=== Mon, Oct 13, 2025
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Note Type: Chief complaint Recorded by: Nurse Seema (RN). Time: 0735 Hrs

Two brief episodes of limb jerking and loss of awareness this morning.

Note Type: Triage Recorded by: Nurse Seema (RN). Time: 0735 Hrs

Triage priority: Yellow (urgent). Allergies: NKDA. Fall risk: Moderate.

Note Type: Vitals. Recorded by: Nurse Seema (RN). Time: 0740 Hrs

Height: 168 cm | Weight: 64 kg | BMI: 22.7 kg/m²
BP: 124/78 (sitting) | Temp: 37.8 °C | Pulse: 88 | RR: 18 | SpO_2: 98% RA | Pain: 3/10

Note Type: HPI. Recorded by: Nurse Nurul (RN). Time: 0815 Hrs

36F, two focal right-arm events ~60s each, brief post-ictal confusion, no incontinence/tongue bite, no trauma; poor sleep x3 days.

Note Type: Examination Notes. Recorded by: Dr Alim (MD – Internal Medicine). Time: 0930 Hrs

General/Neuro unremarkable; Impression: New-onset focal seizures; Plan: admit, labs, EEG/MRI, start Levetiracetam, seizure precautions.

Note Type: Past Medical History. Recorded by: Dr Alim (MD). Time: 0945 Hrs

PMH: Migraine; PSH: Appendectomy (2010); Meds: OCP; Social: Non-smoker.

Note Type: Medication Orders (CPOE). Recorded by: Dr Alim (MD). Time: 0955 Hrs

- **Levetiracetam 500 mg PO BID** — Start now; Indication: Seizure prophylaxis; Duration: 14 days; **Priority:** Routine; **Status:** Active; **Cosign:** Not required.
- **Acetaminophen 1 g PO q8h PRN pain/fever** — Max 3 g/day; **Status:** Active PRN.
- **Lorazepam 2 mg IV STAT PRN** — For seizure >5 min; may repeat once after 5 min; **Status:** Contingency order.
- **0.9% NaCl KVO 30 ml/h** — For IV patency; **Status:** Active.
- **Enoxaparin 40 mg SC daily** — VTE prophylaxis (hold if MRI contrast contraindicated/platelets <50k); **Status:** Active; **Start:** 2100 Hrs.
  Pharmacy verification: **Queued** to Pharm. J. Chua, RPh.

Note Type: Lab Orders. Recorded by: Dr Alim (MD). Time: 1000 Hrs

Panel: **CBC, CMP, Mg, Ca, Random Glucose, β-HCG (urine), CRP**

Lab Results (prelim). Recorded by: Lab Auto-Result. Time: 1315 Hrs
CBC/CMP/Mg/Ca **WNL**; β-HCG **Negative**; CRP 2 mg/L (normal). **Status:** Final.

Note Type: Radiology Orders. Recorded by: Dr Alim (MD). Time: 1005 Hrs

- **MRI Brain w/ and w/o contrast** — Indication: New-onset focal seizures; **Sedation:** None; **Allergy:** NKDA; **eGFR:** pending CMP.
- **EEG (Routine 20-min)** — With hyperventilation & photic.
  EEG Slot Confirmed 0845 Hrs (14 Oct) — Tech A. Goh.
  MRI Scheduled **2100 Hrs (14 Oct)** — Radiology Dept; **NPO 4 h prior** instruction added to nursing orders.

Note Type: Diet Orders. Recorded by: Dr Alim (MD). Time: 1012 Hrs

- **Regular diet**; fluids encourage 2 L/day (unless restricted); **NPO from 1700 Hrs (14 Oct)** for MRI workflow convenience. **Status:** Active.

Note Type: Nursing Care Orders. Recorded by: Dr Alim (MD). Time: 1015 Hrs

- Seizure precautions (bed rails padded, suction ready).
- Neuro obs **q4h**; record GCS; document events.
- Educate patient on call bell; supervise ambulation.
  Acknowledged by: Nurse Seema (RN) at **1017 Hrs**.

Note Type: Nursing Notes. Recorded by: Nurse Seema (RN). Time: 1015 Hrs

Ward orientation; seizure precautions implemented; IV 24G L forearm; labs sent.

Note Type: Medication Administration. Recorded by: Nurse Nurul (RN). Time: 1100 Hrs

Levetiracetam 500 mg PO (1st dose) — tolerated. Acetaminophen 1 g PO for headache (3/10 → 1/10 at 1130 Hrs).

Note Type: Vitals. Recorded by: Nurse Seema (RN). Time: 1200 Hrs

BP: 118/74 | Temp: 37.6 °C | Pulse: 80 | RR: 16 | SpO_2: 99% RA | Pain: 1/10

Note Type: Physiotherapy Orders. Recorded by: Dr Alim (MD). Time: 1400 Hrs

- **PT Evaluate & Treat** — Fall risk education; gait assessment; discharge readiness; **Frequency:** Once today; **Status:** Active.

Note Type: Dietitian Screening. Recorded by: M. Ong (RD). Time: 1410 Hrs

BMI normal; high-protein options advised; hydration ≥2 L/day.

Note Type: Physiotherapy Evaluation. Recorded by: K. Rao (PT). Time: 1540 Hrs

Mobility independent; TUG 12 s; education provided; **No further inpatient PT required**.

Note Type: Progress Notes. Recorded by: Dr Alim (MD). Time: 1930 Hrs

No further events; continue plan; EEG tomorrow AM; MRI 2100 Hrs (14 Oct).

=== Tue, Oct 14, 2025
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Note Type: Vitals. Recorded by: Nurse Nurul (RN). Time: 0610 Hrs

BP: 116/72 | Temp: 37.2 °C | Pulse: 76 | RR: 16 | SpO_2: 99% RA | Pain: 0/10 | Slept 6 h.

Note Type: Vitals. Recorded by: Nurse Seema (RN). Time: 1000 Hrs

BP: 114/70 | Temp: 37.1 °C | Pulse: 72 | RR: 16 | SpO_2: 99% RA

Note Type: Progress Notes. Recorded by: Dr J. Tan (Neurology). Time: 1105 Hrs

No seizures overnight; neuro exam unchanged. Prelim EEG: no clear epileptiform discharges.
Plan: Continue Levetiracetam 500 mg BID; MRI 2100 Hrs; discharge if stable post-results.

Note Type: Medication Administration. Recorded by: Nurse Nurul (RN). Time: 1200 Hrs

Levetiracetam 500 mg PO administered; no adverse effects. PO intake 600 ml this shift.

=== Wed, Oct 15, 2025
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Note Type: Vitals. Recorded by: Nurse Nurul (RN). Time: 0700 Hrs

BP: 116/70 | Temp: 36.8 °C | Pulse: 70 | RR: 16 | SpO_2: 99% RA | Pain: 0/10

Note Type: Medication Orders – Discharge. Recorded by: Dr Alim (MD). Time: 0935 Hrs

- **Levetiracetam 500 mg PO BID x 14 days** — **Status:** Active on discharge; 28 tablets; 0 refills; counseling printed.
- **Acetaminophen 1 g PO q8h PRN** — Max 3 g/day; 20 tablets.
- **Stop:** Enoxaparin (no longer indicated on discharge).
  Pharmacy Dispense: **Completed** by RPh J. Chua at **1000 Hrs**; patient counseled.

Note Type: Follow-up/Referral Orders. Recorded by: Dr Alim (MD). Time: 0940 Hrs

- **OPD Neurology appointment** in **7 days** (preferred morning slot).
- **EEG formal report** to be reviewed at OPD; contact if abnormal.
- **Driving restrictions** per local regulations — provided in discharge education.