASES WITH SATURATION				118.00
02/12/09	23058138	METHEMOGLOBIN				53.00
02/12/09	23058140	BLOOD POTASSIUM; PLASMA/WHL BLD				51.00
02/12/09	23058144	CHLORIDE; BLOOD				51.00
02/12/09	23058139	BLOOD SODIUM; PLASMA OR WHL BLD				51.00
		CALCIUM, IONIZED				5100
		GLUCOSE - BLOOD				40.00
02/13/09	01623100	INTENSIVE CARE				1260.00
02/12/09	8/000059	FROZEN PLASMA 8 TO 24 HOURS				137.72
02/12/09	87000059	FROZEN PLASMA 8 TO 24 HOURS				137.72
		PLATELET APHERESIS PROCESSING				1613.65
		PLATELET APHERESIS PROCESSING				1613.65
02/12/09	8/000059	FROZEN PLASMA 8 TO 24 HOURS				137.72

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PATIENT NAME: WEST, CHARLES

	0011 5075					
	58 V VHIE	. KEF NBK	DESCRIPTI	NO		
	02/12/03	870000033	FRUZEN FLASMA 8 IU 24 HUUKS			137.72
	02/12/09	6/08642/	KED BLUUD CELL PROCESSING			509.15
	02/12/03	87085427	RED BLUUD CELL PROCESSING			509.15
	02/12/09	8/000059	FRUZEN PLASMA 8 TO 24 HOURS			137.72
	02/12/09	8/000059	FRUZEN PLASMA 8 TO 24 HOURS			137.72
	02/12/09	87086389	PLATELET APHERESIS PROCESSING	3		1613.65
	02/13/09	15031419	DESCRIPTI FROZEN PLASMA 8 TO 24 HOURS RED BLOOD CELL PROCESSING FROZEN PLASMA 8 TO 24 HOURS FROZEN PLASMA 8 TO 24 HOURS FROZEN PLASMA 8 TO 24 HOURS PLATELET APHERESIS PROCESSING CATHETER, TRIPLE LUMEN (ARRO) GAUZE, PETROLATUM (VASELINE) PACK - DISP INVASIUE (INF. INSE	4)		95.76
	02/13/09	15071656	GAUZE, PETROLATUM (VASELINE)	(QTY OF	0002)	5.80
	02/13/09	15161214	PACK, DISP INVASIVE LINE INSE	ER		80.00
	02/13/09	15300235	NORMAL SALINE 250CC			30.00
	02/13/09	15300245	NORMAL SALINE 1000CC			30.00
	02/13/03	15300245	NORMAL SALINE 1000CC			30.00
	02/13/09	15300265	SOD CHLOR 1000CC IRRIG			41.50
	02/13/09	17010700	ALBUTEROL INHALER-1 PUFF	(QTY OF	0008)	4.80
	02/13/09	12015111	SUD CHLORIDE INJ, 30ML MDV			10.20
	05/13/03	12010450	ACETAZOLAMIDE INJ 500MG			131.40
	02/13/09	120141/3	PANTOPRAZOLE INJ PER 40 Mg ·			43.80
	02/13/09	12014595	POT PHOSPHATE 3MM/ML 15ML			10.20
	02/13/09	12020065	GAUZE, PETROLATUM (VASELINE) PACK, DISP INVASIVE LINE INSE NORMAL SALINE 250CC NORMAL SALINE 1000CC NORMAL SALINE 1000CC SOD CHLOR 1000CC IRRIG ALBUTEROL INHALER-1 PUFF SOD CHLORIDE INJ, 30NL MDV ACETAZOLAMIDE INJ 500MG PANTOFRAZOLE INJ PER 40 MG POT PHOSPHATE 3MM/ML 15ML D5W INJ, 500ML MAG SULFATE 2GM/WATER 50ML METOPROLOL 25 MG TAB D5W INJ, 250ML FENTANYL INJ 50 MCG/ML,20 ML INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100ML			30.00
	02/13/09	12020189	MAG SULFATE 2GM/WATER 50ML			24.85
	02/13/09	12013742	METOPROLOL 25 MG TAB			1.10
	02/11/09	12020060	DSW INJ, 250ML			30.00
	02/11/09	12012315	FENTANYL INJ 50 MCG/ML, 20 ML	(QTY OF	0020)	11.35
	02/12/09	12012940	INSULIN HUMAN REG 10ML			110.10
	02/12/09	12020234	INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100ML POT CHLORIDE INJ 40MEQ DSW INJ, 500ML DSW INJ, 250ML FENTANYL INJ 50 MCG/ML 20 ML			30.00
	02/13/09	12014555	POT CHLORIDE INJ 40MEQ			10.20
	02/13/09	12020065	DSW INJ, 500ML			30.00
	02/12/09	12020060	DSW INJ, 250ML			30.00
	02/12/09	12012315	FENTANYL INJ 50 MCG/ML,20 ML POT CL POWDER 20MEQ PKT POT CHLORIDE INJ 40MEQ	(QTY OF	0020)	11.35
	02/13/09	12014562	POT CL POWDER 20MEQ PKT	(QTY OF	0002)	i.75
	02/13/09	12014555	POT CHLORIDE INJ 40MEQ			10.20
	02/13/09	12020240	SOD CHLOR 0.9% INJ 500ML (NSS	;)		30.00
	02/13/09	12010450	ACETAZOLAMIDE INJ 500MG			131.40
	02/13/09	12013742	METOPROLOL 25 MG TAB			1.10
	02/13/09	70071010	POT CHLORIDE INJ 40MEQ SOD CHLOR 0.9% INJ 500ML (NSS ACETAZOLAMIDE INJ 500MG METOPROLOL 25 MG TAB CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE ACUTE ABD SERIES W/PA CHEST X-RAY DONE AT BEDSIDE			100.05
	02/13/09	70000009	X-RAY DONE AT BEDSIDE			0.00
	02/13/09	70074022	ACUTE ABD SERIES W/PA CHEST			234.00
	02/13/03	70000009	X-RAY DONE AT BEDSIDE			0.00
	02/13/09	70071010	CHEST, SINGLE FRONTAL			100.05
	02/13/09	70000009	X-RAY DONE AT BEDSIDE			0.00
			CREATININE; BLOOD			32.60
	02/11/09	95184520	UREA NITROGEN; QUANTATITIVE			29.60
1	02/11/09	95182947	GLUCOSE; QUANTITATIVE, BLOOD			49.20
	02/11/09	95184295	SODIUM, SERUM			29.60
			CHLORIDE; BLOOD			31.60
	02/11/09	95184132	POTASSIUM, SERUM			40.15
1	02/11/09	91085024	CBC, AUTOMATED W/AUTO WBC DIF	F		57.05
1	02/11/09	92082150	AMYLASE			68.10

U N I V E R S I T Y H O S P I T A L PAGE 5 UAMS MEDICAL CENTER 01/05/11 11:50 PATIENT STATEMENT OF ACCOUNT - DETAIL STF

PATIENT NAME: WEST, CHARLES ACCOUNT NBR: 015196807-9042

	1, 14.1 % 17.14	i Kunara k	EST ACCOUNT MAKE ALST ACCOUNT MAKE ALST ACCOUNT MAKE ACCO	£.
	SRV DATE	REF NBR	DESCRIPTION CREATININE APTT PROTHROMBIN TIME CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIDCARBONATE/CO2 UREA NITROGEN, BLOOD (BUN) CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM APTT SODIUM - SERUM PROTHROMBIN TIME PHOSPHORUS ALBUMIN BILIRUBIN, TOTAL BILIRUBIN DIRECT ALKALINE PHOSPHATASE SGPT (ALT) SGOT (AST) AMYLASE LIPASE CBC, AUTOMATED W/AUTO WBC DIFF PROTHROMBIN TIME SODIUM - SERUM CHLORIDE BIOCARBONATE/CO2 APTT UREA NITROGEN, BLOOD (BUN) LIPASE CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM MAYLASE CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM MAYLASE CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD	
	02/11/09	92082565	CREATININE	32.60
	02/11/09	91085730	APTT	55.00
	02/11/09	91085610	PROTHROMBIN TIME	47.40
	02/11/09	91085024	CBC. AUTOMATED W/AUTO WBC DIFF	57.05
	02/11/09	92084132	POTASSIUM - SERUM	40.15
	02/11/09	92082435	CHLORIDE	31.60
	02/11/09	92082374	BIDCARBONATE/CO2	29.60
	02/11/09	92084520	UREA NITROGEN, BLOOD (BUN)	29.60
	02/11/09	92082565	CREATININE	32.60
	02/11/09	92082310	CALCIUM, BLOOD, CHEMICAL	58.90
	02/11/09	92082947	GLUCOSE, BLOOD	49.20
	02/11/09	92083735	MAGNESIUM	58.50
	02/11/09	91085730	APTT	55.00
	02/11/09	92084295	SODIUM - SERUM	29.60
	02/11/09	91085610	PROTHROMBIN TIME	47.40
	02/11/09	92084100	PHOSPHORUS	47.50
	02/11/09	92082040	ALBUMIN	47.50
	02/11/09	92082251	BILIRUBIN, TOTAL	61.40
	02/11/09	92082250	BILIRUBIN DIRECT	61.40
	02/11/09	92084075	ALKALINE PHOSPHATASE	68.10
	02/11/09	92084460	SGPT (ALT)	68.10
	02/11/09	92084450	SGOT (AST)	68.10
	02/11/09	92082150	AMYLASE	68.10
	02/11/09	92083690	LIPASE	48.10
	02/11/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF	57.05
	02/11/09	91085610	PROTHROMBIN TIME	47.40
	02/11/09	92084295	SODIUM - SERUM	29.60
	02/11/09	92084132	POTASSIUM, SERUM	40.15
	02/11/09	92082435	CHLORIDE	31.60
	02/11/09	92082374	BIOCARBONATE/CO2	29.60
	02/11/09	91085730	APTT	55.00
	02/11/09	92084520	UREA NITROGEN, BLOOD (BUN)	29.60
	02/11/09	92083690	LIPASE	48.10
	02/11/09	92082565	CREATININE	32.60
	02/11/09	92082310	CALCIUM, BLOOD, CHEMICAL	58.90
	02/11/09	92082947	GLUCOSE, BLOOD	49.20
	02/11/09	92083735	MAGNESIUM	58.50
	02/11/09	92082150	AMYLASE	68.10
•	02/11/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF	57.05
	02/11/09	91085610	FROTHROMBIN TIME	47.40
	02/11/09			55.00
				77.43
			FIBRINOGEN, QUANT	53.95
				57.05
			POTASSIUM, SERUM	40.15
	02/12/09			31.60
	02/12/09	92082374	BIOCARBONATE/CO2	29.60

02/12/09 92084520 UREA NITROGEN, BLOOD (BUN)

29.60

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PATIENT NAME: WEST, CHARLES

SRV DATE	REF NBR	DESCRIPTION CREATININE CALCIUM, BLOOD, CHEMICAL SODIUM — SERUM GLUCOSE, BLOOD MB FRACTION ONLY MAGNESIUM PHOSPHORUS PROTHROMBIN TIME APTT TROPONIN I CPK, TOTAL CBC, AUTOMATED W/AUTO WBC DIFF PROTHROMBIN TIME APTT D-DIMER QUANTITATIVE FIBRINOGEN, QUANT ECHO COMPLETE W/SPECT & CFI NUTRITION ASSESS/CONSULT-COMP HME BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN INTENSIVE CARE MODULE, PUMP ALARIS MODULE, CONTROL ALARIS MODULE, CONTROL ALARIS OXISENSOR, FINGER ADULT DISP				
02/12/09	92082565	CREATININE				32.60
02/12/09	92082310	CALCIUM, BLOOD, CHEMICAL				58.90
02/12/09	92084295	SODIUM - SERUM				29.60
02/12/09	92082947	'GLUCOSE, BLOOD				49.20
02/12/09	92082555	MB FRACTION ONLY				90.80
02/12/09	92083735	MAGNESIUM				58.50
02/12/09	92084100	PHOSPHORUS				47.50
02/12/09	91085610	PROTHROMBIN TIME				47.40
02/12/09	91085730	APTT				55.00
02/12/09	94084484	TROPONIN I				42.00
02/12/09	92082550	CPK, TOTAL				36.04
02/12/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF				57.05
02/12/09	91085610	PROTHROMBIN TIME				47.40
02/12/09	91085730	APTT				55.00
02/12/09	91085379	D-DIMER QUANTITATIVE				77.43
02/12/09	91082730	FIBRINOGEN, QUANT				53.95
02/13/09	03040170	ECHO COMPLETE W/SPECT & CFI				814.07
02/13/09	19010051	NUTRITION ASSESS/CONSULT-COMP				77.30
02/13/09	17010129	HME				10.00
02/13/09	23058135	BLOOD GASES WITH SATURATION				118.00
02/13/09	23058137	CARBOXYHEMOGLOBIN				53.00
02/13/09	23058138	METHEMOGLOBIN				53.00
02/14/09	01623100	INTENSIVE CARE				1260.00
02/13/09	15131616	MODULE, PUMP ALARIS				23.75
02/13/09	15131616	MODULE, PUMP ALARIS				23.75
02/13/09	15131615	MODULE, CONTROL ALARIS OXISENSOR, FINGER ADULT DISP				26.55
02/14/09	15151855	OXISENSOR, FINGER ADULT DISP	(QTY	0F	0002)	150.72
02/14/09	15300135	D5 0.5 SBD CHLOR 1000CC				34.50
02/14/09	15300135	05 0.5 SOD CHLOR 1000CC				34.50
02/14/03	10300240	NUMBAL SALINE 500CC				30"00
02/14/09	12011833	NEXIKOSE IND DOX DOWL				10.20
02/14/03	12011835	DEXIRUSE INJ 50% 50ML				10.20
02/14/09	12014367	FULASSIUM UL IOMEN/SOME MATER				42.35
VZ/14/V3	12012303	FURUSEAIDE INJ ZOMG				10.20
VZ/14/VJ - NO /44/NO	12010111	SOU CHLORIDE INJ, SOME MOV				10.20
02/14/03	120141/3	D5 0.5 SOD CHLOR 1000CC D5 0.5 SOD CHLOR 1000CC NORMAL SALINE 500CC DEXTROSE INJ 50% SOML DEXTROSE INJ 50% SOML POTASSIUM CL 10MEQ/SOML WATER FUROSEMIDE INJ 20MG SOD CHLORIDE INJ, 30ML MDV PANTOPRAZOLE INJ PER 40 MG ALBUTEROL INHALER-1 PUFF LUBRICATING DINT EYE 3.50				43.80
02/14/03	17010700	HUBUICATIVO OTUT FUE O FO	(QTY	0F	0008)	4.80
		LUBRICATING DINT EYE 3.50 DSW INJ, 250ML				715514
V 2 / 1 2 / 0 2	12020000	FENTANYL INJ 50 MCG/ML,20 ML	/ /** *** 1.1			30.00
02/14/09	12012313	DEXTROSE INJ 50% SOME	(111)	ÜΡ	0020)	11.35
02/14/09	17010700	ALBUTEROL INHALER-1 PUFF	/ C-T-13	G 57		10.20
02/11/09	12019754	MIDAZOLAM INJ 5MG PER ML	(MIX	UF	0008)	4.80
02/11/09	12020050	DSW IND, 100ML				55.90
02/14/09	12013742	METOPROLOL 25 MG TAB				30.00
02/14/09	17010700	ALBUTEROL INHALER-1 PUFF	/ OTV	ΔE	88861	1.10
02/14/09	70071010	CHEST, SINGLE FRONTAL	(QTY	UF	VVV8/	4.80
02/14/09	70000003	X-RAY DONE AT BEDSIDE				100.05
		·· voic water the perhatra				0 = 0 0

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

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PATIEN	T NAME: W	DESCR CBC, AUTOMATED W/AUTO WB FROTHROMBIN TIME APTT CPK, TOTAL MB FRACTION ONLY TROPONIN I BLOOD CULTURE CULTURE, URINE, QUANTITA BLOOD CULTURE TROPONIN I CBC, AUTOMATED W/AUTO WB CHLORIDE BIOCARBONATE/CO2 UREA NITROGEN, BLOOD (BU) CREATININE CALCIUM, BLOOD, CHEMICAL SODIUM - SERUM GLUCOSE, BLOOD TROPONIN I POTASSIUM, SERUM PROTHROMBIN TIME APTT MAGNESIUM PHOSPHORUS TROPONIN I APTT PROTHROMBIN TIME HME HME HME HME HME HME HME HME HME H	ACCOUNT	NBR:	015196807-	9042
COU NATE	вес мов	DESCR	T & T T C M			
364 MHIL A7717/00	ACT MOR	DESUR CDC AUTOWATER WALLTO NA	C DICC TLITAM			E3 A8
02/12/02	91000024 91005210	COC, MUIUMMIED MAMUIU ME	C Diff			37.45
02/12/03	21003010	CROTORUBLY (THE				47.4V EE AA
V2/12/V2	_ 2105015V	TTII CDV TATAI				00±00 NA 30
V2/12/02	- 22V02GGV - Q2AQ2SSS	WE SEVELLE ONLY				ጋር ₈ ህ ዋ
02/12/02	94084484	TRADITOR ORLY				ንህ # O O
02/12/02	97097040	RIAND CHITHRE				ማፈቱ VV ውን ግሊ
02/12/09	97087086	CHITIPE HEINE DHONTITO	TTUE			02.70
02/12/09	97087040	RIANN CHITHRE	1 7 7 7			27 20V
02/12/09	34084484	TROPONIN I				ፈጋ ለለ
02/13/09	91085024	CRC. AUTOMATED W/AUTO WRI	nier			57 AS
02/13/09	92082435	CHINETOF	2 0 11 1			31.60
02/13/09	92082374	RINCARRONATE/CO2				29 60
02/13/09	92084520	URFA NITROGEN. RIGOD (RIK	J)			29 60 29 60
02/13/09	92082565	CREATININE	• •			32.60
02/13/09	92082310	CALCIUM, BLOOD, CHENICAL				58.90
02/13/09	92084295	SODIUM - SERUM				29.60
02/13/09	92082947	GLUCOSE - BLOOD				49.20
02/13/09	94084484	TROPONIN I				42.00
02/13/09	92084132	POTASSIUM. SERUM				40-15
02/13/09	91085610	PROTHROMRIN TIME				47.40
02/13/09	91085730	APTT				55.00
02/13/09	92083735	MAGNESIUM				58.50
02/13/09	92084100	PHOSPHORUS				47.50
02/12/09	94084484	TROPONIN I				42.00
02/12/09	91085730	APTT				55.00
02/12/09	91085610	PROTHROMBIN TIME				47.40
02/14/09	17010129	HME				10.00
02/14/09	17010129	HME				10.00
02/14/09	17010280	ADULT VENT SUBSEQUENT DAY	*			707.15
02/14/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
02/14/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
02/14/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
02/14/09	23058135	BLOOD GASES WITH SATURATI	ON			118.00
02/14/09	23058137	CARBOXYHEMOGLOBIN				53.00
02/14/09	23058138	METHEMOGLOBIN				53.00
02/15/09	01623100	INTENSIVE CARE				1260.00
						23.75
		MODULE, PUMP ALARIS				23.75
		MODULE, CONTROL ALARIS				26.55
		D5 0.2% NACL 1000ML				34.50
		05 0.5 SOD CHLOR 1000CC		(QTY	OF 0002)	69.00
		D5 0.5 NS + 20 KCL 1000CC	:			49.25
		D5W INJ, 250ML				30.00
02/14/09	12012315	FENTANYL INJ 50 MCG/ML,20	ML	YTØ)	OF 0020)	11.35
		POT PHOSPHATE SMM/ML 15ML				10.20
02/15/09	12020060	DSW INJ, 250ML				30.00
ひりょうにょひり	10011170	DAMTODOATOLE THE OPE AS W	· ~			12 25

02/15/09 12014173 PANTOPRAZOLE INJ PER 40 MG

43.80

PAGE 8 01/05/11 11:50 STF

SRV DATE R	ace wee	DECCRIPTION		
DAA NATE U	ነርሮ የዕጸ ነውያኒጣካፈጣ	DESCRIPTION SE NO TAN		
02/10/02 1	LEVIOITE	METURKULUL 25 Mb THB		1.10
02/15/09 1	11101077	METOPROLOL 25 MG TAB SOD CHLORIDE INJ, 30ML MDV ALBUTEROL INHALER-1 PUFF	/OTH OF 05001	10.20
02/13/09 1	17010700	HLBUTERUL INHALEK-1 PUFF	(A1A At 0008)	4.80
		METOPROLOL 25 MG TAB		1.10
		CHEST, SINGLE FRONTAL		100.05
		X-RAY DONE AT BEDSIDE		0.00
		ABDOMEN, SINGLE VIEW		116.65
		X-RAY DONE AT BEDSIDE		0.00
		ABDOMEN, SINGLE VIEW		116.65
02/13/09 9	37087070	CULTURE, AEROBIC, ROUTINE		113.60
02/13/09 9	12084132	POTASSIUM, SERUM		40.15
02/13/09 9	32082435	CHLORIDE		31.60
02/13/09 9	2082374	BIOCARBONATE/CO2		29.60
02/13/09 9	12084295	SODIUM - SERUM		29.60
02/13/09 9	2084520	UREA NITROGEN, BLOOD (BUN)		29.60
02/13/09 9	2084100	PHOSPHORUS		47.50
02/13/09 9	2082565	CREATININE		32.60
02/13/09 9	2082310	CALCIUM, BLOOD, CHEMICAL	0.40.	58.90
02/13/09 9	2082947	GLUCOSE, BLOOD	Alasan:	49.20
02/14/09 9	1085024	CBC, AUTOMATED W/AUTO WBC DIFF /		57.05
02/14/09 9	2084132	CULTURE, AEROBIC, ROUTINE POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM HME	FAN CANSIA	40.15
02/14/09 9	2082435	CHLORIDE	2 7500	31.60
02/14/09 9	2082374	BIOCARBONATE/CO2		29.60
02/14/09 9	2084295	SODIUM - SERUM	100	29.60
02/14/09 9	2084520	UREA NITROGEN, BLOOD (BUN)		29.60
02/14/09 9	2084100	PHOSPHORUS		47.50
02/14/09 9:	2082565	CREATININE		32.60
02/14/09 9	2082310	CALCIUM, BLOOD, CHEMICAL		58.90
02/14/09 9:	2082947	GLUCOSE, BLOOD		49.20
02/14/09 9:	2083735	MAGNESIUM		58.50
02/15/09 13	7010129	HME		10.00
02/15/09 1	7010129	HME		10.00
02/15/09 13	7010280	ADULT VENT SUBSEQUENT DAY		707.15
02/15/09 13	7010365	MDI TX-VENT-SUBSEQUENT		27.45
02/15/09 23	3058135	BLOOD GASES WITH SATURATION		118.00
02/15/09 23	3058137	UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM HME HME ADULT VENT SUBSEQUENT DAY MDI TX-VENT-SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHEMOGLOBIN TMTEMSTUF CARE		53.00
02/15/09 23	3058138	METHEMOGLOBIN		53.00
02/16/09 0:	1623100	INTENSIVE CARE		1260.00
02/13/09 83	7086427	RED BLOOD CELL PROCESSING		509.15
		RED BLOOD CELL PROCESSING		509.15
		MODULE, PUMP ALARIS		23.75
02/15/09 13	5131616	MODULE, PUMP ALARIS		23.75
02/15/09 15	5131615	MODULE, CONTROL ALARIS		26.55
02/16/09 13	5300240	NORMAL SALINE 500CC		30.00
		INSULIN HUMAN REG 10ML		110.10
		SOD CHLOR 0.9% INJ 100ML		30.00
		ALBUTEROL INHALER-1 PUFF	(QTY OF 0008)	4.80
		METOPROLOL 25 MG TAB		1.10

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OBH BATE	ner upp	0 * 0 0 0 T 0 T 7 2 1				
		DESCRIPTION				43.80 329.60 134.50
		PANTOPRAZOLE INJ PER 40 MG				43.80
02/16/09	15010861	BALSAM/TRYPSIN(XENADERM) OINT				329.60
02/16/03	12018669	LEVOFLOXACIN INJ 250MG	(QTY	OF	0002)	134.50
02/16/09	12014555	PUT CHLORIDE INJ 40MEQ				10.20
02/16/09	12020060	DSW INJ, 250ML				30.00
02/16/09	12013742	METOPROLOL 25 MG TAB				1.10
02/16/09	12014562	POT CL POWDER 20MEQ PKT				0.90
02/16/09	12012940	INSULIN HUMAN REG 10ML				110.10
02/16/09	12020234	SOD CHLOR 0.9% INJ 100ML				30.00
02/16/09	12012330	FAMOTIDINE INJ. 20MG(PEPCID)				10.20
02/16/09	70071010	CHEST, SINGLE FRONTAL				100.05
02/16/09	70000009	X-RAY DONE AT BEDSIDE				0.00
02/14/09	94084484	TROPONIN I				42.00
02/15/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF				57.05
02/15/09	92084132	POTASSIUM, SERUM				40.15
02/15/09	92082435	CHLORIDE				31.60
02/15/09	92082374	BIOCARBONATE/CO2				29.60
02/15/09	92084295	SODIUM - SERUM				29.60
02/15/09	92084520	UREA NITROGEN, BLOOD (BUN)				29.60
02/15/09	92084100	BALSAM/TRYPSIN(XENADERM) OINT LEVOFLOXACIN INJ 250MG POT CHLORIDE INJ 40MEQ DSW INJ, 250ML METOPROLOL 25 MG TAB POT CL POWDER 20MEQ PKT INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100ML FAMOTIDINE INJ. 20MG(PEPCID) CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE TROPONIN I CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM NUTRITION CARE EVAL & REASSESS HME HME ADULT VENT SUBSEQUENT DAY MDI TX-VENT-SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHEMOGLOBIN METHEMOGLOBIN METHEMOGLOBIN METHEMOGLOBIN INTENSIVE CARE BLOOD TRANSFUSION 4-6 HRS CATHETER, TRIPLE LUMEN (ARROW) TUBING, EXTENSION DISP 33X3ML DS 0.5 NS + 20 KCL 1000CC				47.50
02/15/09	92082565	CREATININE				32.60
02/15/09	92082310	CALCIUM. BLOOD. CHEMICAL				58.90
02/15/09	92082947	GLUCOSE, RLOOD				49.20
02/15/09	92083735	MAGNESTUM				58.50
02/16/09	19010052	NHITRITION PARE FUAL & REASSESS				19 50
02/16/09	17010129	HHF				10.00
02/16/09	17010129	HAE				10 00
02/16/09	17010280	ANIII T UENT SURSEQUENT DAV				707 15
02/16/09	17010365	MNI TY-UFNT-SHRSFOHENT				7 V 7 x 1.3
02/16/09	23059135	PIONO GAGES WITH SATURATION				110 AA
02/16/09	23059137	COBROVUEMOCIODIN				20 00
02/16/09	23058138	METHEMACIARIN				00 VV
02/16/09	20000100	DIOON SACES WITH CATHBATTON				79.00
02/10/V2 02/16/09	20000100	LVDDUAARCHUUTH DECON CHOEG WITH DHICKHIICK				110.00
V2/10/V2	20000107	ACTREMOGRADIA PREGOVILEMOGRADIA				23.00
NO / 1 7 / NO	A16031AA	TATEMOTHE CARE				33.00
A 5 / 1 2 / A 5	01023100	THICKNIVE CHKE				1260.00
02/13/03	92V24V/3	CATUSTED TRIBLE LUXEN (AREAL)				605.00
V2/1//V3	15051415	THIRE IER, IRIPLE LUMEN (PRRUM)	6 m m 1 1	ra. ra.	0.0.1.07.1	95.76
0.2717703	10202680	TUBING, EXTENSION DISP 33X3ML	(#14	UF	0015)	39.00
02/1//09	15300137	D5 0.5 NS + 20 KCL 1000CC				
02/1//03	15300235	NORMAL SALINE 250CC				30.00
		FENTANYL INJ 50 MCG/ML, 2ML				11.35
		POT CL POWDER 20MEQ PKT				0.90
UZ/1//09	12012346	FENTANYL INJ 50 MCG/ML, 2ML				11.35
		ALBUTEROL INHALER-1 PUFF	YTQ)	θF	0008)	4.80
		METOPROLOL 25 MG TAB				1.10
02/1//09	12018659	LEVOFLOXACIN INJ 250MG	(QTY	OF	0002)	134.50
0271//09	12015330	FAMOTIDINE INJ. 20MG(PEPCID)				10.20

U N I V E R S I T Y H O S P I T A L UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

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PATIENT NAME: V	NEST, CHARLES	ACCOUNT	NBRE	015196807	-9042
SRU DATE REE NRR	DESC	אחדדחא			
02/17/09 17010700	ALBUTEROL INHALER-1 PUF SOD CHLOR 0.9% INJ 100M INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100M INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100M FENTANYL INJ 50 MCG/ML, FENTANYL	F	(QTY	OF 0008)	4.80
02/16/09 12020234	SOD CHLOR 0.9% INJ 100M	L			30.00
02/16/09 12012940	INSULIN HUMAN REG 10ML				110.10
02/17/09 12012940	INSULIN HUMAN REG 10ML				110.10
02/17/09 12020234	SOD CHLOR 0.9% INJ 100M	L			30.00
02/17/09 12012346	FENTANYL INJ 50 MCG/ML,	2ML			11.35
02/17/09 12012346	FENTANYL INJ 50 MCG/ML,	2ML			11.35
02/17/09 12012346	FENTANYL INJ 50 MCG/ML,	2ML			11.35
02/17/09 12012346	FENTANYL INJ 50 MCG/ML,	2ML			11.35
02/17/09 12012346	FENTANYL INJ 50 MCG/ML,	2ML			11.35
02/17/09 12013742	METOPROLOL 25 MG TAB				1 . 1.0
02/17/09 12010861	BALSAM/TRYPSIN(XENADERM	THIO (329.60
02/17/09 12012330	FAMOTIDINE INJ. 20MG(PE	PCID)			10.20
02/17/09 76070551	MRI, BRAIN INCL BRAINSTE	M W/O			1672.55
02/17/09 76072141	MRI, CERVICAL SPINE W/O	CONTRAS			1672.55
02/15/09 70000009	X-RAY DONE AT BEDSIDE				0.00
02/17/09 70071010	CHEST, SINGLE FRONTAL				100.05
02/17/09 70000009	X-RAY DONE AT BEDSIDE				0.00
02/16/09 91085024	CBC, AUTOMATED W/AUTO W	BC DIFF			57.05
02/16/09 92084132	POTASSIUM, SERUM				40.15
02/16/09 92082435	CHLORIDE				31.60
02/16/09 92082374	BIOCARBONATE/CO2				29.60
02/16/09 92084295	SODIUM - SERUM				29.60
02/16/09 92084520	UREA NITROGEN, BLOOD (B	(אנ			29.60
02/16/09 92084100	PHOSPHORUS				47.50
02/16/09 92082565	CREATININE				32.60
02/16/09 32082310	CALCIUM, BLOOD, CHEMICA				58.90
02/16/09 92082947	GLUCOSE, BLOOD				49.20
02/16/09 92083735	MAGNESIUM				58.50
02/17/09 17010129	HWE				10.00
02/17/09 17010129	HME				10.00
02/17/09 17010129	HME				10.00
02/17/09 17010129	HME				10.00
02/17/09 17010280	ADULT VENT SUBSEQUENT D	4 Y			707.15
02/17/09 17010280	ADULT VENT SUBSEQUENT DE	PΥ			707.15
02/17/09 17010280	ADULT VENT SUBSEQUENT D	Ϋ́			707.15
02/17/09 17010365	MDI TX-VENT-SUBSEQUENT				27.45
	· · · · · · · · · · · · · · · · · · ·				
	MOI TX - SUBSEQUENT		, p. 1987 . A	me	23.25
02/17/09 17010490			COTY	OF 0002)	52.12
	TRANSPORT CIRCUIT	* 12 2 1			25.00
	BLOOD GASES WITH SATURA	1104			118.00
02/1//09 2305813/	CARBOXYHEMOGLOBIN				53.00

02/17/09 2305813B METHEMOGLOBIN

02/18/09 01623100 INTENSIVE CARE

02/17/09 15310012 DAILY SUPPLY CHARGE-H4

02/18/09 15041650 DRAINAGE, SAHARA CHEST 02/18/09 15300137 D5 0.5 NS + 20 KCL 1000CC

53.00

248.27

1260.00

130.87 49.25

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SRU DATE	REF NBR	DESCRIPTION D5 0.5 NS + 20 KCL 1000CC NORMAL SALINE 500CC FENTANYL INJ 50 MCG/ML, 2ML COMBIVENT INHALER-1 PUFF FENTANYL INJ 50 MCG/ML, 2ML				
02/18/09	15300137	D5 0_5 NS + 20 KCL 1000CC				49 25
02/18/09	15300240	NORMAL SALTHE SOOCC				30 00
02/17/09	12012346	FENTANYI INA SO MCG/MI. 2MI				11.35
02/18/09	12012346	FENTANYL INJ 50 MCG/ML, 2ML				11.35
02/18/09	12012346	FENTANYI ING 50 MCG/ML 2ML				11.35
02/18/09	12012346	FENTANYL INJ SO MCG/ML, 2ML				11.35
02/18/09	12012346	FENTANYL ING 50 MCG/ML 2MI				11.35
02/18/09	17010702	COMBIVENT INHALER-1 PUFF	(DTY	ΰF	0008)	14.64
02/18/09	12012346	FENTANYL INJ 50 MCG/ML. 2ML				11.35
02/18/09	12018669	LEVOFLOXACIN INJ 250MG	(QTY	0F	0002)	134.50
02/18/09	12013742	METOPROLOL 25 MG TAB	·			1.10
02/17/09	12012940	INSULIN HUMAN REG 10ML				110.10
02/17/09	12020234	SOD CHLOR 0.9% INJ 100ML				30.00
02/18/09	12012330	FAMOTIDINE INJ. 20MG(PEPCID)				10.20
02/18/09	12012346	FENTANYL INJ 50 MCG/ML, 2ML				11.35
02/18/09	12012346	FENTANYL INJ 50 MCG/ML, 2ML				11.35
02/18/09	17010702	COMBIVENT INHALER-1 PUFF FENTANYL INJ 50 MCG/ML, 2ML LEVOFLOXACIN INJ 250MG METOPROLOL 25 MG TAB INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100ML FAMOTIDINE INJ. 20MG(PEPCID) FENTANYL INJ 50 MCG/ML, 2ML COMBIVENT INHALER-1 PUFF	(QTY	OF	0008)	14.64
02/18/09	12012346	FENTANYL INJ 50 MCG/ML. 2ML				11.35
02/18/09	12012346	FENTANYL INJ 50 MCG/ML, 2ML				11.35
02/18/09	17010702	FENTANYL INJ 50 MCG/ML, 2ML FENTANYL INJ 50 MCG/ML, 2ML COMBIVENT INHALER-1 PUFF DSW INJ. 250MI	(QTY	0F	0008)	14.64
02/18/09	12020060	DSW INJ, 250ML				30.00
02/18/09	12012353	FERTANYL INJ SONCG/ML, SOML				21.45
02/18/09	12013742	METOPROLOL 25 MG TAB				1.10
02/18/09	12012330	FAMOTIDINE INJ. 20MG(PEPCID)				10.20
02/11/09	08207020	DSW INJ, 250ML FENTANYL INJ 50MCG/ML, 50ML METOPROLOL 25 MG TAB FAMOTIDINE INJ. 20MG(PEPCID) SUTURE 4-0 MONOCRYL SUTURE 3-0 VICRYL UND SUTURE 0 VICRYL UND SUTURE 1 VICRYL UND CAUTERY TIP CLEANER DRAIN/PLEUR-EVAC OAS BLANKET: LOWER BAIR APPOSE ULC 35 WIDE S TRAY: THORACOTOMY GLOVES: BIOGEL MAGNA DRAPE	(QTY	OF	0002)	43.58
02/11/09	08207010	SUTURE 3-0 VICRYL UN				11.64
02/11/09	08207010	SUTURE O VICRYL UND	YTQ)	OF	0002)	18.00
02/11/09	08207010	SUTURE 1 VICRYL UND	(QTY	OF	0006)	54.84
02/11/09	08051314	CAUTERY TIP CLEANER				2.85
02/11/09	08023024	DRAIN/PLEUR-EVAC OAS	(QTY	0F	0002)	226.74
02/11/09	08020089	BLANKET: LOWER BAIR				30.82
02/11/09	08054647	APPOSE ULC 35 WIDE S				25.00
02/11/09	08105124	TRAY: THORACOTOMY				750.00
02/11/09	08051409	GLOVES: BIOGEL	(QTY	0F	0010)	60.00
02/11/09	08056104	MAGNA DRAPE				20.85
		GOWN: XX-LARGE ADUL				16.79
		SUTURE 3-0 SILK TIES				25.00
		SUTURE 1 VICRYL TP-1			0002)	
02/11/09	08116036	SPONGE 450 LAPS/MICK			0004)	24.00
02/11/09	08029013	IRRIGATION NACL 0.9%	(QTY	OF	0004)	166.00
		DRAPE: SALINE WARMER				113.75
		SUTURE 2-0 SILK TIES				25.00
		EGGCRATE MATTRESS				30.23
		SUTURE O SOFSILK BLA				6.00
02/11/03	0401004	Room Start/Stop	15711	0 F	A A 2 4 3	878.50
		Room Start/Stop	(UIY	U۲	0008)	2155.60
VZ/11/VD	11010101	Anesthesia Start / T Anesthesia Start / T	1000	O.F	лалас	232.35
VE/ 23/43	TIVIVIVI	numberd oldre / ((U I Y	Uľ	0008)	743.52

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

01/05/11 11:50 PATIENT STATEMENT OF ACCOUNT - DETAIL STF

PATIENT NAME: WEST, CHARLES ACCOUNT NBR: 015196807-9042

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SRU NATE	PEE MRR	CLIP HORIZON MED TI- CLIP 003204 HORIZON CLIP HORIZON LRG TI- DRAPE: STERI 1018L CATHETER 14724 THORA FLOSEAL 10ML 1501285 SUTURE 4-0 PROLENE R SUTURE 2-0 27' VICRY SUTURE 2-0 SILK 8-30 SUTURE 3-0 SILK CR* CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CULTURE, AEROBIC ID SUSCEPT; AGAR DIL, EA AGT ENT CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CD2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM NUTRITION CARE EVAL & REASSESS FILTERS HME HME ADULT VENT SUBSEQUENT DI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX-SUBSEQUENT MDI TX - SUBSEQUENT MDI			
02/11/09	08051477	CLIP HORIZON WED IT-		•	57.59
02/11/09	08051479	CLIP 003204 HORIZON			57.84
02/11/09	08051478	CLIP HORIZON LRG TI-			6.44
02/11/09	08051548	DRAPE: STERI 1018L	(QTY O	F 0002)	16.10
02/11/09	08051556	CATHETER 14724 THORA	(QTY Of	0002)	160.00
02/11/09	08030168	FLOSEAL 10ML 1501285	(QTY O	F 0002)	1500.00
02/11/09	08207010	SUTURE 4-0 PROLENE R	(QTY OF	0002)	22.00
02/11/09	08207010	SUTURE 2-0 27' VICRY	•		8.25
02/11/09	08207040	SUTURE 2-0 SILK 8-30			43.20
02/11/09	08207040	SUTURE 3-0 SILK CR*			70.27
02/18/09	70071010	CHEST, SINGLE FRONTAL			100.05
02/18/09	70000009	X-RAY DONE AT BEDSIDE			0.00
02/12/09	97087072	CULTURE, AEROBIC ID			36.10
02/12/09	97087179	SUSCEPT; AGAR DIL, EA AGT ENT			28.45
02/17/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF			57.05
02/17/09	92084132	POTASSIUM, SERUM			40.15
02/17/09	92082435	CHLORIDE			31.60
02/17/09	92082374	BIOCARBONATE/CO2			29.60
02/17/09	92084295	SODIUM - SERUM			29.60
02/17/09	92084520	UREA NITROGEN, BLOOD (BUN)			29.60
02/17/09	92084100	PHOSPHORUS			47.50
02/17/09	92082565	CREATININE			32,60
02/17/09	92082310	CALCIUM, BLOOD, CHEMICAL			58.90
02/17/09	92082947	GLUCOSE, BLOOD			49.20
02/17/09	92083735	MAGNESIUM			58.50
02/18/09	19010052	NUTRITION CARE EVAL & REASSESS			19.50
02/18/09	17010093	FILTERS			13.05
02/18/09	17010129	НИЕ			10.00
02/18/09	17010129	HME			10.00
02/18/09	17010280	ADULT VENT SUBSEQUENT DAY			707.15
02/18/09	17010365	MOI TX-VENT-SUBSEQUENT			27.45
02/18/09	1/010390	MDI IX-INITIAL			31.70
02/18/09	1/010395	MDI IX - SUBSEQUENT			23.25
02/18/09	1/010395	MDI IX ~ SUBSEQUENT			23.25
02/18/09	23038135	BLUUD GASES WITH SATURATION			118.00
02/18/03	23038137	CHKROXYHEWOGFORIN			53.00
02/10/03	720199199	DAZIH GURDIN GUADGE UA			53.00
02/18/03	710017	THILY SUPPLY CHARGE MA			248.27
0 4 7 3 3 7 0 3 0 0 1 1 0 1 0 0	46904650	INTENSIVE CARE			1260.00
V # \ 7 2 \ A 2 \ A 2	10001000	COLLAR, ASPEN ADULT REGULAR DRAINAGE, SAHARA CHEST			178,14
		D5 0.5 NS + 20 KCL 1000CC			130.87
		D5 0.5 NS + 20 KCL 1000CC			49.25 49.25
		FENTANYL INJ 50 MCG/ML, 2ML			
		INSULIN HUMAN REG 10ML			11.35 110.10
		SOD CHLOR 0.9% INJ 100ML			30.00
		COMBIVENT INHALER-1 PUFF	(QTY OF	0008)	14.64
02/19/09	12014555	POT CHLORIDE INJ 40MEQ	twit Of		10.20
					4 V H & V

UNIVERSITY HOSPITAL . UAMS MEDICAL CENTER

01/05/11 11:50 PATIENT STATEMENT OF ACCOUNT - DETAIL STF

PATIENT NAME: WEST, CHARLES ACCOUNT NBR: 015196807-9042

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SRV DATE	REF MBR	DESCRIPTION		
		SOD CHLOR 0.9% INJ 500ML (NSS)		30.00
02/19/09	17010702	COMBIVENT INHALER-1 PUFF LEVOFLOXACIN INJ 250MG	(QTY OF 0008)	14.64
			(QTY OF 0002)	134.50
		METOPROLOL 25 MG TAB		1.10
		FAMOTIDINE INJ. 20MG(PEPCID)	•	10.20
		INSULIN HUMAN REG 10ML		110.10
02/18/09	12020234	SOD CHLOR 0.9% IND 100ML		30.00
02/19/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	
02/19/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	
		METOPROLOL 25 MG TAB		1.10
02/18/09	12020060	D5W INJ, 250ML		30.00
		FENTANYL INJ 50MCG/ML, 50ML		21.45
		FAMOTIDINE INJ. 20MG(PEPCID)		10.20
		CHEST, SINGLE FRONTAL		100.05
		X-RAY DONE AT BEDSIDE		0.00
		CULTURE, AEROBIC, ROUTINE	. C/AA/_	113.60
		SMEAR, PRIMARY ROUTINE		33.20
		CULTURE, AEROBIC, ROUTINE		113.60
		CBC, AUTOMATED W/AUTO WBC DIFF	Fra Miller	57.05
		POTASSIUM, SERUM	25 3015	40.15
02/18/09		CHLORIDE	As Comment	31.60
		BIOCARBONATE/CO2		29.60
		SODIUM - SERUM		29.60
		UREA NITROGEN, BLOOD (BUN)	CAMIGANGA STATE OF THE CENTRED	29.60
		PHOSPHORUS		47.50
		CREATININE		32.60
		GLUCOSE, BLOOD		49.20
02/18/09 5				58.50
02/19/09 :				13.05
02/19/09				10.00
		ADULT VENT SUBSEQUENT DAY		707.15
		MDI TX-VENT-SUBSEQUENT		27.45
		MOI TX-VENT-SUBSEQUENT		27.45
		MOI TX - SUBSEQUENT		23.25
		MDI TX - SUBSEQUENT		23.25
		BLOOD GASES WITH SATURATION		118.00
		CARBOXYHEMOGLOBIN		53.00
		METHEMOGLOBIN	•	53.00
		DAILY SUPPLY CHARGE-H4		248.27
		INTENSIVE CARE		1280.00
		LACTED RINGERS 1000CC		37.55
		NORMAL SALINE 1000CC	/OT/ OF \$255	30.00
		COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
		LEVOFLOXACIN INJ 250MG	(QTY OF 0002)	134.50
		METOPROLOL 25 MG TAB	ACTU OF ASSOL	1.10
		COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
02/20/09)	12015330	FAMOTIDINE INJ. 20MG(PEPCID)		10.20

U N I V E R S I T Y H O S P I T A L UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

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PATIENT NAME: W	EST, CHARLES	ACCOUNT NBR:	015196807-9042	!
SRV DATE REF NBR	DESC	RIPTION		
02/20/09 12015111	SOD CHLORIDE INJ, 30HL I	MDV		10.20
02/20/09 17010702	COMBIVENT INHALER-1 PUF	F (QTY	OF 0008)	14.64
02/20/09 12011000	BISACODYL SUPP 10MG			0.75
02/20/09 17010702	COMBIVENT INHALER-1 PUF	F (QTY	DF 0008)	14.54
02/20/09 12011000	BISACODYL SUPP 10MG			0.75
02/20/09 12013742	METOPROLOL 25 MG TAB			1.10
02/20/09 12012330	FAMOTIDINE INJ. 20MG(PE	PCID)		10.20

02/20/09 12011000	BISACODYL SUPP 10MG		0.75
02/20/09 17010702	COMBIVENT INHALER-1 PUFF	(QTY DF 0008)	14.54
02/20/09 12011000	BISACODYL SUPP 10MG		0.75
02/20/09 12013742	METOPROLOL 25 MG TAB		1.10
02/20/09 12012330	FAMOTIDINE INJ. 20MG(PEPCID)		10.20
02/19/09 12020060	D5W INJ, 250ML		30.00
02/19/09 12012353	FENTANYL INJ SONCG/ML, SOML		21.45
02/20/09 70071010	CHEST, SINGLE FRONTAL		100.05
02/20/09 70000009	X-RAY DONE AT BEDSIDE		0.00
02/20/09 70074000	ABDOMEN, SINGLE VIEW		116.65
02/20/09 70000009	X-RAY DONE AT BEDSIDE		0.00
02/20/09 70071010	CHEST, SINGLE FRONTAL		100.05
02/20/09 70000009	X-RAY DONE AT BEDSIDE		0.00
02/19/09 91085024	CBC, AUTOMATED W/AUTO WBC DIFF		57.05
02/19/09 92084132	POTASSIUM. SERUM	•	40.15
02/19/09 92082435	CHLORIDE		31.60
02/19/09 92082374	BIOCARBONATE/CO2		29.60
02/19/09 92084295	SODIUM - SERUM		29.60
02/19/09 92084520	UREA NITROGEN. BLOOD (BUN)		29.60
02/19/09 92084100	PHOSPHORUS		47.50
02/19/09 92082565	CREATININE		32.60
02/19/09 92082310	CALCIUM, RICON CHEMICAL		58.90
02/19/09 92082947	GLUCOSE PLOOD		49 20
02/19/09 92083735	MOCHECIIM		58.50
02/20/09 21010005	OT FUOLIDATION - 30 MIN		185.00
02/20/09 21019230	CHART REUTEN/ATTEMPT PT UTSTT		0.00
02/20/09 19010052	MITRITION CORE FUOL & PROSSESS		19 50
02/20/09 17010129	TAL		10.00
02/20/09 17010129	HME		10 00
02/20/03 1/010123	ADDIT DENT CHRESOHENT DOV		707 15
02/20/03 17010265	MOT TY-UCNT-CUPCCOUCNT		707 15
02/20/03 1/010000	MOT TV-HENT-CHRCEDHENT		27 ፣ ግብ ማማ አፍ
02/20/03 1/010303 02/20/03 17010303	WOT TY_HENT_CHOCCOHENT		2/07J
02/20/03 1/010303	MOT TV _ CHECKNEAT		ፈ/ «ተብ ማህ ማዋ
02/20/00 1/010000	BLOOD CACES WITH CATHDATION		440 AA
02/20/00 20000100 02/20/00 20000100	CADDUAANCE COIM		110:00
02/20/09 2303613/	METHEROPIOPIN		23.00
02/20/02 23030130	BATIV CHOOLU CHABOT HA		73.00
02/20/03 10010012	THICKOTUE CARE		ፈሣዕራፈ/
V2/21/V3 V10231VV	TWICKSIAC CHRC		1250.00
02/21/05 10000000000000000000000000000000000	BISACODYL SUPP 10MG COMBIVENT INHALER-1 PUFF BISACODYL SUPP 10MG METOPROLOL 25 MG TAB FAMOTIDINE INJ. 20MG (PEPCID) D5W INJ, 250ML FENTANYL INJ SOMCG/ML, 50ML CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM OT EVALUATION - 30 MIN CHART REVIEW/ATTEMPT PT VISIT NUTRITION CARE EVAL & REASSESS HME HME ADULT VENT SUBSEQUENT DAY MOI TX-VENT-SUBSEQUENT MO		30.00
02/19/09 12012940	INSULIN HUMAN REG 10ML		110.10
	SOD CHLOR 0.9% INJ 100ML	ووسوم ووسوم	30.00
	COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
	SOD PHOS/BIPHOS ENEMA(FLEETS)	A principle of the second	6.05
	COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
AKNX11/AR 15018668	LEVOFLOXACIN INJ 250MG	(QTY OF 0002)	134.50

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

PAGE 15 01/05/11 11:50 STF

PATIENT	NAME:	WEST,	CHARLES	
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SRY DATE RI	EF NBR	DESCRIPTION				
02/21/09 1:	2014562	POT CL POWDER 20MEQ PKT	(QTY	OF	0002)	1.75
02/21/09 17	2013742	METOFROLOL 25 MG TAB				1.10
02/21/09 13	2012330	METOFROLOL 25 MG TAB FAMOTIDINE INJ. 20MG(PEPCID) COMBIVENT INHALER-1 PUFF COMBIVENT INHALER-1 PUFF				10.20
02/21/09 17	7010702	COMBIVENT INHALER-1 PUFF	(QTY	OF	0008)	14.64
02/21/09 10	7010702	COMBIVENT INHALER-1 PUFF	(QTY	OF	(8000	14.64
02/21/09 12	2015111	SOD CHLORIDE INJ, 30ML MDV	(ÔTY	OF	0002)	10.20
02/21/09 13	2013742	METOPROLOL 25 MG TAB				1.10
02/21/09 12	2013249	LORAZEPAM INJ 2MG SYRINGE				11.35
02/21/09 70	0071010	CHEST. SINGLE FRONTAL				100.05
02/21/09 70	0000009	X-RAY DONE AT REDSTOR				0.00
02/20/09 91	1085024	CRC. AUTOMATED W/AUTO WRC DIFF				57.05
02/20/09 92	2084100	PHOSPHORUS				47.50
02/20/09 92	2084295	SADTHM - SERHM				79 6A
02/20/09 92	2084132	POTASSTUM SERUM				ፈን « U V
02/20/00 02	2007202	MARNECTIM				ማሪ ሚሊ ማሪ ሚሊ
- 02/20/09 93 - 03/30/09 93	2 V C C / C C 3 A O O / A O S	CHIVELTAC				ማር የአ
- V2/2V/V2 - 22	TROCOAC	CHEURIPE BLOOK .				01.00
- V & / & V / V 2 - 2 &	2 V C & 2 M /	DIOLOGO BLOOD				49.40
- VZ/ZV/VD - DZ - NO /ON/NO - OZ	2V0Z3/4 3A04E3A	DIUCHRBURHIE/LUZ				23.60
02/20/00 02	1784974 1888555	CHENTIKOPEN ² BLOOD (BON)				23.60
02/20/09 92	(V82363	CKEHIININE				32.60
02/20/09 92	2082310	CALCIUM, BLUUD, CHEMICAL				58.40
02/21/09 91	1085024	CRC, AUTOWATED MYAUTO MRC DIFF				57.05
02/21/09 92	2084132	SOD CHLORIDE INJ, 30ML MDV METOPROLOL 25 MG TAB LORAZEPAM INJ 2MG SYRINGE CHEST, SINGLE FRONTAL X-RAY DONE AT BEOSIDE CBC, AUTOMATED W/AUTO WBC DIFF PHOSPHORUS SODIUM - SERUM POTASSIUM, SERUM MAGNESIUM CHLORIDE GLUCOSE, BLOOD BIOCARBONATE/CO2 UREA NITROGEN, BLOOD (BUN) CREATININE CALCIUM, BLOOD, CHEMICAL CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SOOIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM SENSITIVITIES STREP SEROTYPE; PARTICLE AGGLU CULTURE, AEROBIC ID STREP SEROTYPE; PARTICLE AGGLU HME NON-MEDICATED AEROSOL/HOUR				40.15
02/21/09 92	2082435	CHLORIDE				31.60
02/21/09 92	2082374	BIDCARBONATE/CO2				29.60
02/21/09 92	2084295	SODIUM - SERUM				29.60
02/21/09 92	2084520	UREA NITROGEN, BLOOD (BUN)				29.60
02/21/09 92	084100	PHOSPHORUS				47.50
02/21/09 92	2082565	CREATININE				32.60
02/21/09 92	082310	CALCIUM, BLOOD, CHEMICAL				58.90
02/21/09 92	082947	GLUCOSE, BLOOD				49.20
02/21/09 92	083735	MAGNESIUM				58.50
02/17/09 97	087186	SENSITIVITIES				83.90
02/17/09 97	087147	STREP SEROTYPE;PARTICLE AGGLU				37.78
02/17/09 97	087072	CULTURE, AEROBIC ID		•		36,10
02/17/09 97	087147	STREP SEROTYPE; PARTICLE AGGLU				37.78
02/21/09 17	010129	HME				10.00
02/21/09 17	010149	NON-MEDICATED AEROSOL/HOUR	(QTY	OF	0005)	97.50
02/21/09 17	010280	ADULT VENT SUBSEQUENT DAY				707.15
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		BLOOD GASES WITH SATURATION				118.00
02/21/09 23	058137	CARBOXYHEMOGLOBIN				53.00
		METHEMOGLOBIN				53.00
		DAILY SUPPLY CHARGE-H4				248.27
		INTENSIVE CARE				1260.00
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U N I V E R S I T Y H O S P I T A L PAGE 16 UAMS MEDICAL CENTER 01/05/11 11:50 PATIENT STATEMENT OF ACCOUNT - DETAIL STF

		DESCRIPTION				
		05 0.5 NS + 20 KCL 1000CC				49.25
		FAMOTIDINE INJ. 20MG(PEPCID)	(QTY	~~	0000	10.20
		COMBIVENT INHALER-1 PUFF	(Q1Y	UF	0008)	14.64
02/22/09	12014000	POT CHLORIDE INJ 40MEQ				10.20
02/22/09	12020240	SOD CHLOR 0.9% INJ 500ML (NSS)	/ 6 T V	0.5	***	30.00 14.64
02/22/03	17010702	COMBIVER! INHHER T FUFF	(617	UF	0008)	14.64
- V2/22/V2 - N9/99/N9	12013/42	COMBIVENT INHALER-1 PUFF METOPROLOL 25 MG TAB LEVOFLOXACIN INJ 250MG	/ n T V	/"s \$""	****	1 = 1 U
- V2/22/V2 - M1/11/M1	12010002	FAMOTIDINE INJ. 20MG(PEPCID)	, k‡ I ±	UF	0002)	704°50 70 71
- 02/ £2/ 02 - 02/ £2/ 02	17012330	COMBIVENT INHALER-1 PUFF	/ O T W	n m	00000	10.20
02/22/03	12020702	DSW INJ, 250ML	1011	Or	00007	30.00
02/20/03	17010700	FENTANYL INJ 50MCG/ML, 50ML COMBIVENT INHALER-1 PUFF COMBIVENT INHALER-1 PUFF CHEST, SINGLE FRONTAL	(017	nε	ΛΛΛΟΙ	ተላ ፎላ
02/22/02 00/00/00	17010702	COMBINERT TRUMECK-I FORF	(W) 1	U.E.	ΑΛΛΟΙ	14.04
02/22/05	70071010	CHEST, SINGLE FRONTAL	(411	υŗ	AAAGA	100.05
02/22/09	70000009	Y-PAV NAME AT REDGINE				V VV 7000
02/22/09	91085024	CRC DUTAMOTER WIGHTA WAS RIFE				57 ለፍ
02/22/09	92084132	PATAGGTHM GERHM				40 15
02/22/09	92082435	CHIODIDE				31 EV
02/22/09	92002100	CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM				20 EV
02/22/09	92084295	GONTHM - GERHA				22.00
02/22/09	92084520	TIPES MITPOREM BLOOD (BIN)				29.60
02/22/09	92084100	PHUCPHUBIIC				27.0V 47 5A
02/22/09	92082565	CREATININE				32.60
02/22/09	92082310	CALCIUM, BLOOD, CHEMICAL				52 QA
02/22/09	92082947	GIUCOSE RIDON				49 20
02/22/09	92083735	MAGNESIUM				58.50
02/22/09	17010149	NON-MEDICATED GEROSOL/HOUR	νται	nΕ	00051	97 5N
02/22/09	17010280	ADIII T VENT SURSEQUENT DOV	· · ·	ω,	00007	707 15
02/22/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
02/22/09	17010365	NDI TX-VENT-SUBSEQUENT				27.45
02/22/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
02/22/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
02/22/09	17010395	MDI TX - SUBSEQUENT				23.25
02/22/09	23058135	BLOOD GASES WITH SATURATION				118.00
02/22/09	23058137	MAGNESIUM NON-MEDICATED AEROSOL/HOUR ADULT VENT SUBSEQUENT DAY MDI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX - SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHEMOGLOBIN DAILY SUPPLY CHARGE-H4				53.00
02/22/09	23058138	METHEMOGLOBIN				53.00
02/22/09	15310012	DAILY SUPPLY CHARGE-H4				248.27
		INTENSIVE CARE				1260.00
		COLLAR, ASPEN ADULT REGULAR				178.14
		FAMOTIDINE INJ. 20MG(PEPCID)				10.20
		METOPROLOL 25 MG TAB				1.10
		COMBIVENT INHALER-1 PUFF	(QTY	0F	0008)	14.64
		INSULIN HUMAN REG 10ML				110.10
		SOD CHLOR 0.9% INJ 100ML				30.00
		COMBIVENT INHALER-1 PUFF	(QTY	0F	0008)	14.64
		LEVOFLOXACIN INJ 250MG			0002)	134.50
		METOPROLOL 25 MG TAB				1.10

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SRV DATE	E REF NOR	DESCRIPTION			
02/20/09	3 12012345	FENTANYL INJ SOMOG/ML 5ML			11.35
02/20/09	12013759	MIDAZOLAM INJ 1MG/ML, 2 ML/1MG			11.35
02/20/09	3 12010133	CISATRACURIUM INJ 2MG/ML.10ML			70.10
02/20/09	12020235	SOD CHLOR 0.9% INJ 250ML (NSS)			30.00
02/20/09	3 12014074	ONDANSETRON ING 2MG/ML 1ML			10.00
02/23/09	12012330	FAMOTIDINE INJ. 20MG/PEPCID)			10 20
02/23/09	1 12014562	POT CI POMPER SAMED BAT	/07V 05	A A A A A A	1V.ZV
02/23/09	17010702	COMPTUENT THUSIED + DHEE	1911 UF 1014 OF	VVVZ)	1 = 7 0
02/23/03	17010702	POMBIVERY TRUNCER-1 FOFF	ረፅነሃ ሀር ረዕፒህ ውሮ	00087	14.64
02/23/09	10010702	METRODOLOL OF MC TAR	(WIY OF	0008)	14.54
V2/23/V3	12013772	FAROTINING THE DAMOGREDOUS			1.10
- VAZAGZVQZ - NOZOGZNO	. 1201E111	CON CHIODENE INT. OVAL AND			10,20
- V Z / Z 3 / V J - A O / O O / A O	. TTATTATE	OUT OF STATE TROY SOME MOV			10.20
02/23/03	70071010	ruepi, gingre eknnigr			100.05
02/23/09	70000009	X-KAY DUNE AT BEDSIDE			0.00
02/23/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF			57.05
02/23/09	92084132	POTASSIUM, SERUM			40.15
02/23/09	92082435	CHLORIDE			31.60
02/23/09	92082374	BIOCARBONATE/CO2			29.60
02/23/09	92084295	SODIUM - SERUM			29.60
02/23/09	92084520	UREA NITROGEN, BLOOD (BUN)		,	29.60
02/23/09	92084100	PHOSPHORUS			47.50
02/23/09	92082565	CREATININE			32 60
02/23/09	92082310	CALCIUM, BLOOD, CHEMICAL			50 OA
02/23/09	92082947	GLUCOSE BLOOD			ላር ውነ ማርቁው
02/23/09	92083735	MOGNESTUM			77.2V En En
02/23/09	21011107	THEPAPEUTTO EVEROTEE EA 15 MIN			00.0V
02/29/09	21011107	CHURCH COLLO CACROLOCTEM 13 MIM			/5.00
V2/20/00	10010050	MILLELLION CORE CHAI & DEVOCEOU			0.00
V2/20/02	12010100	MOINTITUM CHKE CAHE & KCH22F32		•	19.50
02/23/03	17010123	NAC .			10.00
02/23/09	17010129	nat and a second			10.00
02/23/09	17010129	MAL			10.00
02/23/09	17010149	NUN-MEDICATED AEROSOL/HOUR			19.50
02/23/09	1/010280	ADULT VENT SUBSEQUENT DAY			707.15
02/23/09	17010365	MDI TX-VENT-SUBSEQUENT	•		27.45
02/23/09	17010365	DESCRIPTION FENTANYL INJ SOMCG/ML 5ML MIDAZOLAM INJ 1MG/ML, 2 ML/1MG CISATRACURIUM INJ 2MG/ML, 10ML SOD CHLOR 0.9% INJ 250ML (NSS) ONDANSETRON INJ 2MG/ML, 1ML FAMOTIDINE INJ. 20MG(PEPCID) POT CL POWDER 20MEQ PKT COMBIVENT INHALER-1 PUFF COMBIVENT INHALER-1 PUFF METOPROLOL 25 MG TAB FAMOTIDINE INJ. 20MG(PEPCID) SOD CHLORIDE INJ, 30ML MDV CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM THERAPEUTIC EXERCISE-EA 15 MIN CHART REVIEW/ATTEMPT PT VISIT NUTRITION CARE EVAL & REASSESS HME HME HME HME HME HME HOON-MEDICATED AEROSOL/HOUR ADULT VENT SUBSEQUENT MOI TX-VENT-SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN			27.45
02/23/09	17010365	MDI TX-VENT-SUBSEQUENT			27.45
02/23/09	17010365	MDI TX-VENT-SUBSEQUENT			27 . 45
02/23/09	23058135	BLOOD GASES WITH SATURATION			118.00
02/23/09	23058137	CARBOXYHEMOGLOBIN			53.00
02/23/09	23058138	METHEMOGLOBIN			53.00
02/23/09	15310012	DAILY SUPPLY CHARGE-H4			248.27
02/24/09	01623100	INTENSIVE CARE			1260.00
		D5 0.5 NS + 20 KCL 1000CC			49.25
02/24/09	15300234	NORMAL SALINE 100CC			
02/24/09	15300240	NORMAL SALINE 500CC			30.00
02/24/09	17010702	COMBIVENT INHALER-1 PUFF	/0TU 0F	AAAA.	30.00
02/23/09	12012940	INSULIN HUMAN REG 10ML	(QTY OF	0008)	14.64
02/23/09	1202020	SOD CHLOR 0.9% INJ 100ML			110.10
	1 E V E V E U T	AAN GUCAN ANAW TMG TAAME			30.00

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	SRU NATE	DEE MAD	DESCRIPTION				
	02/24/09	. KEP ROK : 17010702	DESCRIPTION COMBINENT INDOLED A BUCC	intu (3 E /		
	02/24/09	12018669	COMBIVENT INHALER-1 PUFF LEVOFLOXACIN INJ 250MG	(WII (ar y nama	JVV87	14.54
	02/24/09	12012742	METOPROLOL 25 MG TAB	(4) (Jr (30023	134-30
	02/24/09	1201074	METOPROLOL 25 MG TAB POT CHLORIDE INJ 40MEQ SOD CHLOR 0.9% INJ 500ML (NSS) FAMOTIDINE INJ. 20MG(PEPCID) POT CL POWDER 20MEQ PKT COMBIVENT INHALER-1 PUFF				1.4.00
	02/24/09	12020240	TO CHECKIDE INC. 40MEG.				10-20
	02/24/09	12012330	FORATTATHE THE CAMBIDED TANK				30.00
	02/24/09	12014562	POT CI POMPER SOMEO PUT	(DTV C	ነሮ ያ	10001	10.20
	02/24/09	17010702	COMBIUENT THUSIES TO SHEE	ነውነና ር ረጥፕሁ ሰ	ነር ነ ነር ነ	/VVZ/	1.673
	02/24/09	12012940	TNSHI TN HUMON REG 10MI	/ th 1 3 /) i. (/VVD/	ተመቀየተ
	02/24/09	12020234	SOD CHIER O. 9% IND 100MI				110.10
	02/24/09	12013742	METOPROLOL 25 MG TAR				1 1 1 1 1
	02/24/09	12012331	COMBIVENT INHALER-1 PUFF INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100ML METOPROLOL 25 MG TAB FAMOTIDINE TAB 20 MG ACETAMINOPHEN 325 MG/10.15 ML LORAZEPAM INJ 2MG SYRINGE CHEST SINGLE EPONTOL				7 90
	02/24/09	12010406	ACETAMINOPHEN 325 MG/10.15 MI	COTY	ነድ ሪ	00021	7 V
	02/24/09	12013249	LORAZEPAM INJ 2MG SYRINGF	: u p 1 :		70027	11 25
	02/24/09	70071010	CHEST, SINGLE FRONTAL				100.05
	02/24/09	70000009	X-RAY DONE AT BEDSIDE				0.00
	02/24/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF				57.05
	02/24/09	92084132	ACETAMINOPHEN 325 MG/10.15 ML LORAZEPAM INJ 2MG SYRINGE CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM THERAPEUTIC EXERCISE-EA 15 MIN CHART REVIEW/ATTEMPT PT VISIT HME HME HME HME ADULT VENT SUBSEQUENT DAY IPV TREATMENT, INITIAL MOI TX-VENT-SUBSEQUENT MOI TX-VENT-SUBSEQUENT MOI TX-VENT-SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN				40.15
	02/24/09	92082435	CHLORIDE				31.60
	02/24/09	92082374	BIOCARBONATE/CO2				29.60
	02/24/09	92084295	SODIUM - SERUM				29.60
	02/24/09	92084520	UREA NITROGEN, BLOOD (BUN)				29.60
	02/24/09	92084100	PHOSPHORUS				47.50
	02/24/09	92082565	CREATININE				32.60
	02/24/09	92082310	CALCIUM, BLOOD, CHEMICAL				58.90
	02/24/09	92082947	GLUCOSE, BLOOD				49.20
	02/24/09	92083735	MAGNESIUM				58.50
	02/24/09	21011107	THERAPEUTIC EXERCISE-EA 15 MIN				75.00
	02/24/09	21019230	CHART REVIEW/ATTEMPT PT VISIT				0.00
	02/24/09	17010129	HME				10.00
	02/24/09	17010129	HME				10.00
1	02/24/09	17010129	HME				10.00
1	02/24/09	17010280	ADULT VENT SUBSEQUENT DAY				707.15
•	02/24/09	17010310	IPV TREATMENT, INITIAL				171.60
•	02/24/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
1	02/24/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
	02/24/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
4	02/24/09	23058135	BLOOD GASES WITH SATURATION				118.00
9	02/24/09	23058137	CARBOXYHEMOGLOBIN				53.00
1	02/24/03	23058138	MEIHEMUGLOBIN				53.00
- 5	JZ/Z4/09 No Joe Joe	15310012	DAILY SUPPLY CHARGE-H4				248.27
	02720/09 No 704700	01623100	INTENSIVE CARE				1260.00
	92724709 NO 20220	15131615	MODULE, CONTROL ALARIS				26.55
,	JZ/24/09 NO 2022/09	15131616	MODULE, PUMP ALARIS				23.75
٠ د)	10131616	MODULE, PUMP ALARIS				23.75
,	72724793 NO 705766	10131616	MODULE, PUMP ALARIS				23.75
7	747 ZO7 UB 30 70# 700	15010031	MOUTH WASH UAMS, 40Z		_		2.75
١	/E/ EU/ U7	12011018	APPLICATOR, COTTON TIP, 100PK	(QTY O	F O	002)	9.12

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PATIENT NAME: WEST, CHARLES

SRV DATE REF NBR)			
8 07/75/09 151610A	DESCRIPTION			
0 0 7 7 5 7 NO 1 5 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	OG CHEET CASE OF THE THE REPLACEMENT			69.00
0 02/25/00 1520000	8 PAD, ASPEN COLLAR REPLACEMENT 9 SWEET-EASE SOLUTION 8 NORMAL SALINE 50CC	(QTY OF	(2000	13.65
02/20/00 1000020	S BICAGO SHINE SOCC			30.00
00/05/00 1704A76	A RISHCOOAF SOBE TOWG			0.75
02/25/00 17010/U	A DOOMER THAT SOLM (SID DOSE) HH			2.13
3 02/25/05 1004004	V DUUNEB INAL SOLN (STD DOSE) HH			2.13
SRV DATE REF NBB 02/25/09 1516186 02/25/09 1519213 02/25/09 1530023 02/25/09 1201100 02/25/09 1701070 02/25/09 1701070 02/25/09 1201324 02/25/09 1201100 02/25/09 1701070	3 LURAZEPAM INJ 2MG SYRINGE			11.35
02/23/03 1201100	O RISACODAL SABB 10MC			0.75
	/ DUDNEB INAL SOLN (STD DOSE) HH			2.13
02/20/09 1201233	O BISACODYL SUPP 10MG DUONEB INAL SOLN (STD DOSE) HH DUONEB INAL SOLN (STD DOSE) HH LORAZEPAM INJ 2MG SYRINGE BISACODYL SUPP 10MG DUONEB INAL SOLN (STD DOSE) HH FAMOTIDINE TAB 20 MG GLYBURIDE TAB 2.5 MG METOPROLOL 25 MG TAB DUONEB INAL SOLN (STD DOSE) HH			7,90
02/25/03 1201260	3 GLYBURIDE TAB 2.5 Mg	(QTY OF	0002)	2.85
02/23/03 12013/4	Z METOPROLOL 25 MG TAB			1.10
02/25/09 1/010/0	DUONER INAL SOLN (STD DOSE) HH			2.13
02/25/09 1201511	1 SOD CHLORIDE INJ, 30ML MDV			10.20
02/22/09 1202006	O D5W INJ, 250ML			30 00
02/22/09 1201235:	3 FENTANYL INJ 50MCG/ML, 50ML			21 45
02/25/09 1701070	7 DUONEB INAL SOLN (STD DOSE) HH			2 12
02/25/09 1201233	I FAMOTIDINE TAB 20 MG			7 90
02/25/09 1201374;	2 METOPROLOL 25 MG TAB			1 10
02/25/09 70071010	1 FAMOTIDINE TAB 20 MG 3 GLYBURIDE TAB 2.5 MG 2 METOPROLOL 25 MG TAB 7 DUONEB INAL SOLN (STD DOSE) HH 1 SOD CHLORIDE INJ, 30ML MDV 0 D5W INJ, 250ML 3 FENTANYL INJ 50MCG/ML, 50ML 7 DUONEB INAL SOLN (STD DOSE) HH 1 FAMOTIDINE TAB 20 MG 2 METOPROLOL 25 MG TAB 1 CHEST, SINGLE FRONTAL 3 X-RAY DONE AT BEDSIDE 1 CBC, AUTOMATED W/AUTO WBC DIFF 2 POTASSIUM, SERUM 5 CHLORIDE 1 BIOCARBONATE/CO2 1 SODIUM - SERUM 1 UREA NITROGEN, BLOOD (BUN) 1 PHOSPHORUS 1 CREATININE 1 CALCIUM, 8LOOD, CHEMICAL 1 GLUCOSE, BLOOD 1 MAGNESIUM 1 THERAPEUTIC EXERCISE-EA 15 MIN 1 CHART REVIEW/ATTEMPT PT VISIT 1 TRAVEL FOR PATIENT CARE-EA 15M 1 NUTRITION CARE EVAL & REASSESS 1 FILTERS 1 HME 1 HME 1 ADULT VENT SUBSEQUENT DOV			100 05
02/25/09 7000000	3 X-RAY DONE AT BEDSIDE			ላላ ለ
02/25/09 91085024	I CBC, AUTOMATED W/AUTO WBC DIFF			57 AS
02/25/09 92084132	POTASSIUM, SERUM			40 1E
02/25/09 92082435	CHLORIDE			TV E E G
02/25/09 92082374	BIOCARBONATE/CO2			92 GA
02/25/09 92084295	SODIUM - SERUM			22.0V 20 20
02/25/09 92084520	UREA WITROGEN, BLOOD (BUN)			23.00 79 6A
02/25/09 92084100	PHOSPHORUS			47 5A
02/25/09 92082565	CREATININE			7/ EUV
02/25/09 92082310	CALCIUM, BLOOD, CHEMICAL			50 0A
02/25/09 92082947	GLUCOSE, BLOOD			40 DV
02/25/09 92083735	MAGNESIUM			7712V 50 50
02/25/09 21011107	THERAPEUTIC EXERCISE-EA 15 MIN			75 AA
02/25/09 21019230	CHART REVIEW/ATTEMPT PT VISIT			ላ ላላ
02/25/09 21019240	TRAVEL FOR PATIENT CARE-EA 15M			ላ የ
02/25/09 19010052	NUTRITION CARE EVAL & REASSESS			19 50
02/25/09 17010093	FILTERS			12 AC
02/25/09 17010129	HME			10.00
02/25/09 17010129	HME			10.00
				707.15
A \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	IPV TREATMENT, SHRSFOHENT			148.50
02/20/09 1/010315	IPV TREATMENT, SUBSECHENT			148.50
A5152103 11010312	IPV TREATMENT, SURSFOREAT			148.50
02/23/09 1/010315	IPV TREATMENT, SUBSECUENT			148.50
02/25/09 23058135	BLOOD GASES WITH SATURATION			118.00
ATV 501/03 53028131	CARBOXYHEMOGLOBIN			53.00
02/25/09 23058138	WETHEMOGLOBIN			53.00
04/40/09 15310012	DAILY SUPPLY CHARGE-H4	•		248.27
				ETURES

U N I V E R S I T Y H O S P I T A L UAMS MEDICAL CENTER PATIENT STATEMENT OF ACCOUNT - DETAIL

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SRV DATE REF NBR DESCRIPTION 1260.00 02/25/09 01523100 INTEMBLYC CARE 1260.00 02/25/09 15131615 MODULE, CONTROL ALARIS 26.55 02/25/09 15131616 MODULE, PUNP ALARIS 23.75 02/25/09 15131616 MODULE, PUNP ALARIS 23.75 02/25/09 15131616 MODULE, PUNP ALARIS 23.75 02/25/09 15031616 MODULE, PUNP ALARIS 23.75 02/25/09 15031616 MODULE, PUNP ALARIS 23.75 02/25/09 15031261 CONTROL REPORT	CRU NATE	PEE NRD	NESCRIPTION			
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, FNEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 18.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SUMP SUMP SUMP SUMP SUMP SUMP SUM	0.0 / 26 / 0.9	01623100	THIENGIUE CORE			1260.00
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/25/09	15131615	MODILIF. CONTROL ALARTS			26.55
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/25/09	15131616	MODULE, PUMP ALARTS			23.75
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/25/09	15131616	MODIL F. PHMP ALARTS			23.75
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/25/09	15131616	MODILE PUMP ALARTS			23.75
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/26/09	15021058	POUCH ACTIVE LIFE 1456 10/BX			56.16
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/26/09	15021147	BINDER MED/IG ARDOMINAL			41.94
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/26/09	15031215	CENTRAL LINE PATIENT DRAPE			53.60
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, FNEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 18.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SUMP SUMP SUMP SUMP SUMP SUMP SUM	02/26/09	15031561	COVER PROBE CUL SM T TIP/BOX			35.24
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, FNEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 18.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SUMP SUMP SUMP SUMP SUMP SUMP SUM	02/26/09	15031568	COLLAR - ASPEN ADULT SHORT			178.14
02/26/09 15041646 DRAPE, 1010 LARGE TOWEL 02/28/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (QTY OF 0002) 57.06 02/26/09 15041664 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15111288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 131.43 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15151505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 1519205 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (3 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL, STERILE (5 PK) 7.30 02/26/09 15202245 TOWEL SALEM SUMP ANTI-REFLUX 8.25 02/26/09 1520231 FAMOTIDINE TOWE SUMP ANTI-REFLUX 18.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 1520245 TOWEL SALEM SUMP SOURCE 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TOWE SUM TOWE SUM	02/26/09	15041471	DEVICE, PICC PLUS SECUREMENT	(QTY OF	0003)	64.50
02/26/09 15041666 DRAPE, 1010 LARGE TOMEL 02/26/09 15041666 DRESSING, 4X4 3/4 TEGADERM CHG (GTY OF 0002) 57.06 02/26/09 15071644 GAUZE, ELASTIO (KLING 2 IN) 2.60 02/26/09 15111604 KIT, PICC INSERTION (GTY OF 0002) 160.00 02/26/09 1511288 KIT, SFR SINGLE LUMEN PICC 115.50 02/26/09 15112289 KIT, SFR SINGLE LUMEN PICC 131.43 02/26/09 15151725 DINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15151725 DINTMENT, CALMOSEPTIME 2 0Z (QTY OF 0002) 49.80 02/26/09 15191950 POWDER, STOMAHESIVE 15.80 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0004) 18.00 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15222479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 153030337 05 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 NG (QTY OF 0002) 4.85 02/26/09 12012331 FAMOTIDINE TAB 20 NG (QTY OF 0002) 4.85 02/26/09 12012311 FAMOTIDINE TAB 20 NG (QTY OF 0002) 4.85 02/26/09 12012311 SOD CHLORIDE INJ, SOML MOV (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.000	02/26/09	15041558	DEVICE, FEEDING TUBE ATTACH			12.65
02/26/09 15041666 DRESSÍNG, 4X4 3/4 TEGADERM CHG (GTY OF 0002) 57.06 02/26/09 15071644 GAUZE, ELASTIC (KLING 2 IN) 2.60 02/26/09 15111208 KIT, FR SINGLE LUMEN PICC 115.50 02/26/09 15112288 KIT, 5FR SINGLE LUMEN PICC 115.50 02/26/09 15112289 KIT, 5FR DUAL LUMEN PICC 131.43 02/26/09 151512289 KIT, 5FR DUAL LUMEN PICC 131.43 02/26/09 15151250 OINTMENT, CALMOSEPTINE 2 0Z (QTY OF 0002) 49.80 02/26/09 15161925 PONDER, STOMAHESIVE 15.80 02/26/09 15191505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191505 SLIPPER, ADULT BARIATRIC 5.82 02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15222479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15232694 WIPES, SKIN PREP 37.53 02/26/09 15300337 DS 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15002231 FAMOTIDINE TOMB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012604 GLYBURIDE TOMB S MG 02/26/09 12012331 FAMOTIDINE TOMB S MG 02/26/09 12012474 METOPROLOL 25 MG TOMB 02/26/09 12012311 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012315 FAMOTIDINE TOMB SOLN (STD DOSE) HH 2.13 02/26/09 12012315 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012315 FAMOTIDINE TOMB SOLN (STD DOSE) HH 2.13 02/26/09 12012315 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012315 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012315 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012315 FAMOTIDINE TOMB SOLN (STD DOSE) HH 2.13 02/26/09 12012312 EATOPROLOL 25 MG TOMB SOLN MOV (QTY OF 0003) 10.20 02/26/09 12012315 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012317 EATOPROLOL 25 MG TOMB SOLN MOV (QTY OF 0003) 10.20 02/26/09 12	02/26/09	15041646	DRAPE. 1010 LARGE TOWEL			6.00
02/26/09 1510464 GRUZE, ELASTIC (KLING 2 IN) 02/26/09 15111288 KIT, FICC INSERTION 02/26/09 15112289 KIT, FR SINGLE LUMEN PICC 02/26/09 15112289 KIT, FR DUAL LUMEN PICC 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 OZ (QTY OF 0002) 02/26/09 15161925 POMDER, STOMAHESIVE 02/26/09 15191970 SET, ENEMA 02/26/09 15191970 SET, ENEMA 02/26/09 15192005 SET, VACUTAINER COLL 23 GA 02/26/09 15192005 SET, VACUTAINER COLL 23 GA 02/26/09 151921970 SPG, ALL GAUZE ST 4X4 10/PKG 02/26/09 15192151 SMARTISITE NEEDLESS L/L VALVE (QTY OF 0004) 18.00 02/26/09 1520245 TOWEL, STERILE (4 PK) 02/26/09 1520245 TOWEL, STERILE (4 PK) 02/26/09 15232694 WIPES, SKIN PREP 02/26/09 153039822 LIDOCAINE 10MG INJ 02/26/09 15010317 D5 0.5 NS + 20 KCL 1000CC 02/26/09 15010317 D5 0.5 NS + 20 KCL 1000CC 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 02/26/09 1201231 FAMOTIDINE TAB 20 MG 02/26/09 1201231 FAMOTIDINE TAB 5 MG 02/26/09 1201249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 02/26/09 1201249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 02/26/09 7007000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15041666	DRESSING. 4X4 3/4 TEGADERM CHG	(QTY OF	0002)	57.06
02/26/09 15111208 KIT, PICC INSERTION (QTY OF 0002) 160.00 02/26/09 15112288 KIT, SFR SINGLE LUMEN PICC 131.43 02/26/09 15112289 KIT, SFR DUAL LUMEN PICC 131.43 02/26/09 15151725 GINTMENT, CALMOSEPTINE 2 OZ (QTY OF 0002) 49.80 02/26/09 15161925 POMDER, STOMAHESIVE 15.80 02/26/09 15191505 SLIPPER, ADULT BARIATRIC 5.82 02/26/09 15192075 SET, ENEMA 5.82 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15222479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUONER INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONER INAL SOLN (STD DOSE) HH 2.13 02/26/09 1201331 FAMOTIDINE TAB 20 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013741 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15071644	GAUZE, ELASTIC (KLING 2 IN)			2.60
02/26/09 15112289 XIT, 5FR DUAL LUMEN PICC (QTY OF 0002) 49.80 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 OZ (QTY OF 0002) 49.80 02/26/09 15161925 POWDER, STOMAHESIVE 15.80 02/26/09 15191505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPE, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPE, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMGARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 152022479 VALVE, SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15300137 05 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 05 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012349 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 1201331 FAMOTIDINE TAB 20 MG 12.13 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 70071010 CHEST, SINGLE FRONTAL 0.00 02/26/09 70071	02/26/09	15111604	KIT, PICC INSERTION	(QTY OF	0002)	160.00
02/26/09 15112289 XIT, 5FR DUAL LUMEN PICC (QTY OF 0002) 49.80 02/26/09 15151725 OINTMENT, CALMOSEPTINE 2 OZ (QTY OF 0002) 49.80 02/26/09 15161925 POWDER, STOMAHESIVE 15.80 02/26/09 15191505 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191970 SET, ENEMA 5.82 02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPE, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPE, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMGARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 152022479 VALVE, SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15300137 05 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 05 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012349 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 1201331 FAMOTIDINE TAB 20 MG 12.13 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 70071010 CHEST, SINGLE FRONTAL 0.00 02/26/09 70071	02/26/09	15112288	KIT, 5FR SINGLE LUMEN PICC			115.50
02/26/09 15191255 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191270 SET, ENEMA 5.82 02/26/09 15192075 SF, ENEMA 5.82 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 152022479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 152022479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012342 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.30 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15112289	KIT, 5FR DUAL LUMEN PICC			
02/26/09 15191255 SLIPPER, ADULT BARIATRIC 4.05 02/26/09 15191270 SET, ENEMA 5.82 02/26/09 15192075 SF, ENEMA 5.82 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 152022479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 152022479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012342 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.30 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15151725	OINTHENT, CALMOSEPTINE 2 OZ	(QTY OF	0002)	49.80
02/26/09 15191970 SET, ENEMA 02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192075 SPG, ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202247 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 530039822 LIDOCAINE 10MG INJ (QTY OF 0002) 20.40 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013741 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.30 02/26/09 70071010 CHEST, SINGLE FRONTAL 1.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.000	02/26/09	15161925	POWDER, STOMAHESIVE			15.80
02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG,ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202247 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15202694 WIPES, SKIN PREP 37.53 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012331 FAMOTIDINE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 1.35 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 1.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.30 MC MOV (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.000	02/26/09	15191505	SLIPPER, ADULT BARIATRIC			4.05
02/26/09 15192005 SET, VACUTAINER COLL 23 GA (QTY OF 0004) 18.00 02/26/09 15192075 SPG,ALL GAUZE ST 4X4 10/PKG 2.67 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202247 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15232694 WIPES, SKIN PREP 37.53 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 7007010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.000	02/26/09	15191970	SET, ENEMA			
02/26/09 15192075 SPG,ALL GAUZE ST 4X4 10/PKG 02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.90 02/26/09 15202247 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15232694 WIPES, SKIN PREP 37.53 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012342 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 11.35 02/26/09 12013742 METOPROLOL 25 MG TAB 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 11.00 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70070000 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15192005	SET. VACUTAINER COLL 23 GA	(QTY OF	0004)	18.00
02/26/09 15192151 SMARTSITE NEEDLESS L/L VALVE (QTY OF 0003) 18.00 02/26/09 15202245 TOWEL, STERILE (4 PK) 7.30 02/26/09 152022479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15232694 WIPES, SKIN PREP 37.53 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 530039822 LIDOCAINE 10MG INJ (QTY OF 0002) 20.40 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12013742 METOPROLOL 25 MG TAB 2.13 02/26/09 12013742 METOPROLOL 25 MG TAB 1.35 02/26/09 12013749 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70070101 CHEST, SINGLE FRONTAL 100.05 02/26/09 70070101 CHEST, SINGLE FRONTAL 100.05	02/26/09	15192075	SPG.ALL GAUZE ST 4X4 10/PKG			2.67
02/26/09 15202245 TOWEL, STERILE (4 PK) 02/26/09 15202479 VALVE: SALEM SUMP ANTI-REFLUX 18.25 02/26/09 15232694 WIPES, SKIN PREP 37.53 02/26/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 02/26/09 530339822 LIDDCAINE 10MG INJ (QTY OF 0002) 20.40 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 02/26/09 12012331 FAMOTIDINE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 02/26/09 1201331 FAMOTIDINE TAB 20 MG 02/26/09 1201331 FAMOTIDINE TAB 20 MG 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 1201331 FAMOTIDINE TAB 20 MG 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70070000 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15192151	SMARTSITE NEEDLESS L/L VALVE	(QTY OF	0003)	18.00
02/26/09 15222479 VALVE: SALEM SUMP ANTI-REFLUX 02/26/09 15232694 WIPES, SKIN PREP 37.53 02/26/09 15300137 D5 0.5 MS + 20 KCL 1000CC 49.25 02/26/09 53039822 LIDOCAINE 10MG INJ 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 02/26/09 12012331 FAMOTIDINE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 02/26/09 12013742 METOPROLOL 25 MG TAB 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 02/26/09 12013742 METOPROLOL 25 MG TAB 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 CHEST, SINGLE FRONTAL 100.05	an incian	100000000	TOURS STERTS (A DUX			7.30
02/26/09 53039822 LIDOCAINE 10MG INJ (QTY OF 0002) 20.40 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012604 GLYBURIDE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15222479	VALVE: SALEM SUMP ANTI-REFLUX			18.25
02/26/09 53039822 LIDOCAINE 10MG INJ (QTY OF 0002) 20.40 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012604 GLYBURIDE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15232694	WIPES, SKIN PREP			37.53
02/26/09 53039822 LIDOCAINE 10MG INJ (QTY 0F 0002) 20.40 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 M6 7.90 02/26/09 12012604 GLYBURIDE TAB 5 MG (QTY 0F 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY 0F 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 700700009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	15300137	D5 0.5 NS + 20 KCL 1000CC			49.25
02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012604 GLYBURIDE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 1201331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 700700009 X-RAY DONE AT BEDSIDE 0.00				(QTY OF	0002)	20.40
02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12012604 GLYBURIDE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, SOML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 700700009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	17010707	DUONEB INAL SOLN (STD DOSE) HH			2.13
02/26/09 12012604 GLYBURIDE TAB 5 MG (QTY OF 0002) 4.85 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, SOML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 700700009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	17010707	DUONEB INAL SOLN (STD DOSE) HH			2.13
02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 700700009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12012331	FAMOTIDINE TAB 20 MG			7.90
02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 17010707 DUONEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7007000 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12012604	GLYBURIDE TAB 5 MG	(QTY OF	0002)	4.85
02/26/09 12013249 LORAZEPAM INJ 2MG SYRINGE 11.35 02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, SOML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12013742	METOPROLOL 25 MG TAB			1.10
02/26/09 17010707 DUDNEB INAL SOLN (STD DOSE) HH 2.13 02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 7000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	17010707	DUONER INAL SOLN (STD DOSE) HH			2:13
02/26/09 12015111 SOD CHLORIDE INJ, 30ML MOV (QTY OF 0003) 10.20 02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12013249	LORAZEPAM INJ 2MG SYRINGE			11.35
02/26/09 12012331 FAMOTIDINE TAB 20 MG 7.90 02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	17010707	DUDNEB INAL SOLN (STD DOSE) HH			2.13
02/26/09 12013742 METOPROLOL 25 MG TAB 1.10 02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12015111	SOD CHLORIDE INJ, 30ML MOV	(QTY OF	0003)	10.20
02/26/09 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12012331	FAMOTIDINE TAB 20 MG			7.90
02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00 02/26/09 70000009 X-RAY DONE AT BEDSIDE 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	12013742	METOPROLOL 25 MG TAB			1.10
02/26/03 70071010 CHEST, SINGLE FRONTAL 100.05 02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00	02/26/09	70071010	CHEST, SINGLE FRONTAL			100.05
02/26/09 70000009 X-RAY DONE AT BEDSIDE 0.00						0 . 0 0
02/26/09 91085024 CBC. QHTGMATED W/QHTG WRC DIFF 57.05						
						57.05
02/26/09 92084100 PHOSPHORUS 47.50						
02/26/09 92084295 SODIUM - SERUM 29.60	02/26/09	92084295	SODIUM - SERUM			29.60

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SRU DOTE	BEE MBB	DESCRIPTION POTASSIUM, SERUM MAGNESIUM CHLORIDE GLUCOSE, BLOOD BIOCARBONATE/CO2 UREA NITROGEN, BLOOD (BUN) CREATININE CALCIUM, BLOOD, CHEMICAL THERAPEUTIC EXERCISE-EA 15 MIN CHART REVIEW/ATTEMPT PT VISIT HME				
0.0 7 26 709	92084132	POTAGETHM GERHM				40.15
02/26/09	92083735	MOGNESTIM				58.50
02/26/09	92082435	CHIORIDE				31.60
02/26/09	92092947	GLUCASE BLOOD				49.20
02/20/02	92082377	RINCAPROMATE/COS				29 60
02/26/09	92084520	UPFO NITROGEN BLOOD (RUN)				29.60
02/26/09	92082565	CREATININE				32.60
02/26/09	92082310	CALCTUM_ BLOOD_ CHENTCAL				58.90
02/26/09	21011107	THERAPEHTIC EXERCISE-FA 15 MIN				75.00
02/26/09	21019230	CHART REUTEW/ATTEMPT PT VISIT				0.00
02/26/09	17010129	HME				10.00
02/26/09	17010149	NON-MEDICATED AEROSOL/HOUR	(QTY	0F	0005)	97.50
02/26/09	17010149	NON-MEDICATED AEROSOL/HOUR	(QTY	OF	0004)	78.00
		NON-MEDICATED AEROSOL/HOUR				
02/26/09	17010280	ADULT VENT SUBSEQUENT DAY				707.15
02/26/09	17010315	IPU TREATMENT, SUBSEQUENT				148.50
02/26/09	17010315	IPV TREATMENT, SUBSEQUENT				148.50
02/26/09	17010315	IPV TREATMENT, SUBSEQUENT				148.50
02/26/09	17010315	IPV TREATMENT, SUBSEQUENT				148.50
02/26/09	23058135	BLOOD GASES WITH SATURATION				118.00
02/26/09	23058137	CARBOXYHEMOGLOBIN				53.00
02/26/09	23058138	METHENOGLOBIN				53.00
02/26/09	15310012	DATLY SUPPLY CHARGE-H4				248.27
02/11/09	65140040	NON-MEDICATED AEROSOL/HOUR ADULT VENT SUBSEQUENT DAY IPV TREATMENT, SUBSEQUENT IPV TREATMENT, SUBSEQUENT IPV TREATMENT, SUBSEQUENT IPV TREATMENT, SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHEMOGLOBIN DAILY SUPPLY CHARGE-H4 PICC LINE W/O PORT US GUIDED VASCULAR ACCESS INTENSIVE CARE MODULE, CONTROL ALARIS MODULE, PUMP ALARIS MODULE, PUMP ALARIS MODULE, PUMP ALARIS MODULE, PUMP ALARIS LORAZEPAM INJ 2MG SYRINGE DUONEB INAL SOLN (STD DOSE) HH FAMOTIOINE TAB 20 MG				247.50
02/11/09	65142020	US GUIDED VASCULAR ACCESS				231.00
02/27/09	01623100	INTENSIVE CARE				1260.00
02/26/09	15131615	MODULE, CONTROL ALARTS				26.55
02/26/09	15131616	MODILIF. PHMP ALARTS				23.75
02/26/09	15131616	MODULE, PHMP GLARIS				23.75
02/26/09	15131616	MODULE, PUMP ALARTS				23.75
02/26/09	12013249	LORAZEPAM INJ 2MG SYRINGE				11.35
02/27/09	17010707	DUONEB INAL SOLN (STD DOSE) HH				2.13
02/27/09	12012331	FAMOTIDINE TAB 20 MG				7.90
02/27/09	12012604	FAMOTIDINE TAB 20 MG GLYBURIDE TAB 5 MG METOPROLOL 25 MG TAB DUONEB INAL SOLN (STD DOSE) HH	(QTY	OF	0002)	4.85
02/27/09	12013742	METOPROLOL 25 MG TAB	-			1.10
02/27/09	17010707	DUONEB INAL SOLN (STD DOSE) HH				2.13
02/27/09	12010450	ACETAZOLANIDE INJ 500MG				131.40
		DSW INJ, 250ML				30.00
02/25/09	12012353	FENTANYL INJ 50MCG/ML, 50ML				21,45
02/27/09	17010707	DUONEB INAL SOLN (STD DOSE) HH				2.13
		DUONEB INAL SOLN (STD DOSE) HH				2.13
		ACETAZOLAMIDE INJ 500MG				131.40
		DUONEB INAL SOLN (STD DOSE) HH				2.13
		CHEST, SINGLE FRONTAL				100.05
		X-RAY DONE AT BEDSIDE				0.00
		CBC, AUTOMATED W/AUTO WBC DIFF				57.05
02/27/09	92084132	POTASSIUM, SERUM				40.15

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PATIENT NAME: WEST, CHARLES

SRV DATE	REF NBR	CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM THERAPEUTIC EXERCISE-EA 15 MIN CHART REVIEW/ATTEMPT PT VISIT NUTRITION CARE EVAL & REASSESS HME HME HME ADULT VENT SUBSEQUENT DAY IPV TREATMENT, SUBSEQUENT IPV TREA		
02/27/09	92082435	DESCRIPTION CHLORIDE		31.60
02/27/09	92082374	BIOCARBONATE/CO2		29.60
02/27/09	92084295	SODIUM - SERUM		29.60
02/27/09	92084520	UREA NITROGEN. BLOOD (BUN)		29.60
02/27/09	92084100	PHOSPHORUS		47.50
02/27/09	92082565	CREATININE		32.60
02/27/09	92082310	CALCIUM, BLOOD, CHEMICAL		58.90
02/27/09	92082947	GLUCOSE, BLOOD	•	49.20
02/27/09	92083735	MAGNESIÚM		58.50
02/27/09	21011107	THERAPEUTIC EXERCISE-EA 15 MIN		75.00
02/27/09	21019230	CHART REVIEW/ATTEMPT PT VISIT		0.00
02/27/09	19010052	NUTRITION CARE EVAL & REASSESS		19.50
02/27/09	17010129	HME		10.00
02/27/09	17010129	HME		10.00
02/27/09	17010280	ADULT VENT SUBSEQUENT DAY		707.15
02/27/09	17010315	IPV TREATMENT, SUBSEQUENT		148.50
02/27/09	17010315	IPV TREATMENT, SUBSEQUENT		148.50
02/27/09	17010315	IPV TREATMENT, SUBSEQUENT		148.50
02/27/09	17010315	IPV TREATMENT, SUBSEQUENT		148.50
02/27/09	17010315	IPV TREATMENT, SUBSEQUENT		148.50
02/27/09	23058135	BLOOD GASES WITH SATURATION		118.00
02/27/09	23058137	CARBOXYHEMOGLOBIN		53.00
02/27/09	23058138	METHEMOGLOBIN		53.00
02/27/09	15310012	DAILY SUPPLY CHARGE-H4		248.27
02/28/09	01623100	INTENSIVE CARE		1260.00
02/28/09	17010707	DUONEB INAL SOLN (STD DOSE) HH		2.13
02/27/09	12010450	ACETAZOLAMIDE INJ 500MG		131.40
02/27/09	12012331	FAMOTIDINE TAB 20 MG		7.90
02/27/09	12013742	METOPROLOL 25 MG TAB		1.10
02/27/09	12013249	LORAZEPAM INJ 2MG SYRINGE		11.35
02/27/09	12013249	LORAZEPAM INJ 2MG SYRINGE		11.35
02/28/09	17010707	DUONEB INAL SOLN (STO DOSE) HH		2.13
02/28/09	12012940	INSULIN HUMAN REG 10ML		110.10
02/28/09	12020234	SOD CHLOR 0.9% INJ 100ML		30.00
02/28/09	12011095	CALCIUM EL INJ 100MG/ML 10ML		10.20
02/28/09	12020048	DOW INJ, SOME		30.00
V2/28/V3	12012331	THMUILDINE TABLE NO.	****	7.90
04/46/03	12012604	PETUBOR OF SE AS IND	1Y UF 0002)	4.85
02/28/09	12013/42	METOPROLOL 25 MG TAB		1 - 1.0
02/20/00	12010430	ACETAZOLAMIDE INJ 500MG		131.40
VZ/ZQ/VZ AA/AA/AA/	1/010/0/	DUONEB INAL SOLN (STD DOSE) HH		2.13
02/20/03 02/30/00	12010111	SOD CHLORIDE INJ, 30ML MDV	•	10.20
VE/ EQ/ V3	17010707	ACETAZOLAMIDE INJ 500MG DUONEB INAL SOLN (STD DOSE) HH		131.40
02/28/09	12012231	FAMOTIDINE TAB 20 MG		. 2,13
		METOPROLOL 25 MG TAB		7.90
		CHEST, SINGLE FRONTAL		1.10
		X-RAY DONE AT BEDSIDE		100.05
The mile V	**************************************	A REF CORE EL DEDOLDE		0.00

UNIVERSITY HOSPITAL PATIENT STATEMENT OF ACCOUNT - DETAIL

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501 BATE	DEE MDD	እም <u>ው</u> ው ም ተ ው ም ተ ነ	n M		
SRV DATE	KEF MUK	DESCRIPTION CBC, AUTOMATED W/AUTO WBC DISPOTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM HME HME HME NON-MEDICATED AEROSOL/HOUR	- '- '1 IA		ET AE
02/28/09	91080024	CRC, AUTOMBIED W/HUTU WRC DI	rF		3/.V3
02/28/09	92084132	ruihasium, sekum			40.15
02/28/09	92082435	CHLURIDE			31.50
02/28/09	92082374	RIOCAKROMA LENCOS			29.60
02/28/09	92084295	SUDIOM - SEKUM			29.60
02/28/09	92084520	NEED WILKOREN PEROOD (ROW)			Z7.5V
02/28/09	92084100	CREATIVINE			47.20
02/28/09	92082365	CALCIUM DICOR CHENTEAL			32,6V
02/28/03	35005010	CHECION, BECODY CHEMICHE			70 2V
02/20/03	22VQ2247 00A00705	MACHECTHM			TO EA
02/20/03	72000700	HACKESION			10.00
02/20/02	17010122	uxe			10 400
0 4 / 2 0 / 0 2 0 4 / 2 0 / 0 2	17010123	NON-MEDICATED AEROSOL/HOUR	/OTV 0	E ለስለልነ	10.00 78 ለለ
72/20/V2 77/70/A0	17010177	NON-MEDICATED AEROSOL/HOUR	/ OTV 0	ድ ስስለፈነ	70 00
02/20/V3 09/90/00	17010172	NON-MEDICATED AEROSOL/HOUR	\φιι υ /ατν η	ሆ የአለልነ ድ ህህህግን	70 # VV 78 ብለ
35 (55 (35	4 2 2 4 2 4 4 5	termine to proper or many many and a summary and an arrangement	ASTU B		en en
02/20/03	17010315	TPU TREATMENT SURSEQUENT	(φ) (ω	1 00007	148.50
02/20/03	17010315	TPU TREATMENT SURGEOUENT			148.50
02/28/09	17010315	TPU TREATMENT, GURSEQUENT			148.50
02/28/09	17010315	TPU TREATMENT, SUBSECUENT			148.50
02/28/09	23058135	BLOOD GASES WITH SATURATION			118.00
02/28/09	23058137	CARROXVHENORIORIN			53.00
02/28/09	23058138	METHEMAGIARIN			53.00
02/28/09	15310012	IPV TREATMENT, SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHENOGLOBIN DAILY SUPPLY CHARGE-H4 INTENSIVE CARE DUONEB INAL SOLN (STD DOSE) H INSULIN HUMAN REG IOML SOD CHLOR 0.9% INJ 100ML ACETAZOLAMIDE INJ 500MG			248-27
03/01/09	01623100	INTENSIVE CORE			1260-00
03/01/09	17010707	DHONER INGL SOLN (SID DOSE) I	1 H		2.13
02/28/09	12012940	TNSHI TW HIMAN REG TOM	.,,		110.10
02/28/09	12020234	SOD CHIOR 0.9% INJ 100MI			30.00
03/01/09	12010450	ACETAZOLAMIDE INJ 500MG			131.40
03/01/09	12015111	ACETAZOLAMIDE INJ 500MG SOD CHLORIDE INJ, 30ML MDV	(017 0	F 0002)	10.20
03/01/09	12010450	ACETAZOLANIDE INJ 500MG			131.40
		DSW INJ, 250ML			30.00
		FENTANYL INJ SOMCG/ML, SOML			21.45
		DUONEB INAL SOLN (STD DOSE) H	1 H		131.40 30.00 21.45 2.13 1.10 4.85
		METOPROLOL 25 MG TAB GLYBURIDE TAB 5 MG	÷		1.10
		GLYBURIDE TAB 5 MG	(QTY D	F 0002)	4.85
03/01/09	12012331	FAMOTIDINE TAB 20 MG			7.90
03/01/09	12010806	ATROPINE INJ 1MG/10ML SYR			11.40
03/01/09	17010707	DUONEB INAL SOLN (STD DOSE) H	lH .		2.13
		ACETAMINOPHEN 325 MG/10.15 ML	. (QTY D	F 0002)	5.55
		INSULIN HUMAN REG 10ML			110.10
		SOD CHLOR 0.9% INJ 100ML			30.00
		COMBIVENT INHALER-1 PUFF		F 0008)	
		COMBIVERT INHALER-1 PUFF	(QTY D	F 0008)	14.64
		FAMOTIDINE TAB 20 MG			7.90
		METOPROLOL 25 MG TAB			1.10
03/01/09	12014074	ONDANSETRON INJ 2MG/ML, 1ML			10.20

U N I V E R S I T Y H O S P I T A L UAMS MEDICAL CENTER

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PATIENT NAME: WEST, CHARLES

CRU NATE	REF NBR	DESCRIPTION				
			COTV	OΕ	ስስስፍነ	14.64
03/01/03	12010806	ATROPINE INJ 1MG/10ML SYR	4 CP 1 1	W.I	00007	11.40
03/01/09	70071010	CHEST, SINGLE FRONTOL				100 05
03/01/09	70000009	X-RAY DONE AT REDSIDE				0.00
03/01/09	70074022	ACHTE ARD SERTES W/PA CHEST				234.00
03/01/09	70071022	X-PAY NAME AT REPORTE				ላለ ለ
03/01/09	70071010	CHEST SINGLE EBONTOL				1ስለ ለ5
03/01/05	70072020	Y-PAY NOME AT RENGINE				ስ ስስ
03/01/03	70000000	CHEST SINGLE SPONTOL				100 05
03/01/09	700/2020	Y-PAY NAME AT REASTAF				0.00
03/01/09	70071010	CHEST SINGLE FRONTAL				100.05
03/01/09	70000009	X-RAY DONE AT REDSTDE				0.00
03/01/09	91085024	CRC. AUTOMATED W/AUTO WRC DIFF				57.05
03/01/09	92084132	POTASSIUM SERUM				40-15
03/01/09	92082435	CHLORIDE				31.60
03/01/09	92082374	BIOCARBONATE/CO2				29.60
03/01/09	92084295	SODIUM - SERUM				29.60
03/01/09	92084520	UREA NITROGEN. BLOOD (BUN)				29.60
03/01/09	92084100	PHOSPHORUS '				47.50
03/01/09	92082565	CREATININE				32.60
03/01/09	92082310	CALCIUM, BLOOD, CHEMICAL				58.90
03/01/09	92082947	GLUCOSE, BLOOD				49.20
03/01/09	92083735	MAGNESIUM				58.50
03/01/09	03020002	COMBIVENT INHALER-1 PUFF ATROPINE INJ 1MG/10ML SYR CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE ACUTE ABD SERIES W/PA CHEST X-RAY DONE AT BEDSIDE CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM ELECTROCARDIOGRAM HME HME HME HME				86.45
03/01/09	17010129	HME				10.00
03/01/09	17010129	HME				10.00
03/01/09	17010129	HME				10.00
03/01/09	17010149	NON-MEDICATED AEROSOL/HOUR	(QTY	OF	0004)	78.00
A D / A 4 / A D	17010110	NOV REPROSED SENSON MOVE	2 m 7 11	~~	00001	~~ ~~
03/01/09	17010280	ADULT VENT SUBSEQUENT DAY				707.15
03/01/09	17010315	ADULT VENT SUBSEQUENT DAY IPV TREATMENT, SUBSEQUENT IPV TREATMENT, SUBSEQUENT IPV TREATMENT, SUBSEQUENT MDI TX-VENT-INITIAL MDI TX-VENT-INITIAL MDI TX-VENT-SUBSEQUENT BLOOD GASES WITH SATURATION CARBOXYHEMOGLOBIN METHEMOGLOBIN				148.50
03/01/09	17010315	IPV TREATMENT, SUBSEQUENT				148.50
03/01/09	17010315	IPV TREATMENT, SUBSEQUENT				148.50
03/01/09	17010360	MDI TX-VENT-INITIAL				31.70
03/01/09	17010360	MDI TX-VENT-INITIAL				31.70
03/01/09	17010365	MDI TX-VENT-SUBSEQUENT				27.45
03/01/09	23058135	BLOOD GASES WITH SATURATION				113.00
03/01/09	23058137	CARBOXYHEMOGLOBIN				53.00
03/01/09	23058138	METHEMOGLOBIN				53.00
		BLOOD GASES WITH SATURATION				118.00
		CARBOXYHEMOGLOBIN				53.00
		METHEMOGLOBIN				53.00
		BLOOD GASES WITH SATURATION				118.00
		CARBOXYHEMOGLOBIN				53.00
		METHEMOGLOBIN				53.00
		BLOOD GASES WITH SATURATION				118.00
		CARBOXYHEMOGLOBIN				53.00
03/01/09	23058138	METHEMOGLOBIN				53.00

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

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ACCOUNT NBR: 015196807-9042 PATIENT NAME: WEST, CHARLES SRV DATE REF NBR DESCRIPTION 03/01/09 15310012 DAILY SUPPLY CHARGE-H4 248.27 03/02/09 01623100 INTENSIVE CARE 1260.00 02/27/09 15300233 NORMAL SALINE 50CC 30.00 02/27/09 15300240 NORMAL SALINE 500CC 30.00 02/28/09 15041471 DEVICE, PICC PLUS SECUREMENT (QTY OF 0002) 43.00 02/28/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 CARRANGE STON 03/01/09 15031568 COLLAR, ASPEN ADULT SHORT 178.14 03/01/09 15300137 D5 0.5 NS + 20 KCL 1000CC 49.25 03/01/09 15300270 NACL 250CC IRRIG 33,75 03/02/09 15031263 CANNULA, NASAL LARIET TYPE 2.60 03/02/09 15031313 CATH, IV 22X1 WINGED INTROCAN 7.90 03/02/09 15031313 CATH, IV 22X1 WINGED INTROCAN 7.90 03/02/09 15111985 KIT, IV START 5.70 03/02/09 15151855 OXISENSOR, FINGER ADULT DISP 75.36 03/02/09 15202660 TUBE, YANKAYER/TONSIL SUCTION 2.65 03/02/09 15300135 D5 0.5 SOD CHLOR 1000CC 34.50 03/02/09 15300135 D5 0.5 SOD CHLOR 1000CC 34.50 03/02/09 15300245 NORMAL SALINE 1000CC 30.00 03/02/09 15300245 NORMAL SALINE 1000CC 30.00 03/02/09 15300335 SET, VENTED/UNVENTED W/2 SMARTS 13.20 03/02/09 17010702 COMBIVENT INHALER-1 PUFF 03/02/09 17010702 COMBIVENT INHALER-1 PUFF 03/02/09 12012331 FAMOTIDINE TAB 20 MG (9TY OF 0008) 14.64 (QTY OF 0008) 14.64 7.90 03/02/09 12012604 GLYBURIDE TAB 5 MG (QTY OF 0002) 4.85 03/02/09 12013742 METOPROLOL 25 MG TAB 1.10 03/02/09 12013/42 METUPROLUL 25 MG TAB 03/02/09 17010702 COMBIVENT INHALER-1 PUFF (QTY OF 0008) 03/02/09 12012005 DOCUSATE LIQ 100MG, 30 ML UD.4 03/02/09 17010702 COMBIVENT INHALER-1 PUFF (QTY OF 0008) 03/02/09 12015111 SOD CHLORIDE INJ, 30ML MDV (QTY OF 0003) 14.64 6.85 14.64 10.20 03/02/09 12020060 D5W INJ, 250ML 03/02/09 12012315 FENTANYL INJ 50 MCG/ML,20 ML (QTY DF 0020) 03/02/09 17010702 COMBIVENT INHALER-1 PUFF (QTY OF 0008) 30.00 11.35 14.64 03/02/03 70071010 CHEST, SINGLE FRONTAL 100.05 03/02/09 70000009 X-RAY DONE AT BEDSIDE 0.00 03/02/09 72070450 CT-BRAIN W/O CONTRAST 789.05 03/01/09 94084484 TROPONIN I 42.00 03/02/09 91085024 CBC, AUTOMATED W/AUTO WBC DIFF 57.05 40.15 03/02/09 92084132 POTASSIUM, SERUM 03/02/09 92082435 CHLORIDE 31.60 03/02/09 92082374 BIOCARBONATE/CO2 29.60 03/02/09 92084295 SODIUM - SERUM 29.60 03/02/09 92084520 UREA NITROGEN, BLOOD (BUN) 29.60 03/02/09 92084100 PHOSPHORUS 47.50 03/02/09 92082565 CREATININE 32.60 03/02/09 92082310 CALCIUM, BLOOD, CHEMICAL 58.30 03/02/09 92082947 GLUCOSE, BLOOD 49.20 03/02/09 92083735 MAGNESIUM 58.50

03/02/09 21011107 THERAPEUTIC EXERCISE-EA 15 MIN

75.00

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

01/05/11 11:50 PATIENT STATEMENT OF ACCOUNT - DETAIL STF

	PATIENT NAME:	WEST, CHARLES O CHART REVIEW/ATTEMP 2 NUTRITION CARE EVAL 9 HME 9 HME 0 ADULT VENT SUBSEQUE 5 MDI TX-VENT-SUBSEQUE 6 TRANSPORT CIRCUIT 7 CARBOXYHEMOGLOBIN 8 METHEMOGLOBIN 8 METHEMOGLOBIN 9 DAILY SUPPLY CHARGE 10 INTENSIVE CARE 11 SYSTEM, CUSTOM MOUTE 15 SYRINGE, TOOMEY GOCO 15 KIT, IV START	ACCOUNT	NBR:	015196807	-9042
	COU NATE DEE MOD		SCCCOTOTION			
	AST DHIE HEF BOX	A CHART DEHICU/ATTEND	UEDURITION TOTOTT			0 50
	03/02/03 2101323	O NUTRITION CARE FUAL	1 F1 V1511			0.00
	03/02/03 1301003	S MOLKILLON CHKE EAHL	& REHSSESS			19.50
	V3/V2/V3 17V1V12	O HAC				10.00
	03/02/03 1/01012	2 hhc 5 hkc				10.00
	03/02/03 1/01012	A ANU T HENT CURCESHE	VIT BAU			10.00
	- V3/ V2/ V3 - 1/V1V26 - A3/A3/A3 - 17A1A3/	A MODEL AEMI SORSEMOF	R! DHY			/0/.15
N.	AD /AD /AD 1741435	A MAT IX HENT CHROSON	EN I			27.40
	03/02/03 1701036	S MOI IXTVENITSUBSEQU S MOI TYUENT CURCEOU	E.N.I			27.45
	- V3/ V2/ V3 1/ V1 V3 C	A NOT TA HENT CHROSOM	EN I			27.45
	- 03/02/03 1701036 - 03/02/03 1701036	J MOI IXTYENITOUSDEGU. 5 MOI IVUENTCUDCEDU	EN I			27.45
	03/02/03 1/01036	S MOI IX-VENI-SUBSCHUI S MOI IX-UENT-SUBSCHUI	EN I			27,43
	03/02/03 1/01036	O MDI IX-YENI-DUBDEWU. A DECB UALUE	E. 19. 1			2/.40
	03/02/03 1701043	V FEET VHLYE E TDANCODDT CIDCUIT				26.V5
	- 03/02/03 1/01043 - 03/02/03 1/01043	S BLOOD GOCCO WITH CO.	THEATTON			20.00
	03/02/03 2303013	7 COBBOYVUEWOGLOBIN	IOKHILUN			110.00
	03/02/03 2305813	9 WETHEMOSTODIN				22.00
	03/02/03 1531001	O NEINEAGGEODIK O Nailv Supplv Puapee.	- U 1			33.VV 38.07
	03/02/05 1551001	A THICK DOLLET CHARGE.	" N 7			ፈማፀ።ፈ/ 1968 88
	02/11/09 1519280:	S SASTEM CHSTUM MUNITI	i cobe	/DTV :	DE AAAON	1200.00
	02/11/09 1519218	S SYRINGE TOOMEY EACH	· CANA	12011	D1 VVV27	22.00
	02/11/09 1511198	5 KIT. TU STORT	.t			5.00
	02/11/09 1511198	5 KIT. TU START		COTY (TE 0003)	17 10
	02/11/09 1503158	5 SYRINGE, TOOMEY 60C(5 KIT, IV START 5 KIT, IV START 5 CUFF,BP SOFT ADULT 5 HEPARIN LOCK W/SMART			21 00007	28.67
	02/11/09 15086050	D HEPARIN LOCK W/SMART	SITE VALUE	(OTV (1F 00021	12 40
	Britasian ammanan.	£ 116.71261 1281				
	02/11/09 1520266	I URINAL, MALE DISP I TUBE,YANKAUER W/O CO D KIT, SUCT CANN W/TUB I SOEESET ODD-ON	INTROL UENT			2 60
	02/11/09 15111740	O KIT. SHOT COMM WITH	TNG	(מדע ו	1F 00021	30.20
	02/11/09 1511228	SAFFSET. ADD-ON		1 April 1	ar vvera	46.52
	02/11/09 1515185	SAFESEL, HOU-UN OXISENSOR, FINGER AL SYSTEM, CUSTOM MOUTH SHAVING CREAM BASIN, WASH FOAM, 3-1 CLEANSING KIT, TRACH CARE WITH	MIT DISP	(ATV)	1F 0002)	150.02
	02/11/09 15192803	S SYSTEM, CUSTAM MAIITE	CARE	13411	or ddor,	6.00
	02/11/09 15191502	2 SHAVING CREAM				3.40
	02/11/09 15021139	BASIN. WASH				2-60
	02/11/09 15031501	FOAM, 3-1 CLEANSING	BODY			18.65
	02/11/09 15031325	KIT, TRACH CARE WITH	SALINE			45.00
	02/11/09 15192152	2 SMARTSITE TRIPORT EX	T ST W/VAL			21.80
	02/11/09 15031311	. CATH IV W/WING 18GAX	1.25	(QTY ()F 0002)	15.80
	02/11/09 15303055	S SET,GEMINI PRM 2Y-SI	TE W/SMART			18.00
	02/11/09 15303060) SET, I-MED Y-BLOOD 2	277			33.12
	02/11/09 15300335	SET, VENTED/UNVENTED	W/2 SMARTS			13.20
	02/12/09 15303060) SET, I-MED Y-8LOOD 2	:277			33.12
	02/12/09 15021158	BLANKET, FULL BODY-B	AIR HUGGER			27.68
		. URINE CULTURE KIT				5.05
		CONNECTOR, Y 6-1				2.60
	02/12/09 15111726	KIT, SUBCLAVIAN CATH	ETER CARE			15.90
	02/12/09 15202539	TUBE, (SALEM SUMP) 1	8 FR			6.80
	02/12/09 15181951	RESTRAINTS, ARM, WRI	ST DISP PR			37.40
	02/12/09 15202661	TUBE, YANKAUER W/O CC	NTROL VENT			2.60

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PATIENT NAME: WEST, CHARLES

COLL BATE	ዕድሮ አነው በ	ΑΓΟΟΒΙΒΤΙΟΝ			
	REF NBR				7E 55
		OXISENSOR, FINGER ADULT DISP			75.36
02/12/09	10111613	KIT, 24 HR ORAL CARE KIT			53,70
02/12/09	15161909	PAD, ULTIMA SUPERSORB TEAL COL			7.80
		PAD, DRYFLOW			10.25
02/12/09	15021051	BAG, AMBU ADULT	(6) 1111 - 61		38.84
02/12/09	02026030	BEDSIDE GLUCOSE MONITORING	(AIA n	F 0002)	13.10
02/12/09	02026030	BEDSIDE GLUCOSE MONITORING	(UIY U	F 0010)	65.50
02/12/09	02026030	BEDSIDE GLUCOSE MONITORING	COTY O	F 0008)	52.40
02/12/09	02026030	BEDSIDE GLUCOSE MONITORING	(814 0	F 0010)	65.50
02/12/09	15011029	AIRWAY, ORAL, LG. ADULT 100MM			2.60
02/12/09	15011022	AEROVENT SPACER			16.00
02/12/09	15232689	AIRWAY, ORAL, LG. ADULT 100MM AEROVENT SPACER WASHCLOTH, PERSONAL CLEANSING DRESSING, 4X4 3/4 TEGADERM CHG DRESSING, 4X4 3/4 TEGADERM CHG			15.40
02/12/09	15041666	DRESSING, 4X4 3/4 TEGADERM CHG			28.53
02/12/09	15041666	DRESSING, 4X4 3/4 TEGADERM CHG			28.53
02/12/09	15303055	SET, GEMINI PRM 2Y-SITE W/SMART	a PTQ)	F 0003)	54.00
02/12/09	15303055	SET, GEMINI PRM 2Y-SITE W/SMART			18.00
02/12/09	15192816	SET, GEMINI PRM 2Y-SITE W/SMART SET, GEMINI PRM 2Y-SITE W/SMART SET, Y-TYPE BLOOD SOLUTION SET, I-MED Y-BLOOD 2277 CANNULA #8 INNER DISP DS 0.5 SOD CHLOR 1000CC DS 0.5 SOD CHLOR 1000CC NORMAL SALINE 500CC			18.10
02/12/09	15303060	SET, I-MED Y-BLOOD 2277			33.12
03/03/09	15202248	CANNULA #8 INNER DISP			12.85
03/03/09	15300135	D5 0.5 SOD CHLOR 1000CC			34.50
03/03/09	15300135	D5 0.5 SOD CHLOR 1000CC			34.50
03/03/09	15300240	NORMAL SALINE 500CC			30.00
03/02/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY O	F 0008)	14.64
03/02/09	12012005	DOCUSATE LIQ 100MG, 30 ML UD.4			6.85
03/02/09	12012331	FAMOTIDINE TAB 20 MG			7.90
03/02/09	12013742	METOPROLOL 25 MG TAB			1.10
03/03/09	17010702	METOPROLOL 25 MG TAB COMBIVENT INHALER-1 PUFF	(QTY O	F 0008)	14.64
03/03/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY D	F 0008)	14.64
03/03/09	12012197	COMBIVENT INHALER-1 PUFF ENOXAPARIN INJ PER 10MG	(QTY O	F 0004)	99.55
03/03/09	12012331	FAMOTIDINE TAB 20 MG GLYBURIDE TAB 5 MG METOPROLOL 25 MG TAB			7.90
03/03/09	12012604	GLYBURIDE TAB 5 MG	(QTY O	F 0002)	4.85
		METOPROLOL 25 MG TAB			1.10
		DOCUSATE LIQ 100MG, 30 ML UD.4			6.85
03/03/09	17010702	COMBIVENT INHALER-1 PUFF	(077 0	F 0008)	14,64
03/03/09	17010702	COMBIVENT INHALER-1 PUFF	(OTY O	F 0008)	14.64
03/03/09	17010702	COMBIVENT INHALER-1 PUFF	(0.17.0)	F 0008)	14.64
		ACETAMINOPHEN 325 MG/10.15 ML			5.55
		FAMOTIDINE TAB 20 MG			7.90
		METOPROLOL 25 MG TAB			1.10
		DOCUSATE LIQ 100MG, 30 ML UD.4			6.85
		INSULIN HUMAN REG 10ML			110.10
		SOD CHLOR 0.9% INJ 100ML	-		30.00
		PEG 000792 DELUXE 20			571.95
		SUTURE 3-0 VICRYL TI			48.63
		TUBE 20011 CORRUGATE			7.50
		SUTURE 2-0 PROLENE S	n YTQ)	F 0002)	62.78
		DRESSING 7605 GAUZE	, sq. i , 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		3.29
					No. 14 East of

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

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PATIENT NAME:	WEST.	CHARLES
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		DESCRIPTION				40.4 00
		TUBE SDCT SHILEY TRA				134.22 41.50
		IRRIGATION NACL 0.9%				
		Room Start/Stop Room Start/Stop Anesthesia Start / T Anesthesia Start / T DRAPE 29522 THYROID	/6TU	n r	44461	1347.25
		Room Start/Stop	(414	UF	0003)	232.35
		Anesthesia Start / T	(570	c. r	AAAEN	464.70
		Anesthesia Start / T	(#14	Ur	(6000	50.86
			(QIY	UF or	VVVZ/	00.VC
		NEEDLE: 25 GA 1.5 IN	(WIY	UF	0002)	20.00
		DURAPREP SOLUTION #8				19.04
		ENDOSMART CAP 140/16				63.79
		BAG DRAINAGE URINARY				20.54 7.09
		PEANUT/CHERRY DISSEC SUTURE 2-0 SILK FS 1 TOWEL STANDARD OR 4P	/ es m 11	سويس		7 # 1/2
		SUTURE 2-0 SILK FS 1	(UIY	UF	00027	17.60 23.70
02/20/09	08024522	TOWEL STANDARD OR 4P	(#17	Ur	00037	3.90
		DOKALKEL KEWOVEK FOI				6.44
		COVER, BACK TABLE				14.10
		BOVIE: GROUNDING PAD	/ OTU	or	AAA41	24.00
02/20/09	08051409					
						29.70
02/20/09	08094808	GOWN: X LARGE ULTRA CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM THERAPEUTIC EXERCISE-EA 15 MIN CHART REVIEW/ATTEMPT PT VISIT HME	(1113	U٢	0004)	07.4V 30.00
03/03/09	70071010	CHEST, SINGLE FRONTAL				100.05
03/03/09	70000009	X-RAY DONE AT BEDSIDE				0.00
03/03/09	91085024	CBC, AUTOMATED W/AUTO MBC DIFF				57.05
03/03/09	92084132	POTASSIUM, SERUM				40.15
03/03/09	92082435	CHLORIDE				31.60
03/03/09	92082374	BIOCARBONATE/CO2				29.60
03/03/09	92084295	SODIUM - SERUM				29.60
03/03/09	92084520	UREA NITROGEN, BLOOD (BUN)				29.60
03/03/09	92084100	PHOSPHORUS				47.50
03/03/09	92082565	CREATININE				32.60
03/03/09	92082310	CALCIUM, BLOOD, CHEMICAL				58.90
03/03/09	92082947	GLUCOSE, BLOOD				49.20
03/03/09	92083735	MAGNESIUM				58.50
03/03/09	21011107	THERAPEUTIC EXERCISE-EA 15 MIN				75.00
03/03/09	21019230	CHART REVIEW/ATTEMPT PT VISIT				0.00
03/03/09	17010129	HME				10.00
03/03/09	17010129	HME				10.00
03/03/09	17010129	HME				10.00
	17010129					10.00
	17010129					10.00
		ADULT VENT SUBSEQUENT DAY				707.15
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
		MDI TX-VENT-SUBSEQUENT				27.45
03/03/09	23058135	BLOOD GASES WITH SATURATION				118.00

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

PATIENT STATEMENT OF ACCOUNT - DETAIL

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PATTENT	NAMES	WEST.	CHARLES
1 72 1 4 4 10 1	1 X 1 1 1 1 1 1 1	7K L U 1 a	

SRU DATE	REE NBR	DESCRIPTION CARBOXYHEMOGLOBIN METHEMOGLOBIN DAILY SUPPLY CHARGE-H4 INTENSIVE CARE COLLAR, ASPEN ADULT SHORT D5 0.5 SOD CHLOR 1000CC D5 0.5 SOD CHLOR 1000CC LACTED RINGERS 1000CC COMBIVENT INHALER-1 PUFF				
03/03/09	23058137	CARROXVHEMOGLORIN				52 00
03/03/09	23058138	METHEMORIORIN				53 00
03/03/09	15310012	DATLY SUPPLY CHAPGE-H4				248 27
03/04/09	01623100	INTENSIVE CARE				1260.00
03/04/09	15031568	COLLAR, ASPEN ADULT SHORT				178.14
03/04/09	15300135	D5 0.5 SOD CHLOR 1000CC				34.50
03/04/09	15300135	D5 0.5 SOD CHLOR 1000CC				34.50
03/04/09	15300230	LACTED RINGERS 1000CC				37.55
03/03/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY	0F	(8000	14.64
03/04/09	17010702	COMBIVENT INHALER-1 PUFF	(OTY	0F	0008)	14.64
03/04/09	12013295	MAGNESIUM CITRATE SOL 300ML LEVOFLOXACIN INJ 250M8 COMBIVENT INHALER-1 PUFF COMBIVENT INHALER-1 PUFF	•			13.65
03/04/09	12018669	LEVOFLOXACIN INJ 250MG	(QTY	OF	0002)	134.50
03/04/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY	OF	0008)	14 F.4
03/04/09	17010702	COMBIVENT INHALER-1 PUFF	(OTY	OF	(8000	14.64
03/04/09	12012005	DOCUSATE LIG 100MG, 30 ML UD.4		-		6,85
		ENOXAPARIN INJ PER 10MG	(QTY	0F	0004)	99.55
03/04/09	12012604	GIVEHETAE TAP 5 MG	(QTY	0F	0002)	A OE
03/04/09	12013742	METOPROLOL 25 MG TAB	•			1.10
03/04/09	17010702	METOPROLOL 25 MG TAB COMBIVENT INHALER-1 PUFF POT CHIORIDE IND 40MF0	(QTY	0F	(8000	14.64
03/04/09	12014555	POT CHLORIDE INJ 40MEQ	•			10.20
03/04/09	12020060	DSW INJ, 250ML				
03/04/09	17010702	DSW INJ, 250ML COMBIVENT INHALER-1 PUFF	(QTY	0F	0008)	 14.64
03/04/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY	0F	0008)	14.64
03/03/09	12012940	COMBIVENT INHALER-1 PUFF INSULIN HUMAN REG 10ML				110.10
03/03/09	12020234	SOD CHLOR 0.9% INJ 100ML				30.00
03/04/09	12010406	ACETAMINOPHEN 325 MG/10.15 ML	(QTY	OF	0002)	5.55
		OXYCODONE CONC 5MG ORAL SYR.				2.35
03/04/09	12013742	METOPROLOL 25 MG TAB				1.10
03/04/09	12012005	DOCUSATE LIQ 100MG, 30 ML UD.4				6.85
03/04/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY	OF	(8000	14.64
03/04/09	70071010	CHEST, SINGLE FRONTAL	•			100.05
03/04/09	70000009	X-RAY DONE AT BEDSIDE				0.00
03/03/09	97087040	BLOOD CULTURE				82.70
03/03/09	97087086	FAMOTIDINE TAB 20 MG METOPROLOL 25 MG TAB DOCUSATE LIQ 100MG, 30 ML UD.4 COMBIVENT INHALER-1 PUFF CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE BLOOD CULTURE CULTURE, URINE, QUANTITATIVE ALBUMIN PREALBUMIN ALBUMIN				44.30
03/03/09	92082040	ALBUMIN				47.50
03/03/09	94084134	PREALBUMIN				53.25
						47.50
03/04/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF				57.05
03/04/09	92084132	POTASSIUM, SERUM				40.15
	92082435					31.60
		BIOCARBONATE/CO2				29.60
		SODIUM - SERUM				29.60
		UREA NITROGEN, BLOOD (BUN)				29.60
		PHOSPHORUS				47.50
		CREATININE				32.80
V3/V4/09	22085310	CALCIUM, BLOOD, CHEMICAL				58,90

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SRV DATE	DEE NDD	DESCRIPTION		
		GLUCOSE, BLOOD		49.20
		MAGNESIUM		58.50
		THERAPEUTIC EXERCISE-EA 15 MIN		75.00
		CHART REVIEW/ATTEMPT PT VISIT		0.00
	17010129			
		ADULT VENT SUBSEQUENT DAY		707.15
		MDI TX-VENT-SUBSEQUENT	. CAS	27.45
		MDI TX-VENT-SUBSEQUENT	/ Misan	27.45
		MDI TX-VENT-SUBSEQUENT		27.45
		MDI TX-VENT-SUBSEQUENT		27.45
		MDI TX-VENT-SUBSEQUENT		27.45
		MDI TX-VENT-SUBSEQUENT	20. Oh	27.45
		MDI TX-VENT-SUBSEQUENT		27.45
		BLOOD GASES WITH SATURATION		118.00
		CARBOXYHEMOGLOBIN		53.00
		METHEMOGLOBIN		53.00
		DAILY SUPPLY CHARGE-H4	PECENED	248.27
		INTENSIVE CARE		1260.00
03/05/09	15300135	D5 0.5 SOD CHLOR 1000CC		34.50
		DS 0.5 SOD CHLOR 1000CC		34.50
		D5 0.5 SOD CHLOR 1000CC		34.50
03/05/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
03/05/09	12014562	POT CL POWDER 20MEQ PKT		0.90
03/05/09	12014555	POT CHLORIDE INJ 40MEQ		10.20
03/05/09	12020065	DSW INJ, SOOML		30.00
03/05/09	12014118	OXYCODONE CONC 5MG ORAL SYR.		2.35
03/05/09	12014118	OXYCODONE CONC 5MG ORAL SYR.		2.35
03/05/09	17010702	COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
03/05/09	12012005	DOCUSATE LIQ 100MG, 30 ML UD.4		6.85
03/05/09	12012197	ENOXAPARIN INJ PER 10MG	(QTY OF 0004)	99.55
03/05/09	12012331	FAMOTIDINE TAB 20 MG		7.90
03/05/09	12012604	GLYBURIDE TAB 5 MG LEVOFLOXACIN INJ 250MG	(QTY OF 0002)	4.85
			(QTY OF 0002)	134.50
		METOPROLOL 25 MG TAB		1.10
		OXYCODONE CONC 5MG ORAL SYR.		2.35
		COMBIVENT INHALER-1 PUFF	(QTY DF 0008)	14.64
		POT CHLORIDE SYRUP 10% OZ	(QTY OF 0002)	2.75
		DXYCODONE CONC 5MG ORAL SYR.		2.50
		COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
		COMBIVENT INHALER-1 PUFF	(QTY OF 0008)	14.64
		DOCUSATE LIQ 100MG, 30 ML UD.4		6,85
		FAMOTIDINE TAB 20 MG		7.90
		METOFROLOL 25 MG TAB	COTY OF AAAON	1.10
		ACETAMINOPHEN 325 MG/10.15 ML CHEST, SINGLE FRONTAL	(WIT UP VVVZ)	5.55
		X-RAY DONE AT BEDSIDE		100.05 0.00
		CBC, AUTOMATED W/AUTO WBC DIFF		57.05
		POTASSIUM, SERUM		40.15
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SRV DATE	REF NBR	DESCA CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BU PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM NUTRITION CARE EVAL & RE HME NON-MEDICATED AFROSOL/HO	IPTION		
03/05/09	92082435	CHLORIDE			31.60
03/05/05	92082374	BIOCARBONATE/CO2			29.60
03/05/09	92084295	SODIUM - SERUM			29.60
03/05/09	92084520	UREA NITROGEN, BLOOD (BU	N)		29.60
03/05/09	92084100	PHOSPHORUS			47.50
03/05/09	92082565	CREATININE			32.60
03/05/09	92082310	CALCIUM, BLOOD, CHEMICAL			58.90
03/05/09	92082947	GLUCOSE, BLOOD			49.20
03/05/09	92083735	MAGNESIUM			58,50
03/05/09	19010052	NUTRITION CARE EVAL & RE	ASSESS		19,50
03/05/09	17010129	HME			10.00
03/05/09	17010149	NON-MEDICATED AEROSOL/HO	UR (QTY:	OF 0004)	61.20
03/05/09	17010149	NON-MEDICATED AEROSOL/HO	UR (GTY	OF 0004)	61.20
03/05/09	17010365	MDI TX-VENT-SUBSEQUENT			27.45
03/05/09	17010365	MDI TX-VENT-SUBSEQUENT			27.45
03/05/09	17010365	MDI TX-VENT-SUBSEQUENT			27.45
03/05/09	17010365	MDI TX-VENT-SUBSEQUENT			27.45
03/05/09	1/010395	MDI TX - SUBSEQUENT			23.25
03/05/09	1/010395	MDI TX - SUBSEQUENT			23.25
03/05/09	23058135	BLOOD GASES WITH SATURAT	ION "		118.00
03/05/09	23058137	CARBOXYHEMOGLOBIN			53.00
03/05/09	23058138	METHEMOGLOBIN			53.00
03/05/09	15310012	DAILY SUPPLY CHARGE-H4			248.27
03/06/09	01623100	MON-MEDICATED AEROSOL/HO MOI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX-VENT-SUBSEQUENT MDI TX - SUBSEQUENT MDI TX - SUBSEQUENT BLOOD GASES WITH SATURAT CARBOXYHEMOGLOBIN METHEMOGLOBIN DAILY SUPPLY CHARGE-H4 INTENSIVE CARE COLLAR, ASPEN ADULT SHOR D5 0.5 SOD CHLOR 1000CC D5 0.5 SOD CHLOR 1000CC COMBIVENT INHALER-1 PUFF OXYCODONE CONC 5MG ORAL			1260.00
03/06/03	15031568	COLLAR, ASPEN ADULT SHOR	T		178.14
03/05/09	15300135	05 0.5 SOD CHLOR 1000CC			34.50
V3/V5/V3	15300135	DS 0.5 SOD CHLOR 1000CC			34.50
03/03/03	1/010/02	CUMBIVENT INHALER-1 PUFF	(QTY C)F 0008)	14.64
03/06/03	12014118	DXYCODONE CONC 5MG ORAL	SYR.		2.50
A21 A61 A3	TAATAAAA	COMRIAEMI IMHHFFK-J LOEE	(QTY A	F 0008)	14.64
03/06/03	12014118	OXYCODONE CONC 5MG ORAL S	SYR.		2.50
03/06/03 03/06/03	1/010/02	COMBINENT INHALER-1 PUFF	(QTY O	F 0008)	14.64
V D / V D / V D	12012003	DUCUSAIE LIQ 100MG, 30 ML	UD.4		6.85
00/00/02 00/00/02	12017127	EMOTIFIED TAR OF ME	(QTY O	F 0004)	99.55
44 / 45 / 46 / 46 / 46 / 46 / 46 / 46 /	12012331	COMBIVENT INHALER-1 PUFF DOCUSATE LIQ 100MG, 30 ML ENOXAPARIN INJ PER 10MG FAMOTIDINE TAB 20 MG GLYBURIDE TAB 5 MG METOPROLOL 25 MG TAB SOD CHLORIDE INJ, 30ML MC OXYCODONE CONC 5MG ORAL SOME			7.90
007 V 07 V 0	12012004	ALTONOOLO: OE NO MO	(QTY O	F 0002)	4.85
03706703 03706703	10010/42	WEINLAGENE THE SEASON NE			1.10
V3/ V6/ V3	12013111	SUD CHECKIDE INJ, 30ML MC	V		10.20
00/06/05 03/06/09	17010709	COMBIVENT INHALER-1 FUFF	YR.		2.50
		COMBIVENT INHALER-1 PUFF	7471 4	1 00007	17404
03/06/09	12015/02	SOD CHLORIDE INJ, 30ML MC	(414 0	F 0008)	14.64
03/06/09	17010707	DUONEB INAL SOLM (STD DOS	A (AIA 0	F 0002)	10.20
03/06/09	12010406	ACETAMINOPHEN 325 MG/10.1		F Abee:	2.13
03/06/09	12014118	OXYCODONE CONC 5MG ORAL S	ча т	F 0002)	5.55
03/06/09	12012005	DOCUSATE LIQ 100MG, 30 ML	TRE HA A		2.50
03/06/09	12012331	FAMOTIDINE TAB 20 MG	U D = 4		6.85
03/06/09	12013742	METOFROLOL 25 MG TAB			7.30
		······································			1.10

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PATIENT NAME: WEST, CHARLES

ANU NATE	ner unb	DESCRIPTION INSULIN HUMAN RES 10ML SOD CHLOR 0.9% INJ 100ML CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASBIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM NUTRITION CARE EVAL & REASSESS NON-MEDICATED AEROSOL/HOUR STANDARD NEB TX-1 MED INITIAL MDI TX - SUBSEQUENT SUPPLY CHARGE-H4 INTENSIVE CARE HYDROGEN PEROXIDE PT COLLAR, ASPEN ADULT SHORT SLEEVE, SCD MED KNEE COMPRESS D5 0.5 SOD CHLOR 1000CC D5 0.5 SOD CHLOR 1000CC NACL 250CC IRRIG OXYCODONE CONC 5MG ORAL SYR. DUONEB INAL SOLN (STD DOSE) HH				
SKA DHIE	KET ROK	UEDURIFILUR THAN THE HIMAN BEC JAMI				110 10
03/04/09	12012940	THOSE SERVICES AND TORK				20 00
03/04/09	12020234	SUD CHECK 0.3% INJ IOUML				100 05
03/06/03	700/1010	CHEST, SINGLE PRUNIFIL				V V V
03/06/09	70000009	X-RAY DONE AT BEDSIDE				0.00
03/06/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF				37.473
03/06/09	92084132	POTASBIUM, SERUM				40.15
03/06/09	92082435	CHLORIDE				31.60
03/06/09	92082374	BIOCARBONATE/CO2				29.60
03/06/09	92084295	SODIUM - SERUM				29.60
03/06/09	92084520	UREA NITROGEN, BLOOD (BUN)				29.60
03/06/09	92084100	PHOSPHORUS				47.50
03/06/09	92082565	CREATININE				32.60
03/06/09	92082310	CALCIUM, BLOOD, CHEMICAL				58.90
03/06/09	92082947	GLUCOSE, BLOOD				49.20
03/06/09	92083735	MAGNESIÚM				58.50
03/06/09	19010052	NUTRITION CARE EVAL & REASSESS				19.50
03/06/09	17010149	NON-MEDICATED AEROSOL/HOUR	(QTY	OF 4	0004)	61.20
03/06/09	17010149	NON-MEDICATED AEROSOL/HOUR	YTQ)	OF	0004)	61.20
03/06/09	17010149	NON-MEDICATED AEROSOL/HOUR	(QTY	OF 4	0004)	61.20
03/06/09	17010149	NON-MEDICATED AFROSOL/HOUR	YTG)	OF :	0005)	76.50
00/00/09	17010149	NON-MEDICATED BEROSOL /HOUR	(QTY	OF 4	0004)	61.20
V0/ V0/ V2	17010119	NON-MEDICATED DEROSOL/HOUR	(DTY	OF	0004)	61.20
72/05/02 72/05/02	17010172	CTONDODO NED TY-4 MED TNITTO	1 14			42.20
- Va/ Va/ Va - An /Ac/An	17010000	MN7 TV CHDCCOHCAT				23.25
03/05/03	11/01/03/02	MAT TV CUDCCOUENT				23.25
03/06/03	1/01/02/0	NVL IX - SUBSEMUCK:				20.25
03/06/09	1/01/02/0	MAT TV . PUBCENHENT				23 25
03/06/09	1/010333	MUL IX - SUBSEQUENT				110 00
03/06/03	23058135	BEOOD CUSES MILL SHINKHIION				110.44
03\06\03	23058137	CUKROXAHEWOGFORIM				33 k V V ድማ ለለ
03\08\03	23058138	WEIKEWORTORIN				ጋር የ ህር ህር
03/06/09	15310012	DAILY SUPPLY CHARGE-H4				240.27
03/07/09	01623100	INTENSIVE CARE				1790.00
03/07/09	12010028	HYDROGEN PEROXIDE PT				2.25
03/07/09	15031568	COLLAR, ASPEN ADULT SHORT				1/8.14
03/07/09	15192209	SLEEVE, SCD MED KNEE COMPRESS				91,50
03/07/09	15300135	D5 0.5 SOD CHLOR 1000CC				34.50
03/07/09	15300135	D5 0.5 SOD CHLOR 1000CC				34.50
03/07/09	15300270	NACL 250CC IRRIG				33.75
03/07/09	12014118	OXYCODONE CONC 5MG ORAL SYR.				2.50
03/07/09	17010707	DUONEB INAL SOLN (STD DOSE) HH				2.13
		FENTANYL INJ 50 MCG/ML, 2ML				11.35
03/07/09	12014118	OXYCODONE CONC 5MG ORAL SYR.				2.50
		ACETAMINOPHEN 325 MG/10.15 ML	(QTY	OF.	0002)	5.55
		DUONEB INAL SOLN (STD DOSE) HH				2.13
		INSULIN HUMAN REG 10ML				110.10
		SOD CHLOR 0.9% INJ 100ML				30'00
		METOPROLOL 25 MG TAB				1.10
		DOCUSATE LIQ 100MG, 30 ML UD.4				6.85
		,				

UNIVERSITY HOSPITAL PAGE 30 11AMG MFDICAL CENTER 01/05/11 11:50 STF PATIENT STATEMENT OF ACCOUNT - DETAIL

		AFACUTETTAN				
SRV DATE	KEL WRK	DESCRIPTION	/ n T V	ΛE	00041	99.55
03/07/09	12012197	ENDXAPARIN INJ PER 10MG	(4) 1	UF	00047	7 90
03/07/09	12012331	FAMOTIDINE TAB 20 MG	/ O T V	0.5	AAA93	99.55 7.90 4.85
03/07/09	12012604	GLYBURIDE TAB 5 MG	7 ft 1 A	ប្រក	00021	7 1 2
03/07/09	17010707	DUONER INAL SOLM (SID DOSE) HH				110 10
03/07/09	12012940	INSULIN HUMAN REG 10ML				710-10
03/07/09	12020234	SOD CHLOR 0.9% INJ 100ML				3V=VV
03/07/09	17010707	DUONEB INAL SOLN (STD DOSE) HH				7 413
03/07/09	12012331	FAMOTIDINE TAB 20 MG				/ # 3 V
03/07/09	12013742	METOPROLOL 25 MG TAB				1.10
03/07/09	12012005	DOCUSATE LIQ 100MG, 30 ML UD.4				66.6
03/07/09	12014118	DXYCODONE CONC 5MG ORAL SYR.				2.50
03/07/09	70071010	CHEST, SINGLE FRONTAL				100.05
03/07/09	70000009	X-RAY DONE AT BEDSIDE				0.00
03/07/09	91085024	CBC, AUTOMATED W/AUTO WBC DIFF				57.05
03/07/09	92084132	POTASSIUM, SERUM				40.15
03/07/09	92082435	CHLORIDE				31.60
03/07/09	92082374	BIOCARBONATE/CO2				29.60
03/07/09	92084295	SODIUM - SERUM				29.60
03/07/09	92084520	UREA NITROGEN. BLOOD (BUN)				29,60
03/07/09	92084100	PHOSPHORUS				47.50
03/07/09	92082565	CREATININE				32.60
03/07/09	92082310	CALCIUM, BLOOD, CHEMICAL				58.90
03/0//03	92082947	GLUCOSE, BLOOD				49.20
00/07/09	920923775	MAGNESTIM				58.50
00/07/02	1701001	GLYBURIDE TAB 5 MG DUONEB INAL SOLN (STD DOSE) HH INSULIN HUMAN REG 10ML SOD CHLOR 0.9% INJ 100ML DUONEB INAL SOLN (STD DOSE) HH FAMOTIOINE TAB 20 MG METOPROLOL 25 MG TAB DOCUSATE LIQ 100MG, 30 ML UD.4 OXYCODONE CONC 5MG ORAL SYR. CHEST, SINGLE FRONTAL X-RAY DONE AT BEDSIDE CBC, AUTOMATED W/AUTO WBC DIFF POTASSIUM, SERUM CHLORIDE BIOCARBONATE/CO2 SODIUM - SERUM UREA NITROGEN, BLOOD (BUN) PHOSPHORUS CREATININE CALCIUM, BLOOD, CHEMICAL GLUCOSE, BLOOD MAGNESIUM OXYGEN 1 HOUR HME	ΥTΩΥ	0F	0004)	10.40
00/07/02	17010129	HME	•			10.00
- VOZ VZ Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z	17010122	MAC				10.00
00/0//02 00/07/09	17010275	ONH T UENT FIRST DAY	•			1005.15
V2/V//V2	17010270	ADDIT UENT SHESERHENT DAY				707.15
03/0//03	17010200	CTANADRO MER TY-1 MED SHRSERHE				25.30
- V3/ V// V2 - A0/A7/A0	17010000	CTAMBARD NED TY-1 MED SHRSFOHE				25.30
V3/V//V3	17010303	CTANADA NED TY-1 MEN SHRSEOHE				25.30
03/0//03	17010303	CTANDADD WEB TY-1 MED SHRSFOLF				25.30
02/0//02	12010000	NATIV CHORLY CHOPRE-HA				248.27
V3/V//V3	7455549V	THIENCING CAPE				1260.00
03/08/09	- 1 E D V D 4 C C	NON-MEDICATED AEROSOL/HOUR ADULT VENT FIRST DAY ADULT VENT SUBSEQUENT DAY STANDARD NEB TX-1 MED SUBSEQUE DAILY SUPPLY CHARGE-H4 INTENSIVE CARE TRAY,URI METER W/18FR TEMP PRB DSLR 1000CC				97.51
03/08/03	10202400	D5LR 1000CC				39.50
03/05/03	10000100	DE VE COU CALOR TVVVCC	COTY	ŊΕ	0002)	69.00
03/08/03	10010001	D5 0.5 SOD CHLOR 1000CC DUONEB INAL SOLN (STO DOSE) HH	eug i i	147 1	0 0 0 00 0	2.13
						110.10
		INSULIN HUMAN REG 10ML				30.00
03/0//09	12020234	SOD CHLOR 0.9% INJ 100ML				2.50
03/08/09	12014116	OXYCODONE CONC 5MG ORAL SYR.				2.13
		DUONEB INAL SOLN (STO DOSE) HH				110.10
		INSULIN HUMAN REG 10ML				30.00
		SOD CHLOR 0.9% INJ 100ML	≀nπ∨	. ១៩	0004)	99.55
		ENOXAPARIN IND PER 10MG	, u ₂ + 1	٠,	33017	7.90
03/08/09	12012331	FAMOTIDINE TAB 20 MG				4 H W. 24

U N I V E R S I T Y H O S P I T A L PAGE 34 UAMS MEDICAL CENTER 01/05/11 11:50 PATIENT STATEMENT OF ACCOUNT - DETAIL STF

001 00TF 0FF	277 13	NEADH THE TAN				
SKY DHIE KER	NBR 12604 GLYBURIDE T	DESCRIPTION	/ 0.T V	nΕ	ለለለጋነ	4.85
V3/V0/V3 12V	13742 METOPROLOL	HB U NO DE MO TAB	(4:1	O.	VVV27	1.10
03/00/03 120 03/00/03 120	19949 METURNOLOL 19949 THOUTH OLD	ECTNE 1001/ML 10ML				245 90
- Va/VO/V2 12V. - No/No/No 17N	ZZDYZ IROGEIN GEHI 18787 Burwed Two!	CULM 1CLV DUCE / AMP				2.13
- V3/V3/V3 1/V	10707 DOOMED IMHE 14110 OVVCODONE C	ONE SHE ODDE SUD				2.50
- V3/V0/V2 IAV. - A9/A0/A0 17A:	ITIO OXTGODORE G TATAT DHONED THAI	COLM (CLD DUCE) NA				2.13
- <u>00/00/02 1/0</u> - 00/00/00 100:	19992 DOOKED IKHÉ	0 100MG 20 MI II) 4				6.85
- VOZVOZVZ 12V. - VOZVOZVO 19V.	19991 FOMOTINTHE	A IAANO' DA UE AAFA				7.90
03/08/09 120:	12747 METOPPOLOL '	75 MG TAR				1.10
03/00/05 120. 03/08/09 700	71010 CHEST SING	LE FRANTAI				100.05
03/08/09 7000	DOODS X-RAY DONE	AT BEDSIDE				0.00
03/08/09 700	71010 CHEST. SING	I F FRONTAL				100.05
03/08/09 7000	DOODS X-RAY DONE	AT REDSIDE				0.00
03/03/03 700	87106 FUNGAL CULT	HRE TO (MOLD) FACH				90.80
03/07/09 9708	37040 BLOOD CULTU	RE				82.70
03/07/09 9708	87086 CULTURE. UR	INE. QUANTITATIVE				44.30
03/07/09 9708	37070 CULTURE. AE	ROBIC, ROUTINE				113.60
03/07/09 9709	87205 SMEAR, PRIM	ARY ROUTINE				33.20
03/07/09 9708	37040 BLOOD CULTUI	3 E				82.70
03/08/09 9108	35024 CBC, AUTOMA	TED W/AUTO WBC DIFF				57.05
03/08/09 9208	34132 POTASSIUM, S	SERUM				40.15
03/08/09 9208	32435 CHLORIDE					31.60
03/08/09 9208	32374 BIOCARBONATE	E/C02				29.60
03/08/09 9208	34295 SODIUM - SEI	AB 5 MG 25 MG TAB. RGINE 100U/ML,10ML SOLN (STD DOSE) HH ONC 5MG ORAL SYR. SOLN (STD DOSE) HH Q 100MG, 30 ML UD.4 TAB 20 MG 25 MG TAB LE FRONTAL AT BEDSIDE LE FRONTAL AT BEDSIDE URE ID (MOLD) EACH RE INE, QUANTITATIVE ROBIC, ROUTINE ARY ROUTINE RE TED W/AUTO WBC DIFF GERUM E/CO2 RUM EN, BLOOD (BUN) DOD, CHEMICAL DOD ED AEROSOL/HOUR				29.60
03/08/09 9208	34520 UREA NITROGE	EN, BLOOD (BUN)				29.60
03/08/09 9208	34100 PHOSPHORUS					47.50
03/08/09 9208	32565 CREATININE					32.60
03/08/09 9208	32310 CALCIUM, BLO	DOD, CHEMICAL				58.90
03/08/09 9208	32947 GLUCOSE, BLO	300				49.20
03/08/09 9208	33735 MAGNESIUM					58.50
03/08/09 1701	.0129 HME					10.00
03/08/09 1701	10129 HME					10.00
03/08/09 1701	.0149 NON-MEDICATE	ED AEROSOL/HOUR	(QTY	OF	0004)	61.20
03/08/09 1701	10280 ADULT VENT :	SUBSEQUENT DAY				707.15
		TX-1 MED SUBSEQUE				707.15 25.30 25.30 25.30 25.30
		3 TX-1 MED SUBSEQUE				25.30
		3 TX-1 MED SUBSEQUE				25.30
	.0012 DAILY SUPPLY					248.27
		SOLN (STD DOSE) HH				2.13
	.4118 OXYCODONE CO					2,50
		SOLN (STD DOSE) HH				2.13
) 100MG, 30 ML UD.4	7.0TV	o.c	00041	6.85 99.55
	2197 ENOXAPARIN		(tg Y	υr	0004)	7.90
	.2331 FAMOTIDINE 1 .3742 METOPROLOL 2					1,10
	13742 METORNOLOL . 1010 CHEST, SINGL					100.05
	0000 X-RAY DONE A					0.00
AMAGAA AMAG	reservice in the least that the	S to the line for the old life has				4 6 4 0

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PATIENT NAME: WEST, CHARLES

COU DATE	REF NBR	DESCRIPTION				
		CBC, AUTOMATED W/AUTO WBC DIFF				57.05
		POTASSIUM, SERUM				40.15
		CHLORIDE				31.60
		BIOCARBONATE/CO2				29.60
		SODIUM - SERUM				29.60
		UREA NITROGEN, BLOOD (BUN)				29.60
		PHOSPHORUS				47.50
		CREATININE		a A		32.60
03/03/03	92082310	CALCIUM, BLOOD, CHEMICAL			V.G.	58.90
		GLUCOSE, BLOOD		484	15 10 ₄	49.20
		MAGNESIUM	f	50	MANGAS STATE 25 2011	58.50
		NUTRITION CARE EVAL & REASSESS		- C		19.50
		STANDARD NEB TX-1 MED INITIAL	A		45 2 00p	42.20
		STANDARD NEB TX-1 MED SUBSEQUE	" I & S	Pag.	<01 ₇ **	25.30
		FUNGAL CULTURE ID (MOLD) EACH	+ 6	a francis	, 's	90.80
		ARTERIAL LINE PLACEMENT SUPPLI		A. W.	WED	304.30
		VENI/PERIPH/ 1-2 TUBES				19.80
		FOLEY INS SUPPLIES W/TEMP PROB				150.00
02/11/09	06010131	BLOOD PRESSURE MONITOR				40.00
02/11/09	06020010	BLOOD PRESSURE MONITOR PULSE OX, MULTIPLE CARDIAC MONITOR ONLY IV INF W/PUMP W/WO ST 1.5 HRS,			•	99.00
02/11/09	06020012	CARDIAC MONITOR ONLY			•	61.50
02/11/09	06020163	IV INF W/PUMP W/WO ST 1.5 HRS,	(Q TY	OF	0002)	710.60
02/11/09	06020162	HYDRATION W/WO PUMP				298.50
		IV SOLUTION ADDITIONAL	(QTY	OF	0002)	68.80
02/11/09	06020250	IMMUNIZATION ADMINISTRATION E & M - LEVEL 5 PROCEDURE - LEVEL 3 BEDSIDE GLUCOSE MONITORING BEDSIDE GLUCOSE MONITORING BEDSIDE GLUCOSE MONITORING				
02/11/09	06010015	E & M - LEVEL 5				655.50
02/11/09	06010303	PROCEDURE - LEVEL 3				160.35
02/13/09	02026030	BEDSIDE GLUCOSE MONITORING	(QTY	OF	0010)	65.50
02/13/09	02026030	BEDSIDE GLUCOSE MONITORING	(QTY	OF	0005)	32.75
02/14/09	02026030	BEDSIDE GLUCOSE MONITORING	(QTY	OF	0010)	65.50
02/14/03	02020000	DEVOIDE BLUCOSE BURLLOKING	₹ t <u>a</u> ≀	UT	00047	26.20
02/14/09	02026030	BEDSIDE GLUCOSE MONITORING	(QTY	OF	0002)	13.10
02/14/09	02026030	BEDSIDE GLUCOSE MONITORING			0006)	
02/15/09	02026030	· · · · · · · · · · · · · · · · · · ·			0010)	
					0010)	
02/16/09	02026030	BEDSIDE GLUCOSE MONITORING	(QTY	OF	0010)	65.50
02/16/09	02026030	BEDSIDE GLUCOSE MONITORING	(QTY	OF	0023)	150.65
02/13/09	08054529	TROCAR, THORACOFORT 11.5/15	(QTY	OF	0002)	168.80
02/13/09	08067701	DAVOL COLLECTION TRAP				5.70
02/13/09	15011022	AEROVENT SPACER				16.00
02/14/09	15011022	AEROVENT SPACER				16.00
02/14/09	15021159	BODY WASH & SHAMPOO ALOE				4.20
02/14/09	15021243	ORAL-SWAB UNSCENTED 20/PK				6.00
02/16/09	15021243	ORAL-SWAB UNSCENTED 20/PK				6.00
02/16/09	15031198	CANNULA, SHIELDED BLUNT	YTQ)	OF	0012)	31.20
02/14/09	15031312	CATH, IV INTROCAN 20X1IN WINGE	(QTY	OF	0002)	15.80
02/14/09	15031325	KIT, TRACH CARE WITH SALINE				45.00
		KIT, TRACH CARE WITH SALINE				45.00

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PATIENT NAME: WES	BT. CH	HARLES
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		DESCRIPTI	ΝО			
02/15/09	15031325	KIT, TRACH CARE WITH SALINE				45.00
		CONNECTOR, Y 6-1				2.60
		DEODORANT, ROLL-ON 1.50Z				2.60
		DEVICE, FEEDING TUBE ATTACH				12.65
02/13/09	15041615	ORESSING, TEGADERM 4.5X5.5				4.02
02/14/09	15041615	DRESSING, TEGADERM 4.5X5.5				4.02 4.02
02/14/09	15041643	DISPOSABLE TOOTHBRUSH				2.60
02/13/09	15111613	KIT, 24 HR DRAL CARE KIT				53.70
02/14/09	15111726	KIT, SUBCLAVIAN CATHETER CARI	E			15.90
02/15/09	15111740	KIT, SUCT CANN W/TUBING	(977	OF	0002)	30.20
02/14/09	15122504	LOTION, BABY				2.65
02/13/09	15131771	TAPE, MICROFOAM 3 INCH				16.90
02/14/09	15151855	OXISENSOR, FINGER ADULT DISP				75.36
02/14/09	15151855	OXISENSOR, FINGER ADULT DISP				75.36
02/14/09	15151855	OXISENSOR, FINGER ADULT DISP				75.36 75.36
02/15/09	15151855	OXISENSOR, FINGER ADULT DISP				75.36
02/14/09	15161224	PILLOW, SPENCO FOOT				61.15
02/13/09	15161865	PACK, INSTRUMENT				8.70
02/14/09	15161866	PAD, DRYFLOW				10.25
02/14/09	15162922	ORESSING, TEGADERM 4.5X5.5 DRESSING, TEGADERM 4.5X5.5 DISPOSABLE TOOTHBRUSH KIT, 24 HR ORAL CARE KIT KIT, SUBCLAVIAN CATHETER CARE KIT, SUCT CANN W/TUBING LOTION, BABY TAPE, MICROFOAM 3 INCH OXISENSOR, FINGER ADULT DISP OXISENSOR, FINGER ADULT DISP OXISENSOR, FINGER ADULT DISP OXISENSOR, FINGER ADULT DISP PILLOW, SPENCO FOOT PACK, INSTRUMENT PAD, DRYFLOW POWDER, BABY RINSE, 16OZ BIOTENE MOUTH RAZOR, DISPOSABLE				2.60
02/14/09	15181965	RINSE, 160Z BIOTENE MOUTH				23.10
02/13/09	15181971	RAZOR, DISPOSABLE				2.60
02/14/09	15191502	SHAVING CREAM				3.40
02/14/09	15191988	SHAVING CREAM SET, SCALP VEIN 23 GA SET, VACUTAINER COLL 23 GA SPG,ALL GAUZE ST 4X4 10/PKG SPG,ALL GAUZE ST 4X4 10/PKG SPG,ALL GAUZE ST 4X4 10/PKG	(QTY	OF	0003)	7.80
02/13/09	15192005	SET, VACUTAINER COLL 23 GA	YTO	OF	0003)	13.50
02/13/09	15192075	SPG, ALL GAUZE ST 4X4 10/PKG				2.67
02/13/09	15192075	SPG, ALL GAUZE ST 4X4 10/PKG				2.67
02/13/09	15192075	SPG, ALL GAUZE ST 4X4 10/PKG				2.67 7.95
		·				
02/13/09	15192151	SUTURE:3-0 SILK BLACK 18 FS-1 SMARTSITE NEEDLESS L/L VALVE	(QTY	OF	0003)	18.00
02/13/09	15192160	SUTURE: 00 SILK W/NOL 1076-51	L (QTY	0F	0002)	13.60
02/14/09	15201800	TOOTHPASTE, 850Z COLGATE				2.60
02/15/09	15202243	SYRINGE, TOOMEY 60CC TOOTHPASTE, 850Z COLGATE TRANSDUCER, DISP. 60IN TUBE,ENTERAL FEEDING(12 FR)45 TUBE,YANKAUER W/O CONTROL VEN TUBE,YANKAUER W/O CONTROL VEN				41.54
02/15/09	15202572	TUBE, ENTERAL FEEDING (12 FR) 45	ì			52.16
02/15/09	15202661	TUBE, YANKAUER W/O CONTROL VEN	VT			2.60
02/16/09	15202661	TUBE, YANKAUER W/O CONTROL VEN	1 T			2.60
02/13/09	15300210	SET, SECONDARY PIGGYBACK W/LL				6.00
		NACL 250CC IRRIG				33.75
02/15/09	15303055	SET, GEMINI PRM 2Y-SITE W/SMAF	? T			18,00
		SET, GENINI PRM 2Y-SITE W/SMAR		0F	0002)	
		IMED, NITRO LIPIDS			0002)	
		INSURANCE DENIED OR REJECTED				_
		MEDICARE PART A				
08/06/09	00140000	AGENCY PLACEMENT				1.22379.27-
08/06/09	00143981	AGENCY PLACEMENT				122379.27
09/16/09	00122011	MEDICARE ADJUSTMENT	SERVICE ON	02/	11/09	37694.68-
		NEDICARE PART A				

UNIVERSITY HOSPITAL UAMS MEDICAL CENTER

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PATIENT STATEMENT OF ACCOUNT - DETAIL

STF

PATIENT NAME: WEST, CHARLES

ACCOUNT NBR: 015196807-9042

DESCRIPTION SRV DATE REF NBR 1696.48-09/18/09 00147140 AGENCY RETURN 1696.48 09/18/09 00143991 AGENCY RETURN 1556.58 10/09/09 00122010 MEDICARE ADJUSTMENT SERVICE ON 02/11/09 MEDICARE PART A SERVICE ON 02/11/09 122236.62-10/09/09 00258011 PAYMENT - MEDICARE MEDICARE PART A 2.75-10/12/09 00135030 WRITE-OFF 120682.79-10/12/09 00140010 AGENCY RETURN 120682.79 10/12/09 00143991 AGENCY RETURN

REMIT TO UAMS MEDICAL CENTER 4301 WEST MARKHAM SLOT 612 LITTLE ROCK

AR 72205

SERVICES FROM: 02/11/09 TO 03/09/09 TOTAL CHARGES TOTAL CHARGES TOTAL ADJUSTMENTS TOTAL PAYMENTS CURRENT ACCOUNT BALANCE

158377.47 36140.85-122236.62-

0.00

MAKE CHECK PAYABLE TO: UAMS MEDICAL CENTER

IF YOU HAVE ANY QUESTIONS CONCERNING THIS STATEMENT PLEASE CONTACT: PHONE: () -

FACE SHEET

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Sunny Acres Of DeKalb RI6100A CHARLES WEST Res No.: 992963 Admit Date: 4/09/09 10:30 am Admitted From: 02 243 CR 1111 Loc: SE 16 B ReAdmitted: 9/20/10 3:30 pm Readmitted From: Н Ph; Discharged: Discharged To: D.O.R. Sax: SSN: Restricted '-**MEDICAL INFORMATION** Med Record no: 992983 Allargiae: Admit Dx: Helant: 78 in MORPHINE 995.91 Sins-Infect W/O Org Dysf Admit Whight: lbs LATEX Discharge Di: Primary Phys: **GULDE, JAMES** (903) 785-9900 THIOPENTAL SODIUM 635 STONE AVE (FROM PENTOTHAL) Current Dx: 401.9 Hypertension NOS **PARIS, TX 75460** 414.0 Corenary Atheroscierosis* RKANSAS STATE 344.9 Paralysis NOS IMS COMMISSION 344.61 Neurogenic Bladder Referring Phys: 783.3 Feeting Problem 250.9 Diatietes W Complic NOS* 728.87 Muscle Weakness QL Hospital stay: CHRISTUS ST. MICHAEL Fram/Thru: 9/15/10 thru 9/20/10 Rehab Polantial: Catheter present **Contractures** Restraint Orders Pressure Sores (other than Stage 1) Admitted with: Received pneumococcal vaccine Received influenza immunization In facility **DEMOGRAPHICS** SERVICE PROVIDERS and PREFERENCES Marital Status: M Country Pharmacy RED RIVER PHARMACY (903) 792-1721 Primary Lang: 1 Race: C. Religion: Five Birthplace: Occupation: ARMY/TRUCK DRIVER U.S. CHEZER Military Srv. BILLING INFORMATION A/R Type: VA CMG: PE1 Resources: Medicare#: 551588461A Ancillary A/R Type: **MRB** Medicald#: Andllary Co-ins A/R Type: Hospital CHRISTUS ST. MICHAEL (903) 614-1000 Inst: Grμ Pat: ins 2: Part D Phan: Pal: Grp: Effective: RXBIN: PXPCN: Recurring Room Chg: Adv Bill Resident is Self Responsible Cardhaidar ID: Max Balance Reminder Group No: !ssuer: Apply Interest TrustFunct THIRD CONTACT SECOND CONTACT RESPONSIBLE PARTY ABBY BERTLAND FLORENCE WEST 433 CR 3114 **NEW BOSTON TX 75570** Relationship: Relationable: In-Lew Relationship: Wife Phone: (Day) Phone: (Dey) (318) 422-9509 Phone: (Day(903) 667-4536 (Eve) (Eve) (Evel (Cull) (Cell) (Çell) (903) 799-8842 ADDITIONAL INFORMATION

Note: This report includes only the selection criteria listed below. Status: Specific Resident

				B-illing.	B-illing Activity	_					ď	(1
:				Sunny Acres C	Acres Of DeKalb (SA)	(SA)					2/23/11 1:36 PM	11 136 PM
Dates of Service			Chry		A.						AF.	ARE400A
From	E E	CATA CATO		S.	F.	Private	Medicaid	# edizare	ð	CAL POSTING	A CONTRACTOR OF THE PERSON OF	
WEST, CH	WEST, CHARLES (982963)	£36	Type: VA	4 Admit 9/201-10								1
April, 2908	and C	Deta Last Adjusted: \$2059										
4,09/09	4/20/08	12 FP RHC	2 SEM-PRIVATE ROOM	e0.00.09	MRA			1				
			Confractual Adjustment	1	#S#			00,080,0		+10204	310201	
421709 4	422/08	2 FP RMC	2 SEMI-PRIVATE RODAL		MRA			2,784,96		10204	31(239	
			Contractual Adjustment	31.22.08 (Da	ARA			180.00		1884	<u> </u>	
423/08 4	42809	6 FP RWC	2 SEMI-PRIVATE ROOM	- 0.00 95 mil	48			454 .16		1000	310298	
			Costractual Adjustment	1 70 th 10 th	5 4			940.00		10201	330201	
4/29/08 4	43809	2 30 \$50	CI		5			1,580.96		10201	3102948	
			Contractual Adjustment	2 1 80 3D	. S				150.00	110211	310501	
4080e	4/2040B	•	250 PHARMACY		425				226.20	110211	310588	
			Contractual Adjustment		402			2,184,33		110204	310203	
4/09/06	HZM2H	-	300 LABS		MRA			(2.184.33)		310286	110204	
			Confractual Adjustment		484			120.95		110204	330205	
4/OS/UB	47Z7AB 4	465	440 SPEECH THERAPY	167.81	V P			(100.95)		3402398	11020#	
			Contractual Adjustment		S 403			776.56		110204	310207	
4,09/08	#YORKING	15	444 SPEECH THERAPY EVAL	***************************************	C :			(776.55)		310299	110204	
			Contractual Adament	5				25.05		110204	310204	
4410/08	* 80727	08*	CO OCCUPATIONAL THERADY		¥ 1			(25.05)		310290	110204	
			Confract and Artis at navant	150 Ja 1	WK.			801.60		110204	31000	
4/10/08	4/10/08	5	ASA CICIL MATTER THE ARM CAM		X			(801.90)		310299	11000	
			Contracting Artistations:	ויסי יפינ	Z :			75.15		110204	STORM	
4.54.00	4/28/08 S	240	ADECIMAL SECULARIA CCA	4 7 4 4	S			(75, 15)		310299	1001	
		ŀ	Confession Adjustment	577 /O:1	Z :			901.80		110204	34000	
41406	41409	45	ASA PAPERTA TAPABAN TABL		e i			(301.80)		310296	110204	
			Confracting Adjustment	MOV TOOL				75.15		110204	310208	
			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		S S S S S S S S S S S S S S S S S S S			(75.15)		310289	110204	
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			Contracted Adjustment	21 80 Dx					2,750.00	190213	310501	
5/05/08		•	4269700197001 PT-INITIAL EVAL						3,968.00	110211	310588	
			Fee Asturbush	- FE BOX: 9				80.50		110207	310603	
5/05/09		₹"	42097110 97110 PT-THERAPY EXERCISE	25 DSC 17	¥ 9			(13.42)	•	310699	110207	
			Fee Adjustment	TO SHOW THE	MAR			22,20	ď	110207	340803	
5/05/05		N	42097112 97112 PT-NEURO RE-EDUCAT	3=287 Am	WE WE		1	(537)	end.	310898	110207	
			For Actuation		ł		7		,	110207	310903	
50509		•	42097530 97530 PT-THER ACTIVITIES	O SECTION			C		****	310699	110201	
			Fee Adjustment	7.98 run			Ĺ		-	110207	310603	
EVENS		**	43097003 97008 OT-INITIAL EVAL	5000 \$14 Alla					***	310699	110207	
			Fee Adjustment	X 395 A4s			ik NS		-	110203	310805	••
SASSOR		•	43097110 97110 OT-THERAPY EXERCISE	3 20 Au			4/ C	-	43	310689	110207	
			Fee Adjusts and	200 BB Alm			io.		**	110207	310806	
5/06/09		•	4309711297112 OT-NEURO RE-EDUC	12.87 Alm		20	AS MAJ			310639	110207	
72			Fee Adjustment	7=7.39 /Un			S		. .	110207	310606	
\$1090F		-	43097530 97530 THERAPY ACTIVITY	40/86/CE	MRB		T.	ĝ (282	110201	-
						rs (100 miles			110207	310605	

Cash receipts are applied in this report based on the Date Received.

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Billing Activity

Sunny Acres Of DeKalb (SA)

25 OT 10 20 20 20 20 20 20 20 20 20 20 20 20 20	are Type Private Medicaid Medi		
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September Sept	MKB MRB MRB		310905
SOTION 1 422297109 THT REPLAY EXERCISE 22.25 Abn 88.87 Abn	MRB	3,10696	110207
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Pea Adjustment Pea Adjustment 20.50 An	acte.	310699	110207
Accessing any of Pricingly Recorded 22.58 Ann		102011	310603
17.25 An		310698	110207
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Cash receipts are applied in this reported based on the Date Received

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Billing Activity

Sunny Acres Of DeKalb (SA)

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From	Thru co.									
WEST, CH	WEST, CHARLES (992943)	₹	(Cont.) Type: Vid	Actinit: 9/20/10						
			Fee Adjustment	27,38 A.T.	758		(5.48)		310699	110207
5472/09	***		43697530 97530 THERAFY ACTIVITY	33.38.Ab	MRB		35.55		140207	310605
<u>.</u>			Fee Adjustment	27.58 /Jun	LATRE		(5.8 <u>0</u>		94069046	110207
575770	•		43097535 97595 OT ADL TRAINING	33.64 /Un	KR8		33,84		110207	310605
3			Fee Adjustment	28.03 /Un	EXEX.		(581)		31D699	110207
000000	£		42097110 97110 PT-THERAPY EXERCISE	32.20 /Un	MRB		Ø. ₩		110207	310603
			Fee Adhustment	26.53 Aln	MERB		(10.74)		310699	110207
d Ecta			42097112 97112 PT-NEURO RE-EDUCAT	32.87 Alm	MARB		32.87		110207	310603
	•		Fee Actuational	27.39 Jün	MRB		5.48		310689	110207
900			42097590 97530 PT-THER ACTIVITIES	33,58 /Un	MRB		67.16		110207	310803
			Fee Advisionant	27.98 Alm	MRB		411.20		310699	110207
outhi	•		43097110 97110 OT-THERAPY EXERCISE	32.20 Mn	MRB		94.40		110007	310806
5			Ten Attention	26.83 An	MAKE		(10.74)		310689	110207
SCHOOL STATE			43097112 97112 OT-NEURO RE-EDUC	3287 AM	E-PW		3287		110207	310606
			Fee Actustment	27.39 (Un	MARB		548		310698	110207
508V8	*		43097630 97530 THERAPY ACTIVITY	33 58 JWn			32.58		110207	310605
			Fee Adjustment	uf/ 96:72	MRB		5.60		310699	110207
FACARIA	-		43097535 97535 OT-AOL TRAINING	33.84 /Jin	MAG		33.64		110201	310604
			Fee Adjustment	28.03 film			(5.5.)		31D699	119207
807175	+		42087110 97110 PT-THERAPY EXERCISE	32.20 JBn			32.20		110207	310600
i			Fee Adjustment	26.49 Alm			[5.37]		310898	110207
57409	61		420971 12 97112 PT-NEURO RE-EDUCAT	32.87 Alm	BPA18		65.74		110207	319603
			Fee Adjuntment	27.39 tUn	BPM.		(10.96)		310998	110207
400 HS	2		42087530 87530 PT-THER ACTIVITIES	33.59 (Un	F-58		67.16		110207	310603
}			Fee Adjustment	27.98 JUn	M 78		(11.20)		310636	110207
5714009	N	,	ADDRI 10 971 10 OT-THERAPY EXERCISE	52.20 JUN	858 4		**		110207	310605
			Fee Adjustment	28.83 Jun	MISE		(40.74)		310898	110207
5114/09	-	_	40097112 97112 OT-NEURO RE-EDUC	32.87 Nn	A.7.6		32.87		110201	310605
			Fee Adjustment	77.39 An	MRB		15.48		310699	110207
60715	•	44.	4009753D 9753D THERAPY ACTIVITY	33.58 Nm	H7.8		33.58		10207	310605
			Fee Asjustment	27,98 Alm	#R9		(5.80)		310698	110207
5714/09	•	-	43097535 97535 OT-AEL TRAINING	33,54 (Un	E75		33.84		110207	310605
			Fee Adjusts and	28.03 (Un	8F38		5.63		310,699	110207
57500	-	_	42097110 97110 PT-THERAPY EXERCISE	32.20 Uh	MF18		32.26		110207	310603
			Fee Adustment	16.83 /Jm	MF18		[5.37]		310699	110207
5715.09	••	2	42097112 97112 PT-NEURO RE-EDUCAT	32.87 /Un	16.F.C		65.74		110207	310603
			Fee Actualment	13.30 PM	MR8		(10.96)		310699	110207
50/5005		2	42097530 97530 PT-THER ACTIMITIES	33.58 Abn	MFIB		67.16		110207	310603
			For Populations	27.52 . Up	167	***************************************	(00°11)		140699	110002
5/15/09	••	74	43097110 97110 OT-THERAPY EXERCISE	32.20 Alm	MARIB		64.40		110207	310605
			Fee Adjustment	26.83 AJIn	MRB		(10.74)		310599	110207
5V5/D9	-	_	43097112 97112 OT-NEURO RE-EDUC	3287 AM	MARKS		32.87		1,50207	310805
			Fee Adjustment	27.38 JUn	MEGB		(5,48)		310699	110207
571509		-	42087.530 97530 THERAPY ACTIVITY	33.58 (Un	A STATE		33.58		1,0207	310805
			Fee Adjustment	27.56 /Un	MRB		(5.60)		340699	110207
50,503		•	43097535 BT535 OT-ADL TRAINING	3364 Au			33.64		1 \$0207	310645
7 <i>1</i> 1			Fee Adjustment	28.03 Aun			(5.81)		310696	110207
5/18/09		***	4209711 0 97 110 PT-THERAPY EXERCISE	32.20 Jun			32.20		110207	310503

Cash receipts are applied in this report based on the Date Received

Billing Activity
Sunny Acres Of DeKalb (SA)

Formal Phys. Chry				Sunny Acres Of DeKalb (SA)	Carvity DeKalb (SA)					Page 223/11	Page 4 of 19
Figure F	ates of Service		İ	*	\$#				4 KJ	A	R6400A
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1 43087559 9750 THE FARMY ACTIVITY 35.58 Jun 1 43087559 9750 THE FARMY ACTIVITY 35.58 Jun 1 43087759 9750 THE FARMY EXERCISE 22.00 Jun 1 42087199 9750 THE FARMY EXERCISE 22.00 Jun 1 4208719 9710 PTT-INERVATE EXERCISE 22.00 Jun 1 4208719 9710 PTT-INERVATE EXERCISE 22.00 Jun 1 4208719 9710 PTT-INERVATE EXERCISE 22.00 Jun 1 4208719 9712 OTT-INERVATE EXERCISE 22.00 Jun 1 4208759 9750 97140 1 TAAINHWG 22.00 Jun 1 4208759 9750 97140 1 TAAINHWG 22.00 Jun 1 4208759 9750 97140 1 TAAINHWG 22.00 Jun 1 4208759 9750 97140 1 THERAPY EXERCISE 22.00 Jun 1 4208779 9750 97140 1 THERAPY EXERCISE 22.00 Jun 1 4208759 9750 97140 1 THERAPY EXERCISE 22.00 Jun 1 4208779 9750 97140 1 THERAPY EXERCISE 22.00 Jun 1 4208779 9750 9750 9750 9750 9750 9750 9750 9	303	-	43097112 ST112 OT-NEURO RE-EDUC		fR8		(10.74)	4. 4.		110207	
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43097112 OT-NEURO RE-EDUC 32.67 Juh	200	7	ASSISTED OF THERAPY EXERCISE		RB		100 A	ře	2000	10201	
43097739 9739 THE PAPENDO RE-EDUC 32.87 Alb	95		For Adjustment		ra ra		(10 Zef.	. 4	1000	316905	
1 43097530 PFSAQ TATATTY AS THE ALL 1 43097530 PFSAQ TATATTY AS THE ALL 1 43097530 PFSAG OT AD L TRAINING 1 43097530 PFSAG OT AD L TRAINING 2 43097110 ST 10 PT -THERAPY EXERCISE 2 42097110 ST 10 ST 10 ST -THERAPY EXERCISE 3 2 20 (Jh 7 43097530 ST 30 ST 30 THERAPY ACTIVITY 1 43097530 ST 30 ST 30 THERAPY ACTIVITY 2 42097130 ST 30 ST 30 THERAPY ACTIVITY 2 42097130 ST 30 ST 30 THERAPY ACTIVITY 3 2 30 (Jh 7 43097530 ST 30 ST 30 THERAPY ACTIVITY 2 42097130 ST 30 ST 30 THERAPY EXERCISE 3 2 20 (Jh 7 42097130 ST 30 ST 30 THERAPY EXERCISE 3 2 20 (Jh 7 42097130 ST 30 ST 30 THERAPY EXERCISE 3 2 20 (Jh 7 42097130 ST 30 ST 30 THERAPY EXERCISE 3 2 20 (Jh 7 5 6 ALU 7 5 6 ALU 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	504	_	ASSESSION OF AN ACTUAL CONTRACTOR OF A CONTRAC		3		28	F &-	1	110207	
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Fee Adustrient 28.43 An	505	**	42087110 ST110 PT-THERAPY EXERCISE				\$8.5)	•) 1058	110207	
2 42287712 97112 PT-NELIKO RE-EDUCAT 32.87 Ah Free Adjustment 27.39 IUn 4308713 8710 OT-THERAPY ACTIVITY 28.89 IUn 27.39 IUn 43087538 87530 THERAPY ACTIVITY 33.80 Un 27.39 IUn 43087558 87535 OT-ADL TRAINING 27.39 IUn 27.39 IUn 43087558 87535 OT-ADL TRAINING 27.39 IUn 27.30 IUn 27.39 IUn 27.30 IU			Fee Actustrient		e e		22.25	ė.	1020 TE	310808	
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Cash receipts are applied in this report based on the Date Received

Page 5 of 19 2/23/11 1:36 PM AR6400A

Billing Activity
Sunny Acres Of DeKalb (SA)

Darks of Service Denys CMG CMG WEST, CHARLES (392963) 2 627109 2 527109 2 512109 2 512109 2 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 2 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 512109 1 <		Admit 9/20/10 Admit 9/20/10 20.39 Jun MRB 20.59 Jun MRB 20.63 Jun MRB 20.63 Jun MRB 20.63 Jun MRB 20.63 Jun MRB 30.54 Jun MRB 30.55 Jun MRB 20.50 Jun MRB		(10.89) (10.89) (11.20) (22.20) (22.20) (23.37) (5.37) (5.37) (5.37) (5.37) (5.37) (5.37) (5.37) (5.37) (5.37) (5.37) (6.37) (6.37) (6.37) (6.37) (6.37)		GT. Poefing GT. Poefing GT. Poefing 110207 310838 110207 310838 110207 310838 110207 310838 110207 310838 110207 310838 110207 310838 110207 310838	Crack 110207 310203 310203 310207
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	Fee Adjustment 420971-10-971-10-PT-JH-ERAPY EXERCISE Fee Adjustment 420975-30-975-30-971-TH-ER ACTIVITIES Fee Adjustment 430971-10-97-110-07-114-FRAPY EXERCISE Fee Adjustment		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	(1569 3220 (1537) 3358 (1569) 3220 (1337) 3220 (1337) (1049)	<u>ਛੋੜੇ ਜੋ ਜ ਧ ਜ ਧ ਜ</u> ਦ		1207 2007 2007 2007 7007 1207 1207 803 803
	42097110 97110 PT-JHERAPY EXERCISE Five Adjustment 42097530 97530 PT-THER ACTIVITIES Five Adjustment 43097110 97110 07-THERAPY EXERCISE Five Adjustment			32.20 (6.37) 33.58 (6.68) 32.20 (6.37) 32.20 (5.37) (10.98)	<u> </u>		9903 2007 2007 7507 7507 1207 1207 9603
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	42097530 97530 PT-THER ACTIVITIES	STAN OF STAN	Q I	22.58	11		330603
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	42087542 97542 PT-WHEELCHAIR TRAIN		9	83.28	=		310603
	Fee Adjustment		92	(5.33)	ল		110207
	43097110 97110 UTTHERAPY EXERCISE		MRB	54.42	##		310805
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	43087 112 97132 OT-NEURO RE-EDUC		MAGE	32.87	₩.		31 0606
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	Fee Adjustment	27.98 (Us N	MARB	(5.80)	45		110207
	43097535 97535 OT-ADL TRAINING	33.64/Un M	MRB	25.58	#		310805
	Fee Adjustment	28.03 JUn M	KARB	(5.67)	ė		110207
	42087110 ST110 PT-THERAPY EXERCISE		MRB	32.20	* -		310903
	Fee Adjustment	25.83 Aun M	MR.B	(5.37)	Ċ	310699	110207
	42097830 97530 PT-THER ACTIVITIES	32,58 Alm M	MRB	33.58	ų,		310603
	Fee Adjustment	27.98 /Jm M	MRB	(5:60)	679		110207
	42097110 97110 PT-THERAPY EXERCISE	_	MRB	64.40	Ť		310603
	Fee Acjustment		MRB	(10.74)	2		110207
SZIXZ	42097112 97112 PT-NEURO RE-EDUCAT	_	MRB	85.74	-		2000
5/27/04	Fee Adjustment	_	MAB	(10.96)	÷		110207
	42097630 97630 PT-THER ACTIVITIES	_	MAR	33.58	÷		310603
	Fee Actuation	-	44.00	(5.80)	•		110207
5/27/09 2	43097110 97110 OT-THERAPY EXERCISE	•	LEPAS.	64 :40	-		310905
	Fee Adjustment		WRB	(10.74)	*		110207
527109	43097112 87112 OT-NEURO RE-EDUC		MRS	78,52	****		310885
	Fee Adjustment	_	WRS	(5.48)	**		1102011
5/27/09	43097530 97530 THERAPY ACTIVITY	33.58.7Un	MRB	33,58	,	110207	310865

Cash receipts are applied in this report based on the Date Received.

Page 6 o-f 19 2/23/11 1:36 F=NM AR64 0m0A

Billing Actualists

Sunny Acres Of De Kalb (SA)

Carter A Carlot				•		1	
From Thru	CAN'THE CHES	(G Oil Description	Parte	1 year	Medical Medicare		
WEST, CHARLES (992963)	(992963)	(Cont.) Type: VA	Admit: 9/20/10				
				MRB	(5.50)	310699	110207
5727109	, -	43097535 97535 OT-ADL TRAINING	33.54 Pb	MR8=	33.64	110207	310805
		Foe Acquebrant	28.03 //15	:] ##25%	(5.61)	319699	110207
5728109	***	42097/10 97110 PT-THERAPY EXERCISE	22.20 (Un	347.00mm	22.25	1102011	310503
		Fee Adjustment	76.93 /Un	MR Billion	15.37	3,0699	110207
S.D.B.OTA	~	A2097112 97112 PT-NEURO RE-EDUCAT	32.67 Nn	MR	95.74	1102011	31,0503
		Fee Actualment	27.39 (Jan	A.R.	(10.98)	310098	110207
5.79.00	-	42097530 97530 PT. THER ACTIVITIES	33.58 (Un	W.C. Tables	33.58	110201	310603
		Fee Actuatorent	27.98 JU	AR	583	310698	110207
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anozu	-	Can Library			14.9%	310699	110207
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		Fee Adjustment	27.98 AJN	M.H.E.M.	(5.60)	310689	
5/28/09	- -	43097530 97530 THERAPY ACTIVITY	33.58 /Lm	AR Market Street	32.58	110201	
		Fee Adjustment	27.98 /Un	MARIE	(5.80)	310696	
5/28/06	-	43097535 97535 OT-AOL TRAINING	33.64 AL	MR MR	33.64	14 02 0 F	
		Fee Adjustment	28.03 Aln	, T. C.	45.89	310889	
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		Fee Adjustment	28.03 Na	MR THE STATE OF TH	(5.64)	310899	110207
50809	8	42087110 97110 PT-THERAPY EXERCISE	32.20 /Un		64.46	110207	E0901E
		Fee Adiustment	28.83 JUn		(48.74)	310699	110207
SUPPLIE	۲۷	42097112 97112 PT-HEURO RE-EDUCAT	32.87 NJn	BILLI HE	47.88	110207	310603
		Fine Adjustment	Z7.39 RU		110.963	310699	110207
522909	•	42097580 97590 PT-THER ACTIVITIES	-E	SA	33.58	7102011	310903
		Fire Actual solution	23 98 (Lh		(08.2)	310689	110207
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			746 (C) (B)	: 5			1 310598
Sat of a	***	42087110 97110 PT-THEXAPY EXERCISE	32.22.41		32.20	110201	310003
		Fee Advantani	28.83 P. 18.83	8	(5.3)	310889	110207
SMUG	^	A2337152 97112 PT-NELRO RE-EDUCAT	32.87 Ah	9	17.28	110207	310003
	ı	Fee Adjustment	27.39 (U)		110.98	310696	110207
GUNTA	-	ASSISTANTES PERSONELLINER ACTIVITIES	45.55. 45.55.) ### ###	1,10201	330603
	•	Case Artistment	27 98 Aio			3:0838	
200	•	Hadrian Control (1987)	100 000 100		56 %	140307	
en an a	-	ACCOUNTS OF THE PROPERTY OF TH	See Also		* FT 8	31088	
•	í	TOTAL STRUCTURE TO	10.0000		Proj.		
CHINA	•						

Cash receipts are applied in this report based on the Date Received.

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Billing Activity Sunny Acres Of DeKalb (SA)

	1			T T				رسمور
5	Design Carlo		oper C	Turn Driveta	Wednest Medizon	See Other	Š	į
From Thru	2	ve svermiseum	anun i		١			
WEST, CHARLES (992863)	(392963)	(Cont.) Type: 17.34	Admit: 9/20/10					
		For Admijustment	28.83 Ah	MARB		[10.74]	310689	110207
601109	*^	4309712 9712 - OT NELHO RE-EDUC	32.87 Alth	WIE		32.87	110207	310605
		Fee Administration	27.39 AUR	MRE		5 . 5	310699	110207
50/103	_	43097530 97530 THERAPY ACTIVITY	33,58 fun	MRS		33.59	1112207	340935
		Fire Activishment	27.98 Alm	WRB		(5.60)	310689	110207
80/10/8	سو	43097535 97535 OT ADL TRAINING	33.54 AM	MRB		33.64	1,10,207	310805
		Fee Amaginstraent	28.63 JUn	MARIB		(5.51)	310698	1702011
6002009	-	42097002 97002 PT-RE-EVALUATION	42.87 /Un	ARB		42.87	110207	310603
		Fee Actuational	35.72 An	MRB		(7.15)	310699	110207
80208		42097110 97110 PT-THERAPY EXERCISE	32.20 Nn	MRB		32.20	110207	310603
!		For Amendjustment.	785.832 f.Un	MRB		(5.37)	310899	110207
902309	N	42097112 97112 PT-NEURO RE-EDUCAT	32.87 JUn	MRB		65.74	110207	310603
		Fee Amegusiment	27.39 JJh	MRB		(10.36)	310699	110207
60203	-	42097530 97530m PT-THER ACTIVITIES	33.58 Min	MRB		33,58	110207	310603
		Fee A. djustment	27.98 rUn	SELECTION OF THE PERSON OF THE		(5.60)	310698	119207
8/02/08	<u></u>	42097542 97542** PT-WHEELCHARR TRAIN	31 98 Nh	MRB		31.99	102011	310603
		Fee ACjustment	26.66 /Un	MARB		(5.33)	310699	110207
602409	23	43097110 971 1000 OT-THERAPY EXERCISE	32.20 /Un	EMAGE.		64.40	110207	310805
		Fige Astrustment	28.83 Jun	MFRB		(10.74)	310690	510207
6/02/09	-	43097112 971 1200 OT-NEURO RE-EIDAG	32.87 AM	MES		32.87	110207	310605
		Fee Adestront	Z7.38 JUhn	MERCO		15.48)	310696	110207
602/09	•	43097530 9753CCD THERAPY ACTIVITY	33.58 JUn	MRB		33,58	110201	310606
		Fac Amdjustment	27.98 JUN	MAKB.		(15.00)	310699	110207
6472708	-	43097535 9753EE OT-ACK, TRAINING	33.84 AJB	MRB.		33.54	110201	310605
		Foe perduatinent	28.03 Ah	MRB		(5.6)	310699	110207
BOROUS	•	AZISTIO 971 (C.) PT-THERAPY EXERCISE	32.20 Jun	MARS		32.20	110207	310603
		Fee Particular and	26.83 JUn	E-55		(4.37)	34 0699	1102011
6403408	2	AZ09712 9711772 PT-NEURO RE-EDUCAT	3287 (Up	JAPE		85.74	110207	310503
		Fee Findjustment	27.39 AU:	MARS.		(10.96)	310688	110207
SYCOADS	~	42097500 9753MID PT-THER ACTIVITIES	33.58 (2)	MRS		33.58	110207	310603
		Fee Factorinen	27.98 Us	N.N.O.		(5 00)	310699	1102011
90309	, -	42097542 9754772 PT-WHEEL CHAIR TRAIN	31.99 Ask	MRB		31.99	1102017	310603
		Fee Perujurtment	28.86 Ju	MRB		(5.33)	310999	110207
8403/89	8	43097110 9711 - 0 OT-THERAPY EXERCISE	32.20 JJh			£.€	110207	310605
		Fee mendijustment	26.83 Jun	MPG		(10.74)	310689	110207
6403409	₩.	430971129711 2 CT-NEURO RE-EDUC	32 67 Alh	MRB		32.87	114207	310605
		For periodical interd	27.38 fUn	MRB		(5.48)	310809	110207
8002003	-	43097530 9755 0 THERAPY ACTIVITY	33.58 Rh	MRB		33.58	110207	310805
		Feerendistribut	27.08.4b	HER	VIII	(\$60)	310889	110207
BUSING	-	43097534 9753==5 OT-ADL FRANING	33 54 A.h	MAR		33.64	110207	310805
		Fee meddyustnant	28.03 A.M	が出来		(5.64)	310699	110207
60409	•	42097110 9711 OPT-THERAPY EXERCISE	32.20 JUh			32.20	1102011	310603
		Feet	28.83 AJn	MRE		(5.37)	310889	110207
5:04(C9	7	42097112 9711ms 2 PT-NEURO RE-EDUCAT	32.67 JUn	MRB		65.74	110207	310503
		∓esAdjustment	27.39 (Un	MRB		(10.96)	310599	110201
60403	-	42097530 975200 PT-THER ACTIVITIES	33.88 (Cr	MRB		33.38	110207	310503
		Fee Adjustment	27.98 run	MRB		(29.9)	310698	110207

Cash receipts are applied in this report based on thme Date Received.

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Billing Activity

Sunny Acres Of DeKalb (SA)

	C. 1. C. C.						55	
From Inte		CIII Describation	1	ANTIA JA I	1			
WEST, CHARLES (992963)	(992963)	(Cont.) Type: VA	Admit: 9/20/10					
•			-52 SS	MAB	(5.33)	316	310699	11 0207
Chance	-	43097CTT304 97004 DT-RE-EVALUATION	54.67 AJn M	AFRE	54.67	118	110207	31 0805
		Fee Adustriant	45.56 Jun M	MPS	(9.11)	346		11 0207
Sinatio	-	43097 110 971 to OT THERAPY EXERCISE	32.20 JUn M	MRB	32,20	111	110207	34: ::0806
				MRB	(15.37)	316	310899	1754 + 10207
expense.	~	ASOBT 112 97112 OT-NEURO RE-EDUC	32.87 (Un	488	66.74	#	110207	31M.J. 10805
		Flee Adjustment	27.39 (Lh M	959	110.96}	H	310699	1.000
POTATION	-	43097 530 B7530 THERAPY ACTIVITY	33,58 /Un M	母华	33.58	11	1102011	3.
			27.59 Ah M	MRB	(5.60)	31.	310699	1
SOMOS	-	43097 SSS BTESS OT ADL TRAINING	33.64 run M	MRB	33.64	11	110207	3
			28.03 /Un N	WRB	(5.81)	£	310699	11
80509	•	42097 110 97 110 PT-THERAPY EXERCISE	32,20 /Un 14	LIRB	32.20	#	110207	335000
		Fee Adjustment	26.83 fth M	MRB	(537)	Z.	310869	1 3 207
6/05/09	7	42087*****112 BT112 PT-NEURO RE-EDUCAT	32.87 A.h W	MRB	66.74	13.7	110207	377
		Fee Adjustment	27.39 Ah	MRB	(10.96)	31	310699	1 ************************************
BUSUS		42087 530 97530 PT.THER ACTIVITIES		URB	33.58	1	110207	3-1611 10503
		Fee Adjustment	JZ7.99 AUs ⊌	MRB	(5.60)		310659	1-2-1
60509	.	42097************************************		MRB	31.99	Ī	110207	3-1111111111111111111111111111111111111
		Fee Adjustment	25.06.03	MRB	(5.33)	Ŕ	310699	1.
80508	~	4308/mmm/110 97110 OT-THERAPY EXERGISE		WRB	54.45		110207	3-
		Fee Adlustment		WRB	(10.74)		010699	1
EADSADS	-	43097 112 97112 OT-NEURO RE-EDUC	•	MRB	32.87		110207	3.
		Fae Adjustment		MRB	(5.49)		310699	130000
90000	-	4309	33.58 Ah L	MRB	33.58	#	110207	31
		Fee Adjustment		MRB	(5.80)	£	310680	11
SASSION	•	4309 4356 97536 OT ADL TRAINING		MRB	2012		116207	3-1000
		Fee Adjustment		NATE	(56f)		318699	120
60809	-	4209110 97110 PT-THERAPY EXERCISE		MARIE	32.20		110207	3-14-14-16-03
		Foe Adjustment		MRB	(5.37)		310699	1
SUMOS	8	4208 7112 97112 PT-NEURO RE-ECNICAT		WRB	65.74		110207	3-51-11-10-003
		Fee Adjustment		WRB	(10.94)		310699	1.33
60909		4209 7530 97530 PT-THER ACTIVITIES		MRB	33.58		110207	3 ********
		Fee Adjustment		ARB	(3,60)		310539	1-11-10207
60808		4209 7542 97542 PT-WHEELCHAIR TRAIN		MRB	96 E		110207	3-44-1603
		Fee Adjustment	_	ARB	(5,33)		310699	/07/18
Expiros	ત્ય	4309 77-10 87110 OT-THERAPY EXERCISE	32.20 ///				110207	Chora de la companya
	,				(#V.D.C.)		449707	
engas	-	ASCR 7312 B7112 UT-NEUMOURE-EDIDO			26.85 26.85		1960	П
coamo	•	ANG 35an 676an THERAPY ACTIVITY		WRB	33.58		110207	3.44 0805
avados	-	Fee Adjustment		MRB	15.803		310649	1.00007
CONSUMO.	•	43097536 97535 01-ADI: TRAINING	_	MRB	33.64		110207	31 (0585
	•	Fee Adjustment	_	MRB	\$9°S)		310699	1.1
emetre	T	4200 THE STILL PT. THERAPY EXERCISE	32.20 /Un	MRB	32.20		110207	3-
				MRB	(5.37)		310699	1.2020
ensors	7	4200mmy1112 97112 PT-NEURO RE-EDUCAT	32.97 /Un	MRB	85.74	£	110207	37444 0503
		Fee Adjustment	27.39 /Un	MAND	(10.86)		310689	1-20-00-0-1

Cash receipts are applied in this report bacessed on the Date Received.

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BillingActivity

Sunny Acres Of DeKaib (SA)

Figure Tyra G/F 1 pt Care Cont. Tyra G/F 1 pt Care Cont. Tyra G/F 1 pt Care Cont. Tyra G/F 1 pt Care Tyra G/F 1 pt Care G/F 2 pt Care Tyra G/F 2 pt Care Tyra G/F 2 pt Care Tyra Tyra		Q C	# FE	Private Medicals		Wedown 0	Officer L	Dethi	Credit
CCMARLES (992963) Fee Adjustment 1		nare		1					
1	Type: VA Admit:	Admit: 9/20/10							
	:	27.98 /Un	MRB			5.60	m	3,10699	110207
	R TRAM	31.99 Alm	MRB			31.90	-	110207	310603
		28.68 JUn	MRS			533	Ö	3-10699	110207
	ERCISE	32.20 Ah	MRS			64.40	-	110201	310606
		26.83 fun	MRS			(10.74)	eo	310699	1 10207
	Dire	32.67 /Un	MRB			32.87	+	110207	340605
		27.39 JUn	MFB			(5.48)	m	310699	110201
	A IF	33.58 JUn	##RB			33.58	•	110207	310606
		27.98 /Jin	WF.8			5.60)	13	310699	10201
	ş	33.84 /Um	MEN.			3364	**	110201	310605
		28.03 AJm	MRB			(5.6%	63	310589	110207
	KERCISE	32.20 Ab	MRB			32.28	*	110207	SACHO
		26.83 Aln	MRB			(637)	n	310699	110207
	EDUCAT	32.87 (Um	MRB			65.74	*	110207	310803
		27.39 /(3)	MRB			(96)	6.3	310699	110207
	11163	33,58 (1)4	₩.KB			33.58	_	110207	310601
		27.98 (Un	NAR.			(5.60)	"	310699	110207
	RTRAIN	31.98 /Un	MRB			31.99	-	110207	310603
		26.06 JJn	#FRB			(5.33)	63	310588	110003
	XEBCISE	32.20 JUn	NF CB			5 4.	*-	110207	340605
		26.83 /Un	#(F)8			110.749	(7)	310599	140207
	EDMIC	32.87 JUI	WRB			3287	-	110207	350806
0 0 0 0 0 0 0 0		27.34 tUs	MHB			(5.48)	67	310898	130203
	AILA	33.56 AJR	14 RG			33.58	-	110207	31090%
- 0 0 0 N +		27.98 A.h	M RG			(260)	67	310689	110207
	¥	33.64 /Ln	MRS			33.54	***	\$10207	310606
2 2 2 2 - 4		28.03 JUn	MRB			(5.61)	E-1	34 0539	110207
0 0 N -	XEACISE	32.20 AJII	M-RB			54.40	•	11 0207	310900
0 0 0 +	-	26.83 Ns	知是			(10.74)	63	310699	110207
O O	EDUCAT	32.87 Mn	MFRB			65.74	•	110207	310900
		27,39 (Un				(10.96)	***	310899	1160207
0 T 0	MITIES	33.58 J.h	MFR			33.58		110207	310903
- 0 0 -		27,98 JUn	SEASO			(5.60)	•	310899	110207
. W	EXERCISE	32.20 JUs	MAG			32.20	•	110207	310905
a a -		26.83 JUn	MRB			(4.37)	.,	310688	110207
	-EDIC	32.87 JUn	200			65.74	•	110207	310905
N -		27.39 RJm	MHB	/	/	(10.96)		310689	110307
~ -	TW.	33.58 Æ	MARIB				-	110207	310905
N *		27.98 /Un	MAB	7/	C			310899	110207
- N -	250	30.64 (Un	WAR	2 2 2	Ä	33.64		110207	310606
- N *		28.03 (Un	WIND	E	A.		179	310899	110201
N *	CKERCISE	32.20 /Uh	MAB	B	rz Is	32.20	•	110207	310603
N *		28.83 (Un	MRB	2	ini C	(5.37)	**	31,0899	110207
•	EDUCAT	32.87 Un	MRB	5 /[0, 0,		_	110207	310903
•		27.38 Rb	MRB	21	is Mi	(10.86)	•••	310538	110207
	VITES	33,58 /Un	MRB		S	33.58	•	110207	310803
		27.98 /Un	MRB		T.	(5.63)		310699	110207
6/12/09 1 ACCOMPANY STORY PT-WHEEL CHAIR TROAM	AIR TRAIN	31.96-/Un	MRB	m ; E			•	111,0207	310903
				JA	E Om				

Cash receipts are applied in this report based on the Date Received.

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Billing Activity
Sunny Acres Of DeKalb (SA)

Dates of Service Days CQVTyp CQ WEST, CHARLES (392343) 2 2 4<	9	ype, V—A		ARR Private Private MRB MRB	Medeard	Medicare (5.33)	Cather Debit 310589	GAL Positing Creating 110207
CHARLES (992843) 2 2 2 2 2 2 2 2 2 2 2 2 2		A .:	88 JUN 88			60		110207
WEST, CHARLES (992963) 641208 2 641209 1 641209 1 641509 2 641508 2 641508 1 641608 2 641609 2 641609 2 641609 2 641609 2 641609 2 641609 2	* * * * * * * * * * * * * * * * * * * *	A	Admit: 920/10 28:68: Non 30:20 Non 32:20 Non 32:88: Non 32:88: Non 33:58: Non 33:54: Non	MRB MRB MRCB		(5,33) (5,48)	310689	110207
61208 2 61209 1 61209 1 61209 1 61509 1 61509 1 61509 2 61509 1 61509 2 61509 1 61509 2 61509 1 61509 1 61509 1	* * * * * * * * * * * * * * * * * * * *	Fee Adjustment 43097110 ST110 OT-FHERAPY EXERCISE Fee Adjustment 43097112 97112 OT-HELIRO RE-EDUC Fee Adjustment 43097539 97530 97530 THAINING Fee Adjustment 43097539 97535 OT-ADL TRAINING Fee Adjustment 4209712 9712 PT-HELIRO RE-EDUCAT Fee Adjustment 4209712 9712 PT-HELIRO RE-EDUCAT Fee Adjustment 42097539 97530 PT-THERAPY EXERCISE Fee Adjustment 4209710 97110 971110 07-THERAPY EXERCISE Fee Adjustment	28.88 EN 29.88 EN 29.	MRB MRB MRB		(5,33) (5,33)	310699	110207
	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	43097110 07-THEAMY EXERCISE Fee Adjustment 4309712 07-THEURO RE-EDUC Fee Adjustment 43097539 97:330 THERARY ACTIVITY Fee Adjustment 43097539 97:330 THERARY EXERCISE Fee Adjustment 42097110 97:110 PT -THERARY EXERCISE Fee Adjustment Fee Adjustment 4209712 97:12 PT-HERARY EXERCISE Fee Adjustment	20.20 An 28.83 Ch 29.39 Ch 29.38 Ch 27.38 An 27.38 An 28.53 An 28.53 An 28.53 An 28.53 An	MRB MRB MRB		64.40	119207	24 05/05
	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Fee Adjustment 43097 112 97112 CT-AEURO RE-EDUC Fee Adjustment 43087 539 97 539 THERAPY ACTIVITY Fee Adjustment 43097 533 97335 GT-ADL TRAINING Fee Adjustment 42097 110 97 110 PT -THERAPY EXERCISE Fee Adjustment	28.83 (th 29.96 (th 29.96 (th 29.96 (th 29.96 (th 29.96 (th 29.96 (th 29.86 (th 29.26	MRB			40000	OJ WIND
		43097 1:2 97112 CT-NEURO RE-EDUC Fee Adjustment 43087539 97:538 THERNAY ACTIVITY Fee Adjustment 43097535 97:35 GT-ADL TRAINING Fee Adjustment 4209710 97:10 PT-JTHERAPY EXERCISE Fee Adjustment 4209712 PT-NEURO RE-EDUCAT Fee Adjustment 42097530 97:53 PT-THERACTIVATIES Fee Adjustment Fee Adjustment Fee Adjustment Fee Adjustment Fee Adjustment	32.86 (Us 27.86 PL 27.86 PL 27.86 PL 27.86 PL 28.56 PL 28	LARE		110.74)	310693	110207
	• • • • • • • • • • • • • • • • • • • •	Fee Adjushment 45087530 97538 THERNAY ACTINITY Fee Adjushment 43097535 97335 GT-ADI. TRAINING Fee Adjushment 42087110 97110 PT-THERADY EXERCISE Fee Adjushment 4208712 9712 PT-NEURO RE-EDUCAT Fee Adjushment 42097530 97535 PT-THERADTRATIES Fee Adjushment Fee Adjushment Fee Adjushment Fee Adjushment Fee Adjushment	23.38.25 23.38.25 23.38.25 23.53.25 23.53.25 23.32.25 23.25	1111		22.117	110207	310665
		43097539 97539 THERARY ACTIVITY Fee Adjustment 43097535 97535 0T-ADL TRAINING Fee Adjustment 4209710 9710 PT-THERARY EXERCISE Fee Adjustment 42097112 9714E PT-THERACTIVITIES Fee Adjustment 42097539 97535 9717HERACTIVITIES Fee Adjustment Fee Adjustment Fee Adjustment Fee Adjustment Fee Adjustment	33.58 Ru 27.38 Ru 33.54 Ru 28.53 Ru 22.50 Ru 28.33 Ru 28.33 Ru	MRB		(5.48)	310699	110207
	•	Fee Adjustment 43097535 97535 OT-ADI. TRAINING Fee Adjustment 42097110 97110 PT -THERAPY EXERCISE Fee Adjustment 42097112 PT-NELNO RE-EDUCAT Fee Adjustment 42097539 97530 PT-THERAPY EXERCISE Fee Adjustment 43097110 97110 97111	27.98 Au 33.54 Na 28.55 Na 32.20 Au 26.33 Au	MRB		33,58	1,0201	310606
		43097535 97535 OT-ADI. TRAININGS Fee Adjustment 42097110 97 110 PT -THERAPY EXERCISE Fee Adjustment 42097112 97 112 PT-NEURO RE-EDUCAT Fee Adjustment 42097539 97530 PT-THERAPY EXERCISE Fee Adjustment 43097110 97118 071-THERAPY EXERCISE Fee Adjustment	33.54 (Un 28.03 Ale 32.20 Aln 25.83 Aln	MRB		(5.90)	310699	110207
		Fee Adjustment 42097110 97110 PT-1THERAPY EXERCISE Fee Adjustment 42097112 97122 PT-NELRO RE-EDUCAT Fee Adjustment 42097539 97536 PT-1THER ACTIVATIES Fee Adjustment 43097110 97110 971110 971110 971110 971110 971110 97111	28.03 Alm 32.20 Alm 25.83 Alm	MRB		33.64	119207	110605
		42097110 97 110 PT -THERAPY EXERCISE Fee Adjustment 4209712 97 112 PT-NEURO RE-EDUCAT Fee Adjustment 42097830 97536 PT-1THER ACTIVATIES Fee Adjustment 43097110 97110 07 -THERAPY EXERCISE Fee Adjustment Fee Adjustment	32.20 An 25.83 An	MRB		(5.61)	310689	110207
	• •	Fee Adjustment 42097/12 97/12 PT-MEURO RE-EDUCAT Fee Adjustment 42097539 97536 PT-THER ACTIVATIES Fee Adjustment 43097/10 97/16 07/14FRAPY EXERCISE Fee Adjustment	25.83 Alin	MRB		32.20	110207	310603
1	• • •	42097112 97112 PT-NEURO RE-EDUCAT Fee Adjustrant 42097539 97536 PT-TI-JER ACTIVATIES Fee Adjustrant 43097110 97116 07.1HERAPY EXERCISE Fee Adjustrant		MR8		(5.37)	310698	1,102071
1		Fee Adjustrant 42097530 97530 PT-117ER ACTIVATIES Fee Adjustrant 43097110 97110 07.1 HERAPY EXERCISE Fee Adjustrant	32.87 Alts	MRB		65.74	1102011	310603
1	•	42097530 97536 PT-THER ACTIVATIES Fob Adjustankt 43097110 97118 07.1 HERAPY EXERCISE Fob Adjustmost	27.39 Abn	MER8		(10.96)	310699	118207
1	·	Feb Adjustnert 43097110 97118 07.1.HERAPY EXERCISE Fee Adjustnest	33.58 An	MRB		67.16	TOZCH	310803
1	•	43097110 97118 07-THERAPY EXERCISE Fee Adjustment	27.98 JUn	MRB		(11.20)	310899	110207
1		Fee Adjustraent	32.20 Alin	MRS		94.40	110207	310605
†			26.83 /l/h	MRB		(10.7-€)	310699	110207
t		43097112 97112 OT MEURO RE-EDUC	32.87 /Jn	MRB		32.87	10201	310605
†		Fine Adjustment	27.39 /Un	MRR		(5.48)	310659	110267
1		43097538 97530 THERAPY ACTIVITY	33.59 fbn	MRB		33.58	#10207	310605
1		Foe Adjustment	77.96 /Un	MRB		(5. 8 t)	310839	110207
t		43097535 97535 OT ADL TRAIMING	33,64 /lln	MRR		33.64 24.04	#102DF	310606
		Fee Adjustment	28.03 //h	MRB		(5.81)	310699	710207
		42097110 97110 PT-THERAPY EXERCISE	32.20 An	MARIE .		4. 04.	10201	310503
1		Fee Adjustment	26.83 An			(10.74)	310638	110207
1		42007512 87112 FT-NEURO RE-EDUCAT	32.87 /Un	MRB		86.74	1000i	310603
		For Aqusment	77.38 /Un	M		(10.96)	310698	110207
1		42097530 87530 PT-THER ACTIVITIES	23.58 (St.			93. 33.	30201L	200003
		Fee Adjustment	77.98 /Un			(3:80)	100000	119604
		43097110 97110 07-17ERAPY EXERCISE	32.20 Ala			54.40	TRUZOL	31000
		Fee Adjustment	26.83 (Un			(10.74)	2300E	110207
8J18009 1		A3097112 97112 OT-NEURO RE-EIX.X	32.87 Aun			3287	110207	313660
		Yes Adultinon	unu ser az	וומעם		(a+r)	100000	10001
6/16/09		43137530 94530 THERAPT ACTIVITY	12.50 (UI	#K5		- 20 D	089010	
•		CM(Mindly Ray In serious seasoner	13.64 834			1985	1102011	
o lower		Te Advition	2803 //4	MR8		(5.61)	310699	
841709		42097110 971 ID PT-THERAPY EXERCISE	32.20 fun	MAR B		64.40	110201	
		East definitions	28.83 Au	MAS		10.74	310699	110207
577.09		42097112 97112 PT-NEURO RE-EDAKCAT	32.67 JUn	MRB		65.74	10201	310803
		Fise Adustinant	27.38 JUn	#R8		(10.96)	310699	110207
1 100		42097630 97530 PT-THER ACTIVITIES		MRR		33.58	1102011	\$10803
		Fee Adjustment	27.58 Au	MRB		(5.88)	310669	110207
6417109		43097110 97110 DT-THERAPY EXERCISE	32.20 Ah	MR8		32.20	110207	310605
		Fee Adjustment	26.83 /Jh	MRB		(5.37)	310699	11(220)
6/17/09 2		4309711.2 97112 OT-NEURO RE-EDLX	32.87 JUN	MRB		65.74	110207	310806
		Fee Adjustment	27.39 /Un	MRB		(10.96)	310699	110,007
B/17/09		COBJESO 87530 THERAPY ACTIVITY	33.58 /Un	8 8 8		33.58	10201	310006

Cash receipts are applied in this report based on the Date Received.

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Billing Activity

Sunny Acres Of DeKalb (SA)

From John							Š	3
WEST, CHARLES (392963)	(392963)	(Cont.) Type: VA	Admit: 9/20/10					
		Fee Adjustment	27.98 AJn N	B245	\$	(5.80)	310689	110207
671709	-	A3097535 97535 OT-ADL TRANSIG	3364 AJn N	SARGE STATES	8	35	110207	310805
		Fee Adultment	28.03 /Un M	848	2	(5.63)	310566	110207
ACT PATTS	•	42097110 97110 PT-THERAPY EXERCISE	32.20 /Un X	MRS	স	32.20	110207	310603
		Fee Adversent	_	MRG	2	(5.37)	310596	110207
531100	2	42097112 97112 PT-NEURO RE-EDIXCAT	32.87 /Un M	MR78	- 735	65.74	110207	310603
		Fee Adjustment	27,39 JUn N		35	(10.96)	310899	110207
eventa de	,	42097530 97530 PT-THER ACTIVITIES	_	6 10	, is	37.50	110207	310603
2		Fee Adustreent	_	25.5	25	(5.60)	310699	110207
KHBMG		42097542 97542 PT-WHEELCHAIR TRAIN	31,99 /Un	92.5	· 103	31.30	\$10207	310503
1		Fee Adversari	286.68 /Un	MRB	₩.	(5.33)	310689	110207
SI 18UDS	8	43097110 97410 OT-THERAPY EXERCISE	_	488	. 43	Q+:45	110267	310605
	ı	Fee Adjustment	26.83 /Un	MAB	¥.	(30.74)	310689	110207
2718/05	_	43897112 97112 OT-MEURO RE-EDUC		MRB	, ค	22.87	110207	310805
<u>.</u>		Fee Adjustment	27.39 Am h	MAB		(5.48)	310686	110207
6/18/09	-	43097630 97530 THERAPY ACTIVITY	33.58 /Un h	MRB	* 45	32.58	110207	310505
		Fee Adjustment	27.98 AM B	MRB	-	(5.90)	310689	110207
6/15/09	•	43097535 97535 OT ADL TRANING	33.84 NM h	MRB	સ	33.54	110207	310505
		Fee Adjustment	28.03 JUH N	MRB		(5.6%)	310689	110207
8719/US	-	42087110 971:0 PT-THERAPY EXERCISE	32.20 AUn N	WRS	8	32.20	110207	310503
		Fae Adjustment	28.83 JUn 1	MRB	-	(5.37)	310699	110207
BYTAKOS	7	420811297112FT-WEURO PE EDUCAT	32.87 Ahr H	ANS.	æ	BK.74	110207	310503
		Fee Adjustment	27.39 /Uh H	MRB	=	10.95)	310699	130207
6713/09	-	42097530 97530 PT-THER ACTIVITIES	33,58 (thr	MR.B.	M	33.86	110207	310603
		Fee Adjustment	27.98 (Ja. 1	MRS	•	(5.60)	310689	110207
ELTS/09	-	42097642 BF542 PT-WHEELCHARR BRAIN	31.89.Un	MRB	r	34.98	1102017	310903
		Fee Adjustment	28:66 /Un	MRB	**	(5.33)	310588	110207
6719YO9	7	43097110 97110 OT-THERAPY EXERCISE	32.20 Aln	MARI	8	04.40	110207	310605
		Fee Adjustment	28.83 ALIN	414		(10.74)	310699	110207
6/19/03	4	43087112 97512 OT-NEURO RE-EDUC	32.87 /Un	MARTS.	67	32.87	110207	310805
<u> </u>		Fee Advantarit	27.39 /Un	WR8		(5.43)	310689	110207
6719(0)	.~	43097538 97538 THERAPY ACTIVITY	33.58 Aln	WRB	. 69	33.58	110267	310605
		Fee Adjustment	27.98 /Un	MRB		(5,80)	310889	110207
671973	-	43087535 97535 OT ADL TRAINING	33.64 Aln	MR.B.	m	33.64	110287	310805
		Fee Adjustment	28.03 /Jm	MRB		(5.61)	310649	110207
62108	-	42097110 97110 PT-THERAPY EXERCISE	32.20 (th	MRB	n	32.30	110287	310603
		Fee Adjustment	26.83 Am	MRB		(5.37)	310843	110207
62103	М	AZX87112 97112 PT-NEURO RE-EDUCAT	32.87 Jun	MRB	**0	86.74	116207	33,0603
	***************************************	Fee Adjustment	27.39.615	WR.	***************************************	110.98)	310599	110207
621/09	-	42087530 97530 PT-THER ACTIVITIES	33.58 /Jn	MRB	173	33.58	110207	310603
		Fee Adjustment	27.98 /Jr	MRB	~	(5.80)	310699	110207
621/09		42097542 97542 PT-VARELCHAIR TRAIN	35,98 (Un	MRB	e	31.84	118207	310663
		Fee Adjustment	28.66 /Un	MRS	-	(5.33)	310699	110207
6/21/09	63	43097110 97110 OT-THERAPY EXERCISE	32.2E (Un	MRB	9	07:10	110207	31,0605
		Fee Adjustment	26.83 run	MRB	Ð	(30.74)	310839	130207
6/21/09	-	43097112 97112 01-NEURO RE-EDUC	32.87 Uh	MRB	**	32.87	110207	310605
		Fee Adjustman	27.39-/Un	MRB		5.43	310593	130007
					•			

Cash receipts are applied in this report based on the Data Received.

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Billing Acti⊤vity
Sunny Acres Of Def⊤≺alb (SA)

 					•	6					AR6400_A
	Dates of St.			Org Or Description			Markett	Moderan	ŧ	G.P.	į
Control Type Make			ιl				N DATE OF	manaa) The same	1987
Comparison Com	WEST CH	ARLES (99296	13	_	Admit: 9/20/10						
				For Adjustment	_	#16B		5.60		310899	119207
Page 19 Page	6727409			43097535 97536 07-AOL TRAINING	_			* # # # # # # # # # # # # # # # # # # #		110207	310806
				Fee Adjustment		F/S		(3 g)		340586	11000
1.00 1.00	80823/9	•-		42097110 97110 PT-THERAPY EXERCISE		2		32.20		110207	STORUS
10.0000 1.				Fee Adjustment		EE.		(5.37)		310599	11120
COCTOR 1 TAMAS MARIAN CANTON CAN	5/22/D9	2		42097112 97112 PT-NEURO RE-EDUCAT	_	FRB		. 18		110207	311603
CODODO 11 CADADOS ARRON LIVERACITATIONES 238.34 to 14 miles MEST 13.43 to 11 miles 11 CADADOS ARRON LIVERACITATIONES 11 CADADOS ARRON LIVERACITATIONES 12 CADADOS ARRON LIVERACITATIONES 12 CADADOS ARRON LIVERACITATIONES 12 CADADOS ARRON LIVERACITATIONES 11 CADADOS ARRON LIVERACITATIONES 11 CADADOS ARRON LIVERACITATIONES 11 CADADOS ARRON LIVERACITATIONES 12 CADADOS ARRON LIVERACITATIONES 12 CADADOS ARRON LIVERACITATIONES 12 CADADOS ARRON LIVERACITATIONES 12 C				Fee Adjustment		ARB.		(10.96)		310689	20001
CONTRILE TOTAL PROPRIENT (LAME TOTAL MARKET) 27.99 A.D. NEW TOTAL MARKET (LAME TOTAL MARKET) 1.000000000000000000000000000000000000	622009	•		42097530 97530 PT-THER ACTIVITIES		38		33.58		110207	TO SELECT
COCTORS 11 COCTOR CANADA (CANADA CANADA CAN				Fee Adustment	-	£		(5.60)		310699	1 10007
COCKER CASE AND MATERIAN CONTRIPERIOR ACCURATION CONTRIPERIOR<	8002209	-	_	42097542 97542 PT-WHEELCHAIR TRAIN	_	FF3		31.99		110207	310603
CCC2008 2 AGRAPH ORD CONTREADAY VERRORSE 23.20.10. M MS 64-40 11007 CCC2008 1 CARRADO CONTREADAY CERRORSE 23.20.10. M MS 64-40 11007 CCC2009 1 CARRADO FREADY CUTIVITY 23.20.10. M MS 64-40 11007 CCC2009 1 CARRADO FREADY CUTIVITY 23.20.10. M MS 64-40 11007 CCC2009 1 CARRADO FREADY CUTIVITY 23.20.10. M MS 64-40 11007 CCC2009 1 CARRADO FREADY CUTIVITY 23.60.10. M MS 64-40 11007 CCC2009 1 CARRADO FREADY CUTIVITY 23.60.10. M MS 64-40 11007 CCC2000 1 CARRADO FREADY CUTIVITY 23.60.10. M MS 23.60.10. M MS 11007 CCC200 1 CARRADO FREADY CUTIVITY 23.60.10. M MS 23.60.10. M MS 23.60.10. M MS CCC200 1 CARRADO FREADY CUTIVITY 23.60.10. M MS 23.60.10. M MS 23.60.10. M MS CCC200 1 CARRADO FREADY CUTIVITY 23.60.10. M MS 23.60.10. M MS 2				Total Adjustra ent		22		(5.33)		310689	110007
Comparison Com	6722/09	2	~	43087110 97130 OT-THERAPY EXERCISE		##S		20		110207	310806
GEATOR 1 CASON TILE STIT CHERRONEE DUE 2.26 ft I.A. MRS CASON				Fee Adjustment		#R2		(10.74)		310699	119297
Comparison Com	6722709	-	-	43097112 97112 01-NEURO RE-EDUC		Bear		32.87		110207	310605
CCC2000 11 CASCED STROND FROM THATING 23.8.4 I.A. MRRB 14.88 33.3.3 11.00.00 CCC2000 1 CASCED STROND FROM THATING 23.6.4 I.A. MRRB 48.89 43.6.4 11.00.00 CCC2000 1 CASCED STROND STROND FROM THATING 23.6.4 I.A. MRRB 48.89 42.6.7 11.00.00 CCC2000 2 CASCED THOU THAT THANKING 23.6.0 I.A. MRRB 48.89 42.6.7 11.00.00 CCC2000 2 CASCED THOU THAT THANKING 23.6.0 I.A. MRRB 48.89 42.6.7 11.00.00 CCC2000 3 CASCED STROND	;	•		fee Adjustment		JP-83		(5.48)		310689	110207
652509 1 CARDON SOUTH STANDARD 27.99 A.M. M. MRB CARDON SOUTH STANDARD 27.99 A.M. M. MRB CARDON SOUTH STANDARD 27.90 A.M. M. MRB CARDON SOUTH STANDARD STANDARD SOUTH STANDARD SO	6722/09	•	•	43097530 97530 THERCAPY ACTIVITY		55		33.58		110207	310606
CCC209 1 CADDATION OF INTERION PECENCIER 2.000 Author MIRB 4.000		•		Feb Adjustiness		6863 1		(5.60)		310838	102011
62209 1 CADDATION OF ILLEGAVE EXERCISE 2220 Au M RB CADDATION OF ILLEGAVE EXERCISE 2220 Au 1 10000 62209 2 CADDATION OF ILLEGAVE EXERCISE 2.220 Au MRB 2.227 1 10000 62200 2 CADDATION OF ILLEGAVE EXERCISE 2.220 Au MRB 5.237 3 10000 62200 3 CADDATION OF ILLEGAVE EXERCISE 2.220 Au MRB 5.239 1 10000 62200 1 CADDATION OF ILLEGAVE TRABAI 2.230 Au MRB 5.339 1 10000 62200 1 CADDATION OF ILLEGAVE TRABAI 2.230 Au MRB 5.339 1 10000 62200 1 CADDATION OF ILLEGAVE TRABAI 2.230 Au MRB 5.339 1 10000 62200 1 CADDATION OF ILLEGAVE TRABAI 2.230 Au MRB 5.339 1 10000 62200 1 CADDATION OF ILLEGAVE TRABAIL 2.230 Au MRB 5.230 1 10000 62200 1 CADDATION OF ILLEGAVE EXERCISE 2.230 Au MRB 5.230 <td>622309</td> <td>**</td> <td></td> <td>ASUB/533 8/535 U. M.D. TEAINING</td> <td></td> <td>92</td> <td></td> <td>79 EX</td> <td></td> <td>1102011</td> <td>310805</td>	622309	**		ASUB/533 8/535 U. M.D. TEAINING		92		79 EX		1102011	310805
GC20498 1 CC201/1 LIFE AND THE LIFE AND		•		The state of the s		(AB		(4 B))		310699	110207
622003 1 CORDITY OF PHEBORIES 2220 Ann HTRS (10.08) (5.37) 110000 622003 1 CORDITY OF PHEBORIES 22.20 Ann HTRS (10.08) 55.73 110000 622003 1 CORDITY OF PHEBORIES 22.20 Ann HTRS (10.08) 310689 310689 622003 1 CORDITY OF PHEBORIES 22.20 Ann HTRS (10.08) 310689 310689 622003 1 CORDITY OF PHEBORIES 22.20 Ann HTRS (10.08) 310689 310689 622003 1 CORDITY OF PHEBORY PERDAY 22.20 Ann HTRS (10.08) 310689 310689 622003 1 CORDITY OF PHEBORY PERDAY 22.20 Ann HTRS (10.09) 310689 310689 622003 1 CORDITY OF PHEBORY PERDAY 22.20 Ann HTRS 42.20 110000 622003 1 CORDITY OF PHEBORY PERDAY 22.20 Ann HTRS 62.20 110000 622003 1 CORDITY OF PHEBO	EKS STAN	-	-	ACLEANTIN SOUTH PROPERTY EXCHANGE	_	(R8		32.20		110201	310803
CEX.OR 1 CEX.OR ALTA MENT TO TABLE ALTA MENT TO TAB	000000	•			_			(537)		310698	110207
CEAZOR 1 CEODSTING DITABLE ALCTIVATIES 2.2-26 ALA MET (10.88) </td <td>200</td> <td>•</td> <td></td> <td>ACONT 176 WINE TO THE DOWN THE PURCHASE</td> <td></td> <td>2 (</td> <td></td> <td>65.74</td> <td></td> <td>110207</td> <td>310603</td>	200	•		ACONT 176 WINE TO THE DOWN THE PURCHASE		2 (65.74		110207	310603
GCZAVO TO CONSTANT TRANIN 23.50 Am MER (5.09) 3108 Am 1100 Tr GCZAVO TO CONSTANT TRANIN 23.50 Am MER (5.09) 3108 Am 1100 Tr GCZAVO TO CONSTANT TRANIN 23.50 Am MER (5.09) 3108 Am 1100 Tr GCZAVOS TO CONSTANT CONTRIBIO PRE-EDUC 22.20 Am MER (5.09) 3108 Am 1100 Tr GCZAVOS TO CONSTANT CONTRIBIO PRE-EDUC 22.20 Am MER (5.07) 3108 Am 1100 Tr 3108 Am	emace	•	4-	SHILL WAS CONTRACT OF STATE OF				(10.96)		310689	110207
622009 1 42097546 Tittle Triant 1.58 A.I. 1.68 A.I. 1.00 B.B.	3		•	Chair Articoto and Chair a				15 CX		1102017	310603
CECALOR CATOLINE INTERPRETATION TO TATE OF A THE INTER	SWEC18	•		MINERAL CIPINAL HARVEST CONCORDED TO SERVICE CONCOR				(5.94)		310689	110207
623.08 2 CROSSTYLO SYTYLO SYT	1223	•	•	Control of the Contro				31.95		110207	310603
SECTION SECT	023860					ž :		(5,33)		310696	110207
622A08 1 4309712 GYTZ GYTZ GYTZ GYTZ GYTZ GYTZ GYTZ GYTZ	BOARCE	•	4			# C		64.40		110201	310605
CALADS 1 A2097SSO PFENANT ACTIVITY 2.26 AUI MRS 5.287 1 HUDOT 622A39 1 A2097SSO PFENANT ACTIVITY 33.96 ALI MRS 5.287 1 HUDOT 622A39 1 A2097SSO PFENANT ACTIVITY 33.96 ALI MRS 5.287 1 HUDOT 622A09 1 A2097SSO PFENANT ACTIVITY 23.20 ALI MRS (5.67) 31.0688 622A09 1 A2097SC OLULI TRANSING 23.20 ALI MRS (5.67) 31.0688 62A09 1 A2097SC OLULI TRANSING 23.20 ALI MRS (5.67) 31.0688 62A09 2 A2097SC OLULI TRANSING 23.20 ALI MRS (5.67) 31.0688 62A09 2 A2097SC OLULI TRANSING 27.30 ALI MRS (5.67) 31.0688 62A09 3 A209ASC OLULI TRANSING 27.30 ALI MRS (5.67) 31.0688 67A09 4 A2097SC OLULI TRANSING 27.30 ALI MRS (5.69) 31.0689 67A08 1 A2097SC OLULI TRANSING 27.30 ALI MRS 31.0699 31.0699 67A08	S. S	•		A SUB-BOOK STAND CARROLL STANDS		## C		110.74)		310659	110207
672AD9 1 43087530 FFEMORY ACTIVITY 17.56 AU MRB 13.56 170083 310689 672AD9 1 43087530 FFEMORY ACTIVITY 17.56 AU MRB (5.61) 17.000				Tab believed				3287		110207	310605
92.409 1 43097CSS 97526 OT-IOL TRANBING 23.54 Aln MFRB 455.00 310689 62.408 1 43097CSS 97526 OT-IOL TRANBING 33.64 Aln MFRB 455.00 33.64 Aln MFRB 430.69 33.64 Aln 140207	6022409	•	_	AXOSTSSQ 97550 HERAPY ACTIVITY				5.48		310889	110207
SCZ-409 1 43097325 97				Fige Actuations				X		110207	310605
624/08 † 42097 10 971	672309		_	43097535 97536 OT ADI TRAINING				(5.60)		310659	110207
624/09 † 42097110 97110 FT-Th-ERAPY EXERCISE 3.2.0 ALIn MFB 2.20 10.03 310839 924/09 2 4209712 9712 FT-AEURO RE-EDLCAT 28.83 ALIn MFB 52.73 10.007 924/09 2 4209712 9712 PT-AEURO RE-EDLCAT 22.81 ALIn MFB 52.73 10.007 924/09 1 42097520 97320 PT-AMELECHAIR TRAIN 27.33 ALIn MFB 53.83 110207 924/09 1 42097532 97542 PT-AMELECHAIR TRAIN 27.30 ALIn MFB 31.93 31.93 924/09 1 42097540 BT-AMELECHAIR TRAIN 27.20 ALIn MFB 53.59 110207 924/08 2 43097140 9710 OT-IN-ERAPY EXERCISE 22.20 ALIn MFB 53.80 110207 924/08 1 43097142 OT-IN-EIRAPY ACTIVITY 23.50 ALIn MFB 52.20 ALIn MFB 52.30 ALIn MFB 52.80 ALIn<				Fee Adusmen				33.64		110207	310605
Fige Adjustment 28.39 Au MRB 52.20 Fige Adjustment 59.39 Au MRB 52.20 Fige Adjustment 57.29 Au MRB 52.20 Fige Adjustment 57.29 Au MRB 5	62409	•	4.	42097110 97110 PT-THERAPY EXERCISE		994		(0:0)		31.055W	110207
92/4/19 2 42097112 97132 PT-NEUNG RE-EDLICAT 32.87 /Un MRB EB.74 110207 82/4/05 Fee Adjustment 27.38 /Un MRB 1014 96) 31.88 110207 82/4/05 Fee Adjustment 27.38 /Un MRB 27.98 /Un MRB 110207 82/4/05 1 42097350 97530				Fee Adustment		SI-SI		(5.37)		310698	310003
824/02 f 42037503 PT-THER ACTIVITIES 27.35 IUN MRB 2016 1000 31.669 110207 874/02 f 42037320 PT-THER ACTIVITIES 33.58 IUN 110207 33.58 110207 110207 874/03 f 4203734 PT-THER ACTIVITIES 33.59 IUN MRB 31.99 IUN 110207 872/06 f A303714 DT-THER CHAIR THAIN 25.69 IUN MRB 53.39 IUN 110207 872/06 f A303714 DT-THER CHAIR THAIN 25.60 IUN MRB 64.40 IUN09 110207 872/06 f A303714 DT-THER APPY EXERCISE 22.67 IUN MRB 64.40 IUN09 110207 872/06 f A303714 DT-THER APPY EXERCISE 22.67 IUN MRB 40.74) 40.74) 110207 872/06 f A303714 DT-THER APPY ACTIVITY 23.56 IUN ARR 40.74) 40.74) 31.0699	624/09		~	42097112 97312 PT-NEURO RE-EDUCAT		878		86.74		11000	310502
\$24003 1 420375XO 9753O 77-Th/EA ACTIVITIES 58.39 flut 110207 674008 1 420375X2 97542 97542 97547 1-1070 1-10207 47.98 flut 47.98 flut 47.98 flut 47.99 flut 47.90 flut				Fae Adjustment		2		(10.96)		310990	200017
Graduo Tee Adjustment ZT.98 /Un MRB (5.60) 310899 Graduo 1 42097542 97542 PT-VMEELCHAIR THAIN 31.98 /Un MRB 31.99 110207 Graduo 2 43097140 9710 O1-IP-ERAPY EXERCISE 22.20 /Un MRB 64.40 110207 BV2409 1 43097142 O1-IP-ERAPY EXERCISE 22.81 /Un MRB 42.87 10.074 310899 BV2409 1 45097142 O1-IP-ERAPY ACTVITY 23.58 /Un ARR 45.40 110207 BV2409 1 45097142 O1-IP-ERAPY ACTVITY 310899 310899 310899	62409			42097530 97530 PT-THEA ACTIVITIES		8E		18 .88		110207	340403
GFA008 1 42007542 97542 PT-WHEBLCHAIR TRAIN 31.99 (10.74) 110207 GFA00 Fee Adjustment 2x.60 Aur MRB 53.39 110207 GFA009 2 43097140 97.10 OI-MERAPY EXERCISE 2x.20 Aur MRB 64.40 110207 BV2409 1 43097112 97.12 OI-MEURO RE-EDLIC 2x.68 Aur MRB 42.87 110207 Fee Adjustment 27.36 Aur MRB 42.49 110207 110207 BV2409 1 4.097350 97500 PERAPY ACTVITY 3x.56 Aur MRB 4.5067				Fee Adjustment		æ		(5.60)		310699	110313
Stand Fee Adjustment 2A:69 Aut AIRB (5.33) 118899 Stand 32.20 Au AIRB 64.40 110207 PEA-409 To Adjustment 2A:87 Au AIRB (10.74) 310899 BVA409 To Adjustment AIRB AIRB AIRB AIRB AIRB BVA409 To Adjustment AIRB AIRB AIRB AIRB AIRB BVA409 To AGS730 0FEAAP ACTVITY AIRB AIRB AIRB AIRB AIRB	972409	•	**	42097542 97542 PT-WHEBLCHAIR TRAIN				31.99		1 10207	310803
8/2-408 2 43/09711/0 9/11/0 0				Fee Adustment		200		(5,33)		310699	11001
Fee Aduatment 26,83 /Un ARB (10,74) 310898 102470 102470 10277 10207	8724/09		2	43097110 97110 OT-THERMPY EXERCISE		120		. 54. 0+38		119207	310806
### 4-03-7172 9171Z-01-REUNG RE-EDLIC		·	,	Fee Adultment		23.		(10.74)		310699	190207
6/24/49 1 4/36/7530 8/3500 PERAPY ACTIVITY 33.56 Alm MRB (5.45) 31.597 (19/207			_	ASUST 12 STATE OF THE UNIT HE FEDICE		82		X.87		110207	310505
BYZANS T 4.7.25/250 BYZSZU PIZSZU PIZ						28		(5.45)		310699	110207
			-	ATIO/338 BISSO HERNET AUTIVITY		28		33.58		119207	310505

Cash receipts are applied in this report based on the Date Received.

Page 13 of ___19 2/23/11 1:36 P--M AR640C_DA

Billing Activity

Sunny Acres Of DeKalb (SA)

Part							**************************************			C. Dander	
COUNTY OF THE PROPERTY COUNTY Type: VA Addrés 920/10	Dates of Service		;		Per				Officer	Petri	
Control Type VA Admit 902010	From Thru		O C	mojinkan	rance						
Comparison Com	WEST CHARLES	(592863)		Type: VA	Admit: 9/20/10						***************************************
				- Personal	27.58 A.Jin	MARS		(5.60)		310696	10201
CONTINUENT CONTINUEN		,	•		33.64 R.Jn	MRB.		33.64		110207	3/0805
	22 4 03	-		ı	24 CC AU	9		(zet)		310899	110207
Control Cont		•		TANGET A CARDINATION PARTY OF TRANSPORT	32.20 AU	92.2		32.20		110207	310603
CONTINUE	825/09	-			28 B3 dbn	1 N		(6.37)		310599	110207
		,		Tack has a contract to the con	32.87 A.In	MRB		66.74		110207	310603
	425v69	74		2007; 37 CM-11-1 771.76 711.76074	2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	G (2)		(10,86)		310569	110207
				TOP TO THE TOTAL T	40 Ca Ca			8 25		112207	310606
	M25M9	~		ASSETTED STATES THE HAND THE MANY EXEMPLISE		a dom		C. 37		\$10699	110207
				1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 0		() () () () () () () () () ()		110207	310605
CONTINUE DEFENCE CONTINUE DE	625508	•			SALDE FUIE			(F. 488)		316699	110207
CONTINUED CONT					Z	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* # £		110297	310805
COOKING WILL DETACLEMENT 20 SILV MEN 2	6725079	-		1	33.58 JEN	244		B. 5		340600	410207
				ı	27.88 /Lh	MRB		(5.50)		1,140,007	310603
	87508	1			32.20 /Uh	MKB		35.75		(0.50)	20000
CONTINUED PRINCIPLY 228 PAIN MRB 1054 110201				- 51	26.83 /Un	MRB		(5.37)		310036	130507
C1087020 5700 FT-FER ACTATITIES 2.28 ATA MRB 10058 110505 110	60303	7			32.87 /Un	MRB		#2.58 #2.54		110201	311000
1 1992/2019/67/00 PT-PT-REF ACTIVITIES 25.09 L/m MRR 25.00 19.00 1 1992/2019/67/00 PT-PT-REF ACTIVITIES 25.00 L/m MRR 25.00 2 1992/2019/67/00 PT-PT-REF ACTIVITIES 25.00 L/m MRR 25.00 3 1992/2019/67/00 PT-PT-REF ACTIVITIES 25.00 L/m MRR 25.00 4 1992/2019/67/00 PT-PT-REF ACTIVITY 25.00 L/m MRR 25.00 4 1992/2019/67/00 PT-PT-REF ACTIVITY 25.00 L/m MRR 25.00 5 1992/2019/67/00 PT-PT-REF ACTIVITY 25.00 L/m MRR 25.00 L/m 25.00 L/m 25.00 L/m 25.00				- 11	27.39 /Un	MRB		(10.95)		319683	7070
	90000	-			33.58 /Jin	MRB		33.58		10007	SUBUR.
	2000			- 11	27.98 /Jm	MRB		(5.60)		310698	110207
1	90000	-			31,980 /J/n	WRB		31.99		110207	Studius
1.000 1.00	50 E78			The Passes of Comments of the Passes of the	26.88 /Un	MRB		(5.33)		340808	110201
					32.20 fun	228		32.20		1,10207	310605
1	S. Carrier	•		ľ	25,83 /Un	MRB		15.37		310699	110207
1	, and the second	*		ŀ	32.87 AJT	MARIB		25.74		102011	310605
1	ACMINA ACMINA	J			27.39 Alm	MRB		(10.96)		310698	110207
4.0007753 9735000000000000000000000000000000000000		•		ATMITTAL THE BARK MCTIVITY	33.58 /Un	MRB		33.58		10201	310605
	ST.COLTS	-		The first framewith and	27.98 Aln	MRB		(5.60)		310898	110207
1	4	•		ANDREAS TOTAL OF ADAILY	33.84 Æln	MPR		33.B4		110201	310605
ACCOPTION TO STATEMENT FRENCISE ACCOPTION TO STATE ENT FRANCISCO ACCOPTION TO STATEMENT FR	5/29/03	-		THE PARTY OF THE P	28.03 JUn	MAKE .		15:83		310669	110207
Total Control Contro		•		ASSOCIATION OF LITTER PT. THERE BY ENERGY EN	32.20 JUn	88.		32.20		110207	310603
2 42097112971125559 9752—— PT-THEURO RE-EDUIGAT 22.87 /Juh MRRB (10.39) (10.3	esance.	-		Floor d	78.83 (Un	MRB		(6.37)		370999	10207
42097530 9735CTT PTTTPER ACTIVITIES 21.58 L/m MRB 10.590 210899 110207		C		Annual 12 071 12 071 12 DILLEDIICAT	32.87 /Un	MRB		42.50		110201	310603
1000 1000	623003	*		Charles In the state of the sta	27.33 JUn	MRB		(9504)		310699	110207
1		•		SHINITIAN REPORT CONTRACTOR	\$3.58 JUn	MAB		33.58		110201	310603
1	630,03	-		10000 TO 100	27.98 /Jm	MAT 8		(5.80)		310699	110207
100 100		,		MAGT GIALLY ISSUED TO COMPANY TO	31.99 /Un	MR8		31.99		1.0207	310603
2 4309710 9711	6130106	-		AZUBYOAK SIOAMANIK FINANCE COREN TRANS	78.88 /In	888		(6.33)		3,0699	110207
10276 10276 10276 10276 10276 10276 10277 1027		1			47 CC CC	54 S		64.40		1.020.1	31080%
Comparison Com	GCINOS	2			78.82 Alle.	\$ 0 81		110.74		3:0699	1102011
43097550 9750mm				ALBOT BE CELLED THE THE PROPERTY OF A STATE OF THE PROPERTY OF	A) 18 CE	MRR		3287		110207	310606
43097550 97550=1750 1 0207	6/30/08	,-		ACCESS 150 OF IMPRING CLUMPING CALL LAND CALL	25 86 25	822		5.485		34.0699	1 10207
430457504 5750444110 et 10004713 575047				ALBORIO ACCRECATO Company of the property of the company of the co	39.58 Qfs	#H#		. 25 25 25 25 25 25 25 25 25 25 25 25 25 2		11 0207	310805
43087535 9752mm5 07.402, TRAINING 33.84 An MR8 33.84 110207 11020	BUCCE	-		AND THE PARTY OF T	13 40 FC			(5.80)		28 0899	1,0207
43087555 9752mmm5 01-A2A, TRANSING 5404-701 MTG (5.67) 310599 Fee present death of the present o				"	UN 98:77			200		110207	310806
ARB 10,37265 10,37266	800CFS	_		8 7	10. 40.50 10. 40.50 10. 40.50	202		1985)	٠	310889	110207
MATCH MATCH AND A LOCAL AND A				Fee Americanist	ZRUS IUS	200		30,220,08	. •		
				BALTING #CE		N. C.		AL STATE		,	

Cash receipts are applied in this report based on theme Date Received.

July, 2009

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Billing Activity Sunny Acres Of DeKalb (SA)

		•							, de	7	
COUNTEST STATE COUNTEST Type: VAI Admit 920-id Marie COUNTEST STATE COUNTEST Type: VAI Admit 920-id T	ğ		246	Od Description			# ecicaio	# echoare		Cross :	
Propertion (COME) Type VM Annit MOZING Mark COME	ישון ישורו										
Section Proposed 1,000	WEST, CHARLES	£ (382863)			Admit: 9/20/10						***************************************
	Small			Payment 7/23/08				(2801.30)			i de la constantina della cons
	40104			CICI BOX334 (Legitland		**			(+38.00)	-	110211
13.00 13.0	9079			Powerhand Total Office Office of the Contract		*			(5,758.00)	1100	110211
Comparing Management		3	tat	2 SEMILBRINGTE BOOM	8C) 00'06	**			2,790.00	110211	310501
1,000,100 1,00		5	3	Section of the latest the section of	23.808 IDs	MA.			3,968,00	110211	310698
		,		STATE OF THE PROPERTY OF THE P	old accx			32.20		110207	310803
2 CONTINUE VITAL PRINCIPATE STATE AND	60,03	-			10 mary 10 mar			45.37		310539	110207
2 CONTROL TOTAL TOTA					17 18 27			KE 74		110207	310603
1	90/108	2		42097112 97112 PI-NEUNU HE-EULUAN	20 m			1900		310809	110007
				Tae Adustrian	27.39.10			(96.01)		140083	340803
1	901/09	+		42097530 97530 PT-THER ACTIVITIES	33.58 (Lin			33.58		160,002	- POORIE
				Fee Adjustment	27.58 Rh	25 P.D.		(5.60)		30000	10201
Comparison Com	thy mg	_		42097542 97542 PT-WHEELCHAIR TRAIN	31.99 /Un	MR.B		31.99		110207	310901
CONTINUENT CON	2			Fee Ariustrien	26.66 JUs	MRB		(5.33)		310699	110207
CONTINUED NOTE NOTE NOTE NOTE NOTE NOTE NOTE NOTE	9	F		ARREATED THE DITTHERAPY EXERCISE	32.20 AJ	MRB		B4.40		110287	310505
CONTINUE NOTE NOTE NOTE NOTE NOTE NOTE NOTE NOT	ACTIVE.	v		Fam before the		MAB		110.74		310699	110207
1	1	•		TINGS THE CONTRACT TO CONTRACT		MAS		22.87		110207	310905
1	AUTON.	-		Face Adjustment	23.86	88		15.48		310699	110207
1	•	•		ALIVILLY ACTUAL DESCRIPTION TO THE STORES	- E	₹		· 83		110201	310805
1 CASSISSISSISSIC ALL'I TRANSING 1 1 1 1 1 1 1 1 1	SOUTH OF	-		Control of the Adjustment	23.88 65			(5.63)		340699	110207
		,		Control of The Transfer of The Saline	45.50			23.55		110207	310605
1 C2008110 B71-0F71-READAY EXERCISE 22.25 1/b MRB 53.20 110287	CALCALUS.	-		The feet of the fe	50 50 50			(5.63		310699	110207
		•		SUCCESSED FOR THE SECOND STATES OF THE SECOND SECON	32,30 (Un	MAKE:		32.20		110267	310603
1	and			New Actualment	28.83 /Un	MERE		(£.37)		310699	110207
10.2007 10.2	1	•		TACHERT OF PROPERTY OF A PROPE	32.87 Alm	MRB		\$2.88 22.88		\$16207	310903
10007 1000	T/POZDBS	٦		Free Adiabates	7 38 EP	MR.		10.38		310699	110207
		,		SELECTIVE OF COLUMN AND ADDRESS OF COLUMN AN		MRR		33.58		110207	310503
42097942 9740 PERION 15.50 M MRB 11.0207 11.02	7,02,08	-		ACCIDITION OF DOLLAR PROPERTY OF THE PROPERTY	15 15 16 17 16 16	8071		5		310699	110207
ACCOUNT OF STATE CHANNELLY STATES ACCOUNT ARREST ACCOUNT ACCO		,		TOTAL TO CANADATE OF THE STATE	1 00 E	E 247		31.89		110207	310603
1	7,02,09	-		NEGRETARY SECRETARY AND SECRET	14 50 60	904		66.5		310639	110207
1 4309710 97110 0714ELECVAR EACHOUSE 25.87 kJn MR18 10207 11020		,			29 70 Als	Bar		(15 P.)		140207	310605
Total	7102009	N		PERSONAL PROPERTY INCIDENTIAL PROPERTY INCIDENTY INCIDENTY INCIDENTY INCIDENTY INCIDENTY INCIDENTY INCIDENTY INCIDENTY INCIDENTY INCIDE	100000000000000000000000000000000000000			4501		310890	150207
4308712 3712 D1 MENDA MENDAL 1000 1100				- Co Adjustment	CD1.83.62			(CO) .		110207	310605
Fee Adjustment 27.59 At MRTB S3.69 At	7/02/09	_		43097112 97112 01-NEURO NE-EDUC	32.05 full	G C		10.25		*HORBH	110207
43687530 9T530 THERAPY ACTIVITY				Fee Adjustment	ZI 38 YEL	MAKE		(0.40)		700010	3409016
1 43097538 97535 CT-ADL TRAINING 27.58 AUn MRB 53.64 AUn MRB 52.07 AUN MRB 53.57 AUN MRB 54.64 AUN MRB 56.33 AUN MRB 56.33 AUN MRB 56.33 AUN MRB 56.34 AUN	7,02,03	•		43097530 97530 THERAPY ACTIVITY	33.58 Am	3 20		88		10701	310000
430971595 87535 GT-ADL TRAINING				Fee Adjustment	27.98 /Un	MRB		(5.60)		33038	/OZBLL
Feb Adjustment	7752036			43097535 97535 GT-4DL TRAINING	33.64 Mn	MRB		33.64		110207	310605
1 4209710 97-10 P7-THEALPY EXERCISE 22.0 /Lin MRB 22.20 110207				Fee Adjustment	29.9G /Un	MRB		(5/2)		310699	110207
2 42.09712 97112 PT-NEURO RE-EDUCAT 22.87 /un MRB 65.74 110Z07 1 42.09712 97112 PT-NEURO RE-EDUCAT 22.87 /un MRB 66.74 110Z07 1 42.09732 97530 97530 97530 PT-THER ACTIVITIES 23.58 /un MRB 10.36 110Z07 1 42.097542 97542 97542 PT-WHEELCHAIR TRAIN 27.98 /un MRB 51.59 110Z07 2 43.0971 10 971 10 OT-THERAPY EXERCISE 22.50 /un MRB 64.40 110Z07 2 43.0971 10 971 10 OT-THERAPY EXERCISE 22.69 /un MRB 64.40 110Z07 2 43.0971 10 971 10 OT-THERAPY EXERCISE 22.69 /un MRB 10.207 10.207	STATES.	-		420971 to 97110 PT-MERAPY EXERCISE	32,20 /Un	MRB		32.33		110201	310603
2 4209712 9112 PT-NEURO RE-EDUCAT 22.87 /lun MRRB 65.74 110207 Fee Adustment 27.99 /lun MRRB 13.59 210.99 310989 1 42097329 97530 PT-THER ACTIVITIES 23.58 /lun MRRB 13.59 110207 1 42097342 97542 PT-WHEELCHAIR TRAIN 31.99 /lun MRRB 12.59 /lun MRRB 13.29 /					वार १४ छट	MRB		(5.37)		310893	110207
Fee Adjustment 27.39 fun MRB (10.36) 310888 1 42097329 97530 PT-THER ACTIVITIES 23.58 fun MRB (10.36) 310888 1 42097329 97542 PT-WHEBLCHAIR TRAIN 31.39 fun MRB (5.39) 510898 1 42097342 97542 97542 PT-WHEBLCHAIR TRAIN 31.39 fun MRB (5.39) 510898 2 43097110 97110 071-THERAIV EXERCISE 22.0 fun MRB (6.39) 6140 110207 2 43097110 97110 071-THERAIV EXERCISE 22.0 fun MRB (10.74) 310699	70300	8		A2097112 87112 PT-NEURO RE-EDUCAT	\$2.87 /Un	MRB		45.74		10201	310600
42097530 97530 PT-THER ACTIVITIES				Fee Adustment	27.39 Aln			(10.96)		310698	110207
Fee Adjustment	2rraff0.	•		42097530 97530 PT-THER ACTIVITIES	33.58 Mn	MARIE .		13.58		11020)	310803
1 42097542 PT-VMHEELCHAIRTRAIN 31.99 /Jun MRB 31.99 /Jun MRB (5.39) 110207 20.96 /Jun MRB (5.39) 310699 310	The state of the s			Figure Acting Control	27.98 AJR	MF8		5.60		310888	110207
26.86 Ibn MRB (5.39) 310689 2 430371 to 97 to Ort-THERADY EXERCISE 22.29 Ibn MRB (10.74) 110207 Fee Advanced 26.93 Ibn MRB (10.74) 310699	Chicat	•		MINERAL THE CENTRE OF STANCES	31.99 /Jn	MR8		31.58		110207	310803
2 430371 to 971 to 071-THERALPY EXERCISE 22.26 Jun MRB 64.40 110207 1102	SON SA	-		ACCOUNTS OF THE PROPERTY OF TH	10 SE SE	200		(S. 23)		310699	110207
2 43037132 9710-01-10E-04-7 EACANDOC 2663.00 MINS (10.74) 310699 Fee Advantage 4 10.74 (10.74) 310699		•		HER TO THE SECOND STATE OF THE SECOND				64.6		110207	310805
Fee Adjustment 2008 5 July WHIS (1924) 1930 1	7103/09	C4		43097110 97110 OTHERAPY EXERCISE	15.02.00m					317600	110003
				Fee Adustinant	UDI SESS						

Cash receipts are applied in this report based on the Dale Received

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Billing Activity
Sunny Acres Of DeKalb (SA)

						ž						
Dates of Service From Thru	95	S	Or Description		Ante	Ę	Privente	Medicaid	Medicare	Sept.	Dest.	Chadic
WEST, CHARLES (992963)	(9922983)		_	Type: VA	Adm 4: 9/20/10							
				1	27.38 AM	99			45 4®		310899	110207
7103/09	•		43097530 97530 THERAPY ACTIVITY		33.58 AJA	£.			* #S		1102011	310805
			Fee Adjustment		27.98 AJn	E			(5.60)		340589	110207
7/03/09	-		43097535 B7535 OT-ADL TRAINING		X3.64 PUs	윤			# K		1102011	310605
			Fee Adjustment		28.03 7Js	878			(5.63)		310689	110207
			BALANCE			X.R.B			5,390.65			
						\$				13,298.00		
August, 2009												
60108			Payment 803/08 0.D			٧,				(6,540,00)	110101	110211
BOLINDS BUSINGS	३ इ	SSC	2 SEM-PRIVATE ROOM		eCt. 00:08	٧A				2,790.00		310501
			Contractual Adjustment		218.00 JDs	Ϋ́Α				3,968.00		310598
			BALANCE			MR8			8,390.68	•		
						\$				13,516.00	•	
September, 2009						;						
	1				1 1	\$				(6,758.00)		110211
9701,709 9730,779	8	386	2 SENI-PRIVATE ROOM		80 00 DS	\$				2,700,00		310501
1			Confederal Adjustment	1	278.00 /Da	\$				3,840,06	110211	310598
80,60,6	~ -		44092610 92610 ST-EVAL SWAL FUNC	N.	B2. B2 /Un	MARB			82,82		110207	310604
			Fee Adjustment		68.017Un	200			(13.81)		310696	110207
			BALANCE			MHB			B,459.89			
						\$				13,288.00		
Descipate, 2007			Co Cratter by the control of			3						
OFFICE ACTION	4	200	CA SUBSTANT THERETON		8	\$ 3				(6,75&.0d)		110211
	·		SCHOOL STAND			\$ \$				30.086	110211	3:0501
	\$	ě			216.00.108	\$ \$				1,408,00		310598
TUTOUS MUSING	i i		POPULATION AND AND AND AND AND AND AND AND AND AN			S				1,800.00		310501
			COMPANY AGUSTIMA		PCL US \$12	¥ .				2,560.00	110211	310598
						B :			8,459,69			
Movember 2169						Š.				13.236.00		
amtkra			Part of March 11 September 11			75				4	70	770077
100103			Payment 11/30009 BD			5				(R. 758 DM		1021
SOLIDS.			Payment 11/1909			MARE			65.24	(as in a sub		110267
90/045			Payment 11/30/09			MRB			13.4.63		110101	110207
11/2009	88	PE1	2 SEMI-PRIVATE ROOM		90:00 /Da	47			,	2,700:00	110211	310501
			Contractual Adjustment		218.00 rDa	**				3,840.00		310596
			BALANCE			ANG.			8,069,85			
						*				6,540,00		
12/01/09 12/31/08	15 E	7	2 SEMI-PRIVATE ROOM		ECT. D0:006	**				27 COT 78	140211	34.0504
			Contractual Acfuelment		218:00 /Da	Š				2.058.76	110211	310508
			BALANCE			MRS			8,089,95	200.00		America In
						\$				13,298,00		
January, 2010												
			Payment 1/O4/10/DD			5				(6.540.00)	110101	110211
100410 1/3410	24 24 24	된	2 SEMIPRIMITE ROOM		90:00 /Dw	ž				2 790.00		310501
			Contraction Adjustinent		218.00 ADs	š				3.988.00	110211	310598
			1177									

Cash receipts are applied in this report based on the Date Received.

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Billing Activity
Sunny Acres Of DeKalb (SA)

Part														
	Dates	f Service	Select Se				į	A .	į	1.2 2 2.2	1	į		
	Frem	734.0		- [1		rans.	X.	T-C-1-Water	M. COLUMN	Webcara	TO CACA		7 mm
State Stat	WEST,	CHARLES	(992963)		(Cont.)	Typa: VA	Admit: 9/20/10							
Part								*				13,518,00		
	February.	2010	Date Last &	amily stack										
State Stat		12/01/08			Payment 2/18/10/00			Ϋ́				(6,758,00)	110101	182
Contact Adjustment Contact	20110	2726710	器器	PE1	2 SEMI-PRIVATE ROOM		ed/ 0006	*				2,520.00	110211	3105015
Mail					Contractual Adjustment		220.00 /Da	ş				3,640.00	110211	310596
1					BALANCE			SE			8,089.95			
1								\$				12,918,00		
100 10 10 10 10 10 10 1	March, 20	10	Cute Last A.	dustad;										
200105 21 00 PE 2 SERE PROVIE SOON 2000 D		\$401/10			Payment 3/04/10			š				[6,758.00]	11010	110211
1979 1970	3001/10	3/31/10	33.95	ë E	2 SEMI-PRIVATE ROOM		90.09 (Da	Α,				2,790.00	11021	310505
A					Confractual Adjustment		220.00 /Ds	¥				400000	1201	340598
1					BALANCE			25. 25. 25.			9,030.35			
2001 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 12 20 20								٧A				12,980,00		
2001 2002 2004	April, 201	æ	Date Least A	M. of ushed:	772010									
17.70 1.					Payment 446519 DD			₩,				IG.163.34	11010	110211
47200 15 20 PET 2.5 Rebe PRANTERONN 2010 PA V. 1,4500 P		5/17/TDB			Payment 4/30/10			BAW	í		(51.15)		#10HD	110207
15.00 1.5 Control Adjained 220 0.0 h V 1500 10.0 h 1.5 1.500 1.0 h 1.5	401/10	41270	12 38	PE	2 SEMI-PRIVATEROOM		SCI 00 IDs	λ¥				1,080,06	11021	310601
1,000 1,00					Contractual Adjustmant		220.00 fDs	¥,				1,560,00	11021	310588
Part Contracted Adjustment 2000 Gb Vi	413/10	01,057	# 30	ភូ	2 SEMI-PRIVATE ROOM		50.00 fbs	¥¥				1,620,00	11021	310601
1970 1970					Contractual Adjustment		220.00 fbs	*				2,340.08	11023	310598
14 14 14 14 14 14 14 14					BALANCE			20°			\$,00.800,8			
Second								¥				13.415.86		
Section Prepare Station Proper Sta	May, 20%		Onto Last F	=1/djusted:										
SATION Payment STATION P		SPOIND			Payment S/IO/18			P/d	(40°CO)				11010	110201
SPSINT 18 0.001 Contractue Additional PAGE DIA PARTICULAR ADDITIONAL PRODUCTION PAGE DIA PARTICULAR ADDITIONAL PRODUCTIONAL PAGE DIA PARTICULAR ADDITIONAL PAGE DIA		370170			Payment & Carlo DD			\$				(6,820.00)	15010 1	110271
Contractue Adjustment 240,00 Ray 1,4 1,200 1	SPORTE	52910	95 83	ខ	2 SENI-PRIVATE ROOM		90.03 (Se	∀ ,>				2,520,00	11021	310501
SPSIIID 3 ID CCI 2 EMILIARIATE ROOM 90.00 Table VA 270.00 11221 1 1 CONTINCIALO A-MARTINATI 156.00 Table VA 66.78 65.78 111.09 111.00 11020mmmmon 111.00 11020mmmon 111.00 111.00 11020mmmon 11020mmmon 11020mmmon 11020mmmon 11020mmmon 11020mmon 11020mmon <t< td=""><td></td><td></td><td></td><td></td><td>Contracting Acquisitional</td><td></td><td>SALCO (Da</td><td>X.</td><td></td><td></td><td></td><td>4,250.00</td><td>11021 1</td><td>310598</td></t<>					Contracting Acquisitional		SALCO (Da	X.				4,250.00	11021 1	310598
Controlle Acidented 186, 60 (No. 14) MRB 111.14 11600 1020	5/28/10	5731/10	3 30	8	2 SEMIPRIMATEROOM		90.00 mg	٧A				270,00	11025	310501
2 4399710 97110 OTT-NERAPY EXERCISE 23.38 JAn MRB 68.78 11020mmm - 7 4 4 (309710 97110 OTT-NERAPY EXERCISE 23.38 JAn MRB (43.77) 110.20mmm - 7 110.20mmm - 7 2 4 (309710 97110 OTT-NERAPY EXERCISE 27.81 Jun MRB (43.87) 110.20mmm - 7 110.20mmm - 7 4 4 (309710 97110 OTT-NERAPY EXERCISE 27.81 Jun MRB (43.87) 110.20mmm - 7 110.20mmm - 7 4 4 (309710 97110 OTT-NERAPY EXERCISE 27.81 Jun MRB (43.87) 110.20mmm - 7 110.20mmm - 7 4 4 (309710 97110 OTT-NERAPY EXERCISE 27.81 Jun MRB (22.80) 110.20mmm - 7 5 4 (309710 97110 OTT-NERAPY EXERCISE 27.81 Jun MRB (22.80) 110.20mm - 7 6 4 (309710 97110 OTT-NERAPY EXERCISE 27.81 Jun MRB (22.80) 110.20mm - 7 1 4 (309710 9710 OTT-NERAPY EXERCISE 27.81 Jun MRB (22.80) 110.20mm - 7 1 4 (309710 9710 OTT-NERAPY EXERCISE 23.80 Jun MRB (22.80) 110.20mm					Contractua Acjustment		196.00 (Da	*				315.00	11021	310598
Fig. 4 Agost Total The Mark Art	SABBITO		en.		43097110 97110 OT-THERAPY EXE	ERCISE	33.38 ILA	M.C.			98 98		1020	310605
4 4 (20097110 g714 OTT-PTEAMPY EXERCISE 23.8 M.h. MRB MRB 173.127 10020mm-7 2 4 (3097110 g7140 CTT-PTEAMPY EXERCISE 27.81 M.h. MRB 27.81 M.h. MRB 111.149 3.065mm-9 4 4,3097110 g7140 CTT-PTEAMPY EXERCISE 23.38 M.h. MRB 112.28 110.22mm-7 4 4,3097110 g7140 CTT-PTEAMPY EXERCISE 27.81 M.h. MRB 122.28 11022mm-7 4 4,3097110 g7140 CTT-PTEAMPY EXERCISE 27.81 M.h. MRB 122.28 11022mm-7 5 4,4097110 g7140 g7140 G7140 EMBAPY EXERCISE 27.81 M.h. MRB 111.34 31069mm-9 6 4,4097110 g7140 g7120 G714E MAPPY EXERCISE 27.85 M.h. MRB 27.85 M.h. MRB 111.34 31069mm-9 1 4,3097112 g7120 G714E MAPPY EXERCISE 23.86 M.h. MRB 23.86 M.h. MRB 38.60 11022mm-9 1 4,3097112 g7110 G714H MAPPY EXERCISE 23.86 M.h. MRB 23.86 M.h. MRB 38.60 11022mm-9 1 4,5097112 g7110 G714H MAPPY EXERCISE 23.86 M.h. MRB 38.60 1502mm-9 1 4,5097112 g7110 G714H MAPPY EXERCISE 38.60 M.h. MRB 38.60<					Fee Adjustment		27.81 lun				11114		31069	110207
2 (3.097 110 of THERAPY EXERCISE) 27.61 Un MRB MRB 53.090 3300000000000000000000000000000000000	50470		+		43097110 97114 CT-THERMPY EXE	ERCISE	23.38 /Ln				138.172		11020	310805
2 43037 110 97 110 07 THERAPY EXERCISE 23.38 Jun MRB 66.76 1/10220007 4 43037 110 97 110 07 THERAPY EXERCISE 27.81 Jun MRB 171.54 310620000 4 43037 110 97 110 07 THERAPY EXERCISE 27.81 Jun MRB 122.28 110220000 4 43037 110 97 110 07 THERAPY EXERCISE 27.81 Jun MRB 122.28 110220000 2 43037 110 97 110 07 THERAPY EXERCISE 27.81 Jun MRB 68.76 110220000 1 43037 12 97 12 07 4 EUSO RE-EDUC 27.83 Jun MRB 68.76 110220000 1 42037 12 97 12 07 4 EUSO RE-EDUC 28.83 Jun MRB 11.14 310620000 1 42037 12 97 12 07 4 EUSO RE-EDUC 28.83 Jun MRB 11.02 1102200000 1 42037 12 97 12 07 4 EUSO RE-EDUC 28.83 Jun MRB 33.90 1102200000 1 42037 12 07 4 EUSO RE-EDUC 28.83 Jun MRB 33.90 1102200000 1 43037 112 07 4 EUSO RE-EDUC 28.83 Jun MRB 34.60 1102200					Fee Adjustment		27.61 JUn				122,389		31069	110207
4 A3087114 87110 OT-THERAPY EXERCISE 27.8 I. Jun MRB 111.54 31063mmm9 4 A3087114 87110 OT-THERAPY EXERCISE 23.8 I. Jun MRB 122.28 11050mmm7 2 Fox Adjustment 27.8 J. Jun MRB 66.78 11050mmm7 5 43087119 87110 OT-THERAPY EXERCISE 27.8 J. Jun MRB 66.78 11050mmm7 6 7 43087119 87110 OT-THERAPY EXERCISE 27.8 J. Jun MRB 66.78 11050mmm7 1 43087112 9712 OT-RELINO RE-EDUC 28.8 J. Jun MRB 33.60 11050mmm7 1 43087112 9712 OT-RELINO RE-EDUC 28.8 J. Jun MRB 33.90 11050mmm7 1 43087112 9712 OT-RELINO RE-EDUC 28.8 J. Jun MRB 33.90 11050mmm7 1 43087112 9712 OT-RELINO RE-EDUC 28.8 J. Jun MRB 33.90 11050mmm7 2 43087112 9712 OT-RELINO RE-EDUC 28.8 J. Jun MRB 33.90 11050mmm9 3 44087110 OT-THERAPY EXERCISE 33.80 J. Jun MRB 34.00 <t< td=""><td>5/05/10</td><td></td><td>۰,</td><td></td><td>43097110 97110 OT-THERAPY EXE</td><td>ERCISE</td><td>33,38 /Un</td><td></td><td></td><td></td><td>98.76</td><td></td><td>11020</td><td>310805</td></t<>	5/05/10		۰,		43097110 97110 OT-THERAPY EXE	ERCISE	33,38 /Un				98.76		11020	310805
4 43097110 97110 OT-THERAPY EXERCISE 31.80 fUn MRB 635.52 11020ment 4 A3097110 97110 OT-THERAPY EXERCISE 27.81 fUn MRB 122.28) 31065mens 2 CA007110 97110 OT-THERAPY EXERCISE 27.61 fUn MRB 122.28) 11020mens 2 CA007110 9710 OT-THERAPY EXERCISE 27.61 fUn MRB 3106mens 3106mens 1 CA007110 9710 OT-THERAPY EXERCISE 27.61 fUn MRB 34.60 fUn 11020mens 1 CA007110 9710 OT-THERAPY EXERCISE 27.61 fUn MRB 35.36 fUn 1005mens 1 A3087112 OT-THERAPY EXERCISE 27.61 fUn MRB 35.36 fUn 1005mens 1 A3087112 OT-MELRO RE-EDUC 28.62 fUn MRB 35.36 fUn 1005mens 1 A3087112 OT-MELRO RE-EDUC 28.62 fUn MRB 35.39 fUn 1005mens 2 A3087112 OT-MELRO RE-EDUC 28.62 fUn MRB 35.39 fUn 35.39 fUn 35.39 fUn 2 A3087112 OT-MELRO RE-EDUC 28.62 fUn MRB 35.00 fUn					Fee Adjustment		27.81.Nn				14.14¢		31069	130207
Fee Adjustment 17.81 Au	STIGNE		₹		43097110 97110 OT-THERAPY EXE	ERCISE	33,39 Ain				133,52		11020	310505
4 43097110 97110 1THERAPY EXERCISE 33.38 Alm MRB 133.62 110220mmen 7 2 43097110 97110 0TTHERAPY EXERCISE 33.38 Alm MRB 68.78 110320mmen 7 1 43097112 OTALEHRAPY EXERCISE 27.57 J/m MRB 11.54 110220mmen 7 1 42097112 OTALEHRAPY EXERCISE 33.38 Alm MRB 15.77 310650mmen 7 1 42097112 OTALEHRAPY EXERCISE 33.38 Alm MRB 15.67 310650mmen 7 1 42097112 OTALEHRAPY EXERCISE 27.81 Alm MRB 33.96 110252mmen 9 1 43097112 OTALEHRAPY EXERCISE 27.81 Alm MRB 33.96 110252mmen 9 2 43097112 OTALEHRAPY EXERCISE 33.38 Alm MRB 53.77 310650mmen 9 2 43097115 97110 OTTHERAPY EXERCISE 33.38 Alm MRB 65.77 33.00					Fee Adjustment		27.81 Æln				[22.28]		31069	1,10207
2 4010671 10 07 LTHERAPY EXERCISE 27.63 Ann MRB 68.78 310628888 1 4300671 20 71 ACLARO RE-EDUC 34.60 Ann MRB 68.78 110.54 310628888 1 4300671 20 71 ACLARO RE-EDUC 28.82 Ann MRB 54.60 110.54 310628888 1 420071 10 07 THERAPY EXERCISE 33.36 Ann MRB 53.26 1102628888 1 420071 12 07 ACLARO RE-EDUC 28.83 An MRB 53.36 1102628888 1 430071 12 07 ACLARO RE-EDUC 34.60 An 1102628888 1102628888 1 430071 12 07 ACLARO RE-EDUC 34.60 An 110262888 2 44007 11 07 THERAPY EXERCISE 33.36 An MRB 50.77 310688888 2 44007 11 07 THERAPY EXERCISE 38.36 An MRB 50.77 310688888	5,07,110		+		43097110 97110 0T-THERAPY EXE	ERCISE	33.38 Aln				133.62		11020	310805
2 43087110 97110 97110 97110 97110 97110 97110 97110 97110 97111 97110 9					Freduktiver		27.81.0ln	MRB			22.185		31062	110207
11.34 31065 1055	571710		e		43097110 87110 OT-THERAPY EXE	ERCISE	33.58 /Un				98 .78		11020	310505
4508712 97112 074EURO RE-EDUC 24.60 /un ARB 34.60 1102CIIIIII 1102CIIIII 1102CIIIII 1102CIIIII 1102CIIIII 1102CIIII 1102CIIIII 1102CIIII 1					Fee Adjustment		27.81.fUn				±.14		31069	110207
Feb Adjustment 28.85 /Un ARR (5.77) 31065mmmm 31.06 /Un ARR (5.77) 31065mmmm 31065mmmm 31.06 /Un ARR (5.77) 31065mmm 31.	511110				43097112 97112 OT-NEURO RE-ED	DRC	34.6D/Un				G9.56		11020	310605
42097110 9					Fee Adjustment		28,85 (U)				(5 TJ		31065	1102017
Foo Adjustment 27.81 Ahr MRB [5.57] 3108435529 34.60 1502733335 3108435529 34.60 1502733335 3108435529 34.60 1502733335 3108435529 33.36 Ahr MRB (5.77) 3.006733335 33.36 Ahr MRB (5.77) 3.006733335 33.36 Ahr MRB (5.77) 3.006733335 3.00673335 3.00673335 3.00673335 3.00673335 3.00673335 3.0067335 3.0067335 3.0067335 3.0067335 3.0067335 3.0067335 3.00673	ธ์กุรหย		-		42057110 97110 PT-THERAPY EXE	ERCISE	33.38 (Un				33.38		11020	310623
1 45097112 97112 0714EURO RE-EDUC 34.80 17022 2 45097112 97110 0T-THERAPY EXERCISE 33.36 An MRB 65.77 3706					Fee Adjustment		27.81 A.h				(F.ST)		31086	110207
Fee Adjustment 28 kB Rule MRB (5.77) 3.706 2 43097115 97 110 OT-THERAPY EXERCISE 33.36 Aln MRB 68.76 1302************************************	51210				43097112 97112 OT-NELIRO RE-EC	DUC	34.80 f.Lh				34.88 88		1402()	310606
2 43087118 97110 0T-THERAPY EXERCISE 33.38 Ain MR8 68.76 1302					Fee Adjustment		28.83 Ash				[5.77]		3106	140207
	Sr318		73		43097116 97110 OT-THERAPY EXE	ERCISE	33.38 AUn	MRB			86.76		\$302	310505

Cash receipts are applied in whis report based on the Date Received.

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Billing Activity

Sunny Acres Of DeKalb (SA)

Darbert of Confession									i	
From Thru	S S	OMO	Cd Description	Rate	Type Pytude	e Medicaid	Medicare	Officer	Cadri	5
WEST, CHARLES (192861)	\$ (992963)		(Cont.) Type: VA	Actmit: 9/20/10						
•	•		Fee Adjustment	27.81 /Un	MAR		(11.14)		310629	110207
50340	~		43097112 97112 OT-NEURO RE-EDUC	34.80 fcn	MRS		69.20		10207	310505
			Foe Actustment	28.83 Alin	MRB		£2,55		310699	110287
347710	7		43097110 97110 OT-INERAPY EXERCISE	33.38 Aln	MRB		92.76		110207	310605
			Fee Adjustment	27.81 /Jm	MRB		G1.14		310630	110207
54770			43097112 87112 OT-NEURO RE-EOUC	34.80 AUn	MRB		34.90		110201	310505
			Sea Adjustment	28.83 /Un	MAR		(5.77)		310694	110207
SCHOOL	*		43097110 97110 OT:THERAPY EXERCISE	23.38 /Un	MFRB		85.78 87.78		110201	310605
2			Fee Adjustment	27.85 JUn	MRB		61.14		310698	110207
508MD	ţ		43097112 97112 OT-WEURO RE-EDUC	34.50 fUn	M 73		83.20		1 10201	310606
			Fee Actuatment	28.83 JUn	MARIE		111.54		310899	110207
SHOTE	N		43097110 97110 OT-THERAPY EXERCISE	33.38 Mn	MRB		66.78		110207	310606
3			Fee Adjustment	27,81 fJn	MRB		(11.14)		310639	110207
54948	N		4309711297112 OT-NEURO RE-EDUC	3450 NA	MPB		69.20		110207	310605
	!		Fee Adjustment	28.83 /Un	MR8		(11.54)		310699	110201
5028(10	-		43097710 97410 DT-THERAPY EXERCISE	33.38 /Un	MRB		33,38		110207	340505
			Fee Adjustment	27.81 AJn	MRB		(557)		310699	110207
520/10	•		43097112 97112 OT-NEURO RE-EDUC	34.93 J.C.	MRB		34.63		110207	310605
			Fee Adjustment	28.83 A.h	MRB.		(\$.77)		310669	110207
521/10	tv		43097110 97110 OT-THERAPY EXERCISE	33.38 JUn	MRB		646.736		110207	310605
			Fee Augustment	27.84 RUn	MRB MRB		(11,14)		310699	110207
5/21/10	N		43097112 97112 DT-MEURO RE-EDUC	34.60 //	HR3		88.23		110207	340606
			Fee Adjustment	28.83 JUN	¥.78		(11.54)		34,0699	1102011
52410	-		43097110 97110 OT-THERAPY EXERCISE	33 88 AL	ST-ST-ST-ST-ST-ST-ST-ST-ST-ST-ST-ST-ST-S		33.38		110207	310605
			Fee Adjustment	27,81 (Un	MRB		(4.57)		310839	110201
5724/10	-		43097112 97112 OT NEURO RE-EDUC	34.60 AJn	E STE		34.60		TOZOT.	310606
			Fee Adjustment	28.KG /Un	WARD.		(5.77)		3115398	110201
5725/10	N		43097110 97110 OT-THERAPY EXERCISE	33.38 J.h	MRB		66.76		110207	310605
			Fee Adjustment	27.81 JUn	ER.		11.14		310099	110207
52500	74		43097112 97112 OT-NBIRO REFEDUC	34.60 fun	\$F18		88.23		1102011	310605
			Fee Adjustment	28.53 Au			(11.54)		310099	110207
500510	۳		43087110 97110 OT-THERAPY EXERCISE	33.38.IUn	WARB		33,38		116207	310605
<u> </u>			Fee Agustment	27.81 JUn	MARB		(5.57)		310699	11 0207
52670			43087 112 97 112 OT NEURO RE-EDUC	34,80 JAn	MRB		34.85		110207	310805
			Fee Adjustment	28.83 (Un	MRB		(5.77)		310699	110207
827310	64		43097110 97110 OT-THERAPY EXERCISE	33.38 Ch	MRB		96 .75		110207	310605
			Fee Adjustment	27.81 /Un	MRB		41.11		310699	110207
58740	74		43087112 97112 OT NEURO RE-BOUG	34.80 /Un	MRB		68.20		110207	310805
			Feet Manual Ten	+88	WING.		(11.54)		310699	110207
52810	es.		43097118 97110 OT.THEFAPY EXERCISE	33,389 rUn	MRB		55. 289 55. 289		110207	340805
			Fine Acquational	27.81 /Un	MRB		(31°E)		310699	110207
52870	N		43097112 97112 GT-WEURO RE-EDVIC	34.60 fun	MRB		69 .20		110207	310605
			Foe Adjustment	28.63 AJn	MAN		(11.54)		310639	110207
			BALANCE		PVI	[40.00]*				
					MRB		9,941.38			
					*			13,901,68		
June, 2010	Date Last	Date Last Adjusted: 10/2010								

Cash receipts are applied in this report based on the Date Received.

Billing Activity
Sunny Acres Of DeKalb (SA)

104 Services Days CMG CMG Thru	dica		5 /8					4		
### CONTROL OF STATES 1920		4	20	Driverto	Markoske	Modern	ě		GL Posting	
### ### ### ### ### ##################		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					2		Tre S	
### CONTROL	A Saddi	ACMAT: SCZUTIU								
### CONTROLL SO SET CCT	0.02010		Σ	(20 OC)				110101	110201	
116 SOUTHO ST 20 CC1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ATE PEROM	90'00 DB	\$				2,700.90	110211	310501	
501/10 501/10 501/10 501/10 501/10 31 30 CC1 2 733/10 31 30 CC1 2 2201/10 313/1	Contractual Adjunctional	195.00 AD	¥,				3,150.90	110271	310598	
501/10 501/10 501/10 501/10 501/10 8/31/10 8/31/10 8/31/10 8/31/10 8/31/10 8/31/10 8/31/10 8/31/10 11 FP 8/52 2 8/30/10 11 FP 8/52 8/30/10 8/52			Ž	(80.00)						
501/10 501/10 501/10 501/10 31.30 CC1 2 723/10 31.30 CC1 2 801/10 803/10 31.30 CC1 2 803/10 31.30 CC1 2 2 803/10 11 FP SE2 2 300/10 11 FP SE2 2 0 1003/10 11 FP SE2 2 2 0 1003/10 2 2 FP			0 0 .			3,641,38				
501/10 501/10 501/10 501/10 803/10 803/10 803/10 803/10 803/10 803/10 9/44/10 11 FP SE2 2 9/50/10 1003/10 11 FP SE2 2 0 1003/10 2 FP			\$				13,046.82			
500/10 720/10 720/10 31.30 CC1 2 600/10 823/10 31.30 CC1 2 820/10 9/14/10 14.30 CC1 2 9/14/10 14.30 CC1 2 9/14/10 14.30 CC1 2 9/14/10 14.30 CC1 2 2 0 10/14/10 14.30 CC1 2 2 2 0 10/14/10 14.30 CC1 2 2 2 0 10/14/10 2 2 0 10/14/10 2 2 0 10/14/10 2 2 0 10/14/10 2 2 0 10/14/10 2 2 0 10/14/10 2 2 0 10/14/10 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2007		2							
7331/10 31.30 CC1 2.2 (2010) 421/10 Date Leaf Adjusted: 102010 2.2 (2010) 521/10 Date Leaf Adjusted: 12/2010 2.2 (2010) 522/14/10 14.30 CC1 2.2 (2014/40) 542/14/10 2.2 30 GC1 2.2 (2014/40)	ACC TO THE CASE OF					(1,306.74)		110901	110207	
### 192010 ##################################		6 6 6 6 6	\$:				(1,305.00)	110101	110211	
### 2016 Date Last Adjusted; 102010 ####################################		907 OF 05	\$:				2,790.00	110211	310501	
### 2016 Date Last Adjusted; 10/2010 B/31/10 31/30 CC! 2 2 #### 2016 Date Last Adjusted; 12/2010 2 2 2 #########################		195.00 JDs	V				3,255.00	110211	310596	
### 2016 Date Last Adjusted; 10,2010 ####################################	21		5	(80.Ddf)						
### 2016 Date Last Adjusted; 10/2010 B01/10 31 30 CC1 2 2 #### 2016 Date Last Adjusted; 12/2010 2 2 2 #########################						8,334.64				
831/10 31 30 CC1 2 831/10 31 30 CC1 2 9/14/10 14 30 CC1 2 9/14/10 1 FP SE2 2 0 10/04/10 1 FP SE2 2 0 10/04/10 1 FP SE2 2 0 10/04/10 2 FP PE1 2			<u> </u>				11,786,82			
831/f0 31 32 CC1 2 701/f0 Date Last Adjusted: 12/2018 9/3/f0 14 30 CC1 2: 9/3/f0 14 30 CC1 2: 9/3/f0 11 FP SE2 2 2 201/f0 1 FP SE2 2 2 400/f0 1 FP SE2 2 2 10/03/f0 2 FP PE1 2 3 10/03/f0 5 FP PE1 2	Payntent 8/241cm 9D		ΑV					7070		
### 2010 Date Last Adjusted: 12/2010 #####	2 SEMI-PRIVATE MRDOM	\$0.09 \$0.00	₹.				[54.55.55]	10191	110211	
### 2010 ##################################	Confractual Adjustant	195.00 (Da	, AA				2,790.00	112011	310501	
### 2019 Duto Lase! Adjusted: 12/2010 9/3/10 14 30 CO! 2 9/3/10 14 30 CO! 2 9/3/10 1			PVT	10000			3,255,00	<u> </u>	340088	
701/10 9/14/10 14 30 CC1 2 9/20/10 11 FP 9E2 2 9/20/10 11 FP 9E2 2 9/20/10 10/20/10 11 FP 9E2 2 11 FP 9E2 2 11 FP 9E3 2 11 FP 9E3 2 11 FP 9E3 2			M PES	Ì		8.334.64 °				
### 2010			ΥA				* 1 070 14			
979,1470 14 30 CC1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	; 									
993010 11 FP 8E2 2 893010 11 FP 8E2 2 8930110 391110 1 FP 8E2 2 7 1002110 2 FF PE1 2 7 1003110 2 5F PE1 2 7 1003110 2 30 8C1 2			¥.				(5,049.72)	110101	110211	
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Cash receipts are applied in this report based on the Date inReceived.

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Cash receipts are applied in this report based on the Date Received.

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS LITTLE ROCK DISTRICT, 12TH DIVISION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian ad litem for CHARLES J. WEST

PLAINTIFF

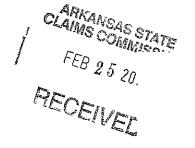
CASE NO. 60-CV-2011-0643

VS.

RONALD ROBERTSON, M.D.; GIRIPRAKASH SRIKANTHAN, M.D.; MARK P. WRIGHT, M.D.; RACHEL R. MCKINZIE, M.D.; JAY M. CHEEK, M.D.; JOHN B. CONE, M.D.; CAREY L. GUIDRY, M.D.; MANILA BAGHERZADEH-AZAR, M.D.: NANCY HOGUE, NURSE; CASEY R. SCALES, RESPIRATORY THERAPIST: CHRISTINA GARNES, R.N.: JANE/JOHN DOE I, licensed nurse; JANE/JOHN DOE II, licensed nurse; JANE/JOHN DOE III, licensed nurse; JANE/JOHN DOE IV, respiratory therapist; JANE/JOHN DOE V, respiratory therapist; JANE/JOHN DOE VI, physician; JANE/JOHN DOE VII, physician; JANE/JOHN DOE VIII, physician; JANE/JOHN DOE IX, physician; JANE/JOHN DOE X, physician; UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES; **UAMS MEDICAL CENTER UNIVERSITY HOSPITAL;** ROE CORPORATION I; ROE CORPORATION II; ROE CORPORATION III; ROE CORPORATION IV; ROE CORPORATION V; ROE CORPORATION VI; ROE CORPORATION VII; ROE CORPORATION VIII; ROE CORPORATION IX; ROE CORPORATION X; ROE CORPORATION XI; ROE CORPORATION XII; ROE **CORPORATION XIII; ROE CORPORATION XIV: ROE** CORPORATION XV; ROE CORPORATION XVI; ROE CORPORATION XVII; ROE CORPORATION XVIII; ROE CORPORATION XIX; ROE CORPORATION XX; ROE CORPORATION XXI; ROE CORPORATION XXII; ROE CORPORATION XXIII: ROE CORPORATION XXIV: ROE CORPORATION XXV; ROE CORPORATION XXVI; ROE

CORPORATION XXVII; ROE CORPORATION XXVIII; ROE

FILED 02/15/11 15:17:44 Larry Crane Pulaski Circuit Clerk





CORPORATION XXIX; ROE CORPORATION XXX; ROE CORPORATION XXXII; ROE CORPORATION XXXII; ROE CORPORATION XXXII; ROE CORPORATION XXXIV; ROE CORPORATION XXXVII; ROE CORPORATION XXXVII; ROE CORPORATION XXXVIII; ROE CORPORATION XXXVIII; ROE CORPORATION XLI; ROE CORPORATION XLI; ROE CORPORATION XLII; ROE CORPORATION XLIII; ROE CORPORATION XLIV; ROE CORPORATION XLV; ROE CORPORATION XLVI; ROE CORPORATION XLVII; ROE CORPORATION XLVII; ROE CORPORATION XLVIII; and ROE CORPORATION XLVIII

CLAIMS COLUMNS STATE OF THE 25 2011

RECEIVED

DEFENDANTS

PLAINTIFF'S FIRST AMENDED COMPLAINT AND DEMAND FOR JURY TRIAL

Plaintiff, FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, An Incapacitated Person, through her undersigned counsel brings this action against Defendants and hereby alleges and states:

NATURE OF CLAIMS

1. This is an action for medical injury pursuant to ARK. CODE ANN. § 16-114-201 et seq.

PLAINTIFFS

- 2. FLORENCE WEST resides in New Boston, Bowie County, Texas. She is married to CHARLES J. WEST.
- 3. CHARLES J. WEST resides in Sunny Acres Nursing Home, 12520 FM 1840, Dekalb, Bowie County, Texas 75559. He resides in a nursing home as a direct result of the negligence of the Defendants named herein.
- 4. JIM VERSCHOYLE is the duly appointed guardian *ad litem* for CHARLES J. WEST as evidenced by the Order Appointing Guardian *ad litem*, attached hereto as Exhibit A.

DEFENDANTS

- 5. Defendant RONALD ROBERTSON, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- 6. Defendant GIRIPRAKASH SRIKANTHAN, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of anesthesiology in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Anesthesiology, 4301 W. Markham, Little Rock, Arkansas 72205.
- 7. Defendant MARK P. WRIGHT, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- 8. Defendant RACHEL R. MCKINZIE, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of anesthesiology in Little Rock, Arkansas. She may be served at her place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Anesthesiology 4301 W. Markham, Little Rock, Arkansas 72205.
- 9. Defendant JAY M. CHEEK, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.

PAGE 3 OF 51

- 10. Defendant JOHN B. CONE, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- Defendant CAREY L. GUIDRY, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of radiology in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Radiology, 4301 W. Markham, Little Rock, Arkansas 72205.
- 12. Defendant MANILA BAGHERZADEH-AZAR, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of radiology in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Radiology, 4301 W. Markham, Little Rock, Arkansas 72205.
- 13. Defendant NANCY HOGUE is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 14. Defendant CASEY R. SCALES is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 15. Defendant CHRISTINA GARNES, R.N., is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER

UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.

- 16. Defendant JANE/JOHN DOE I is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 17. Defendant JANE/JOHN DOE II is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 18. Defendant JANE/JOHN DOE III is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 19. Defendant JANE/JOHN DOE IV is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 20. Defendant JANE/JOHN DOE V is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 21. Defendant JANE/JOHN DOE VI is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 22. Defendant JANE/JOHN DOE VII is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 23. Defendant JANE/JOHN DOE VIII is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 24. Defendant JANE/JOHN DOE IX is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 25. Defendant JANE/JOHN DOE X is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES is a part of the University of Arkansas, which is a body politic and corporate, organized under the laws of the State of Arkansas. See Ark. Code Ann. §§ 6-64-202 & 6-64-401. Pursuant to Ark. Code Ann. § 6-64-402(b)(1), Defendant UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, through its Board of Trustees, "shall employ all necessary supervisors, professors, teachers, agents and servants" to ensure that its medical department is "operated in a first-class manner." Defendant UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES may be served through

any agent authorized to accept service at its principal place of business at 4301 W. Markham, Little Rock, Arkansas 72205.

- 27. Upon information and belief, Defendant UAMS MEDICAL CENTER UNIVERSITY HOSPITAL is a hospital operated by UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES. Defendant UAMS MEDICAL CENTER UNIVERSITY HOSPITAL may be served through its Chief Operating Officer, Melissa Fontaine, at 4301 W. Markham, Little Rock, Arkansas 72205.
- 28. Defendant ROE CORPORATION I is an insurance company doing business in the State of Arkansas, which insured RONALD ROBERTSON, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RONALD ROBERTSON, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 29. Defendant ROE CORPORATION II is an insurance company doing business in the State of Arkansas, which insured RONALD ROBERTSON, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of a RONALD ROBERTSON, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 30. Defendant ROE CORPORATION III is an insurance company doing business in the State of Arkansas, which insured GIRIPRAKASH SRIKANTHAN, M.D. for professional

liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of GIRIPRAKASH SRIKANTHAN, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 31. Defendant ROE CORPORATION IV is an insurance company doing business in the State of Arkansas, which insured GIRIPRAKASH SRIKANTHAN, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of GIRIPRAKASH SRIKANTHAN, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 32. Defendant ROE CORPORATION V is an insurance company doing business in the State of Arkansas, which insured MARK P. WRIGHT, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MARK P. WRIGHT, M.D and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 33. Defendant ROE CORPORATION VI is an insurance company doing business in the State of Arkansas, which insured MARK P. WRIGHT, M.D for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MARK P. WRIGHT, M.D and his

officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant

- 34. Defendant ROE CORPORATION VII is an insurance company doing business in the State of Arkansas, which insured RACHEL R. MCKENZIE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RACHEL R. MCKENZIE, M.D and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 35. Defendant ROE CORPORATION VIII is an insurance company doing business in the State of Arkansas, which insured RACHEL R. MCKENZIE, M.D for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RACHEL R. MCKENZIE, M.D and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 36. Defendant ROE CORPORATION IX is an insurance company doing business in the State of Arkansas, which insured JAY M. CHEEK, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JAY M. CHEEK, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the

time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

37. Defendant ROE CORPORATION X is an insurance company doing business in the State of Arkansas, which insured JAY M. CHEEK, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JAY M. CHEEK, M.D and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

38. Defendant ROE CORPORATION XI is an insurance company doing business in the State of Arkansas, which insured JOHN B. CONE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JOHN B. CONE, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

39. Defendant ROE CORPORATION XII is an insurance company doing business in the State of Arkansas, which insured JOHN B. CONE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JOHN B. CONE, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 40. Defendant ROE CORPORATION XIII is an insurance company doing business in the State of Arkansas, which insured CAREY L. GUIDRY, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CAREY L. GUIDRY, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 41. Defendant ROE CORPORATION XIV is an insurance company doing business in the State of Arkansas, which insured CAREY L. GUIDRY, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CAREY L. GUIDRY, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 42. Defendant ROE CORPORATION XV is an insurance company doing business in the State of Arkansas, which insured MANILA BAGHERZADEH-AZAR, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MANILA BAGHERZADEH-AZAR, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 43. Defendant ROE CORPORATION XVI is an insurance company doing business in the State of Arkansas, which insured MANILA BAGHERZADEH-AZAR, M.D. for professional

liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed

Plaintiff's Original Complaint, and, as such, is responsible for the action of MANILA

BAGHERZADEH-AZAR, M.D. and his officers, agents, servants, employees or representatives

under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint's Compl

- Defendant ROE CORPORATION XVII is an insurance company doing business in the State of Arkansas, which insured NANCY HOGUE, NURSE for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of NANCY HOGUE, NURSE and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XVIII is an insurance company doing business in the State of Arkansas, which insured NANCY HOGUE, NURSE for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of NANCY HOGUE, NURSE and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 46. Defendant ROE CORPORATION XIX is an insurance company doing business in the State of Arkansas, which insured CASEY R. SCALES, RESPIRATORY THERAPIST for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of

CASEY R. SCALES, RESPIRATORY THERAPIST and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 47. Defendant ROE CORPORATION XX is an insurance company doing business in the State of Arkansas, which insured CASEY R. SCALES, RESPIRATORY THERAPIST for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CASEY R. SCALES, RESPIRATORY THERAPIST and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 48. Defendant ROE CORPORATION XXI is an insurance company doing business in the State of Arkansas, which insured CHRISTINA GARNES, R.N. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CHRISTINA GARNES, R.N. and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 49. Defendant ROE CORPORATION XXII is an insurance company doing business in the State of Arkansas, which insured CHRISTINA GARNES, R.N. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions CHRISTINA GARNES, R.N. and her officers, agents, servants, employees or representatives under the Arkansas Direct Action

Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity of the ide

- State of Arkansas, which insured JANE/JOHN DOE I, licensed nurse, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE I, licensed nurse, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXIV is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE I, licensed nurse, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE I, licensed nurse, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXV is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE II, licensed nurse, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE II, licensed nurse, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- Defendant ROE CORPORATION XXVI is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE II, licensed nurse, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE II, licensed nurse, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 54. Defendant ROE CORPORATION XXVII is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE III, licensed nurse, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE IIII, licensed nurse, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXVIII is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE III, licensed nurse, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE III, licensed nurse, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 56. Defendant ROE CORPORATION XXIX is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE IV, respiratory therapist, for professional

liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE IV, respiratory therapist, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 57. Defendant ROE CORPORATION XXX is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE IV, respiratory therapist, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE IV, respiratory therapist, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 58. Defendant ROE CORPORATION XXXI is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE V, respiratory therapist, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE V, respiratory therapist, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 59. Defendant ROE CORPORATION XXXII is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE V, respiratory therapist, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE V,

respiratory therapist, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- One of Arkansas, which insured JANE/JOHN DOE VI, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff's Criginal Complaint, and, as such, is responsible for the actions JANE/JOHN DOE VI, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXXIV is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE VI, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE VI, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXXV is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE VII, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE VII, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas

Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 63. Defendant ROE CORPORATION XXXVI is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE VII, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE VII, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXXVII is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE VIII, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE VIII, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XXXVIII is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE VIII, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE VIII, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

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- Defendant ROE CORPORATION XXXIX is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE IX, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE IX, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE IX, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant ROE CORPORATION XLI is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE X, physician, for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE X, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 69. Defendant ROE CORPORATION XLII is an insurance company doing business in the State of Arkansas, which insured JANE/JOHN DOE X, physician, for professional liability

during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions JANE/JOHN DOE X, physician, and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- Obefendant ROE CORPORATION XLIII is an insurance company doing business in the State of Arkansas, which insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 71. Defendant ROE CORPORATION XLIV is an insurance company doing business in the State of Arkansas, which insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 72. Defendant ROE CORPORATION XLV is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 73. Defendant ROE CORPORATION XLVI is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 74. Defendant ROE CORPORATION XLVII is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 75. Defendant ROE CORPORATION XLVIII is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants,

employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

Defendant ROE CORPORATION XLIX is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this First Amended Complaint, Plaintiff is not aware of the identity and location of this Defendant.

ACTS OF AGENTS

Whenever in this Complaint it is alleged that any of the Defendants did any act or thing, it is meant that the particular Defendant referred to, either personally or through their respective employees or representatives, did such act or thing, and that, at the time such act or thing was done, it was done in the ordinary course and scope of employment of that Defendant's officers, agents, servants, or representatives, and Defendants are responsible for the acts of their/its officers, agents, servants, employees, or representatives through the doctrine of respondent superior.

JURISDICTION AND VENUE

- 78. The alleged acts or omissions that are the subject of this action occurred in Pulaski County, Arkansas and venue is proper pursuant to ARK. CODE ANN. § 16-55-213(e).
- 79. Jurisdiction of the subject matter and parties in this action is proper in this Court.

FACTUAL ALLEGATIONS

- 80. CHARLES J. WEST ("West"), a victim of a motor vehicle accident, was admitted to UAMS MEDICAL CENTER UNIVERSITY HOSPITAL on February 11, 2009, after being airlifted by helicopter from Christus St. Michael Health System, Texarkana, Texas.
- 81. West's diagnoses included traumatic pneumohemothorax, multiple rib fractures, lung contusion, spleen laceration, liver laceration and subarachnoid hemorrhage. At UAMS MEDICAL CENTER UNIVERSITY HOSPITAL, he underwent a left major thoracotomy for bleeding and control of lung lacerations.
- 82. West experienced progressive improvement until March 1, 2009. At or about 1335 that day, while undergoing a respiratory therapy treatment known as intrapulmonary percussive ventilation ("IPV"), his condition suddenly deteriorated. He stopped breathing, and a "code" was called.
- 83. West's entire healthcare team, consisting of physicians, nurses and respiratory therapists, failed to recognize, diagnose and treat his obvious tension pneumothorax for more than one hour.
- 84. The placement of an essential chest tube was not performed until at least 1500, only after an inexplicably delayed review of unnecessary chest x-rays.
- 85. As a result of such actions and inactions identified in paragraphs 80-84 herein, West suffered hypoxia, hypotension, bradycardia and acidosis, which, in turn, caused decreased cerebral perfusion and brain injury. The ultimate result was anoxic brain damage as documented by the hospital-coding summary of March 13, 2009.
- 86. Moreover, laboratory evidence indicated that West suffered from severe malnutrition.

 This severe malnutrition, the result of negligent medical care, contributed to West's need for

mechanical ventilation and helped to prevent West from being weaned off this respiratory assistance prior to March 1, 2009. This severe malnutrition, in turn, exposed West to a greater risk for the development of a pneumothorax (a well-recognized complication of mechanical ventilation).

87. West was discharged from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL on March 9, 2009. Since his hospital discharge, West has been confined to nursing homes. West will not be able to function as an independent adult for the remainder of his life.

CAUSES OF ACTION

NEGLIGENCE

- 88. Plaintiff restates the allegations of paragraphs 1 through 87 of this Plaintiff's Original Complaint, as if fully set forth herein.
- 89. Defendant, RONALD ROBERTSON, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to provide adequate nutrition for West so as to prevent severe malnutrition;
 - b. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
 - Selecting Intrapulmonary Percussive Ventilation as an appropriate modality of respiratory care for West;
 - d. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - e. Failing to have another physician timely manage West's new emergency condition if not personally available;
 - f. Failing to properly train, instruct and supervise resident physicians and fellowship physicians regarding the clinical diagnosis and emergency management of tension pneumothorax;

- g. Operating a surgical practice and/or service negligently, in a manner that denied standard-of-care diagnosis for West as he was experiencing a tension pneumothorax;
- h. Failing to use the degree of skill and care required by the standard for physicians in the same or similar circumstances;
- i. Failing to timely and appropriately respond to a West's code situation; and
- Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 90. Defendant ROE CORPORATION I insured RONALD ROBERTSON, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RONALD ROBERTSON, M.D., and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 91. Defendant ROE CORPORATION II insured RONALD ROBERTSON, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RONALD ROBERTSON, M.D., and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 92. Defendant, GIRIPRAKASH SRIKANTHAN, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;

- c. Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
- d. Failing to use clinical criteria to timely diagnosis tension pneumothorax;
- e. Failing to immediately evaluate West by traditional means of clinical assessment in order to make timely diagnosis of tension pneumothorax;
- f. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
- g. Failing to immediately view the chest x-rays that were ordered;
- h. Relying on unnecessary testing of arterial blood gases, thereby delaying the diagnosis of tension pneumothorax;
- i. Failing to provide timely thoracic decompression by needle thoracostomy and/or chest tube;
- j. Failing to use the degree of skill and care required by the standard for physicians in the same or similar circumstances;
- k. Failing to timely and appropriately respond to West's code situation; and
- Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 93. Defendant ROE CORPORATION III insured GIRIPRAKASH SRIKANTHAN, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of GIRIPRAKASH SRIKANTHAN, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 94. Defendant ROE CORPORATION IV insured GIRIPRAKASH SRIKANTHAN, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of

GIRIPRAKASH SRIKANTHAN, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 95. Defendant, MARK P. WRIGHT, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
 - Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
 - d. Failing to use clinical criteria to timely diagnosis tension pneumothorax;
 - e. Failing to examine for and to detect unilateral absence of breath sounds;
 - f. Failing to insert chest tube in a timely manner;
 - g. Failing to perform chest decompression by use of needle or surgeon's finger if chest tube equipment were not readily available;
 - h. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
 - i. Failing to immediately view the chest x-rays that were ordered;
 - j. Failing to use the degree of skill and care required by the standard of care for surgeons in the same or similar circumstances;
 - k. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
 - 1. Failing to timely and appropriately respond to West's code situation; and
 - m. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.

- 96. Defendant ROE CORPORATION V insured MARK P. WRIGHT, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MARK P. WRIGHT, M.D., and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 97. Defendant ROE CORPORATION VI insured MARK P. WRIGHT, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MARK P. WRIGHT, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 98. Defendant, RACHEL R. MCKINZIE, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
 - Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
 - d. Failing to use clinical criteria to timely diagnose tension pneumothorax;
 - e. Failing to examine for and to detect unilateral absence of breath sounds;
 - f. Failing to provide timely thoracic decompression by needle thoracostomy and/or chest tube;
 - g. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
 - h. Failing to immediately view the chest x-rays that were ordered;

- i. Failing to use the degree of skill and care required by the standard for physicians in the same or similar circumstances;
- j. Failing to timely and appropriately respond to West's code situation; and
- k. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 99. Defendant ROE CORPORATION VII insured RACHEL R. MCKINZIE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RACHEL R. MCKINZIE, M.D. and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 100. Defendant ROE CORPORATION VIII insured RACHEL R. MCKINZIE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RACHEL R. MCKINZIE, M.D. and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 101. Defendant, JAY M. CHEEK, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
 - Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
 - d. Failing to use clinical criteria to timely diagnosis tension pneumothorax;
 - e. Failing to examine for and to detect unilateral absence of breath sounds;

- f. Failing to insert chest tube in a timely manner;
- g. Failing to perform chest decompression by use of needle or surgeon's finger if chest tube equipment was not readily available;
- h. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
- i. Failing to immediately view the chest x-rays that were ordered;
- Failing to use the degree of skill and care required by the standard of care for surgeons in the same or similar circumstances;
- k. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
- 1. Failing to timely and appropriately respond to West's code situation; and
- m. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 102. Defendant ROE CORPORATION IX insured JAY M. CHEEK, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JAY M. CHEEK, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 103. Defendant ROE CORPORATION X insured JAY M. CHEEK, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JAY M. CHEEK, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 104. Defendant, JOHN B. CONE, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:

- a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax despite having been made being aware of patient's condition;
- b. Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009, despite having been made aware of patient's condition;
- c. Failing to instruct bedside physicians to perform clinical assessment of tension pneumothorax and to perform emergent thoracic decompression if there were clinical findings suggestive of tension pneumothorax;
- d. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
- e. Failing to timely and appropriately respond to West's code situation; and
- f. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 105. Defendant ROE CORPORATION XI insured JOHN B. CONE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JOHN B. CONE, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 106. Defendant ROE CORPORATION XII insured JOHN B. CONE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JOHN B. CONE, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 107. Defendant, CAREY L. GUIDRY, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to interpret West's "stat" chest x-rays in appropriate time;

- b. Failing to relay findings of "stat" chest x-rays to West's bedside physicians in a timely manner;
- c. Failing to diagnose tension pneumothorax during interpretation of chest radiographs, March 1, 2009; and
- d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 108. Defendant ROE CORPORATION XIII insured CAREY L. GUIDRY, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CAREY L. GUIDRY, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 109. Defendant ROE CORPORATION XIV insured CAREY L. GUIDRY, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CAREY L. GUIDRY, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 110. Defendant, MANILA BAGHERZADEH-AZAR, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to interpret West's "stat" chest x-rays in appropriate time;
 - Failing to relay findings of "stat" chest x-rays to West's bedside physicians in a timely manner;
 - c. Failing to diagnose tension pneumothorax during interpretation of chest radiographs, March 1, 2009; and

- d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 111. Defendant ROE CORPORATION XV insured MANILA BAGHERZADEH-AZAR, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MANILA BAGHERZADEH-AZAR, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 112. Defendant ROE CORPORATION XVI insured MANILA BAGHERZADEH-AZAR, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MANILA BAGHERZADEH-AZAR, M.D. and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 113. Defendant, NANCY HOGUE, NURSE, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code":
 - b. Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
 - Failing to document required clinical data on "focus notes" or other form of nurses' notes other than eleven (11) lines of handwritten observations 1330 – 1530, March 1, 2009;
 - d. Failing to relay and/or communicate chest x-ray findings, interpretation, and any other telephoned or transmitted information to West's attending physicians;

- e. Failing to relay and/or communicate chest x-ray findings, interpretation, and any AS JANKANSAS STATE COMMISSION other telephoned or transmitted information to West's attending physicians in timely manner; and
- f. Spoliation and fraudulent falsification of the medical records and medical chart of 25 West in an attempt to conceal, hide, or cover up negligent acts and omissions
- Defendant ROE CORPORATION XVII insured NANCY HOGUE, NURSE, for 114. professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of NANCY HOGUE, NURSE, and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION XVIII insured NANCY HOGUE, NURSE, for 115. professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of NANCY HOGUE, NURSE, and his officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant, CASEY R. SCALES, Respiratory Therapist, in the course of rendering 116. medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Selecting Intrapulmonary Percussive Ventilation as an appropriate modality of respiratory care for West;
 - b. Failing to have high index of suspicion for tension pneumothorax when West's clinical condition suddenly deteriorated during IPV treatment;
 - c. Failing to examine for and to detect unilateral absence of breath sounds;
 - d. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410, March 1, 2009;

- e. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax; and
- f. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 117. Defendant ROE CORPORATION XIX insured CASEY R. SCALES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CASEY R. SCALES and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 118. Defendant ROE CORPORATION XX insured CASEY R. SCALES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CASEY R. SCALES and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 119. Defendant, CHRISTINA GARNES, R.N., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code";
 - Failing to document required clinical data on "focus notes" or other form of nurses' notes other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009; and
 - d. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.

- 120. Defendant ROE CORPORATION XXI insured CHRISTINA GARNES, R.N. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CHRISTINA GARNES, R.N. and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 121. Defendant ROE CORPORATION XXII insured CHRISTINA GARNES, R.N. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CHRISTINA GARNES, R.N. and her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 122. Defendant, JANE/JOHN DOE I, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - b. Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code"; and
 - c. Failing to document required clinical data on "focus notes" or other form of nurses' notes other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
- 123. Defendant ROE CORPORATION XXIII insured JANE/JOHN DOE I for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE I and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 124. Defendant ROE CORPORATION XXIV insured JANE/JOHN DOE I for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE I and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 125. Defendant, JANE/JOHN DOE II, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - Failing to document required clinical data on a "code sheet" during West's "code";
 - b. Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code"; and
 - c. Failing to document required clinical data on "focus notes" or other form of nurses' notes other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
- 126. Defendant ROE CORPORATION XXV insured JANE/JOHN DOE II for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE II and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 127. Defendant ROE CORPORATION XXVI insured JANE/JOHN DOE II for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE II and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 128. Defendant, JANE/JOHN DOE III, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - Failing to delegate responsibility for documenting required clinical data on a "code sheet" during West's "code"; and
 - c. Failing to document required clinical data on "focus notes" or other form of nurses' notes other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
- 129. Defendant ROE CORPORATION XXVII insured JANE/JOHN DOE III for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE III and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 130. Defendant ROE CORPORATION XXVIII insured JANE/JOHN DOE III for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE III and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 131. Defendant, JANE/JOHN DOE IV, respiratory therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410, March 1, 2009; and
 - b. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax.

- 132. Defendant ROE CORPORATION XXIX insured JANE/JOHN DOE IV for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IV and his/her officers, agents, servants, employees or representatives under the Arkansas Direction of the A
- Action Statute.

 133. Defendant ROE CORPORATION XXX insured JANE/JOHN DOE IV for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IV and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 134. Defendant, JANE/JOHN DOE V, respiratory therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410, March 1, 2009; and
 - b. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax.
- 135. Defendant ROE CORPORATION XXXI insured JANE/JOHN DOE V for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE V and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 136. Defendant ROE CORPORATION XXXII insured JANE/JOHN DOE V for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed

Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE V and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 137. Defendant, JANE/JOHN DOE VI, a physician, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 138. Defendant ROE CORPORATION XXXIII insured JANE/JOHN DOE VI for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VI and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 139. Defendant ROE CORPORATION XXXIV insured JANE/JOHN DOE VI for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VI and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 140. Defendant, JANE/JOHN DOE VII, a physician, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 141. Defendant ROE CORPORATION XXXV insured JANE/JOHN DOE VII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of

JANE/JOHN DOE VII and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 142. Defendant ROE CORPORATION XXXVI insured JANE/JOHN DOE VII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VII and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 143. Defendant, JANE/JOHN DOE VIII, a physician, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 144. Defendant ROE CORPORATION XXXVII insured JANE/JOHN DOE VIII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VIII and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 145. Defendant ROE CORPORATION XXXVIII insured JANE/JOHN DOE VIII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VIII and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 146. Defendant, JANE/JOHN DOE IX, a physician, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:

- a. Failing to respond to West's "code" announcement and situation.
- 147. Defendant ROE CORPORATION XXXIX insured JANE/JOHN DOE IX for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IX and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 148. Defendant ROE CORPORATION XL insured JANE/JOHN DOE IX for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IX and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 149. Defendant, JANE/JOHN DOE X, a physician, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 150. Defendant ROE CORPORATION XLI insured JANE/JOHN DOE X for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE X and his/her officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 151. Defendant ROE CORPORATION XLII insured JANE/JOHN DOE X for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE

X and his/her officers, agents, servants, employees or representatives under the Arkansas Intermediate State of the Arkan

the acts of its employees under the doctrine of respondeat superior and is responsible for its ow acts, which include the following:

- a. Failing to properly train, instruct and supervise its employees who provided medical services to West:
- b. Credentialing and providing hospital privileges negligently to the physicians and hospital personnel who provided care to West;
- c. Failing to require as part of protocol, policy or procedure the timely diagnosis and treatment of a patient with tension pneumothorax;
- d. Operating its intensive care unit, nursing department, radiology department and supervisory/administrative staff negligently, in a manner that denied standard-of-care diagnosis and management for West as he was experiencing a tension pneumothorax;
- e. Failing to have a physician immediately available with training and knowledge to clinically diagnosis tension pneumothorax and then perform emergency thoracic decompression;
- f. Failing to implement appropriate policies and procedures to assure that injuries such as experienced by West do not occur while patients are receiving medical care from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL;
- g. Failing to use the degree of skill and care required by the standard of care for hospitals in the same or similar circumstances; and
- h. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 153. Defendant, UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, is responsible for the acts of its employees under the doctrine of respondeat superior and is liable for its own acts, which include the following:

- a. Failing to teach the resident physicians and fellowship physicians who attended West on March 1, 2009 how to diagnosis tension pneumothorax by clinical assessment and criteria; and
- b. Failing to train the resident physicians and fellowship physicians who attended West on March 1, 2009 how to promptly perform thoracic decompression by needle thoracostomy, use of surgeon's finger as temporary "vent", and especially by chest tube placement; and
- c. Spoliation and fraudulent falsification of the medical records and medical chart of West in an attempt to conceal, hide, or cover up negligent acts and omissions.
- 154. Defendant ROE CORPORATION XLIII insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 155. Defendant ROE CORPORATION XLIV insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION XLV insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

157. Defendant ROE CORPORATION XLVI insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and

its officers, agents, servants, employees or representatives under the Arkansas Direct Action

Statute.

158. Defendant ROE CORPORATION XLVII insured UNIVERSITY OF ARKANSAS FOR

MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action

arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is

responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and

its officers, agents, servants, employees or representatives under the Arkansas Direct Action

Statute.

159. Defendant ROE CORPORATION XLVIII insured UNIVERSITY OF ARKANSAS FOR

MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action

arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is

responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and

its officers, agents, servants, employees or representatives under the Arkansas Direct Action

Statute.

160. Defendant ROE CORPORATION XLIX insured UNIVERSITY OF ARKANSAS FOR

MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action

arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is

responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and

its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

PROXIMATE CAUSE

- 161. Plaintiff restates the allegations of paragraphs 1 through 160 of this Plaintiff's First Amended Complaint, as if fully set forth herein.
- 162. As a direct and proximate result of the combined and/or singular acts of negligence of the Defendants and their breach of duties owed to West, Plaintiff suffered damages more fully described below for which the Defendants are jointly and severally liable.

WILLFUL AND WANTON CONDUCT

- 163. Plaintiff restates the allegations of paragraphs 1 through 162 of this Plaintiff's First Amended Complaint, as if fully set forth herein.
- 164. Defendants' actions and omissions set forth above, when viewed objectively from the standpoint of the Defendant at the time of the occurrence, involved an extreme degree of risk considering the probability and magnitude of the potential harm to West. Such acts and commissions constitute willful and wanton conduct and demonstrate a conscious indifference to the consequences to West and his loved ones, such that malice can be inferred.

<u>DAMAGES</u>

165. Plaintiff restates the allegations of paragraphs 1 through 164 of this Plaintiff's First Amended Complaint, as if fully set forth herein.

- 166. West suffered damages, and Plaintiffs West and FLORENCE WEST are entitled to recover from Defendants the following:
 - a. Past hospital and extended care facility expenses, and those reasonably expected to be occurred in the future;
 - b. Past medical and nursing expenses, and those reasonably expected to be incurred in the future;
 - c. Loss of love, comfort, society and companionship of CHARLES J. WEST due to his debilitating injuries;
 - d. Loss of reasonable contributions of a pecuniary value that Plaintiff FLORENCE WEST, in reasonable probability, would have received from CHARLES J. WEST, had he not been injured; and
 - e. Mental anguish suffered in the past, and mental anguish reasonably expected to be suffered in the future.
- 167. The damages claimed herein are in an amount in excess of the amount required for jurisdiction in this court.

CONSTITUIONAL CLAIMS

- 168. Plaintiff restates the allegations of paragraphs 1 through 167 of this Plaintiff's First Amended Complaint, as if fully set forth herein.
- 169. This Court has the power under ARK. CODE ANN. § 16-111-103(a) to declare the rights of Plaintiff in these proceedings. Act 649 adversely affects Plaintiff's rights in these proceedings because the Act as applied to the facts in these proceedings violates the Arkansas Constitution and Plaintiff's privileges and immunities as stated below.
- 170. In enacting Act 649, the Arkansas Legislature limited amounts that could be recovered for injuries to persons or property, in violation of the Arkansas Constitution. The Act most obviously violates Article V, Section 32 of the Arkansas Constitution, which plainly prohibits

legislative limitations on recoveries, and Article IV, Sections 1 and 2 of the Arkansas Constitution, which prohibits legislative incursions on judicial power.

171. Act 649 violates a whole constitutional scheme that works to limit governmental incursion on common law rights and to limit legislative power to assist special interests. This scheme is embodied in provisions such as Article II, Sections 4, 13, and 21 of the Arkansas Constitution, recognizing the right to petition the government for redress and imposing a duty on government to provide such redress; Article II, Section 13 of the Arkansas Constitution, guaranteeing every injured party the right to a remedy; Article II, Section 7 of the Arkansas Constitution, prescribing that the right to a jury trial "shall remain inviolate;" Article II, Sections 13 and 21 of the Arkansas Constitution, mandating due process and application of the law of the land; Article II, Sections 3, 18, and 21 of the Arkansas Constitution, recognizing that citizens shall receive equal treatment ("the equality provisions"); and the related Article V, Section 25 of the Arkansas Constitution, limiting unequal treatment to times when it is justified, and requiring "that where a general law can be made applicable no special law shall be enacted."

172. Specifically, Section 18 of Act 649 is unconstitutional in that it requires the plaintiff to provide evidence of the standard care allegedly breached by using an expert witness of the same medical specialty as the defendant. Ironically, Section 18 of Act 649 places no restriction in the same circumstances, on evidence the defendant might present regarding the standard of care. Further, Section 18 of Act 649 requires a plaintiff to establish causation through the use of a "qualified medical expert". Section 18 of Act 649 places no restriction, in the same circumstances, on evidence a defendant might present regarding causation. Consequently, Section 18 of Act 649 treats victims of medical injury different that other victims of other torts and treats perpetrators of medical injury different than it does perpetrators of other torts. As

such, Section 18 of Act 649 treats victims of medical injury less advantageously than victims of other torts and treats perpetrators of medical injury different than it does perpetrators of other torts. There is no rational basis for the difference in treatment worked by Section 18 of Act 649. There is no compelling state interest for the differences in treatment worked by Section 18 of Act 649. Section 18 of Act 649 has the purpose and intent of reducing the amount of recovery for this Plaintiff in this cause of action. Section 18 of Act 649 is in direct conflict with Arkansas Rule of Evidence 702. Section 18 of Act 649 violates the equality provisions and the right to a remedy and due process clauses of the Arkansas Constitution, Article II, Sections 3, 13, 18 and 21. Section 18 of Act 649 impairs the capacity of this Plaintiff, in asserting a claim for medical injury, to exercise the right of access to the courts, in violation of the right to petition the government for redress in Article II, Sections 4, 13 and 21 of the Arkansas Constitution. Section 18 of Act 649 violates Article V, Sections 25 and 32, of the Arkansas Constitution because the Legislature has created a special law that has the purpose and effect of limiting the plaintiff's right to recovery. Section 18 of Act 649 violates the separation of powers doctrine in that it is in direct conflict with Arkansas Rule of Evidence 702.

173. Specifically Act 649, Section 20 requires courts, at the request of a party, to order that awards for future damages greater than \$100,000.00 to be paid in future payments, rather than a lump sum. Section 20 of Act 649 is unconstitutional because it legislatively mandates changes in awards made by juries. Act 649, Section 20 violates the right to a jury trial and due process clause of Article II, Sections 7, 13, and 21 of the Arkansas Constitution. Act 649, Section 20 impairs the capacity of the plaintiff asserting claims for medical injury to exercise the right of access to courts in violation of the right to petition the government for redress in Article II, Sections 4, 13, and 21 of the Arkansas Constitution. Act 629, Section 20 violates the separation

of powers provision in Article IV, Sections 1 and 2 and Article V, Section 32, of the Arkansas

Constitution.

174. Specifically, ARK. CODE ANN. § 16-55-201 violates Article V, Section 32 of the

Arkansas State Constitution, as it eliminates joint and several liability. Further, Section 16-55-

201 constitutes an impermissible limitation by the Legislature on recoveries under Article IV,

Sections 1 and 2 of the Arkansas State Constitution, as it constitutes an unconstitutional

usurpation of judicial powers.

175. Since Act 649 adversely affects Plaintiff's rights in these proceedings, rights that are

protected by the Arkansas Constitution, as enumerated above, Plaintiff has standing pursuant to

ARK. CODE ANN. § 16-111-104 to request a declaratory judgment in her favor invalidating Act

649 as unconstitutional when applied to the facts of these proceedings. The Attorney General is

being served with notice of these proceedings pursuant to ARK. CODE ANN. § 16-111-106

because Plaintiff requests a judgment declaring Act 649 unconstitutional.

DEMAND FOR JURY TRIAL

Plaintiff demands a trial by jury.

WHEREFORE, Plaintiff prays that she be awarded damages in excess of the federal

jurisdictional limit and sufficient to compensate for the damages described above and for

PLAINTIFF'S FIRST AMENDED COMPLAINT (1390,000) AND DEMAND FOR JURY TRIAL

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all other relief to which she may be entitled, and that a jury be instructed to draw a negative inference against any spoliator/falsifier.

Respectfully submitted,

Jack N. Boyd, Jr. **BOYD, POFF & BURGESS, LLP**

2301 Moores Lane P.O. Box 6297

Texarkana, Texas 75505-6297

Telephone: 903-838-6123 Facsimile: 903-832-8489

Jack N. Boyd, Jr.

Jack N. Boyd, Jr.

AR Bar # 90150

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Authorized

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Phone: (903) 796-4187 Fax: (903) 796-6522 TSBN: 20554000

ATTORNEY AD LITEM

BOYD PRAZAK, LLP

A REGISTERED LIMITED LIABILITY PARTNERSHIP

JACK N. BOYD, JR. JONATHAN R. PRAZAK 2301 MOORES LANE TEXARKANA, TEXAS 75503 (903) 838-6123 WWW.BOYDPRAZAK.COM

May 24, 2016

Arkansas Claims Commission

MAY 25 2016

RECEIVED

VIA FACSIMILE 501-682-2823
Arkansas State Claims Commission
ATTN: Brenda Wade
100 East Capitol Ave, Ste 410
Little Rock, Arkansas 72201-3823

Re:

Florence West

Claim #:

11-0554-CC vs. University of Arkansas Medical Sciences

Dear Brenda:

I am in receipt of and thank you for your letter dated May 17, 2016. We have conducted discovery in the civil litigation that we filed against the physicians in this matter, and through that discovery it has become apparent that the nurses and the pulmonary therapist were negligent in causing Mr. West's injury, an anoxic brain injury. Based upon that discovery information, we dismissed the civil lawsuit against the physicians. We are now ready to proceed with this claim with the Arkansas State Claims Commission directly against UAMS.

I would thank you to provide me with available dates for the depositions of the respiratory therapist and the RN who was in charge of Mr. West's care on the date of his incident, so that we may get this matter ready for a claims commission hearing. Unfortunately, I don't know the names of either of these ladies, as we can't make that determination from the medical records. I am enclosing a copy of the Original Complaint to enable you to have the applicable dates of these hospital employees. Would you mind checking with the hospital and find out if you can produce them for depositions?

I look forward to working with you.

Sincerely,

Jack, N. Boyd, Jr.

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS LITTLE ROCK DISTRICT

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian ad litem for Charles West

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12TH DIVISION

PLAINTIFF

60CV2011 0643

VS.

RONALD ROBERTSON, M.D.; GIRIPRAKASH SRIKANTHAN, M.D.; MARK P. WRIGHT, M.D.; RACHEL R. MCKINZIE, M.D.; JAY M. CHEEK, M.D.; JOHN B CONE, M.D.; CAREY L. GUIDRY, M.D.; MANILA BAGHERZADEH-AZAR, M.D.; NANCY HOGUE, NURSE; CASEY R. SCALES, RESPIRATORY THERAPIST; CHRISTINA GARNES, R.N.; JANE/JOHN DOE I, licensed nurse; JANE/JOHN DOE II, licensed nurse: JANE/JOHN DOE III, licensed nurse; JANE/JOHN DOE IV, respiratory therapist; JANE/JOHN DOE V, respiratory therapist; JANE/JOHN DOE VI, physician; JANE/JOHN DOE VII, physician; JANE/JOHN DOE VIII, physician; JANE/JOHN DOE IX, physician; JANE/JOHN DOE X, physician; UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES; DAMS MEDICAL CENTER UNIVERSITY HOSPITAL; ROE CORPORATION I; ROE CORPORATION II; ROE CORPORATION III; ROE CORPORATION IV; ROE CORPORATION V; ROE CORPORATION VI; and ROE CORPORATION VII

DEFENDANTS

PLAINTIFF'S ORIGINAL COMPLAINT

Plaintiff, FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, An Incapacitated Person, through her undersigned counsel brings this action against Defendants and hereby alleges and states:

NATURE OF CLAIMS

1. This is an action for medical injury pursuant to ARK. CODE ANN. § 16-114-201 et seq.

PLAINTIFFS

- 2. FLORENCE WEST resides in New Boston, Bowie County, Texas. She is married to CHARLES J. WEST.
- 3. CHARLES J. WEST resides in Sunny Acres Nursing Home, 12520 FM 1840, Dekalb, Bowie County, Texas 75559. He resides in a nursing home as a direct result of the negligence of the Defendants named herein.
- 4. JIM VERSCHOYLE is the duly appointed guardian ad litem for Charles West as evidenced by the Order Appointing Guardian ad litem, attached hereto as exhibit A.

DEFENDANTS

- 5. Defendant RONALD ROBERTSON, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- 6. Defendant GIRIPRAKASH SRIKANTHAN, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of anesthesiology in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Anesthesiology, 4301 W. Markham, Little Rock, Arkansas 72205.

- 7. Defendant MARK P. WRIGHT, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- 8. Defendant RACHEL R. MCKINZIE, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of anesthesiology in Little Rock, Arkansas. She may be served at her place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Anesthesiology 4301 W. Markham, Little Rock, Arkansas 72205.
- 9. Defendant JAY M. CHEEK, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- 10. Defendant JOHN B. CONE, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of surgery in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Surgery, 4301 W. Markham, Little Rock, Arkansas 72205.
- Defendant CAREY L. GUIDRY, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of radiology in Little Rock, Arkansas. He may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Radiology, 4301 W. Markham, Little Rock, Arkansas 72205.
- 12. Defendant MANILA BAGHERZADEH-AZAR, M.D. is a physician licensed to practice in the State of Arkansas, who practices in the area of radiology in Little Rock, Arkansas. He

may be served at his place of business at UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Department of Radiology, 4301 W. Markham, Little Rock, Arkansas 72205.

- 13. Defendant NANCY HOGUE is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 14. Defendant CASEY R. SCALES is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 15. Defendant CHRISTINA GARNES, R.N., is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and can be served at her place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 16. Defendant JANE/JOHN DOE I is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 17. Defendant JANE/JOHN DOE II is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 18. Defendant JANE/JOHN DOE III is a licensed nurse and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 19. Defendant JANE/JOHN DOE IV is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 20. Defendant JANE/JOHN DOE V is a licensed respiratory therapist and/or hospital staff person in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS MEDICAL CENTER UNIVERSITY HOSPITAL. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 21. Defendant JANE/JOHN DOE VI is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 22. Defendant JANE/JOHN DOE VII is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 23. Defendant JANE/JOHN DOE VII is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 24. Defendant JANE/JOHN DOE IX is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 25. Defendant JANE/JOHN DOE X is a physician licensed to practice in the State of Arkansas and practicing in Pulaski County, Arkansas. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- Defendant UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES is a part of the University of Arkansas, which is a body politic and corporate, organized under the laws of the State of Arkansas. See Ark. Code Ann. §§ 6-64-202 & 6-64-401. Pursuant to Ark. Code Ann. § 6-64-402(b)(1), Defendant UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, through its Board of Trustees, "shall employ all necessary supervisors, professors, teachers, agents and servants" to ensure that its medical department is "operated in a first-class manner." Defendant UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES may be served through any agent authorized to accept service at its principal place of business at 4301 W. Markham, Little Rock, Arkansas 72205.
- 27. Upon information and belief, Defendant UAMS MEDICAL CENTER UNIVERSITY HOSPITAL is a hospital operated by UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES. Defendant UAMS MEDICAL CENTER UNIVERSITY HOSPITAL may be served through its Chief Operating Officer, Melissa Fontaine, at 4301 W. Markham, Little Rock, Arkansas 72205.
- 28. Defendant ROE CORPORATION I is an insurance company doing business in the State of Arkansas, which insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time

Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 29. Defendant ROE CORPORATION II is an insurance company doing business in the State of Arkansas, which insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 30. Defendant ROE CORPORATION III is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 31. Defendant ROE CORPORATION IV is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants,

employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.

- 32. Defendant ROE CORPORATION V is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.
- 33. Defendant ROE CORPORATION VI is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant
- 34. Defendant ROE CORPORATION VII is an insurance company doing business in the State of Arkansas, which insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. At the time of filing this Original Complaint, Plaintiff is not aware of the identity and location of this Defendant.

ACTS OF AGENTS

35. Whenever in this Complaint it is alleged that any of the Defendants did any act or thing, it is meant that the particular Defendant referred to, either personally or through their respective employees or representatives, did such act or thing, and that, at the time such act or thing was done, it was done in the ordinary course and scope of employment of that Defendant's officers, agents, servants, of representatives, and Defendants are responsible for the acts of their/its officers, agents, servants, employees, or representatives through the doctrine of respondent superior.

JURISDICTION AND VENUE

- 36. The alleged acts or omissions that are the subject of this action occurred in Pulaski County, Arkansas and venue is proper pursuant to ARK. CODE ANN. § 16-55-213(e).
- 37. Jurisdiction of the subject matter and parties in this action is proper in this Court.

FACTUAL ALLEGATIONS

- 38. CHARLES J. WEST ("West"), a victim of a motor vehicle accident, was admitted to UAMS MEDICAL CENTER UNIVERSITY HOSPITAL on February 11, 2009, after being airlifted by helicopter from Christus St. Michael Health System, Texarkana, Texas.
- 39. West's diagnoses included traumatic pneumohemothorax, multiple rib fractures, lung contusion, spleen laceration, liver laceration and subarachnoid hemorrhage. At UAMS MEDICAL CENTER UNIVERSITY HOSPITAL, he underwent a left major thoracotomy for bleeding and control of lung lacerations.
- 40. West experienced progressive improvement until March 1, 2009. At or about 1335 that day, while undergoing a respiratory therapy treatment known as intrapulmonary percussive

ventilation ("IPV"), his condition suddenly deteriorated. He stopped breathing, and a "code" was called.

- 41. West's entire healthcare team, consisting of physicians, nurses and respiratory therapists, failed to recognize, diagnose and treat his obvious tension pneumothorax for more than one hour.
- 42. The placement of an essential chest tube was not performed until at least 1500, only after an inexplicably delayed review of unnecessary chest x-rays.
- 43. As a result of such actions and inactions identified in paragraphs 33-38 herein, West suffered hypoxia, hypotension, bradycardia and acidosis, which, in turn, caused decreased cerebral perfusion and brain injury. The ultimate result was anoxic brain damage as documented by the hospital-coding summary of March 13, 2009.
- 44. Moreover, laboratory evidence indicated that West suffered from severe malnutrition. This severe malnutrition, the result of negligent medical care, contributed to West's need for mechanical ventilation and helped to prevent West from being weaned off this respiratory assistance prior to March 1, 2009. This severe malnutrition, in turn, exposed West to a greater risk for the development of a pneumothorax (a well-recognized complication of mechanical ventilation).
- 45. West was discharged from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL on March 9, 2009. Since his hospital discharge, West has been confined to nursing homes. West will not be able to function as an independent adult for the remainder of his life.

CAUSES OF ACTION

NEGLICENCE

- 46. Plaintiff restates the allegations of paragraphs 1 through 39 of this Plaintiff's Original Complaint, as if fully set forth herein.
- 47. Defendant, RONALD ROBERTSON, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to provide adequate nutrition for West so as to prevent severe malnutrition;
 - b. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
 - c. Selecting Intrapulmonary Percussive Ventilation as an appropriate modality of respiratory care for West;
 - d. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - e. Failing to have another physician timely manage West's new emergency condition if not personally available;
 - f. Failing to properly train, instruct and supervise resident physicians and fellowship physicians regarding the clinical diagnosis and emergency management of tension pneumothorax;
 - g. Operating a surgical practice and/or service negligently, in a manner that denied standard-of-care diagnosis for West as he was experiencing a tension pneumothorax; and
 - h. Failing to use the degree of skill and care required by the standard for physicians in the same or similar circumstances;
 - i. Failure to timely and appropriately respond to a Mr. West's code situation;
 - j. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 48. Defendant ROE CORPORATION I insured RONALD ROBERTSON, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of

RONALD ROBERTSON, M.D., and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 49. Defendant ROE CORPORATION II insured RONALD ROBERTSON, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RONALD ROBERTSON, M.D., and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 50. Defendant, GIRIPRAKASH SRIKANTHAN, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
 - Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
 - d. Failing to use clinical criteria to timely diagnosis tension pneumothorax;
 - e. Failing to immediately evaluate Mr. West by traditional means of clinical assessment in order to make timely diagnosis of tension pneumothorax;
 - f. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
 - g. Failing to immediately view the chest x-rays that were ordered;
 - Relying on unnecessary testing of arterial blood gases, thereby delaying the diagnosis of tension pneumothorax;
 - i. Failing to provide timely thoracic decompression by needle thoracostomy and/or chest tube; and
 - Failing to use the degree of skill and care required by the standard for physicians in the same or similar circumstances.

- k. Failure to timely and appropriately respond to a Mr. West's code situation.
- Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions:
- Defendant ROE CORPORATION I insured GIRIPRAKASH SRIKANTHAN, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of GIRIPRAKASH SRIKANTHAN, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 52. Defendant ROE CORPORATION II insured GIRIPRAKASH SRIKANTHAN, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of GIRIPRAKASH SRIKANTHAN, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 53. Defendant, MARK P. WRIGHT, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
 - Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
 - d. Failing to use clinical criteria to timely diagnosis tension pneumothorax;
 - e. Failing to examine for and to detect unilateral absence of breath sounds;
 - f. Failing to insert chest tube in a timely manner;

- g. Failing to perform chest decompression by use of needle or surgeon's finger if chest tube equipment were not readily available;
- h. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
- i. Failing to immediately view the chest x-rays that were ordered; and
- j. Failing to use the degree of skill and care required by the standard of care for surgeons in the same or similar circumstances.
- k. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
- 1. Failure to timely and appropriately respond to a Mr. West's code situation.
- m. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- Defendant ROE CORPORATION I insured MARK P. WRIGHT, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MARK P. WRIGHT, M.D., and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION II insured MARK P. WRIGHT, M.D., for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MARK P. WRIGHT, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 56. Defendant, RACHEL R. MCKINZIE, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:

- a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
- b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
- Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
- d. Failing to use clinical criteria to timely diagnose tension pneumothorax;
- e. Failing to examine for and to detect unilateral absence of breath sounds;
- f. Failing to provide timely thoracic decompression by needle thoracostomy and/or chest tube;
- g. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
- h. Failing to immediately view the chest x-rays that were ordered; and
- Failing to use the degree of skill and care required by the standard for physicians in the same or similar circumstances.
- j. Failure to timely and appropriately respond to a Mr. West's code situation.
- k. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 57. Defendant ROE CORPORATION I insured RACHEL R. MCKINZIE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of RACHEL R. MCKINZIE, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 58. Defendant ROE CORPORATION II insured RACHEL R. MCKINZIE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of

RACHEL R. MCKINZIE, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 59. Defendant, JAY M. CHEEK, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax;
 - b. Failing to follow hospital protocol, policy and procedure for the evaluation and management of tension pneumothorax;
 - Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009;
 - d. Failing to use clinical criteria to timely diagnosis tension pneumothorax;
 - e. Failing to examine for and to detect unilateral absence of breath sounds;
 - f. Failing to insert chest tube in a timely manner;
 - g. Pailing to perform chest decompression by use of needle or surgeon's finger if chest tube equipment was not readily available;
 - h. Relying on unnecessary chest x-ray(s), thereby delaying the diagnosis of tension pneumothorax;
 - i. Failing to immediately view the chest x-rays that were ordered; and
 - j. Failing to use the degree of skill and care required by the standard of care for surgeons in the same or similar circumstances.
 - k. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
 - 1. Failure to timely and appropriately respond to a Mr. West's code situation.
 - m. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;

- Defendant ROE CORPORATION I insured JAY M. CHEEK, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JAY M. CHEEK, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION II insured JAY M. CHEEK, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JAY M. CHEEK, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 62. Defendant, JOHN B. CONE, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - Failing to promptly and personally assess a hospitalized patient who was experiencing new findings indicative of a tension pneumothorax despite having been made being aware of patient's condition;
 - b. Failing to include and consider tension pneumothorax in a differential diagnosis to explain West's sudden, new symptoms in the early afternoon of March 1, 2009, despite having been made aware of patient's condition; and
 - c. Failing to instruct bedside physicians to perform clinical assessment of tension pneumothorax and to perform emergent thoracic decompression if there were clinical findings suggestive of tension pneumothorax.
 - d. Failing to recognize malnutrition as a cause of difficulty in weaning West from mechanical ventilation;
 - e. Failure to timely and appropriately respond to a Mr. West's code situation.
 - f. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;

- Defendant ROE CORPORATION I insured JOHN B. CONE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JOHN B. CONE, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION II insured JOHN B. CONE, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JOHN B. CONE, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 65. Defendant, CAREY L. GUIDRY, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to interpret West's "stat" chest x-rays in appropriate time;
 - b. Failing to relay findings of "stat" chest x-rays to West's bedside physicians in a timely manner; and
 - c. Failing to diagnose tension pneumothorax during interpretation of chest radiographs, March 1, 2009.
 - Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- Defendant ROE CORPORATION I insured CAREY L. GUIDRY, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CAREY L. GUIDRY, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- Defendant ROE CORPORATION II insured CAREY L. GUIDRY, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CAREY L. GUIDRY, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 68. Defendant, MANILA BAGHERZADEH-AZAR, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to interpret West's "stat" chest x-rays in appropriate time;
 - b. Failing to relay findings of "stat" chest x-rays to West's bedside physicians in a timely manner; and
 - c. Failing to diagnose tension pneumothorax during interpretation of chest radiographs, March 1, 2009.
 - d. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 69. Defendant ROE CORPORATION I insured MANILA BAGHERZADEH-AZAR, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of MANILA BAGHERZADEH-AZAR, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 70. Defendant ROE CORPORATION II insured MANILA BAGHERZADEH-AZAR, M.D. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of

MANILA BAGHERZADEH-AZAR, M.D. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 71. Defendant, CASEY R. SCALES, Respiratory Therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Selecting Intrapulmonary Percussive Ventilation as an appropriate modality of respiratory care for West;
 - b. Failing to have high index of suspicion for tension pneumothorax when West's clinical condition suddenly deteriorated during IPV treatment;
 - c. Failing to examine for and to detect unilateral absence of breath sounds;
 - d. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410, March 1, 2009; and
 - e. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax.
 - f. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 72. Defendant ROE CORPORATION I insured CASEY R. SCALES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CASEY R. SCALES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 73. Defendant ROE CORPORATION II insured CASEY R. SCALES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CASEY R.

SCALES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 74. Defendant, CHRISTINA GARNES, R.N., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code":
 - Failing to delegate responsibility for documenting required clinical data on a "code sheet during West's "code"; and
 - c. Failing to document required clinical data on "focus notes" or other form of nurses other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
 - d. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 75. Defendant ROE CORPORATION I insured CHRISTINA GARNES, R.N. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CHRISTINA GARNES, R.N. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 76. Defendant ROE CORPORATION II insured CHRISTINA GARNES, R.N. for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of CHRISTINA GARNES, R.N. and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 77. Defendant, JANE/JOHN DOE I, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to the following:

- a. Failing to document required clinical data on a "code sheet" during West's "code";
- Failing to delegate responsibility for documenting required clinical data on a "code sheet during West's "code"; and
- c. Failing to document required clinical data on "focus notes" or other form of nurses other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
- 78. Defendant ROE CORPORATION I insured JANE/JOHN DOE I for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE I and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 79. Defendant ROE CORPORATION II insured JANE/JOHN DOE I for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE I and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 80. Defendant, JANE/JOHN DOE II, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - Failing to delegate responsibility for documenting required clinical data on a "code sheet during West's "code"; and
 - c. Failing to document required clinical data on "focus notes" or other form of nurses other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
- 81. Defendant ROE CORPORATION I insured JANE/JOHN DOE II for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed

Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE II and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 82. Defendant ROE CORPORATION II insured JANE/JOHN DOE II for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE II and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 83. Defendant, JANE/JOHN DOE III, licensed nurse, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on a "code sheet" during West's "code";
 - b. Failing to delegate responsibility for documenting required clinical data on a "code sheet during West's "code"; and
 - e. Failing to document required clinical data on "focus notes" or other form of nurses other than eleven (11) lines of handwritten observations 1330-1530, March 1, 2009.
- 84. Defendant ROE CORPORATION I insured JANE/JOHN DOE III for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE III and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 85. Defendant ROE CORPORATION II insured JANE/JOHN DOE III for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE

III and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 86. Defendant, JANE/JOHN DOE IV, respiratory therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410, March 1, 2009; and
 - b. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax.
- 87. Defendant ROE CORPORATION I insured JANE/JOHN DOE IV for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IV and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION II insured JANE/JOHN DOE IV for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IV and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 89. Defendant, JANE/JOHN DOE V, respiratory therapist, in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to document required clinical data on "Vent/O2 Device Flow Sheet" anytime after 1410, March 1, 2009; and

- b. Failing to document in writing a respiratory therapist's ventilator time sheet for the time interval (approximately 2 ½ hours) surrounding the episode of tension pneumothorax.
- 90. Defendant ROE CORPORATION I insured JANE/JOHN DOE V for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE V and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- Defendant ROE CORPORATION II insured JANE/JOHN DOE V for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE V and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 92. Defendant, JANE/JOHN DOE VI, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 93. Defendant ROE CORPORATION I insured JANE/JOHN DOE VI for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VI and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 94. Defendant ROE CORPORATION II insured JANE/JOHN DOE VI for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed

Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VI and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 95. Defendant, JANE/JOHN DOE VII, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 96. Defendant ROE CORPORATION I insured JANE/JOHN DOE VII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VII and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 97. Defendant ROE CORPORATION II insured JANE/JOHN DOE VII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VII and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 98. Defendant, JANE/JOHN DOE VIII, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - a. Failing to respond to West's "code" announcement and situation.
- 99. Defendant ROE CORPORATION I insured JANE/JOHN DOE VIII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE

VIII and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 100. Defendant ROE CORPORATION II insured JANE/JOHN DOE VIII for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE VIII and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 101. Defendant, JANE/JOHN DOE IX, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:
 - Failing to respond to West's "code" announcement and situation.
- 102. Defendant ROE CORPORATION I insured JANE/JOHN DOE IX for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IX and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 103. Defendant ROE CORPORATION II insured JANE/JOHN DOB IX for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE IX and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 104. Defendant, JANE/JOHN DOE X, M.D., in the course of rendering medical care to West was negligent and such negligence includes, but is not limited to, the following:

- a. Failing to respond to West's "code" announcement and situation.
- 105. Defendant ROE CORPORATION I insured JANE/JOHN DOE X for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE X and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 106. Defendant ROE CORPORATION II insured JANE/JOHN DOE X for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of JANE/JOHN DOE X and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 107. Defendant, UAMS MEDICAL CENTER UNIVERSITY HOSPITAL, is responsible for the acts of its employees under the doctrine of respondent superior and is responsible for its own acts, which include the following:
 - a. Failing to properly train, instruct and supervise its employees who provided medical services to West;
 - b. Credentialing and providing hospital privileges negligently to the physicians and hospital personnel who provided care to West;
 - Failing to require as part of protocol, policy or procedure the timely diagnosis and treatment of a patient with tension pneumothorax;
 - d. Operating its intensive care unit, nursing department, radiology department and supervisory/administrative staff negligently, in a manner that denied standard-of-care diagnosis and management for West as he was experiencing a tension pneumothorax;
 - Failing to have a physician immediately available with training and knowledge to clinically diagnosis tension pneumothorax and then perform emergency thoracic decompression;

- f. Failing to implement appropriate policies and procedures to assure that injuries such experienced by West do not occur while patients are receiving medical care from UAMS MEDICAL CENTER UNIVERSITY HOSPITAL; and
- g. Failing to use the degree of skill and care required by the standard of care for hospitals in the same or similar circumstances.
- h. Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 108. Defendant, UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, is responsible for the acts of its employees under the doctrine of respondent superior and is liable for its own acts, which include the following:
 - a. Failing to teach the resident physicians and fellowship physicians who attended West on March 1, 2009 how to diagnosis tension pneumothorax by clinical assessment and criteria; and
 - b. Failing to train the resident physicians and fellowship physicians who attended West on March 1, 2009 how to promptly perform thoracic decompression by needle thoracostomy, use of surgeon's finger as temporary "vent", and especially by chest tube placement.
 - Spoliation and fraudulent falsification of the medical records and medical chart of Charles West in an attempt to conceal, hide, or cover up negligent acts and omissions;
- 109. Defendant ROE CORPORATION I insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute. Defendant ROE CORPORATION II insured UAMS MEDICAL CENTER UNIVERSITY HOSPITAL for professional liability during the time that Plaintiff's cause of action arose and during the time

Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UAMS MEDICAL CENTER UNIVERSITY HOSPITAL and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

- 110. Defendant ROE CORPORATION III insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 111. Defendant ROE CORPORATION IV insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 112. Defendant ROE CORPORATION V insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.
- 113. Defendant ROE CORPORATION VI insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action

arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

Defendant ROE CORPORATION VII insured UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES for professional liability during the time that Plaintiff's cause of action arose and during the time Plaintiff filed Plaintiff's Original Complaint, and, as such, is responsible for the actions of UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES and its officers, agents, servants, employees or representatives under the Arkansas Direct Action Statute.

PROXIMATE CAUSE

- 115. Plaintiff restates the allegations of paragraphs 1 through 64 of this Plaintiff's Original Complaint, as if fully set forth herein.
- 116. As a direct and proximate result of the combined and/or singular acts of negligence of the Defendants and their breach of duties owed to West, Plaintiff suffered damages more fully described below for which the Defendants are jointly and severally liable.

WILLFUL AND WANTON CONDUCT

- 117. Plaintiff restates the allegations of paragraphs 1 through 66 of this Plaintiff's Original Complaint, as if fully set forth herein.
- 118. Defendants' actions and omissions set forth above, when viewed objectively from the standpoint of the Defendant at the time of the occurrence, involved an extreme degree of risk considering the probability and magnitude of the potential harm to West. Such acts and

commissions constitute willful and wanton conduct and demonstrate a conscious indifference to the consequences to West and his loved ones, such that malice can be inferred.

DAMAGES

- 119. Plaintiff restates the allegations of paragraphs 1 through 68 of this Plaintiff's Original Complaint, as if fully set forth herein.
- 120. West suffered damages, and Plaintiffs West and FLORENCE WEST are entitled to recover from Defendants the following:
 - a. Past hospital and extended care facility expenses, and those reasonably expected to be occurred in the future;
 - b. Past medical and nursing expenses, and those reasonably expected to be incurred in the future;
 - Loss of love, comfort, society and companionship of CHARLES J. WEST due to his debilitating injuries;
 - d. Loss of reasonable contributions of a pecuniary value that Plaintiff FLORENCE WEST, in reasonable probability, would have received from CHARLES J. WEST, had he not been injured; and
 - e. Mental anguish suffered in the past, and mental anguish reasonably expected to be suffered in the future.
- 121. The damages claimed herein are in an amount in excess of the amount required for jurisdiction in this court.

CONSTITUIONAL CLAIMS

- 122. Plaintiff restates the allegations of paragraphs 1 through 71 of this Plaintiff's Original Complaint, as if fully set forth herein.
- 123. This Court has the power under ARK. CODE ANN. § 16-111-103(a) to declare the rights of Plaintiff in these proceedings. Act 649 adversely affects Plaintiff's rights in these proceedings

because the Act as applied to the facts in these proceedings violates the Arkansas Constitution and Plaintiff's privileges and immunities as stated below.

- 124. In enacting Act 649, the Arkansas Legislature limited amounts that could be recovered for injuries to persons or property, in violation of the Arkansas Constitution. The Act most obviously violates Article V, Section 32 of the Arkansas Constitution, which plainly prohibits legislative limitations on recoveries, and Article IV, Sections 1 and 2 of the Arkansas Constitution, which prohibits legislative incursions on judicial power.
- 125. Act 649 violates a whole constitutional scheme that works to limit governmental incursion on common law rights and to limit legislative power to assist special interests. This scheme is embodied in provisions such as Article II, Sections 4, 13, and 21 of the Arkansas Constitution, recognizing the right to petition the government for redress and imposing a duty on government to provide such redress; Article II, Section 13 of the Arkansas Constitution, guaranteeing every injured party the right to a remedy; Article II, Section 7 of the Arkansas Constitution, prescribing that the right to a jury trial "shall remain inviolate;" Article II, Sections 13 and 21 of the Arkansas Constitution, mandating due process and application of the law of the land; Article II, Sections 3, 18, and 21 of the Arkansas Constitution, recognizing that citizens shall receive equal treatment ("the equality provisions"); and the related Article V, Section 25 of the Arkansas Constitution, limiting unequal treatment to times when it is justified, and requiring "that where a general law can be made applicable no special law shall be enacted."
- 126. Specifically, Section 18 of Act 649 is unconstitutional in that it requires the plaintiff to provide evidence of the standard care allegedly breached by using an expert witness of the same medical specialty as the defendant. Ironically, Section 18 of Act 649 places no restriction in the same circumstances, on evidence the defendant might present regarding the standard of care.

Further, Section 18 of Act 649 requires a plaintiff to establish causation through the use of a "qualified medical expert". Section 18 of Act 649 places no restriction, in the same circumstances, on evidence a defendant might present regarding causation. Consequently, Section 18 of Act 649 treats victims of medical injury different that other victims of other torts and treats perpetrators of medical injury different than it does perpetrators of other torts. As such, Section 18 of Act 649 treats victims of medical injury less advantageously than victims of other torts and treats perpetrators of medical injury different than it does perpetrators of other torts. There is no rational basis for the difference in treatment worked by Section 18 of Act 649. There is no compelling state interest for the differences in treatment worked by Section 18 of Act 649. Section 18 of Act 649 has the purpose and intent of reducing the amount of recovery for this Plaintiff in this cause of action. Section 18 of Act 649 is in direct conflict with Arkansas Rule of Evidence 702. Section 18 of Act 649 violates the equality provisions and the right to a remedy and due process clauses of the Arkansas Constitution, Article II, Sections 3, 13, 18 and 21. Section 18 of Act 649 impairs the capacity of this Plaintiff, in asserting a claim for medical injury, to exercise the right of access to the courts, in violation of the right to petition the government for redress in Article II, Sections 4, 13 and 21 of the Arkansas Constitution. Section 18 of Act 649 violates Article V, Sections 25 and 32, of the Arkansas Constitution because the Legislature has created a special law that has the purpose and effect of limiting the plaintiff's right to recovery. Section 18 of Act 649 violates the separation of powers doctrine in that it is in direct conflict with Arkansas Rule of Evidence 702.

127. Specifically Act 649, Section 20 requires courts, at the request of a party, to order that awards for future damages greater than \$100,000.00 to be paid in future payments, rather than a lump sum. Section 20 of Act 649 is unconstitutional because it legislatively mandates changes in

awards made by juries. Act 649, Section 20 violates the right to a jury trial and due process clause of Article II, Sections 7, 13, and 21 of the Arkansas Constitution. Act 649, Section 20 impairs the capacity of the plaintiff asserting claims for medical injury to exercise the right of access to courts in violation of the right to petition the government for redress in Article II, Sections 4, 13, and 21 of the Arkansas Constitution. Act 629, Section 20 violates the separation of powers provision in Article IV, Sections 1 and 2 and Article V, Section 32, of the Arkansas Constitution.

- 128. Specifically, ARK. CODE ANN. § 16-55-201 violates Article V, Section 32 of the Arkansas State Constitution, as it eliminates joint and several liability. Further, Section 16-55-201 constitutes an impermissible limitation by the Legislature on recoveries under Article IV, Sections 1 and 2 of the Arkansas State Constitution, as it constitutes an unconstitutional usurpation of judicial powers.
- 129. Since Act 649 adversely affects Plaintiff's rights in these proceedings, rights that are protected by the Arkansas Constitution, as enumerated above, Plaintiff has standing pursuant to ARK. Code Ann. § 16-111-104 to request a declaratory judgment in her favor invalidating Act 649 as unconstitutional when applied to the facts of these proceedings. The Attorney General is being served with notice of these proceedings pursuant to ARK. Code Ann. § 16-111-106 because Plaintiff requests a judgment declaring Act 649 unconstitutional.

DEMAND FOR JURY TRIAL

Plaintiffs demand a trial by jury.

WHEREFORE, Plaintiffs pray that they be awarded damages in excess of the federal jurisdictional limit and sufficient to compensate them for the damages described

above and for all other relief to which they may be entitled, and that a jury be instructed to draw a negative inference against any spoliator/falsifier.

Respectfully submitted,

Jack N. Boyd, Jr.
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By:

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Authorized by:

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Fax: (903) 796-6522 TSBN: 20554000

TORNEY AD LITEM

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE as Guardian Ad Litem for CHARLES J. WEST

CLAIMANT

VS.

NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

RESPONDENT

ANSWER

Comes now the respondent, University of Arkansas for Medical Sciences (UAMS), by and through its undersigned counsel, and for its Answer to the Complaint of claimants, Florence West and Jim Verschoyle, states as follows:

- 1. Respondent is without sufficient information or knowledge to admit or deny whether Florence West resides in New Boston, Bowie County, Texas, or whether she is currently married to Charles J. West, and therefore denies each and every allegation contained in paragraph 1 of the Complaint.
- 2. Respondent is without sufficient information or knowledge to admit or deny whether Charles J. West resides in Sunny Acres Nursing Home, 12520 FM 1840, DeKalb, Bowie County, Texas, 75559, and therefore denies that allegation in paragraph 2 of the Complaint. Respondent denies each and every other allegation contained in paragraph 2 of the Complaint.
 - 3. Respondent admits the allegations contained in paragraph 3 of the Complaint.
- 4. Respondent admits the allegations contained in paragraph 4 of the Complaint, with one exception: respondent denies that UAMS may be served through its Board of Trustees, namely B. Alan Sugg, President, as in Claims Commission cases, the claimant does not serve the State agency involved, but rather the Complaint is forwarded to the agency by the Director of the

Commission.

CLAIMS COMMISSION

APR 2.1 2011

- Respondent admits that UAMS Medical Center is a hospital operated by UAMS.
 Respondent denies each and every other allegation contained in paragraph 5 of the Complaint.
- 6. Respondent admits that Nancy Hogue is a licensed nurse in the State of Arkansas, practicing in Pulaski County, Arkansas, at UAMS Medical Center. Respondent denies each and every other allegation contained in paragraph 6 of the Complaint.
- 7. Respondent admits that Casey R. Scales is a licensed respiratory therapist in the State of Arkansas, practicing in Pulaski County, Arkansas at UAMS Medical Center. Respondent denies each and every other allegation contained in paragraph 7 of the Complaint.
- 8. Respondent admits that Christina Garnes was formerly employed as a licensed nurse at UAMS Medical Center. Respondent denies each and every other allegation contained in paragraph 8 of the Complaint.
- 9. Respondent denies each and every allegation contained in paragraphs 9, 10, 11, 12 and 13 of the Complaint.
- 10. Paragraph 14 of the Complaint merely states what is "meant" by claimant in referencing certain entities or persons, and therefore does not require a response. To the extent a response is required, respondent admits that any actions of its employees were undertaken within the course and scope of their employment. Respondent denies each and every other allegation contained in paragraph 14 of the Complaint.
- 11. Respondent admits that Charles West was admitted as a patient to UAMS Medical Center on February 11, 2009, after suffering a motor vehicle accident and being airlifted from Texarkana. Respondent denies each and every other allegation contained in paragraph 15 of the Complaint.
 - 12. Respondent admits the allegations contained in paragraph 16 of the Complaint.

- 13. Respondent admits that Charles West experienced some improvement until March 1, 2009, and that on that date he had an episode of respiratory distress and bradycardia. Respondent denies each and every other allegation contained in paragraph 17 of the Complaint.
- 14. Respondent denies each and every allegation contained in paragraphs 18, 19, 20 and 21 of the Complaint.
- 15. Respondent admits that Charles J. West was discharged from UAMS Medical Center on March 9, 2009. Respondent does not have sufficient information or knowledge to admit or deny the remaining allegations contained in paragraph 22 of the Complaint, and therefore denies said allegations.
- 16. Respondent recognizes that claimant restates the allegations contained in paragraphs 1 through 22 of the Complaint, and respondent restates and reasserts each response it has made to those paragraphs as set forth above.
- 17. Respondent denies each and every allegation contained in paragraphs 24 (including subparagraphs 24(a), 24(b), 24(c), 24(d), 24(e), 24(f), 24(g) and 24(h)), 25 (including subparagraphs 25(a), 25(b) and 25(c)), 26 (including subparagraphs 26(a), 26(b), 26(c), 26(d), 26(e) and 26(f)), 27 (including subparagraphs 27(a), 27(b), 27(c), 27(d), 27(e) and 27(f)), 28 (including subparagraphs 28(a), 28(b), 28(c) and 28(d)), 29 (including subparagraphs 29(a), 29(b), 29(c) and 29(d)), 30 (including subparagraphs 30(a), 30(b), 30(c) and 30(d)), 31 (including subparagraphs 31(a), 31(b), 31(c) and 31(d)), 32 (including subparagraphs 32(a), 32(b) and 32(c)), and 33 (including subparagraphs 33(a), 33(b) and 33(c)) of the Complaint.
- 18. Respondent recognizes that claimant reasserts the allegations in paragraph 1-33 of the Complaint, and respondent hereby reasserts and restates each of its responses to those paragraphs as set forth above.
 - 19. Respondent denies each and every allegation contained in paragraph 35 of the Complaint.

- 20. Respondent recognizes that claimant restates the allegations contained in paragraphs 1-35 of the Complaint, and respondent hereby reasserts and restates each of its responses to those paragraphs as set forth above.
 - 21. Respondent denies each and every allegation contained in paragraph 37 of the Complaint.
- 22. Respondent recognizes that claimant restates the allegations contained in paragraphs 1-37 of the Complaint, and respondent hereby reasserts and restates its responses to those paragraphs as set forth above.
- 23. Respondent denies each and every allegation contained in paragraph 39 of the Complaint, including subparagraphs 39(a), 39(b), 39(c), 39(d) and 39(e).
- 24. Respondent recognizes that in paragraph 40 of the Complaint, claimants list persons who they claim may be witnesses to the matters raised in the Complaint, and said paragraph does not call for a response.
- 25. Respondent admits that claimants have filed a lawsuit regarding the transaction or occurrence giving rise to this case before the Commission, in the Circuit Court of Pulaski County, Arkansas, Case No. 60-CV-2011-0643, which, among others, names a number of UAMS physicians as defendants. As such, inasmuch as those physician defendants are covered by medical malpractice insurance, and since Ark. Code Ann. § 19-10-302, provides that the Commission shall not hear a claim until the claimant has exhausted all possible remedies against insurers, this claim must be held in abeyance pending the outcome of the Pulaski County Circuit Court case.
- 26. Respondent denies each and every allegation contained in paragraph 42 of the Complaint. In fact, that paragraph contradicts the statement of the claimants contained in paragraph 41 of the Complaint. Since the UAMS physicians they have sued in Pulaski County Circuit Court all have medical malpractice insurance, they have not yet exhausted all possible remedies against insurers.

27. Respondent affirmatively states that the only appropriate respondent in a claim before the Arkansas State Claims Commission is a particular State agency and, therefore, UAMS Medical Center, Nancy Hogue, Casey R. Scales, Christina Garnes, and all asserted Jane and John Does must be struck as respondents in this matter.

WHEREFORE, having fully answered claimants' Complaint, respondent prays that said Complaint and claimants' claims be held in abeyance pending the outcome of the companion Pulaski County Circuit Court case, and that ultimately claimants' Complaint be denied and dismissed in its entirety, and for all other relief to which it may be entitled.

Respectfully submitted,

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Respondent

By:

JEFFREY A. BELL, ABA #77009

Sr. Associate General Counsel

University of Arkansas

2404 North University Avenue

Little Rock, AR 72207-3608

(501) 686-2520

CERTIFICATE OF SERVICE

I, Jeffrey A. Bell, do hereby certify that a copy of the foregoing pleading and a disk containing the same has been served on claimant herein by mailing a copy of same, by U.S. Mail, postage prepaid, this 19th day of April, 2011 addressed to the following:

Jack N. Boyd, Jr. Boyd, Poff and Burgess 2301 Moores Lane Texarkana, TX 75503

Jeffrey A. Bell

UAMS Medical Center UAMS Discharge Summary Document



Patient:

West, Charles

MRN: 001519680

DOB:

Acet#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Admit Date: 02-11-2009 19:50

Gender: 1

Discharge Dtm: 03-09-2009 13:00

Location: H4-409-01

Discharge Summary Note-Discharge Summary SICU

REVISED

Authored:03-09-2009 6:39

By: Friedman, Adva B (7810) (MD) [Entered: 03-09-2009 06:46:42.31]

Discharge Data

Discharge

Admission Date: Feb-11-09 Discharge date Mar-09-09.

Attending physician responsible for the patient's discharge Robertson. Will the Discharge Summary and/or Hospital Course be dictated? No.

Problems Addressed/Managed This Admission

TRAUM PNEUMOHEMOTHOR-CL: 860.4 (ICD9) ; Active

Principal DX

LUNG CONTUSION-CLOSED: 861.21 (ICD9); Active

Secondary DX

SPLEEN INJURY NEC-CLOSED: 865.09 (ICD9); Active

Secondary DX

FX EIGHT/MORE RIB-CLOSED: 807.08 (ICD9); Active

Secondary DX

LIVER LACERATION NOS: 864.05 (ICE9) ; Active

Secondary DX

History and Hospital Course

History

Patient history: 66y/o WM transferred from Texarkana after suffering injuries in a MVA, car vs. 18wheeler. Pt was driver of the car and was broadsided by the 18wheeler. Unknown if seatbelts were used or air bags were deployed. Pt was conscious and talking at the scene but required extrication from his vehicle. was transferred to an OSH where a L CT was placed due to multiple rib fractures and a hemothorax. He also required intubation at OSH. A CT performed at the OSH showed the following injuries: Left rib fractures 1-9 with pneumohemotherax, Probable left pulmonary contusions, Small liver and spleen lac with mild intra-abd fluid, No obvious long bone or pelvic fractures. He was transferred to UAMS via helicopter for further management of his injuries. On transport, his CT put out approx 800ml, and he received 3u pREC and approx 3L of crystalloid. On arrival, his VS were stable and he was sedated/intubated.

Hospital Course

Hospital Course: Patient continued to have high output from chest tube. Taken to the OR on 2/11/09. Underwent & major thoracotomy for control of bleeding and lung lacerations. Two L sided chest tubes were placed at that time. Patient admitted to the ICU. Neurosurgery consulted for small R parietal punctuate hemorrhage seen on CT at OSH. Patient was neurologically stable and no interventions were needed per team. Spine films were attained at this time. Cardiology was also consulted for elevated cardiac enzymes. They believed this to be secondary to myocardial stress. Cardiac enzymes were followed and trended down. Echo was not diagnostic.

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-16-2009 23:21

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Printed from: IT Analyst

EXHIBIT

186

UAMS Medical Center UAMS Discharge Summary Document



Patient:

West, Charles

MRN: 001519680

DOB:

Admit Date: 02-11-2009 19:50

Acct#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Gender:

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

Chest tubes were placed to water seal as cutput had decreased. On 2/16/09 patient had green discharge from nose, Levaquin started for sinusitis. Sedation weaned on 2/17/09. Spine films returned negative and patient was taken off precautions. On 2/17/09 an MRI of the brain and C spine were done. Patient was also started on Tube feeds. Trial of weaning off vent was attempted, patient was unable to tolerate this. Patient received a trachecatomy and PEG tube on 2/20/09. Posterior chest tube was D/Ced on 2/23/09 when patient was beginning to be weaned off the vent. Patient had episode of respiratory distress on 2/23/09 but after secretions suctioned, patient's sats increased and stabilized. Second chest tube D/Ced on 2/27/09. Patient continued to be weaned from SIMV to CPAP and trach collar. On 3/1/09 patient had episode of respiratory distress and bradycardia required atropine. Found to have large Right sided pneumotherax. Chest tube was placed and patient improved. Repeat head CI on 3/3/09 was negative. Neurology was consulted on 3/4/09 for evaluation of mental status. They believed mental insult to be secondary to hypoxia. Weaning off vent continued. Patient tolerating CPAP at night and trach collar at 40% during the day. On day of discharge patient's mental

Inpatient Orders

Pharmacy/Medications

- Metoprolol Tab; (Lopressor Tab), 12.5 mg, Grocastric, two (2) times a day, Feb-12-2009, Active
- Balsam-Trypsin Oint; (Xenaderm) Apply to perianal skin, every eight (8) hours, PRN for irritated skin, Feb-16-2009, Active
- Famotidine Tab; (Pepcid Tab), 20 mg, Dobhoff Tube, two (2) times a day, Feb-24-2009, Active
- Acetaminophen Elixir; (Tylenol), 325 650 mg, PEG Tube, every six (6) hours, PRN for Fever, Feb-24-2009, Active
- Docusate Syrup; 100 mg, Cral, two (2) times a day, Mar-02-2009, Active

status had improved, he was tolerating FO, having EMs, good UOF.

- Enoxaparin Inj; (Lovenox), 40 mg, Subcutaneous, daily, Mar-02-2009, Active Bisacodyl Supp; (Dulcolax), 10 mg, Rectal, every four (4) hours, PRN for
- Constipation, Mar-03-2009, Active
- Oxycodone Soln; (Roxicodone), 5 mg, PEG Tube, four (4) times a day, PRN for Pain, Mar-04-2009, Active
- Albuterol/Ipratropium Updraft; 3 ml, Inhaled via: Nebulizer, every six (6) hours Indication: Bronchospasm/Wheezing., Mar-06-2009, Active
- Insulin Glargine; (Lantus), 20 unit(s), Subcutaneous, daily, Mar-08-2009, Active
- Insulin (Human-R) to scale; Blood Glucose 0-150, No Insulin
 - 3 unit(s) if Blood Glucose 151 180
 - 5 unit(s) if Blood Glucose 181 200
 - 7 unit(s) if Blood Glucose 201 250
 - 9 unit(s) if Blood Glucose 251 300
 - 10 unit(s) if Blood Glucose 301 350
 - 12 unit(s) if Blood Glucose 351 400
 - Blood Clucose greater than 400, Call Physician, Subcutaneous, every six (6) hours, Mar-08-2009, Active

Discharge Medication Instructions

Medication Instructions

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-16-2009 23:21 PRINTED BY: DMHE AND JOSEPP Doc Rev7 Day.pt DATE 6/10/20 Printed from: IT Analyst **EXHIBIT 1**

UAMS Medical Center UAMS Discharge Summary Document



Patient:

West, Charles

MRN: 001519680

DOB:

Acct#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Gender:

Admit Date: 02-11-2009 19:50

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

- Medication instructions given to Patient should continue current

the patient

medications received as impatient, but copy of outpatient medications

will be given to LTAC.

Medication Reconciliation Attestation

Medicaton reconciliation

I have compared the patient's medication orders to the list for discharge and made the appropriate updates.

Discharge Condition

Condition on Discharge

Patient's condition at discharge was Stable.

Discharge to

The patient is being discharged to

- This patient is being discharged LTC/Nursing home

Location details

Promise Shreveport, LA

Physician Discharge Instructions

Discharge instructions

- Diet at discharge Tube feed Pivot 1.5 cal @60/hr,

> flush 20mL H2O every 2 hours and Proteinex Liquid 30mL once daily,

flush 30 mL H20 after

- Activity on discharge Limit to light, non-stressful

activites

- Wound care Cover with a dry sterile dressing.

> Observe daily for signs and symptoms of infection. Maintain R chest dressing x 48 hours and then may cover with dry dressing for

drainage.

- Seek medical attention for: Any unusual chest pain Any

shortness of breath Chills or fever greater than 101 degrees Excessive pain Incisional redress, warmth,

swelling or drainage

- Additional instructions for the

patient

Patient may be on CPAP at night and Trach collar during the day. CPAP settings are CFAP: 5 PS: 10 Fi02: 40% and Trach collar at 40%. If pateith does not tollerate Trach collar may be placed back on CPAP.

Core Measures

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-16-2009 23:21 DBINTED BY. DMHF A BAMS_005EPF_DocRev7Day.pt DATE 6/10/20 Printed from: IT Analyst

EXHIBIT 1

UAMS Medical Center

UAMS Discharge Summary Document



Patient:

West, Charles

MRN: 001519680

DOB:

Acct#: 015196807-9042

Attending:

Robertson, Ronald D (3258)

Gender:

Admit Date: 02-11-2009 19:50

Discharge Dtm: 03-09-2009 13:00

Location:

H4-409-01

Core Measures

CHFor ACS/MI

- Does the patient have either CHF Neither or ACS/MI?

Pneumonia

- Did this hospitalization involve No pneumonia?

Smoking Cessation

Smoking Cessation

- Is the patient a current smoker? No

Signatures

Friedman, Adva B (7810) (MD)[signed Mar-09-2009 10:29]

Authored: Discharge Data, Problems Addressed/Managed This Admission, History and Hospital Course, Inpatient Orders, Discharge Medication Instructions, Medication Reconciliation Attestation, Discharge Condition, Discharge to, Physician Discharge Instructions, Core Measures, Smoking Cessation

Document Status History

Date Modified	Modified By	Type of Modification	Reason
	Friedman, Adva B (7810)	Entered Signed	Create
03-09-2009 07:23	Friedman, Adva B (7810)	Revised Signed	Edit
03-09-2009 07:26	Friedman, Adva B (7810)	Revised Signed	Edit
03-09-2009 07:40	Friedman, Adva B (7810)	Revised Signed	Edit
03-09-2009 07:41	Friedman, Adva B (7810)	Revised Signed	Edit
03-09-2009 10:30	Friedman, Adva B (7810)	Revised Signed	Edit

Authenticated by Ronald Robertson, M.D. On 03/17/2009 10:43:15 AM

Requested by: SCM, Report Scheduler (UAMS IT)

Mar-16-2009 23:21 PRINTED RY: DMHEDROMS 005EPF DocRev7Day.pp DATE 長く1八く2八「Printed from: IT Analyst

IN THE ARKANSAS STATE CLAIMS COMMISSION

FLORENCE WEST, ET AL.

CLAIMANTS

v.

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

RESPONDENT

DECLARATION OF ROXANE A. TOWNSEND, M.D.

- I, Roxane A. Townsend, M.D., being over eighteen years of age and of sound mind, do hereby declare as follows:
- I am the Chief Executive Officer for the University of Arkansas for Medical Sciences ("UAMS") Medical Center.
- 2. In this position, I am familiar with the purchase of malpractice insurance for our attending physicians and resident physicians.
- 3. UAMS purchases malpractice insurance for attending physicians and resident physicians. Policies provide coverage up to \$1,000,000 per claim for attending physicians and up to \$500,000 per claim for resident physicians.

ROXANE A. TOWNSEND, M.D.

9.1

DATE

ELECTRONICALLY FILED 2015-Aug-10 10:39:31 60CV-11-643 C06D12: 1 Page

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS LITTLE ROCK DISTRICT, 12TH DIVISION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian ad litem for CHARLES J. WEST

PLAINTIFF

VS.

CASE NO. <u>60-CV-2011-0643</u>

RONALD ROBERTSON, M.D.; GIRIPRAKASH SRIKANTHAN, M.D.; MARK P. WRIGHT, M.D.; RACHEL R. MCKINZIE, M.D.; LLOYD MEEKS, M.D.; and MUHAMMAD JAFFAR, M.D.

DEFENDANTS

ORDER GRANTING PLAINTIFFS' MOTION TO DISMISS WITHOUT PREJUDICE

The Court, Defendants, LLOYD MEEKS, M.D., GIRIPRAKASH SRIKANTHAN, M.D., and MUHAMMAD JAFFAR, M.D. hereby finds that the Plaintiffs' Motion should be granted.

IT IS THEREFORE ORDERED that Plaintiffs' Motion to Dismiss Without Prejudice as to Defendants LLOYD MEEKS, M.D., GIRIPRAKASH SRIKANTHAN, M.D., and MUHAMMAD JAFFAR, M.D. is hereby GRANTED, and said Defendants are hereby dismissed without prejudice from the above-entitled cause and all costs are to be paid by the party incurring same.

SIGNED this 7th day of August, 2015

Presiding Judge

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS 12TH DIVISION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian ad litem for CHARLES J. WEST

PLAINTIFF

VS.

CASE NO. <u>60-CV-2011-0643</u>

RONALD ROBERTSON, M.D.; GIRIPRAKASH SRIKANTHAN, M.D.; MARK P. WRIGHT, M.D.; RACHEL R. MCKINZIE, M.D.; JAY M. CHEEK, M.D.; JOHN B. CONE, M.D.; CAREY L. GUIDRY, M.D.; MANILA BAGHERZADEH-AZAR, M.D.; NANCY HOGUE, NURSE; CASEY R. SCALES. RESPIRATORY THERAPIST; CHRISTINA GARNES, R.N.; JANE/JOHN DOE I, licensed nurse; JANE/JOHN DOE II, licensed nurse: JANE/JOHN DOE III, licensed nurse: JANE/JOHN DOE IV, respiratory therapist; JANE/JOHN DOE V, respiratory therapist; JANE/JOHN DOE VI, physician; JANE/JOHN DOE VII, physician; JANE/JOHN DOE VIII, physician: JANE/JOHN DOE IX, physician; JANE/JOHN DOE X, physician: UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES: UAMS MEDICAL CENTER UNIVERSITY HOSPITAL; ROE CORPORATION I; ROE CORPORATION II; ROE CORPORATION III; ROE CORPORATION IV; ROE CORPORATION V; ROE CORPORATION VI: ROE CORPORATION VIII; ROE CORPORATION VIII: ROE CORPORATION IX; ROE CORPORATION X; ROE CORPORATION XI; ROE CORPORATION XII: ROE CORPORATION XIII; ROE CORPORATION XIV; ROE CORPORATION XV; ROE CORPORATION XVI; ROE CORPORATION XVII; ROE CORPORATION XVIII; ROE CORPORATION XIX: ROE CORPORATION XX: ROE CORPORATION XXI; ROE CORPORATION XXII: ROE CORPORATION XXIII; ROE CORPORATION XXIV; ROE CORPORATION XXV; ROE CORPORATION XXVI; ROE CORPORATION XXVII; ROE CORPORATION XXVIII: ROE CORPORATION XXIX; ROE CORPORATION XXX; ROE CORPORATION XXXI; ROE CORPORATION XXXII; ROE CORPORATION XXXIII; ROE CORPORATION XXXIV; ROE CORPORATION XXXV; ROE CORPORATION XXXVI;

ELECTRONICALLY FILED 2015-Jun-16 14:43:20 60CV-11-643 C06D12: 1 Page

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS LITTLE ROCK DISTRICT, 12TH DIVISION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian ad litem for CHARLES J. WEST

PLAINTIFF

VS.

CASE NO. <u>60-CV-2011-0643</u>

RONALD ROBERTSON, M.D.; GIRIPRAKASH SRIKANTHAN, M.D.; MARK P. WRIGHT, M.D.; RACHEL R. MCKINZIE, M.D.; JAY M. CHEEK, M.D.; JOHN B. CONE, M.D.; LLOYD MEEKS, M.D.; MUHAMMAD JAFFAR, M.D.; JOSEPH C. JENSEN, M.D.

DEFENDANTS

AMENDED ORDER GRANTING PLAINTIFFS' MOTION TO DISMISS WITHOUT PREJUDICE

The Court, having considered Plaintiff's Motion to strike and substitute her previous Order dismissing Defendants, LLOYD MEEKS, M.D., JOHN B. CONE, M.D., and JOSEPH C. JENSEN, M.D., have reviewed the same, agrees that said Motion resulted from an unintentional mistake; The Court, therefore,

ORDERS, that its previous Order dismissing Defendants, LLOYD MEEKS, M.D., JOHN B. CONE, M.D., and JOSEPH C. JENSEN, M.D., without prejudice is hereby amended and substituted with this Order. The Court further orders that Defendants JAY M. CHEEK, M.D., JOHN B. CONE, M.D., and JOSEPH C. JENSEN, M.D. are hereby Dismissed Without Prejudice, and Defendants Lloyd Meeks, M.D., Ronald Robertson, M.D., Giriprakash Srikanthan, M.D., Mark P. Wright, M.D., Rachel R. McKinzie, M.D., and Muhammad Jaffar, M.D remain as a party Defendant as if the Court had never entered its previous Order dismissing

Defendant Lloyd Meeks, M.D. without prejudice.

SIGNED this 16th day of June

Presiding Judge

ELECTRONICALLY FILED
Pulaski County Circuit Court
Larry Crane, Circuit/County Clerk
2015-Sep-14 12:01:04
60CV-11-643
C06D12: 1 Page

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS LITTLE ROCK DISTRICT, 12TH DIVISION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person PLAINTIFF

VS.

CASE NO. 60-CV-2011-0643

RONALD ROBERTSON, M.D.; MARK P. WRIGHT, M.D.; RACHEL R. MCKINZIE, M.D.; UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES; UAMS MEDICAL CENTER and UNIVERSITY HOSPITAL

DEFENDANTS

ORDER GRANTING PLAINTIFFS' NOTICE AND MOTION OF NON-SUIT WITHOUT PREJUDICE

The Court, RACHEL MCKINZIE, M.D., RONALD ROBERTSON, M.D. and MARK WRIGHT, M.D., hereby finds that the Plaintiffs' Notice and Motion should be granted.

IT IS THEREFORE ORDERED that Plaintiffs' Notice and Motion of Non-Suit Without Prejudice as to Defendants RACHEL MCKINZIE, M.D., RONALD ROBERTSON, M.D. and MARK WRIGHT, M.D., is hereby GRANTED, and said Defendants are hereby dismissed without prejudice from the above-entitled cause and all costs are to be paid by the party incurring

same.				
SIGNED this	14Th day of 5	eptember/2015.	1/	·
		Mari	(Syni	w
		Presiding Judg	ge /	$-\!\!\!/-$
Judge Gray Date 9-14-15 D	12 w			
Jury Trial				
Bench Trial				
Non-Trial	\square			

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IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS LITTLE ROCK DISTRICT, 12TH DIVISION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and JIM VERSCHOYLE, as guardian *ad litem* for CHARLES J. WEST

PLAINTIFF

VS.

CASE NO. <u>60-CV-2011-0643</u>

RONALD ROBERTSON, M.D.; et al

DEFENDANTS

MOTION FOR CONTINUANCE

COMES NOW, Plaintiff in the above referenced matter, and files this, its Motion for Continuance and in support therefore would respectfully show the Court as follows:

- 1. This is a medical negligence case filed by Plaintiff against several physicians as a result of healthcare acts and omissions occurring in 2009.
- 2. This suit was filed on February 14, 2011.
- The parties have vigorously conducted pre-trial discovery; however, on May
 2015, Charles West died.
- 4. Pursuant to Arkansas Rules of Civil Procedure Rule 25, Plaintiff's claims are abated until he obtains an Order for Substitution of Plaintiff. Pursuant to Arkansas Statutes Annotated, Section 16-62-108, Plaintiff is allowed until one (1) year from the date of death of Mr. West to obtain a substitution of his party Plaintiff. Until such substitution is completed, the case is abated, as in the interim, there is no named Plaintiff with legal authority to represent the interests and pursue the claims of the Estate of Charles West, deceased and all wrongful death beneficiaries of Mr. West.

5. This case is set for trial on October 5, 2015, with a pre-trial date of August 27,

2015.

6. Given the death of Charles West, Plaintiff is therefore requesting a

continuance of this trial date for at least an additional six (6) months.

7. This motion is not brought for the purpose of delay, but instead, so as to allow

Plaintiff to substitute an authorized person to represent the interests of the

Estate of Charles West, deceased and all wrongful death beneficiaries of Mr.

West.

8. The only remaining defendants are Dr. Donald Robertson and Dr. Rachel

McKinzie. Plaintiff has consulted with Rick Beard, counsel for Defendant

McKinzie, and he has no objection to the Motion. Plaintiff has attempted to

reach Adam Wells, counsel for Defendant Robertson but Mr. Wells is

presently trying a different medical negligence case, and Plaintiff's counsel

has not been able to speak directly with Mr. Wells. Notwithstanding,

Plaintiff's counsel anticipates that Mr. Wells has no objection to this

continuance.

WHEREFORE, PREMISES CONSIDERED, Plaintiff requests a continuance and

rescheduling of the trial date presently scheduled for October 5, 2015.

Respectfully submitted,

Jack N. Boyd, Jr.

Boyd Prazak, LLP

2301 Moores Lane

Texarkana, Texas 75503

Telephone: 903-838-6123

Facsimile: 903-832-8489

jboyd@boydprazak.com

By: Jack N. Boyd, Jr.
AR Bar # 90150

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing instrument has been forwarded to the following counsel of record on this 19th of August 2015.

Adam Wells
Friday, Eldredge & Clark, LLP
400 West Capitol Avenue, Suite 2000
Little Rock, Arkansas, 72201

Mr. R. T. Beard, III

Mitchell, Williams, Selig, Gates, Woodyard, PLLC

425 West Capitol Avenue, Suite 1800

Little Rock, Arkansas 72201

Jack N. Boyd, Jr.

BOYD PRAZAK, LLP ATTORNEYS AT LAW A REGISTERED LIMITED LIABILITY PARTNERSHIP

JACK N. BOYD, JR. JONATHAN R. PRAZAK 2301 MOORES LANE TEXARKANA. TEXAS 75503

(903) 838-8123 WWW.BOYDPRAZAK.COM

September 16, 2015

VIA FAX
Sherri L. Robinson
University of Arkansas
Associate General Counsel
4301 W. Matkham #860
Little Rock, AR 72205

Re: Florence West, Individually and as Next Friend of Charles West, an Incapacitated Person, vs. UAMS

Dear Sherri:

Please recall that we filed suit against various medical providers, including UAMS, on February 14, 2011. I am enclosing a copy of that Original Complaint for your convenient reference.

We have now resolved all of the claims against the physicians and residents, by dismissing all claims against those individuals entirely, without any settlement. We are now prepared to move forward with our claims against UAMS; our claims against UAMS will be limited to the actions of the hospital staff (respiratory therapist, nurses, and nutritionist).

Mr. West passed away last May; as you know there is a procedure in a civil trial for replacing Mr. West with a Personal Representative or Special Estate Administrator for purposes of the civil litigation. However, I am uncertain as to whether that statute also applies to our claim against UAMS to be determined by the Arkansas Claims Commission, and would thank you to advise me. If necessary, we will open an Estate Administration so as to pursue the claims against UAMS.

Perhaps a telephone conference would assist you and me in discussing the procedural aspects. If you could drop me an email at <u>jhoyd@boydprazak.com</u> and let me know when it would be a convenient time for a telephone conference with you, I will give you a call.

As always, thank you for the professional courtesies you extend herein. I look forward to speaking with you soon.

J. N. D. J. T.

JNB/lbm 1390.000

IN THE ARKANSAS STATE CLAIMS COMMISSION

FLORENCE WEST, ET AL.

Arkansas Claims Contribia NTS

SEP 2 0 2016

v.

CASE NO. 11-0554-CC

RECEIVED

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

RESPONDENT

RESPONDENT'S MOTION FOR SUMMARY JUDGMENT

Comes now Respondent, by and through the undersigned counsel, and for its motion for summary judgment, states:

- 1. There are no genuine issues of fact for the Commission's consideration and this matter may be disposed of on summary judgment.
- 2. Claimants failed to substitute an estate representative for Charles West within one year of his death as required by law.
- 3. Claimants did not fully exhaust their remedies prior to filing a claim in the Claims Commission as required by law.
- 4. Claimants dismissed the physicians in Pulaski County Circuit Court without a finding of negligence; consequently, there can be no vicarious liability against UAMS for the physicians' alleged actions or inactions as a matter of law.
- 5. The following exhibits are attached in support of this motion:
 - a. Exhibit 1 UAMS Discharge Summary Report
 - b. Exhibit 2 Declaration of Dr. Roxane Townsend
 - c. Exhibit 3 Orders dismissing claims against physicians without prejudice
 - d. Exhibit 4 Pulaski County filing regarding death of Charles West
 - e. Exhibit 5 Letter to UAMS counsel from West counsel dated September 16, 2015

6. The grounds for this motion are more fully set forth in a brief in support filed contemporaneously with the motion.

WHEREFORE, Respondent requests that the Commission grant its motion for summary judgment and for all other relief to which it is entitled.

Respectfully submitted,

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Respondent

By:

SHERRI L. ROBINSON, #97194

Associate General Counsel

University of Arkansas for Medical Sciences

4301 West Markham, Slot 860

Little Rock, AR 72205

(501) 686-7608

Srobinson3@uams.edu

Attorney for Respondent

CERTIFICATE OF SERVICE

I, Sherri L. Robinson, do hereby certify that a copy of the foregoing pleading has been served on claimant herein by mailing a copy of same, by U.S. Mail, postage prepaid, this 19th day of September, 2016, addressed to the following:

Jack Boyd, Jr. Boyd Prazak, LLP 2301 Moores Lane Texarkana, TX 75503

Sherri L. Robinson

IN THE ARKANSAS STATE CLAIMS COMMISSION

SEP 2 0 2016

FLORENCE WEST, Individually and as Next Friend Of CHARLES WEST, an Incapacitated Person, and JIM VERSHOYLE, as guardian ad litem for CHARLES WEST

RECEIVED

CLAIMANTS

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

V.

RESPONDENT

BRIEF IN SUPPORT OF RESPONDENT'S MOTION FOR SUMMARY JUDGMENT

Introduction and Statement of Facts.

Claimants brought the present action alleging that UAMS is responsible for acts of medical negligence to Charles West while he was a patient at UAMS in 2009. Claimants argue that the alleged medical negligence includes acts by Mr. West's "entire healthcare team, consisting of physicians, nurses and respiratory therapists" involving the failure to diagnose and treat several complications that arose during Mr. West's hospitalization. See Complaint, ¶ 18.

On February 11, 2009, Charles and Florence West were in a horrific motor vehicle accident with an 18 wheeler near Texarkana, Texas. See Complaint, ¶ 15. Mr. West, who was 66 years old at the time, suffered numerous severe injuries which included a traumatic pneumohemothorax, nine rib fractures on the left side, a lung contusion, a spleen laceration, a liver laceration, and subarachnoid hemorrhage. See Complaint, ¶ 16. Mr. West was intubated in the Texas hospital and a chest tube was placed on the left side prior to being airlifted to UAMS for treatment at the trauma center. See Id., Exhibit B, p. 1. As a result of his injuries, Mr. West underwent major surgery at UAMS to control internal bleeding, and two chest tubes were placed on his left side at the time. See Exhibit 1 - UAMS Discharge

Summary Document. Mr. West was admitted to the intensive care unit at UAMS where he remained for treatment until his discharge to a rehabilitation facility on March 9, 2009. See Complaint, ¶ 22; Exhibit 1. During his stay at UAMS, Mr. West was treated by numerous physicians, nurses, therapists and other staff members.

On February 14, 2011, the Wests filed a lawsuit in Pulaski County Circuit Court against UAMS and several UAMS physicians and staff members alleging various acts of medical negligence. See 60CV-11-643. The Wests amended the complaint twice with the final amended complaint specifically naming eleven physicians as well as five Jane/John Doe physicians. See Second Amended Complaint, 60CV-11-643. All physicians at UAMS had malpractice insurance policies purchased by UAMS. See Exhibit 2 - Declaration of Dr. Roxane Townsend. Over the next four years, the parties to the Pulaski County case conducted discovery and filed various motions. See docket for 60CV-11-643. From August 2014 to September 2015, the Wests, through their attorney, systematically dismissed each of the eleven UAMS physicians without any finding of negligence by the court. See Exhibit 3 - Orders of dismissal. The last three physicians were dismissed only three weeks prior to trial. See docket for 60CV-11-643.

Claimant Charles West died May 12, 2015; however, no substitution of party was ever made for Mr. West to allow his medical negligence claims to continue before the Commission. See Exhibit 4. Moreover, Claimants' counsel admitted to UAMS counsel in a letter dated September 16, 2015 that the case against the physicians was dismissed in its entirety "without any settlement." See Exhibit 5 - letter from counsel dated September 16, 2015.

Argument.

Rule 56(c)(2) of the Arkansas Rules of Civil Procedure states that summary judgment "shall be rendered forthwith if the pleadings, depositions, answers to interrogatories and admissions on file, together with the affidavits, if any, shows [sic] that there is no genuine issue as to any material fact and that the moving party is entitled to a judgment as a matter of law on the issues specifically set forth in the motion." Ark. R. Civ. P. 56(c)(2). See also Martin v. Hallum, 2010 Ark. App. 193 at 10, 2010 WL 647010. The evidence is to be viewed by the court in the light most favorable to the non-moving party. *Id.* Nonetheless, "an adverse party may not rest on mere allegations or denials of his pleadings, but his response, by affidavits or as otherwise provided by this rule, must set forth specific facts showing that there is a genuine issue for trial." Ark. R. Civ. P. 56(e)). "[T]he opposing party must meet proof with proof and demonstrate the existence of a material issue of fact." Spear v. City of Fordyce, 351 Ark. 305, 92 S.W.3d 38 (2002).

UAMS is entitled to judgment as a matter of law on the following procedural grounds: (1) there has been no substitution for Charles West as a party as required by law; (2) Claimants failed to exhaust against all available insurance remedies as required by law; and (3) because Claimants dismissed the state court action against the physicians, there can be no vicarious liability as a matter of law against UAMS.

I. No Substitution of Party.

Rule 25(a) of the Arkansas Rules of Civil Procedure states that "unless [a] motion for substitution is made not later than ninety (90) days after the death is suggested upon the record . . ., the action may be dismissed as to the deceased party." In a filing on August 19, 2015, Claimants' counsel notified the Pulaski County Circuit Court that Mr. West died on

May 12, 2015. See Exhibit 4. Counsel took the position in that filing that he had one year to substitute someone for Mr. West. Id. Rather than substituting a party in the Pulaski County action, the plaintiffs dismissed the case. Governing law states the "failure to move for substitution within one year from the time of [Mr. West's] death prevents the revivor of the action," and the matter should be dismissed with prejudice. Ausman ex rel. Estate of Ausman v. Hiram Shaddox Geriatric Center, 2013 Ark. 66, *9, 426 S.W.3d 379, 385. More than one year has passed since Mr. West's death and no one has been substituted in the present case before the Claims Commission.

The General Assembly provides that the Commission cannot grant relief on any claim that would be dismissed "as a matter of law" in a court of law or equity or general jurisdiction. Ark. Code Ann. § 19-10-204(b)(3). Under the case law applicable this issue, this claim would be dismissed as a matter of law in a court of law, and therefore, must be dismissed here.

II. No Exhaustion.

The Arkansas State Claims Commission "shall hear no claim until the claimant has exhausted all remedies against insurers." Ark. Code Ann. § 19-10-302 (emphasis added). See also Rules and Regulations of the Arkansas State Claims Commission, Claims Excluded. To prove exhaustion, the claimant must file a sworn affidavit that he or she has exhausted all remedies against insurers which shall include the total amount of insurance benefits paid to the claimant. Id.

Here, the undisputed evidence indicates that the Wests filed a lawsuit in Pulaski County Circuit Court against eleven physicians but dismissed them all without a finding on the merits or a settlement of any claim. See 60CV-11-643 and Exhibits 3 and 5. By releasing

the physicians, Claimants did not exhaust all remedies against potential insurers as is clearly required by statute. Instead, Claimants made the conscious decision to dismiss all of the physicians and pursue only the State.

The Commission is to recommend payment of claims that it finds from the evidence are just debts of the State. If an alleged wrong to a claimant can be satisfied by insurance or other private means, then there is no just debt for the State to satisfy, and taxpayers should not be assessed the burden of a judgment. The only way to avoid placing this burden on taxpayers is to require compliance with Ark. Code Ann. § 19-10-302. Here, Claimants complained of actions that are undertaken, directed or supervised by physicians. The insurance limits available against the eleven named physicians exceeded the \$2,000,000 sought by Claimants in this action. See Exhibit 2. Claimants were statutorily obligated to pursue these remedies but failed to do so. Consequently, Claimants did not exhaust, and UAMS is entitled to summary judgment.

III. No Vicarious Liability.

According to the Arkansas Supreme Court, "Vicarious liability is tied to the negligence of the employee. It is well-settled that when an employee has been released or dismissed, and the employer is sued solely on a theory of vicarious liability, any liability of the employer is likewise eliminated." *Stephens v. Petrino*, 350 Ark. 268, 279 (2002); *Hartford Ins. Co. v. Mullinax*, 336 Ark. 335 (1999) (emphasis added).

In the Complaint before the Commission, Claimants allege that UAMS should be liable for the negligent actions of the physicians under the doctrine of respondeat superior.

See Complaint, ¶¶ 24-25. Claimants have sued UAMS because of its position as the employer of the physicians involved in Mr. West's care at UAMS. It is undisputed that

Claimants released and dismissed all eleven physicians they sued in the Pulaski County lawsuit without a finding of negligence against any of them. See Exhibits 3 and 5.

As stated above, the General Assembly requires dismissal of a claim before the Commission when the claim would be dismissed "as a matter of law" in a court of law or equity or general jurisdiction. See Ark. Code Ann. § 19-10-204(b)(3). As a matter of law, because Claimants dismissed the physicians (UAMS employees), any potential vicarious liability by UAMS has been eliminated. As a result, UAMS is entitled to summary judgment.

Conclusion.

There are no genuine issues of fact on the dispositive issues raised by Respondent, and Respondent is entitled to summary judgment in this matter. First, Claimants did not substitute an estate representative for Mr. West within one year of his death as required by Arkansas law. Next, Claimants did not fully exhaust their remedies against all insurance sources as required by governing statute, and there is no just debt remaining for the State of Arkansas to satisfy. Finally, by non-suiting the Pulaski County lawsuit against the physicians, the potential vicarious liability of UAMS was also eliminated. For these reasons, Respondent is entitled to judgment as a matter of law.

WHEREFORE, Respondent requests that the Commission grant its motion for summary judgment and for all other relief to which it is entitled.

Respectfully submitted,

THE UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Respondent

By:

SHERRI L. ROBINSON, #97194

Associate General Counsel

University of Arkansas for Medical Sciences

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Srobinson3@uams.edu

Attorneys for Respondent

CERTIFICATE OF SERVICE

I, Sherri L. Robinson, do hereby certify that a copy of the foregoing pleading has been served on claimant herein by mailing a copy of same, by U.S. Mail, postage prepaid, this 19th day of September, 2016, addressed to the following:

Jack Boyd, Jr. Boyd Prazak, LLP 2301 Moores Lane Texarkana, TX 75503

Sherri L. Robinson

OCT 1 0 2016

RECEIVED

IN THE ARKANSAS STATE CLAIMS COMMISSION

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and Jim Verschoyle, as Guardian ad Litem for CHARLES J. WEST.

CLAIMANTS,

٧.

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, et al.,

RESPONDENTS.

CLAIMANT FLORENCE WEST'S OPPOSITION TO RESPONDENT UAMS' MOTION FOR SUMMARY JUDGMENT AND BRIEF IN SUPPORT

COMES NOW Claimant FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and files this, her Opposition to Respondent UAMS' Motion for Summary Judgment and Brief in Support. In opposing the Motion filed by UAMS, Claimant would show unto the Commission as follows:

I. BACKGROUND

Florence and Charles West were involved in a motor vehicle accident in Texarkana, Texas on February 11, 2009, during which Charles sustained numerous, severe injuries. See Plaintiffs' Original Complaint. As a result of the car accident, Charles was taken to Christus St. Michael Health System in Texarkana, where he was then airlifted to UAMS in Little Rock for treatment on that same day. *Id*.

Despite the severity of his injuries, Charles experienced progressive improvement in his condition while at UAMS until March 1, 2009. *Id.* On March 1, 2009 at 1335 hours, Charles "coded" while undergoing intrapulmonary percussive ventilation (IPV), a type of respiratory therapy. *Id.*

Charles coded because of a tension pneumothorax, which went undetected from the code at 1335 until a chest tube was performed on Charles at 1500 hours. *Id.* Claimant Florence West alleges that Charles' physicians, nurses, and respiratory therapists were negligent in failing to recognize, diagnose, and treat the pneumothorax for over an hour. *Id.*

As a result of the tension pneumothorax, Charles West suffered anoxic brain damage. *Id*.

On February 14, 2011, Claimant Florence West filed a lawsuit on Charles' behalf (and for her own loss-of-consortium claims) against UAMS, several UAMS physicians, and several UAMS staff members (including two nurses and one respiratory therapist) for medical negligence in the Pulaski County Circuit Court. Concurrently with her Original Complaint in State Court, Claimant Florence West also filed a complaint with the Arkansas State Claims Commission on February 25, 2011 (to preserve her claims against UAMS and its staff members – including the nurses and respiratory therapist – that would be excluded from the State Court lawsuit because of sovereign immunity).

Both the Pulaski County lawsuit and the claims before this Claims Commission were brought by "Florence West, Individually and Next Friend of Charles J. West, and Incapacitated Person, and Jim Verschoyle, as guardian ad litem for Charles West." Both filings asserted claims not only on Charles' behalf for his injuries, but also for Florence West as an individual for her loss-of-consortium claims.

Over the next four years (and while this action before the Claims Commission sat in abatement), the parties to the Pulaski County lawsuit conducted discovery (including nine depositions) and engaged in motion practice, until the point that the various physicians were dismissed from the lawsuit – leaving only UAMS, and its nurses and respiratory therapists (entities and individuals enjoying sovereign immunity that must be pursued before the Claims Commission).

Even though not a "Real Party in Interest" under Rule17 of the Arkansas Rules of Civil Procedure (because the lawsuit was brought by Florence West on Charles' behalf due to his brain injury and incapacity), Charles West did pass away on May 12, 2015.

Claimant's claims before the Claims Commission are now set for hearing on Thursday, January 19, 2017. In anticipation of that hearing, UAMS has filed the instant Motion for Summary Judgment. In its Motion, UAMS makes three arguments for dismissal of Claimant's action:

- (1) That Claimant failed to substitute an estate representative for Charles West within one year of his death as required by law;
- (2) That Claimant did not fully exhaust her remedies before pursuing her claims in the Claims Commission; and
- (3) UAMS cannot be held vicariously liable (even if Claimant's action was allowed to proceed) because the physicians were dismissed in the underlying lawsuit.

II. AUTHORITIES & ARGUMENTS

A. Appropriate Standard

UAMS labels its request for dismissal as a "Motion for Summary Judgment." However, after providing the typical restatement of summary judgment standards, UAMS then requests "judgment as a matter of law on ... procedural grounds" and thereafter only invokes issues of law to support the requested dismissal. Therefore,

despite the title of the Motion, UAMS has actually filed a Motion to Dismiss to address procedural grounds, not the sufficiency of Claimant's evidence.

With a motion to dismiss, the court should treat the facts alleged in the complaint as true and view them in the light most favorable to the plaintiff. *Faulkner v. Ark. Children's Hosp.*, 69 S.W.3d 393, 399 (Ark. 2002) (citations omitted). In viewing the facts in the light most favorable to the plaintiff, the facts should be liberally construed in plaintiff's favor. *Id.* (citations omitted).

B. Florence West is the Real Party in Interest.

For its first grounds of dismissal, UAMS cites to Ark. Code Ann. § 16-62-108 (the Revivor Statute) and the fact that Charles West has passed (but that no substitution of parties was made) to support its Motion to Dismiss. Section 16-62-108 provides that:

[a]n order to revive an action in the names of the representatives or successor of a plaintiff may be made forthwith. However, an order to so revive the action shall not be made without the consent of the defendant after the expiration of one (1) year from the time when the order might first have been made...

ARK. CODE ANN. § 16-62-108 (emphasis added).

Revivor, as addressed by Section 16-62-108, is a procedure used **upon the** death of a party to a legal proceeding in which a new party is substituted to proceed with the prosecution or defense of the claim. *Ausman v. Hiram Shaddox Geriatric Ctr.*, 426 S.W.3d 379, 384 (Ark. 2013) (quoting *Deaver v. Faucon Properties, Inc.*, 239 S.W.3d 525, 531 (Ark. 2006)) (emphasis added).

As for the appropriate "party to a legal proceeding," Arkansas law provides that every action is to be prosecuted in the name of the real party in interest. *Ausman*, 426

S.W.3d at 385 (citing ARK. R. CIV. P. 17(a)). Pursuant to Rule 17 of the Arkansas Rules of Civil Procedure:

[e]very action shall be prosecuted in the name of the real party in interest. An executor, administrator, guardian (conservator), bailee, trustee of an express trust, a party with whom or in whose name a contract has been made for the benefit of another, or the State or any officer thereof or any person authorized by statute to do so may sue in his own name without joining with him the party for whose benefit the action is being brought...

ARK. R. Civ. P. 17(a)(emphasis added).

Accordingly, a "real party in interest" is considered to be the person or corporation who can discharge the claim on which the allegation is based, not necessarily the person ultimately entitled to the benefit of any recovery. *Ausman*, 426 S.W.3d at 385 (citations omitted).

In this case, Charles West was never a "party" or a "plaintiff" for purposes of the Revivor Statute because he was already rendered incapacitated by anoxic brain damage when these claims were filed with the Claims Commission. Instead, the claims before the Claims Commission were brought by Florence West in her individual capacity (for her loss-of-consortium claims) and as Next Friend (*i.e.*, the spouse) of Charles West and by the Guardian Ad Litem appointed for Charles West.

Therefore, because (1) Revivor is a procedure used **upon the death of a party** to a legal proceeding in which a new party is substituted to proceed with the prosecution and (2) no "party" to the proceedings at issue has passed (either Florence West or the Guardian Ad Litem), Section 16-62-108 does not apply to these circumstances and UAMS' first argument for dismissal is misplaced.

Moreover, to the extent the Revivor Statute might apply to bar Charles West's claims (which Claimant does not concede), that Statute would not touch Claimant's individual claims for loss of consortium or companionship.

C. Claimant has exhausted her remedies.

For its second grounds of dismissal, UAMS cites to Ark. Code Ann. § 19-10-302 and the fact that the various UAMS physicians were dismissed in the Pulaski County lawsuit to attempt to show that Claimant has not exhausted her remedies. Section 19-10-302 provides that:

[t]he Arkansas State Claims Commission shall not dismiss a claim with prejudice on grounds that the claimant has received or is due benefits under a policy of insurance. However, the commission shall hear no claim until the claimant has exhausted all remedies against insurers, including the claimant's insurer.

ARK. CODE ANN. § 19-10-302(a).

Notably, UAMS provided no case law to show what "exhaustion of all remedies" under Section 19-10-302 means. Likewise, Claimant could find no guidance for the Claims Commission on the issue.

Resorting to the common-law "doctrine of exhaustion of administrative remedies," that doctrine provides that no one is entitled to judicial relief for a supposed or threatened injury until the prescribed statutory administrative remedy has been exhausted. *Staton v. Am. Mfrs. Mut. Ins. Co.*, 207 S.W.3d 456, 457(Ark. 2005) (citations omitted). However, there are exceptions to the exhaustion-of-administrative-remedies doctrine. *Ahmad v. Beck*, 480 S.W.3d 166, 170 (Ark. 2016) (citations omitted). For example, exhaustion of remedies is not required when no genuine opportunity for adequate relief exists or when irreparable injury will result if the complaining party is

compelled to pursue administrative remedies. *Id.* (citations omitted). Exhaustion of remedies is also not required when an administrative appeal would be futile. *Id.* (citations omitted).

While the language in Section 19-10-302 and common-law doctrine of exhaustion of administrative remedies may not be perfectly analogous, it stands to reason that there would be exceptions to both rules. For instance, if there was an incident giving rise to potential claims against UAMS but with no insured parties involved, then presumably there would be no need for the claimant to "exhaust all remedies against insurers" because there would be no insured parties or insurers. Likewise, if there was an incident giving rise to potential claims against UAMS and other insured parties were involved but those insured parties were in no way culpable or responsible for the incident, again there would be no need to exhaust remedies that would not be available.

In this case, the parties conducted nine depositions in the Pulaski County lawsuit, the plaintiffs faced numerous motions filed by the insured physicians in that action, and, through the discovery process and extensive motion practice, Claimant came to better evaluate her claims against those parties. And through that evaluation process, Claimant is now better able to assess which claims are viable and which are not.

To read Section 19-10-302 to require claimants to pursue every potential claim against an insured party (no matter how remote the chance of success) ignores that same practicalities ("no genuine opportunity for adequate relief," futility, and irreparable injury) that the exceptions to the common-law doctrine of administrative remedies seek to address. Indeed, the exceptions to the rule are well-founded and provide a balanced

framework for vetting claims (and deciding when to bypass the administrative process so that some claims might proceed).

Accordingly, Claimant respectfully submits that, by pursuing her claims against the insured physicians as far as she did, she has satisfied the "exhaustion of remedies" language found in Section 19-10-302 (or, in the alternative, an exception applies to that requirement, because going any further with the lawsuit would be futile). To hold otherwise would require the Claims Commission to oversee and second guess every litigation decision (and push claimants into pursuing every claim to an adjudication on the merits while unnecessarily wasting judicial resources).

D. UAMS can be held vicariously liable for its staff.

For its third grounds of dismissal, UAMS argues that it cannot be held vicariously liable for Claimant's claims because the physicians were dismissed. However, UAMS ignores the fact that Claimant also asserted claims against UAMS' nurses and respiratory therapist and that those Defendants and the claims against them were not dismissed in the Pulaski County lawsuit.

Therefore, despite UAMS' contention to the contrary, there are underlying UAMS employees who could still be held liable by the Claims Commission in this action and for which UAMS would be held vicariously liable.

WHEREFORE, PREMISES CONSIDERED, Claimant FLORENCE WEST respectfully requests that the Claims Commission deny Respondent's Motion for Summary Judgment, and grant Claimant such other and further relief, whether at law or at equity, to which she may show herself justly entitled.

Respectfully submitted,

BOYD PRAZAK, LLP

Ву:

Jack N. Boyd, Jr.

ABN: 90150

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(f) 903.832.8489

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ATTORNEYS FOR CLAIMANT FLORENCE WEST

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing instrument has been forwarded to the following counsel of record on this 7th day of October 2016.

Sherri L. Robinson Associate General Counsel UAMS 4301 W. Markham, Slot 860 Little Rock, AR 72205

By: Men

Jack N. Boyd, Jr.

OCT 1 4 2016

IN THE ARKANSAS STATE CLAIMS COMMISSION

RECEIVED

FLORENCE WEST, Individually and as Next Friend Of CHARLES WEST, an Incapacitated Person, and JIM VERSHOYLE, as guardian ad litem for CHARLES WEST

CLAIMANTS

V.

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

RESPONDENT

REPLY TO RESPONSE TO RESPONDENT'S MOTION FOR SUMMARY JUDGMENT

Under either the summary judgment or dismissal standard, UAMS is entitled to judgment as a matter of law in this matter.

I. No Substitution of Party.

It appears from Claimant's response to the motion that she concedes that can be no recovery on behalf of Mr. West as he is deceased and no substitution for him was made. While a guardian ad litem brought the lawsuit originally for Mr. West, he was appointed to represent Mr. West and not his estate. The guardian ad litem no longer has a role since Mr. West is deceased; consequently, a substitution was required to maintain claims on behalf of Mr. West's estate.

II. No Exhaustion.

There has been no case law interpreting Ark. Code Ann. § 19-10-302; however, before resorting to any other law interpreting principals of exhaustion, plain meaning should be given to the language of the applicable statute. The General Assembly very clearly states that "all remedies against insurers" must be exhausted before pursuing a claim against the state coffers. Ark. Code Ann. § 19-10-302 (emphasis added). There is no ambiguity in this requirement.

The General Assembly has charged the Commission recommending payment of claims that it finds from the evidence are just debts of the State. To do so, the General Assembly has given very clear guidance to the Commission - ensure that any claim that can be satisfied by private insurance, i.e., <u>not</u> taxpayer money, is in fact exhausted. Here, Claimant is asking for \$2,000,000 of state taxpayer money when the actions of which she complains were undertaken, directed or supervised by physicians.

As Exhibit 2 to the motion demonstrates, UAMS, a state entity, has already purchased liability insurance for its physicians. The insurance limits that were available in the Pulaski County lawsuit far exceeded the \$2,000,000 sought by Claimant in this action. See Exhibit 2.

It is undisputed that the Wests dismissed all of the physicians who they originally sued without a finding on the merits or a settlement of any claim. See 60CV-11-643 and Motion Exhibits 3 and 5. The reasons for dismissal are irrelevant. Claimants chose to dismiss the physicians; consequently, there is no exhaustion as required by state law. It is contrary to clearly stated law to allow Claimant to forego exhausting those remedies before seeking money from the State through UAMS.

III. No Vicarious Liability.

While Claimant alleges that she seeks to hold the non-physician staff liable for their actions here, the actions of which she complains in the Complaint were undertaken, directed or supervised by physicians. As such, liability must first be sought against the physicians. In this case, as set forth in section II, the physicians had insurance to cover any possible negligence. Because Claimant dismissed the physicians without a finding of

negligence, as a matter of law, Claimant can no longer seek compensation for any actions of the physicians.

Conclusion.

There are no genuine issues of fact on the dispositive issues raised by Respondent, and Respondent is entitled to summary judgment in this matter.

WHEREFORE, Respondent requests that the Commission grant its motion for summary judgment and for all other relief to which it is entitled.

Respectfully submitted,

THE UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Respondent

By:

SHERRI L. ROBINSON, #97194

Associate General Counsel

University of Arkansas for Medical Sciences

4301 West Markham, Slot 860

Little Rock, AR 72205

(501) 686-7608

Srobinson3@uams.edu

Attorneys for Respondent

CERTIFICATE OF SERVICE

I, Sherri L. Robinson, do hereby certify that a copy of the foregoing pleading has been served on claimant herein by mailing a copy of same, by U.S. Mail, postage prepaid, this 12th day of October, 2016, addressed to the following:

Jack Boyd, Jr. Boyd Prazak, LLP 2301 Moores Lane Texarkana, TX 75503

Sherri L. Robinson

STATE CLAIMS COMMISSION DUCKET		
OPINIC	11-0554-CC	
Amount of Claim \$	Claim No.	
Althount, or older to	Attorneys	
and the second s	Jack N. Boyd, Jr., Attorney Claimant	
Florence West, ET AL. Claimant	· ·	
	Sherri L. Robinson, Attorney	
University of AR Medical Sciences Respondent	Sherri L. Roomson, Attorney Respondent	
State of Arkansas	Donal Lainer Doin &	
Date Filed February 25, 2011	Type of Claim Negligence, Personal Injury, Pain & Suffering, Mental Anguish	
FINDING OF FACTS		
After reviewing the Respondent's "Motion for Summary Judgment" and the Claimant's response to that pleading, the Claims Commission hereby unanimously grants the Respondent's "Motion for Summary Judgment" for the following reasons:		
1. More than 1 year has passed since the death of Mr. West, and no one has been substituted in the present case before the Claims Commission. In circuit court, this case would be dismissed as a matter of law under rule 25(a) of the Arkansas Rules of Civil Procedure. Under A.C.A. 19-10-204(b)(3), since this case would be dismissed as a matter of law in circuit court, it must also be dismissed here.		
 dismissed here. The Claimant's dismissed all claims against 11 physicians in the circuit court case, without findings on the merits or settlement of any claim. Such action does not meet the "exhaust all remedies requirement" against potential insurers as required by A.C.A. 19-10-302. The Claimant's dismissal of the physicians, who supervised the employees at UAMS, effectively guts the exhaustion of remedies requirement. Since the physicians were dismissed as outlined above, any potential of vicarious liability of UAMS has been eliminated. 		
Therefore, this claim is denied and dismissed.		
IT IS SO ORDERED.		
(See Back of C	pinion Form)	
CONCLUSION		
The Claims Commission hereby unanimously grants the Respondent's "Motion for Summary Judgment." Therefore this claim is denied and dismissed.		
Date of Hearing November 17, 2016		
Date of Disposition November 17, 2016 Chairman Mun Frether Commissioner		

Arkansas Claims Commission

IN THE ARKANSAS STATE CLAIMS COMMISSION

DEC 3 0 2016

FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and Jim Verschoyle, as Guardian ad Litem for CHARLES J. WEST.

RECEIVED

CLAIMANTS,

٧.

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, et al.,

RESPONDENTS.

CLAIMANT FLORENCE WEST'S MOTION FOR RECONSIDERATION

COMES NOW FLORENCE WEST, Movant, and files her Motion for Reconsideration, and in support thereof, would respectfully show as follows:

I.

On March 1, 2009, Charles West, husband of Florence West, received negligent nursing care at UAMS in Little Rock, Arkansas. As a result of said negligent care, Charles West was partially paralyzed.

11.

On February 14, 2011, in Cause No. 60-CV-2011-0643, Movant and Charles West filed their Original Complaint against UAMS and various physicians employed by UAMS, alleging breaches in the medical and nursing standards of care. The case against UAMS was abated by the Arkansas Claims Commission, pending a final resolution of Cause No. 60-CV-2011-0643 (the Circuit Court case against the physicians).

III.

Charles West died on May12, 2015. Movant, Florence West, continued to pursue litigation in her own behalf against the physician Defendants and UAMS.

IV.

Throughout the course of the discovery conducted in Cause No. 60-CV-2011-0643 (the Circuit Court case against the physicians), Movant and her experts determined that none of the defendant physicians were negligent, but instead, that the proximate cause of Charles West's injuries were from the acts and omissions of UAMS and its nurses. Since Movant, pursuant to the procedural mandates of the Arkansas Claims Commission, could not simultaneously pursue her claims against UAMS and its nurses while pursuing claims against the physician defendants, Movant voluntarily dismissed her claims against the physician defendants so as to allow her to pursue her claims against UAMS and its nurses

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Despite the death of Charles West, Movant continued with her pursuit of her claims against UAMS through the Arkansas Claims Commission. Movant's claims against UAMS and its nurses have always been distinctly separate from the claims made by Charles West. Movant has never filed a wrongful death claim against any defendant (including UAMS); instead, her claims were basically for loss of consortium and loss of the benefit of Charles West's financial benefits. The fact that Movant is continuing to pursue only her claims against UAMS, and not the claims of Charles West nor any wrongful death claim, is evidenced in Paragraph 4 of Exhibit 4 attached to UAMS' Motion for Summary Judgment (Plaintiffs Motion for Continuance in UAMS'

Cause No. 60-CV-2011-0643, the Circuit Court case against the physicians). Movant attaches said Motion for Continuance as Exhibit "A" hereto. For further argument regarding the effect of Charles West's death on Movant's claims, Movant refers her Response to UAMS' Motion for Summary Judgment, which is incorporated herein for all purposes).

VI.

On September 19, 2016, UAMS filed its Motion for Summary Judgment. Movant responded to UAMS's Motion for Summary Judgment on October 10, 2016. Movant refers to and incorporates for all purposes herein her Response to UAMS' Motion for Summary Judgment filed on October 10, 2016.

VII.

Movant anticipated and expected the Arkansas Claims Commission would conduct a hearing on UAMS' Motion for Summary Judgment, just as all Arkansas Circuit Courts do. Instead, On November 17, 2016, the Arkansas Claims Commission, without providing any counsel with any type of notice of any hearing on UAMS' Motion for Summary Judgment, issued its finding of fact, denying and dismissing Movant's claim. The Arkansas Claims Commission did not conduct any type of a hearing on UAMS's Motion for Summary Judgment, but instead, issued its findings of fact based solely upon a review of UAMS's Motion for Summary Judgment and Movant's response to that Motion.

VIII.

Movant respectfully requests that the Arkansas Claims Commission (i) reconsider its findings of facts, denial and dismissal of Movant's claim, and (ii) schedule a hearing to include oral arguments on UAMS's Motion for Summary Judgment.

Respectfully submitted,

BOYD PRAZAK, LLP

By:

Jack N. Boyd, Jr.

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ATTORNEYS FOR CLAIMANT FLORENCE WEST

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing instrument has been forwarded by fax and U.S. mail to the following counsel of record on this 29th day of December 2016.

Sherri L. Robinson Associate General Counsel UAMS 4301 W. Markham, Slot 860 Little Rock, AR 72205

Jack N. Boyd, Jr.

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BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

FLORENCE WEST, ET AL.

CLAIMANTS

V.

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

RESPONDENT

RESPONSE TO MOTION FOR RECONSIDERATION

Comes now, Respondent, UAMS, by and through the undersigned counsel, and for its Response to Motion for Reconsideration, states:

Rule 7.1 of the Claims Commission General Rules of Practice & Procedure requires the party moving for reconsideration to set forth "new or additional evidence which was not available to the moving party at the time of the scheduled hearing." The Arkansas Rules of Civil Procedure do not specifically address a motion for reconsideration. However, generally, a party seeking reconsideration of a written decision must show a new, intervening change in law, "manifest error" or new evidence, which was not previously available at the time of the hearing on the motion. See id.

In that same vein, a motion for reconsideration is not a vehicle for the introduction of new legal theories or "new evidence that could have been adduced during pending of the motion at issue." *Arnold v. ADT Sec. Services, Inc.,* 627 F.3d 716, 721 (8th Cir. 2010) (internal quotations omitted). In order to be considerate "newly discovered" for purposes of a motion for reconsideration, the evidence in question must have been "previously unavailable." *BIS Investments, LLC v. Bank of America, N.A.*, No. 4:12CV 195 CDP, 2012 WL 2128032, at *1 (E.D. Mo. Jun. 12, 2012) (citing *Anthony v. Runyon*, 76 F.3d 210, 215 (8th Cir. 1996)). Re-arguments of the same

arguments on the same evidence are improper for reconsideration. See Alliance Commc'n Co-op., Inc. v. Global Crossing Telecommc'ns, Inc., 690 F. Supp.2d 889, 900 (S.D.S.D. 2010) ("Now, without presenting any newly discovered evidence or identifying any manifest errors of law, plaintiffs attempt to rehash arguments that the court resolved in the summary judgment order. That is not the purpose of a motion for reconsideration.") A motion for reconsideration is not a chance for a party to take a "second bite at the apple." Rafter v. Liddle, 288 Fed.Appx. 768, 769 (2d Cir. 2008) (quoting Sequa Corp. v. GBJ Corp., 156 F. 3d 136, 144 (2d Cir. 1998)).

Finally, findings of fact are governed by a "clearly erroneous standard." *See* Ark. R. Civ. P. 52(a). Thus, "[f]indings of fact, whether based on oral or documentary evidence, **shall** not be set aside unless clearly erroneous (clearly against the preponderance of the evidence." *Id.* (emphasis added). In sum, the bar for Claimant to have the Claims Commission reconsider its decision is very high.

Claimant offers no newly discovered evidence for consideration in its motion or legal reason why the Commission's order should be reconsidered. Instead, she restates information already presented and laments that the Commission did not give her a hearing on the motion for summary judgment. There is no requirement that a hearing be held on motions for summary judgment. As a result, Claimant's motion should be denied.

WHEREFORE, Respondent respectfully requests that Claimant's motion for reconsideration be denied and for all other relief to which it may be entitled.

Respectfully submitted,

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES, Respondent

By:

SHERRI L. ROBINSON, #97194

Associate General Counsel

University of Arkansas for Medical Sciences 4301 West Markham, Slot 860

Little Rock, AR 72205

(501) 686-7608

Srobinson3@uams.edu

Attorney for Respondent

CERTIFICATE OF SERVICE

I, Sherri L. Robinson, do hereby certify that a copy of the foregoing pleading has been served on claimant herein by mailing a copy of same, by U.S. Mail, postage prepaid, this 4th day of January, 2017, addressed to the following:

Jack Boyd, Jr. Boyd Prazak, LLP 2301 Moores Lane Texarkana, TX 75503

Sherri L. Robinson

STATE CLAIMS COMMISSION DOCKET OPINION

OPINION	
Amount of Claim \$ (unspecified amount)	11-0554-CC
Florence West, Individually and as Next Friend of Charles J. West, an Incapacitated Person Claimant	Attorneys Jack N. Boyd, JrClaimant
vs. University of Arkansas for Medical Sciences	Sherri L. Robinson
Respondent	Respondent
State of Arkansas February 25, 2011 Date Filed	Negligence, Personal Injury, Pain and Suffering, Mental Anguish, Etc.
FINDING C	of FACTS
The Arkansas State Claims Commission (the "Claims Motion for Reconsideration filed by Florence or additional evidence to change the November Commission denying and dismissing West's c Medical Sciences (the "Respondent"). Therefore,	West ("West") for West's failure to offer new 17, 2016, order (the "Order") of the Claims laim against the University of Arkansas for
IT IS SO ORDERED.	
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1	
(See Back of C	pinion Form)
CONCL	USION
The Claims Commission hereby unanimously Disuch, the Order denying and dismissing West's cl	ENIES West's Motion for Reconsideration. As laim against the Respondent remains in effect.
February 16, 2017	
	0-
Date of Hearing	$-\alpha\alpha(\cdot)$
February 16, 2017	Yalla M
Date of Disposition	Chairman

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IN THE ARKANSAS STATE CLAIMS COMMISSION

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FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person, and Jim Verschoyle, as Guardian ad Litem for CHARLES J. WEST,

CLAIMANTS.

V.

CASE NO. 11-0554-CC

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES.

RESPONDENT.

CLAIMANT FLORENCE WEST'S NOTICE OF APPEAL

COMES NOW Claimant FLORENCE WEST, Individually and as Next Friend of CHARLES J. WEST, an Incapacitated Person (now deceased), and files this, her Notice of Appeal to the Claims Review Subcommittee of the Arkansas Legislative Council of the Arkansas General Assembly. In appealing the decision of the Arkansas Claims Commission, Claimant states as follows:

- 1. On November 17, 2016, the State Claims Commission issued an Opinion in the above-captioned claim granting Respondent's Motion for Summary Judgment and denying and dismissing Claimant's claims. Thereafter, Claimant filed a Motion for Reconsideration, and the State Claims Commission denied that Motion on February 16, 2017.
- 2. In granting the Respondent's Motion for Summary Judgment, the State Claims
 Commission issued "Findings of Facts" and gave the following reasons for its decision:
 - a. More than 1 year has passed since the death of Mr. West, and no one has been substituted in the present case before the Claims Commission. In circuit court, this case would be dismissed as a matter of law under rule 25(a) of the Arkansas Rules of Civil Procedure. Under A.C.A. 19-10-204(b)(3), since this case would be dismissed as a matter of law in circuit court, it must also be dismissed here.

- b. The Claimant's dismissed all claims against 11 physicians in the circuit court case, without findings on the merits or settlement of any claim. Such action does not meet the "exhaust all remedies requirement" against potential insurers as required by A.C.A. 19-10-302. The Claimant's dismissal of the physicians, who supervised the employees at UAMS, effectively guts the exhaustion of remedies requirement.
- c. Since the physicians were dismissed as outlined above, any potential of vicarious liability of UAMS has been eliminated.
- 3. The State Claims Commission erred in its decision for the following reasons, which reasons warrant reversal of the decision issued regarding Claimant's claims:
 - a. The Revivor Statute (Ark. Code Ann. § 16-62-108) does not apply to Claimant Florence West because she was always the "Real Party in Interest" under Rule 17 of the Arkansas Rules of Civil Procedure in this action in that:
 - Claimant initially filed the claim in a representative capacity for Decedent Charles West because the Mr. West was already incapacitated when the claim was originally filed (due to a brain injury); and
 - ii. Claimant filed an individual claim for loss of consortium related to the loss of her husband's companionship (and that type of claim belonged to her personally, such that it would not be subject to the Revivor Statute);
 - b. The State Claims Commission interpreted the "exhaustion of remedies" doctrine found in Ark. Code Ann. § 19-10-302 too broadly and ignored common exceptions to that doctrine found in other areas of the law (including the exception to the doctrine available when pursuit of other

remedies would provide no genuine opportunity for adequate relief). The state-law claims against the other potentially culpable parties were pursued for four years, and the claims against those parties were investigated and evaluated thoroughly by virtue of the discovery process provided under the Arkansas Rules of Civil Procedure. Although Claimant did not push those claims to an ultimately negative outcome (she voluntarily dismissed her state-law claims after conducting discovery), those claims were fully litigated nonetheless. To require her to pursue her claims beyond their reasonable basis places an unreasonably burden upon the Claimant before she might be able to her pursue her claims in this forum; and

c. Physicians often practice medicine in hospitals under admitting privileges and do not employ the nurses that assist them (as the State Claims Commission seems to presume). Therefore, the physicians dismissed in the underlying lawsuit did not "supervise" any UAMS employees (including the nurses and respiratory therapist identified in the lawsuit) such that the physicians' dismissal would preclude the claims asserted against the hospital and its employees.

WHEREFORE, Claimant respectfully requests the Claims Review Subcommittee of the Arkansas Legislative Council to review this matter and reverse the State Claims Commission's decision.

Respectfully submitted,

BOYD PRAZAK, LLP

By:

Jack N. Boyd, Jr.

ABN: 90150

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ATTORNEYS FOR CLAIMANT FLORENCE WEST

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing instrument has been forwarded to the following counsel of record on this 6th day of March, 2017.

Sherri L. Robinson University of Arkansas Associate General Counsel 4301 W. Markham #860 Little Rock, Arkansas 72205

Jack N. Boyd, Jr.