

**PUBLIC—REDACTS MATERIAL FROM CONDITIONALLY
SEALED RECORD**

IN THE CALIFORNIA COURT OF APPEAL

IN AND FOR THE SECOND APPELLATE DISTRICT

DIVISION FIVE

In re JOSEPH HUNT,)	Case No.: B313344
)	
)	Los Angeles County
Petitioner,)	Superior Court Case
)	No.: A090435
)	
)	Previous Related Case:
On Habeas Corpus.)	B110428
_____)	

EXHIBITS IN SUPPORT OF PETITION FOR WRIT OF HABEAS CORPUS

VOLUME 3

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	Lab Reviews and [REDACTED]
Service Date/Time:	3/6/2020 15:52 PST
Result Status:	Modified
Perform Information:	Saipher, Marshall NP (3/6/2020 16:10 PST); Saipher, Marshall NP (3/6/2020 16:09 PST)
Sign Information:	Saipher, Marshall NP (3/6/2020 16:10 PST); Saipher, Marshall NP (3/6/2020 16:09 PST)
Authentication Information:	Saipher, Marshall NP (3/6/2020 16:10 PST); Saipher, Marshall NP (3/6/2020 16:09 PST)

Addendum by Saipher, Marshall NP on March 06, 2020 16:10:11 PST

I also informed him that a repeat lab was ordered and that I will review everything with him next week. He was agreeable.

IP was scheduled today to request [REDACTED] test. I informed him a [REDACTED] test was already ordered. He said he wants it because he's thinking that that might explain his other health problems, especially [REDACTED]. Denies [REDACTED].

I took the opportunity today also to discuss the recent [REDACTED]. He seemed surprised. Denies feeling sick--no subjective [REDACTED]. Has [REDACTED].

I took the opportunity of our meeting to encourage him once more to take his [REDACTED], as recommended by his [REDACTED]. He replied he's concerned about the side effect and, besides, he no longer has symptoms-- [REDACTED]. He said, [REDACTED]. He said that a doctor friend outside the prison recently told him that, since he not currently having [REDACTED] and is feeling well overall, he doesn't necessarily need to be on any of these medications. I replied that he should listen to his own [REDACTED], who is in a much better position to advise him. He didn't agree and stated his intention to continue refusing to take the medications in question.

Encounter Info: Patient Name: [REDACTED], Encounter Type: Institutional Encounter

Report Request ID: 27398289

Print Date/Time: 3/9/2020 11:30 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	3/5/2020 08:24 PST
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (3/5/2020 08:29 PST)
Sign Information:	Saipher, Marshall NP (3/5/2020 16:20 PST)
Authentication Information:	Saipher, Marshall NP (3/5/2020 16:20 PST); Saipher, Marshall NP (3/5/2020 16:20 PST); Saipher, Marshall NP (3/5/2020 08:35 PST)

Reviewed [REDACTED] dated yesterday, March 4th. Shows [REDACTED]. Previous [REDACTED]
[REDACTED]

Check health history for [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

I will order today a repeat [REDACTED]

Encounter Info: Patient Name: JOE [REDACTED] Encounter
Type: Institutional Encounter

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	2/27/2020 11:10 PST
Result Status:	Auth (Verified)
Perform Information:	Trull, Steve LVN (2/27/2020 11:11 PST)
Sign Information:	Trull, Steve LVN (2/27/2020 11:11 PST)
Authentication Information:	Trull, Steve LVN (2/27/2020 11:11 PST)

Encounter Info: Patient Name: [REDACTED] Encounter Type: Institutional Encounter

Report Request ID: [REDACTED]

Print Date/Time: 3/9/2020 11:30 PDT

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7707 Austin Rd
Stockton, CA 95215-

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring: [REDACTED]

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	2/25/2020 08:43 PST
Result Status:	Auth (Verified)
Perform Information:	Saipher,Marshall NP (2/25/2020 08:45 PST)
Sign Information:	Saipher,Marshall NP (2/25/2020 09:00 PST)
Authentication Information:	Saipher,Marshall NP (2/25/2020 09:00 PST); Saipher,Marshall NP (2/25/2020 09:00 PST); Saipher,Marshall NP (2/25/2020 08:53 PST)

[illegible]

Encounter Info: Patient Name: [REDACTED] Encounter
Type: Institutional Encounter

Print Date/Time: 3/9/2020 11:31 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-Nurse
Document Subject:	[REDACTED]
Service Date/Time:	2/24/2020 14:33 PST
Result Status:	Auth (Verified)
Perform Information:	Kaur, Sarbjit RN (2/24/2020 14:39 PST)
Sign Information:	Kaur, Sarbjit RN (2/24/2020 14:39 PST)
Authentication Information:	Kaur, Sarbjit RN (2/24/2020 14:39 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, FIN: 10282275111480004D61863, Facility: CHCF, Encounter Type: Institutional Encounter

IP attended follow-up RN appointment for [REDACTED]

Electronically Signed on 02/24/2020 02:39 PM PST

Kaur, Sarbjit RN, RN

Report Request ID: 27398293

Print Date/Time: 3/9/2020 11:31 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

Progress Note-Nurse
[REDACTED]
2/22/2020 10:24 PST
Auth (Verified)
Ngan, Maria RN (2/22/2020 11:23 PST)
Ngan, Maria RN (2/22/2020 11:23 PST)
Ngan, Maria RN (2/22/2020 11:23 PST)

Encounter Info: Patient Name: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Electronically Signed on 02/22/2020 11:23 AM PST

Ngan, Maria RN, RN



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient:

DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: 11480004
Referring:

Progress Notes

Document Type: Inpatient Progress Note
Document Subject: [REDACTED]
Service Date/Time: 2/22/2020 09:59 PST
Result Status: Modified
Perform Information: Mohyuddin, Aliasghar P&S (2/22/2020 10:16 PST); Mohyuddin, Aliasghar P&S (2/22/2020 10:12 PST)
Sign Information: Mohyuddin, Aliasghar P&S (2/22/2020 10:16 PST); Mohyuddin, Aliasghar P&S (2/22/2020 10:12 PST)
Authentication Information: Mohyuddin, Aliasghar P&S (2/22/2020 10:16 PST); Mohyuddin, Aliasghar P&S (2/22/2020 10:12 PST)

Addendum by Mohyuddin, Aliasghar P&S on February 22, 2020 10:13:04 PST

Patient was asked about [REDACTED]

Electronically Signed on 02/22/2020 10:16 AM PST

Mohyuddin, Aliasghar P&S, P&S

Modified by: Mohyuddin, Aliasghar P&S, P&S on 02/22/2020 10:16 AM PST

CHCF - California Health Care Facility - Stockton

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] / Male CDCR: [REDACTED]

Progress Notes

The patient had come in to see the nurses for a 7362 that he had filled out. I happened to be around so I wanted to look at the reason the patient had come in the patient relates that he had been at the [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Encounter Info: Patient Name: [REDACTED] Encounter
Type: Institutional Encounter

Electronically Signed on 02/22/2020 10:12 AM PST

Mohyuddin, Aliasghar P&S, P&S

Report Request ID: 27398295

Print Date/Time: 3/9/2020 11:31 PDT

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7707 Austin Rd
Stockton, CA 95215-

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring: [REDACTED]

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	2/21/2020 14:38 PST
Result Status:	Auth (Verified)
Perform Information:	Saipher,Marshall NP (2/21/2020 15:04 PST)
Sign Information:	Saipher,Marshall NP (2/21/2020 15:04 PST)
Authentication Information:	Saipher,Marshall NP (2/21/2020 15:04 PST)

Encounter Info: Patient Name: [REDACTED] Encounter Type: Institutional Encounter

Print Date/Time: 3/9/2020 11:31 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
PID #: [REDACTED]
Referring:

History and Physical Reports

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

History and Physical
[REDACTED]
2/20/2020 20:51 PST
Auth (Verified)
Akintola, Omoniyi PA (2/20/2020 20:59 PST)
Akintola, Omoniyi PA (2/20/2020 20:59 PST)
Akintola, Omoniyi PA (2/20/2020 20:59 PST)

Chief Complaint

[REDACTED]

History of Present Illness

The patient is a 60-year-old Caucasian male being seen today in [REDACTED]

[REDACTED]

Problem List/Past Medical History

Ongoing

[REDACTED]

Historical

No qualifying data

Medications

[REDACTED]

Allergies

[REDACTED]

Social History

[REDACTED]

Report Request ID: 27398297

Print Date/Time: 3/9/2020 11:31 PDT

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CHCF - California Health Care Facility - Stockton

Patient: [REDACTED]

DOB/Age/Sex: [REDACTED] / Male

CDCR: [REDACTED]

History and Physical Reports

[REDACTED]

Substance Abuse

Never

Tobacco

Never

Family History

Follow-up:

[REDACTED]

Past medical history

[REDACTED]

Social History: Tattoos: Denies. IVDA: Denies. Illicit drug use: Denies. Smoking: Denies. ETOH: Denies.

Family History:

[REDACTED]

Education: College degree USC graduate.

Occupation: Financial marker treated. Marital Status: Married. Children: None.

Report Request ID: 27398297

Print Date/Time: 3/9/2020 11:31 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: [REDACTED]

DOB/Age/Sex: [REDACTED] / Male

CDCR: [REDACTED]

History and Physical Reports

Review of Systems

[REDACTED]
[REDACTED]
[REDACTED]

Physical Exam

Vitals & Measurements

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Assessment/Plan

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Report Request ID: 27398297

Print Date/Time: 3/9/2020 11:31 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] / Male CDCR: [REDACTED]

History and Physical Reports

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

Electronically Signed on 02/20/2020 08:59 PM PST

Akintola, Omoniyi PA, PA

Report Request ID: 27398297

Print Date/Time: 3/9/2020 11:31 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: [REDACTED]
DOB/Age/Sex: [REDACTED] Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: [REDACTED]
Referring: [REDACTED]

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	Diagnostic Study Results
Service Date/Time:	2/20/2020 10:18 PST
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (2/20/2020 10:20 PST)
Sign Information:	Saipher, Marshall NP (2/20/2020 10:20 PST)
Authentication Information:	Saipher, Marshall NP (2/20/2020 10:20 PST)

IP scheduled today to review [REDACTED] from the 14th. [REDACTED]

Encounter Info: Patient Name: [REDACTED] Encounter
Type: Institutional Encounter

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Discharge Summary
* Final Report *

Result type: [REDACTED]
Result Date: February 20, 2020 12:27 PST
Result Status: Auth (Verified)
Result Title/Subject: Discharge Note
Performed By/Author: Ali, Usman MD on February 20, 2020 15:50 PST
Verified By: Ali, Usman MD on February 20, 2020 15:50 PST
Encounter info: 30419101, [REDACTED] 2/14/2020 - 2/20/2020

HUNT, JOE

60 Years Male

Admission Information

Team: Med Team 3
Attending: Dr. Ali
Resident: Dr. Galang, PGYII
[REDACTED]
CODE STATUS: Full
Disposition: CHCF, Dr. Lwin

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D61863
[REDACTED] A304-214

Page 1 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

HUNT, JOE - 12549368

[REDACTED]
* Final Report *

[REDACTED]
[REDACTED]
For HR of 150, patient was given adenosine 6mg and 12mg in the the emergency department. Underlying rhythm was noted to

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

Physical Exam

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

[REDACTED]
[REDACTED] A304-214

Page 2 of 6

MRN: D61863
FIN: 10282275111480004D61863

* Final Report *

[illegible][illegible]

[REDACTED] A304-214

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* Final Report *

Test Name			

SUMMARY OF FINDINGS AND RECOMMENDATIONS: Mr. Joe Hunt is a 60-year-old Caucasian male,

[REDACTED]

[REDACTED] [REDACTED]

[REDACTED]

* Final Report *

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Follow Up

With	When	Contact Information
[REDACTED]		
[REDACTED]		[REDACTED]
[REDACTED]		
[REDACTED]		

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Attending Note:

[REDACTED]

Signature Line

[Electronically Signed on: 02/20/2020 15:50 PST]

Ali, Usman MD MD

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

HUNT, JOE - 12549368

[REDACTED]
* Final Report *

[Electronically Signed on: 02/20/2020 15:40 PST]

Galang, Kristine J MD RES

[Electronically Signed on: 02/20/2020 15:40 PST]

Galang, Kristine J MD RES

[Electronically Signed on: 02/20/2020 15:50 PST]

Galang, Kristine J MD RES

[Verified on: 02/20/2020 15:50 PST]

Ali, Usman MD MD

Completed Action List:

- * Modify by Galang, Kristine J MD on February 20, 2020 13:02 PST
- * Modify by Galang, Kristine J MD on February 20, 2020 13:13 PST
- * Modify by Galang, Kristine J MD on February 20, 2020 13:28 PST
- * Modify by Galang, Kristine J MD on February 20, 2020 13:29 PST
- * Sign by Galang, Kristine J MD on February 20, 2020 15:40 PST Requested by Galang, Kristine J MD on February 20, 2020 15:40 PST
- * Sign by Galang, Kristine J MD on February 20, 2020 15:40 PST
- * Perform by Ali, Usman MD on February 20, 2020 15:50 PST
- * Modify by Ali, Usman MD on February 20, 2020 15:50 PST
- * Sign by Ali, Usman MD on February 20, 2020 15:50 PST Requested by Galang, Kristine J MD on February 20, 2020 13:30 PST
- * VERIFY by Ali, Usman MD on February 20, 2020 15:50 PST
- * Sign by Galang, Kristine J MD on February 20, 2020 15:50 PST Requested by Ali, Usman MD on February 20, 2020 15:50 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

[REDACTED] 6
[REDACTED] A304-214

Page 6 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

History and Physical
* Final Report *

HUNT, JOE - 12549368

Result type: History and Physical
Result Date: February 14, 2020 13:24 PST
Result Status: Auth (Verified)
Result Title/Subject: [REDACTED]
Performed By/Author: Jung, Syung MD on February 14, 2020 23:25 PST
Verified By: Jung, Syung MD on February 14, 2020 23:25 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: 12549368
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

Chief Complaint

[REDACTED]

History of Present Illness

This is a 59-year-old Caucasian male with

[REDACTED]

[REDACTED]

[REDACTED]

Problem List/Past Medical History

Ongoing

[REDACTED]

Historical

No qualifying data

[REDACTED]

Lab Results

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

[REDACTED] 6
[REDACTED] A304-214

Page 1 of 5

History and Physical
* Final Report *

Last 24 Hours

Chemistry

[illegible]

Review of Systems

Physical Exam

Vitals & Measurements

Assessment/Plan

1.

[REDACTED] ^b [REDACTED]
 [REDACTED] A304-214

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History and Physical
* Final Report *

[illegible]

		02/14/20 11:49:00
		02/14/20 11:49:00
		02/14/20 11:49:00
		02/14/20 11:49:00

Patient has been seen and examined with the team residents. Vital sign, Labs, Image reviewed.

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[illegible]

HUNT, JOE D61873
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

History and Physical
* Final Report *

HUNT, JOE - 12549368

	02/14/20
	11:49:00
	02/14/20
	11:49:00
	02/14/20
	11:49:00
	02/14/20
	11:49:00
	02/14/20
	11:49:00
	02/14/20
	11:49:00
	02/14/20
	11:49:00

	Date/Time
	02/14/20
	11:49:00
	02/14/20
	11:49:00

All Other
Results

Event Name	Event Result	Date/Time
		02/14/20
		11:49:00

Diagnostic Results

[REDACTED]

FINDINGS:

[REDACTED]

Miscellaneous: None.

IMPRESSION: [REDACTED]

[1] XR Chest 1 View Portable; Nikpour, Arian M MD 02/14/2020 13:07 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 4 of 5

* Auth (Verified) *

History and Physical
* Final Report *

HUNT, JOE - 12549368

Signature Line

[Electronically Signed on: 02/14/2020 23:25 PST]

Jung, Syung MD MD

[Electronically Signed on: 02/15/2020 00:49 PST]

Malik, Ali I MD RES

[Verified on: 02/14/2020 23:25 PST]

Jung, Syung MD MD

Completed Action List:

- * Modify by Malik, Ali I MD on February 14, 2020 13:24 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:09 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:10 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:12 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:12 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:16 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:47 PST
- * Modify by Malik, Ali I MD on February 14, 2020 14:47 PST
- * Modify by Malik, Ali I MD on February 14, 2020 16:22 PST
- * Modify by Malik, Ali I MD on February 14, 2020 16:24 PST
- * Perform by Jung, Syung MD on February 14, 2020 23:25 PST
- * Modify by Jung, Syung MD on February 14, 2020 23:25 PST
- * Sign by Jung, Syung MD on February 14, 2020 23:25 PST Requested by Malik, Ali I MD on February 14, 2020 14:47 PST
- * VERIFY by Jung, Syung MD on February 14, 2020 23:25 PST
- * Sign by Malik, Ali I MD on February 15, 2020 0:49 PST Requested by Jung, Syung MD on February 14, 2020 23:25 PST

ED Note - Physician
* Final Report *

Review of Systems

Constitutional symptoms: No fever, no chills.

Respiratory symptoms: No shortness of breath,

Cardiovascular symptoms: Palpitations. No chest pain.

Gastrointestinal symptoms: No abdominal pain, no nausea, no vomiting, no diarrhea.

Neurologic symptoms: No headache, no dizziness.

Additional review of systems information: [REDACTED], All systems reviewed as documented
part.

[illegible]

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:22 PST

HUNT, JOE D61873
10/26/59 A304-214

Page 2 of 6

* Auth (Verified) *

ED Note - Physician
* Final Report *

Seborrheic keratosis
Suspicious nevus

Physical Examination

Vital Signs
Vital Signs

2/14/2020 11:24 PST

[REDACTED]

[REDACTED]

Measurements

2/14/2020 11:37 PST

2/14/2020 11:37 PST

2/14/2020 11:24 PST

[REDACTED]

[REDACTED]

Basic Oxygen Information

[REDACTED]

Medical Decision Making

[REDACTED]

[REDACTED] Montecino, Mary C
2/21/2020 9:22 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

ED Note - Physician
* Final Report *

HUNT, JOE - 12549368

[REDACTED]

Documents reviewed: [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

HUNT, JOE D61873
10/26/59 A304-214

Page 4 of 6



* Auth (Verified) *

ED Note - Physician
* Final Report *



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

[REDACTED]

ED Note - Physician
* Final Report *

HUNT, JOE - 12549368

[REDACTED]

Addendum

The documentation recorded by the scribe, Gabrielle de Loyola, accurately reflects the service I, Janine Johal, PA-C personally performed and the decisions made by me.

Signature Line

[Electronically Signed on: 02/14/2020 19:27 PST]

Johal, Janine P PA PA

[Electronically Signed on: 02/14/2020 19:35 PST]

Dela Cruz, Maricel R DO DO

[Verified on: 02/14/2020 19:27 PST]

Johal, Janine P PA PA

Completed Action List:

- * Perform by Johal, Janine P PA on February 14, 2020 11:59 PST
- * Modify by De Loyola, Gabrielle on February 14, 2020 12:00 PST
- * Modify by De Loyola, Gabrielle on February 14, 2020 12:12 PST
- * Modify by De Loyola, Gabrielle on February 14, 2020 12:24 PST
- * Modify by Johal, Janine P PA on February 14, 2020 12:45 PST
- * Modify by Johal, Janine P PA on February 14, 2020 13:10 PST
- * Modify by De Loyola, Gabrielle on February 14, 2020 14:14 PST
- * Modify by Johal, Janine P PA on February 14, 2020 19:27 PST
- * Sign by Johal, Janine P PA on February 14, 2020 19:27 PST Requested by De Loyola, Gabrielle on February 14, 2020 14:14 PST
- * VERIFY by Johal, Janine P PA on February 14, 2020 19:27 PST
- * Sign by Dela Cruz, Maricel R DO on February 14, 2020 19:35 PST Requested by Johal, Janine P PA on February 14, 2020 19:27 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:22 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 6 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

Result type: Progress Note-Physician
Result Date: February 19, 2020 16:32 PST
Result Status: Auth (Verified)
Result Title/Subject: Progress/SOAP Note
Performed By/Author: Ali, Usman MD on February 19, 2020 16:37 PST
Verified By: Ali, Usman MD on February 19, 2020 16:37 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959

Registration Date: 02/14/2020

Primary Care Physician: CHCF, Physician

Subjective

[REDACTED]

Review of Systems

[REDACTED]

Objective

[REDACTED]

Physical Exam

[REDACTED]

Lab Results

Last 24 Hours

Chemistry

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00
[REDACTED]	[REDACTED]	02/19/20 05:26:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 3

[illegible][illegible]

Coagulation	
Event Name	

Assessment/Plan

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368

[REDACTED]

Signature Line

[Electronically Signed on: 02/19/2020 16:37 PST]

Ali, Usman MD MD

[Verified on: 02/19/2020 16:37 PST]

Ali, Usman MD MD

Completed Action List:

- * Perform by Ali, Usman MD on February 19, 2020 16:37 PST
- * Sign by Ali, Usman MD on February 19, 2020 16:37 PST
- * VERIFY by Ali, Usman MD on February 19, 2020 16:37 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 3

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

Result type: Progress Note-Physician
Result Date: February 18, 2020 8:31 PST
Result Status: In Progress
Result Title/Subject: IM Progress/SOAP Note
Performed By/Author: Abdali, Abdul S F MD on February 18, 2020 15:44 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Preliminary Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

Objective

* This column has not completed the indicated time period.

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 4

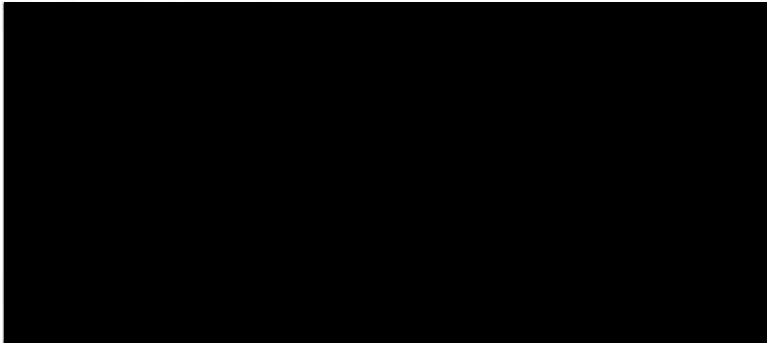
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368



Lab Results

Last 24 Hours

Chemistry

Event Name	Event Result	Date/Time
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
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		02/18/20 12:28:00
		02/18/20 12:28:00
		02/18/20 05:34:00
		02/18/20 12:28:00
		02/18/20 12:28:00
		02/18/20 12:28:00

Hematology

Event Name	Event Result	Date/Time
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00
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		02/18/20 05:34:00
		02/18/20 05:34:00
		02/18/20 05:34:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61862
FIN: 10282275111480004D61862

* Auth (Verified) *

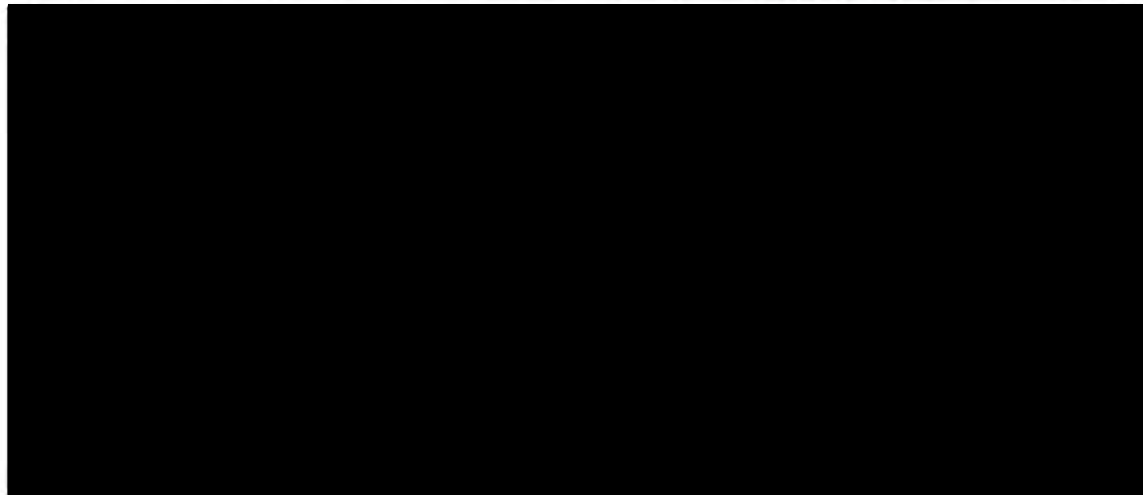
Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

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	02/18/20 05:34:00
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	02/18/20 05:34:00
	02/18/20 05:34:00
	02/18/20 05:34:00
	02/18/20 12:28:00
	02/18/20 12:28:00
	02/18/20 12:28:00

	Date/Time
	02/18/20 11:04:00

	Date/Time
	02/18/20 12:28:00
	02/18/20 12:28:00
	02/18/20 12:28:00
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	02/18/20 12:28:00



Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61862
10/26/59 A304-214

Page 3 of 4

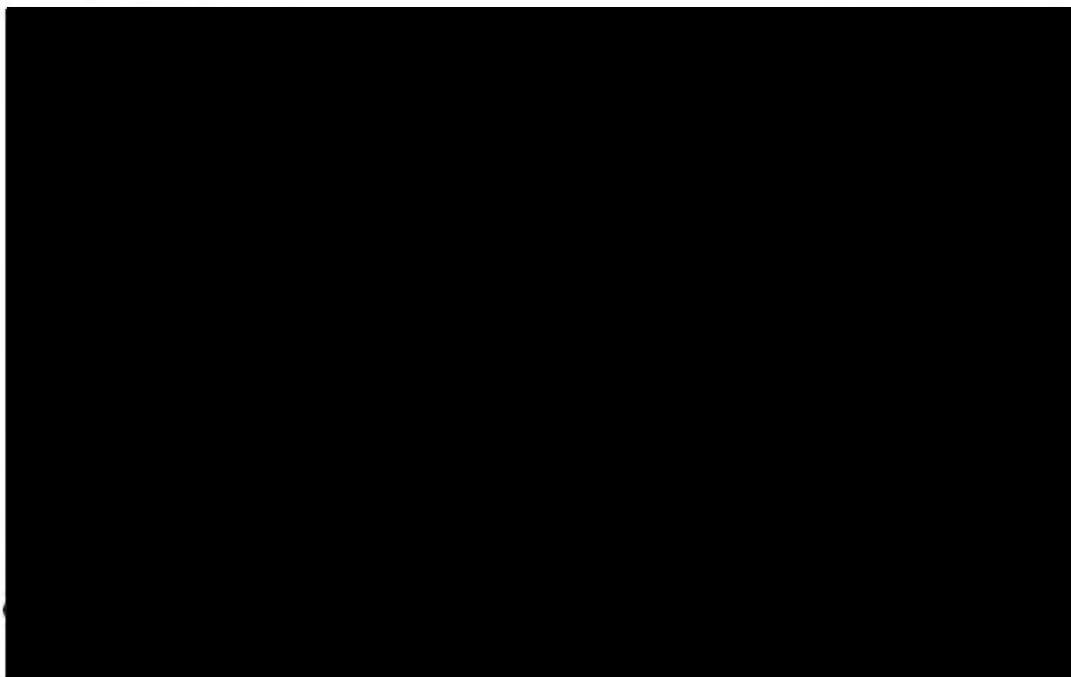
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186
FIN: 10282275111480004D6186

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368



Signature Line

Abdali, Abdul S F MD RES

Completed Action List:

* Perform by Abdali, Abdul S F MD on February 18, 2020 15:44 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D6186⁶
10/26/59 A304-214

Page 4 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - [REDACTED]

Result type: Progress Note-Physician
Result Date: February 17, 2020 9:48 PST
Result Status: In Progress
Result Title/Subject: IM Progress/SOAP Note
Performed By/Author: Abdali, Abdul S F MD on February 17, 2020 9:52 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Preliminary Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

Objective

* This column has not completed the indicated time period.

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

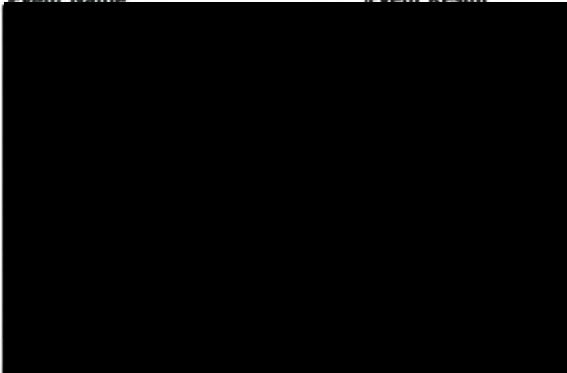
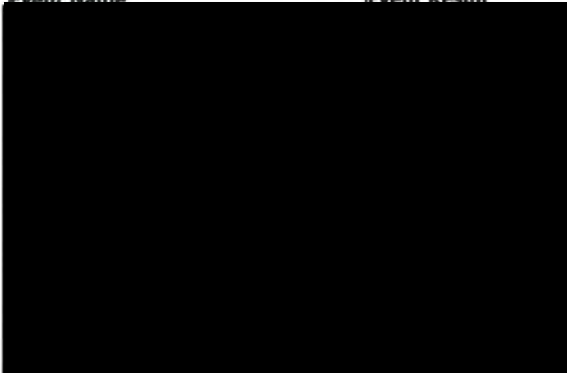
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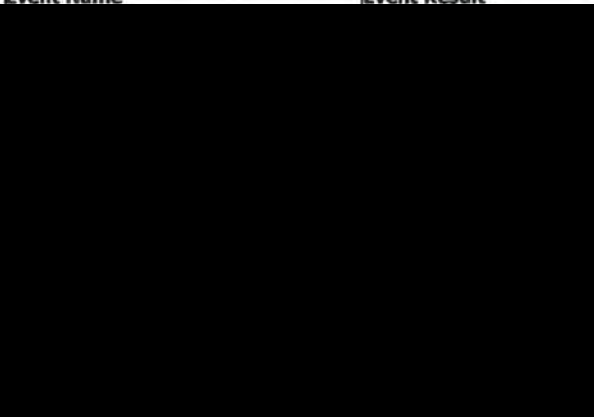
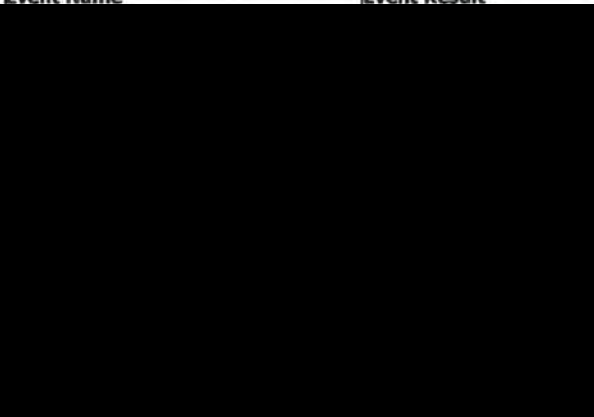
Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368



Lab Results
Last 24 Hours
Chemistry

Event Name	Event Result	Date/Time
		02/17/20 05:29:00
		02/17/20 05:29:00
		02/17/20 05:29:00
		02/17/20 05:29:00
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		02/17/20 05:29:00
		02/17/20 05:29:00
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		02/17/20 05:29:00
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		02/17/20 05:29:00
		02/17/20 05:29:00

Event Name	Event Result	Date/Time
		02/17/20 05:29:00
		02/17/20 05:29:00
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		02/17/20 05:29:00
		02/17/20 05:29:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

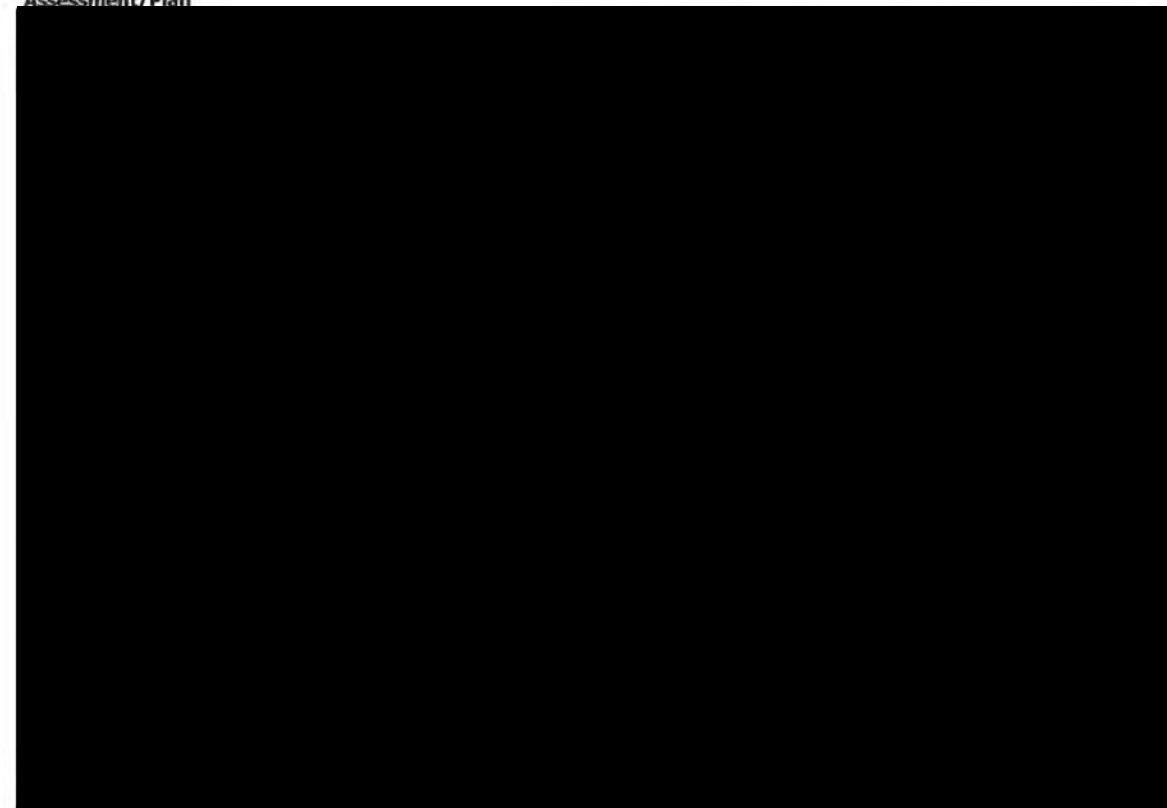
Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

	02/17/20 05:29:00
	02/17/20 05:29:00
	02/17/20 05:29:00
	02/17/20 05:29:00
	02/17/20 05:29:00

	Date/Time
	02/17/20 05:29:00

Assessment/Plan



Signature Line

Abdali, Abdul S F MD RES

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61873
10/26/59 A304-214

Page 3 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186
FIN: 10282275111480004D6186

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

Completed Action List:

- * Perform by Abdali, Abdul S F MD on February 17, 2020 9:52 PST
- * Modify by Abdali, Abdul S F MD on February 17, 2020 11:39 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D6186
10/26/59 A304-214

Page 4 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

Result type:	Progress Note-Physician
Result Date:	February 16, 2020 10:49 PST
Result Status:	In Progress
Result Title/Subject:	IM Progress/SOAP Note
Performed By/Author:	Abdali, Abdul S F MD on February 16, 2020 10:54 PST
Encounter info:	30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Preliminary Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

[REDACTED]

Objective

[REDACTED]

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

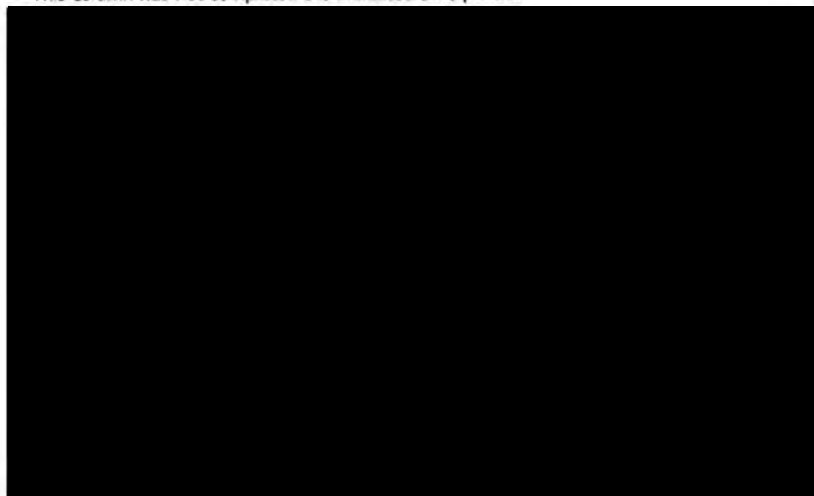
MRN: D6186;
FIN: 10282275111480004D6186;

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - [REDACTED]

* This column has not completed the indicated time period.



Lab Results
Last 24 Hours
Chemistry

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/16/20 04:58:00
		02/16/20 04:58:00
		02/16/20 04:58:00
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		02/16/20 04:58:00
		02/16/20 04:58:00
		02/16/20 04:58:00

Hematology

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/16/20 04:58:00
		02/16/20 04:58:00
		02/16/20 04:58:00
		02/16/20 04:58:00
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		02/16/20 04:58:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D6186⁶
10/26/59 A304-214

Page 2 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186
FIN: 10282275111480004D6186

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
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	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
	02/16/20 04:58:00
Date/Time	
02/16/20 04:58:00	

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

Signature Line

Abdali, Abdul S F MD RES

Completed Action List:

* Perform by Abdali, Abdul S F MD on February 16, 2020 10:54 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 4 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61862
FIN: 10282275111480004D61862

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

Result type:	Progress Note-Physician
Result Date:	February 15, 2020 10:47 PST
Result Status:	Auth (Verified)
Result Title/Subject:	IM Progress/SOAP Note
Performed By/Author:	Srai, Meena MD on February 15, 2020 14:07 PST
Verified By:	Srai, Meena MD on February 15, 2020 14:08 PST
Encounter info:	30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

Objective

[REDACTED]

* This column has not completed the indicated time period.

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61862
10/26/59 A304-214

Page 1 of 6

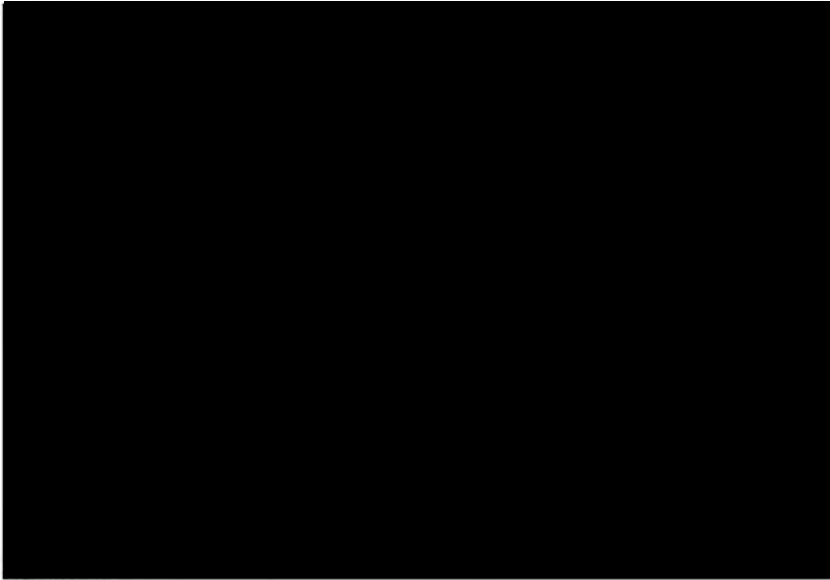
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368



Lab Results
Last 24 Hours
Chemistry

Event Name	Event Result	Date/Time
		02/15/20 05:04:00
		02/15/20 05:04:00
		02/15/20 05:04:00
		02/15/20 05:04:00
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		02/14/20 11:49:00
		02/15/20 05:04:00
		02/15/20 05:04:00
		02/15/20 05:04:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 6

MRN: D61863
FIN: 10282275111480004D61863

HUNT, JOE - 12549368

	02/15/20 05:04:00
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	02/15/20 05:04:00
	02/14/20 18:51:00
	02/14/20 18:51:00
	02/14/20 18:51:00
	02/15/20 05:04:00
	02/14/20 11:49:00
	02/14/20 11:49:00

Event Name

[illegible]

Page 3 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186:
FIN: 10282275111480004D6186:

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368

	Date/Time
	02/14/20 11:49:00
	02/14/20 11:49:00
	02/14/20 11:49:00
	02/15/20 05:05:00

	Date/Time
	02/14/20 20:51:00
	02/14/20 20:51:00
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	02/14/20 20:51:00
	02/14/20 20:51:00
	02/14/20 20:51:00

All Other Results

Event Name	Event Result	Date/Time
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		02/14/20 20:51:00
		02/14/20 20:51:00
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Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D6186⁶
10/26/59 A304-214

Page 4 of 6

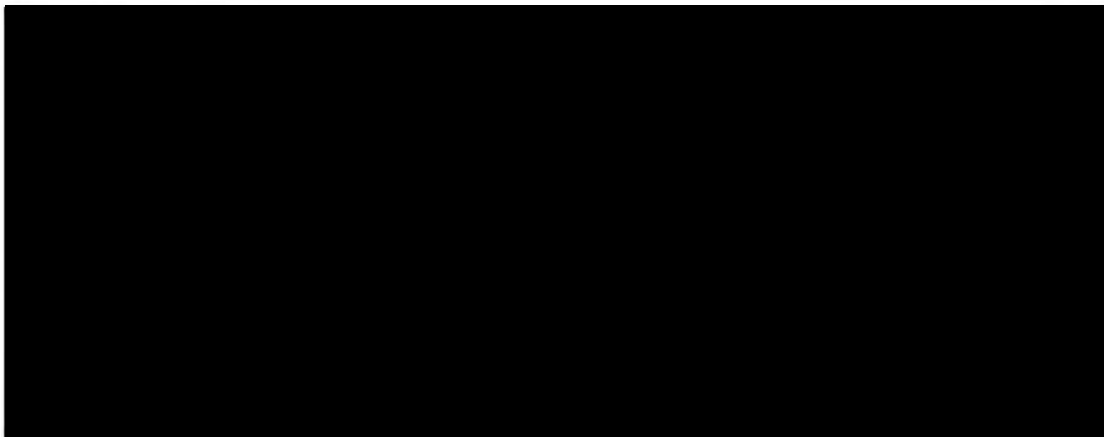
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

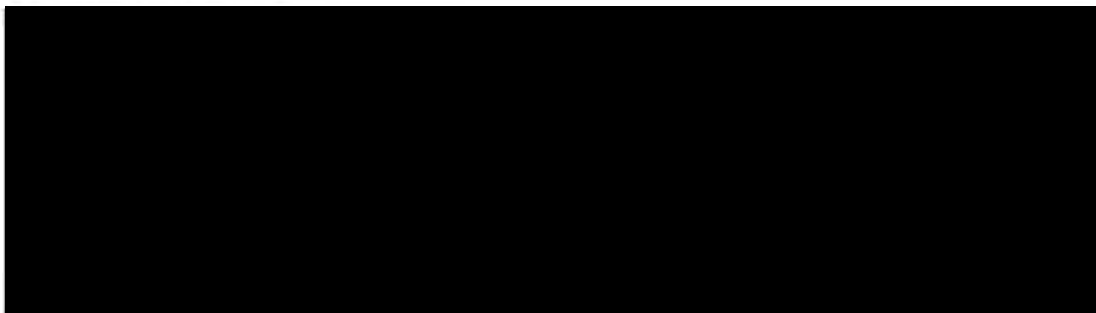
* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368



Professional Services/Counseling



Meena Srai, MD

Signature Line

[Electronically Signed on: 02/15/2020 14:08 PST]

Srai, Meena MD MD

[Verified on: 02/15/2020 14:08 PST]

Srai, Meena MD MD

Completed Action List:

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 5 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186
FIN: 10282275111480004D6186

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368

- * Modify by Abdali, Abdul S F MD on February 15, 2020 11:02 PST
- * Review by Srail, Meena MD on February 15, 2020 14:02 PST
- * Perform by Srail, Meena MD on February 15, 2020 14:07 PST
- * Modify by Srail, Meena MD on February 15, 2020 14:07 PST
- * Modify by Srail, Meena MD on February 15, 2020 14:08 PST
- * Sign by Srail, Meena MD on February 15, 2020 14:08 PST Requested by Abdali, Abdul S F MD on February 15, 2020 11:02 PST
- * VERIFY by Srail, Meena MD on February 15, 2020 14:08 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:21 PST

HUNT, JOE D6186^b
10/26/59 A304-214

Page 6 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

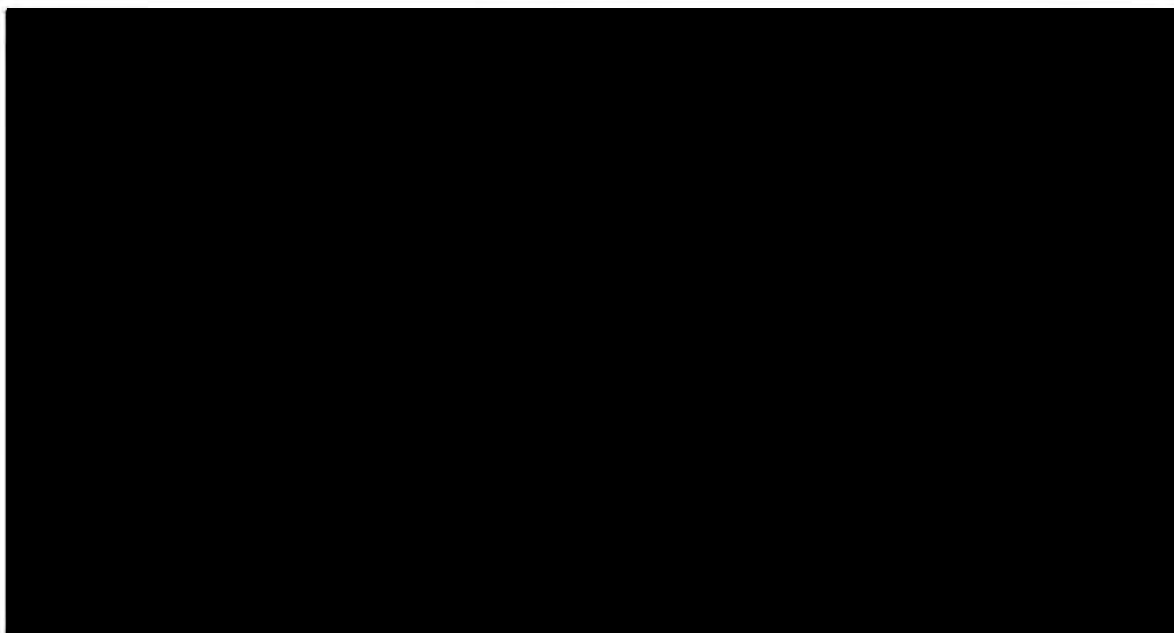
Result type: Progress Note-Physician
Result Date: February 20, 2020 7:52 PST
Result Status: Auth (Verified)
Result Title/Subject: Heme/Onc Progress Note
Performed By/Author: Ali, Saiyed MD on February 20, 2020 7:53 PST
Verified By: Gill, Amandeep S MD on February 20, 2020 16:40 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician



Lab Results
Last 24 Hours

Chemistry

Event Name	Event Result	Date/Time
[REDACTED]		02/20/20 02:58:00
[REDACTED]		02/20/20 02:58:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186;
FIN: 10282275111480004D6186;

* Auth (Verified) *

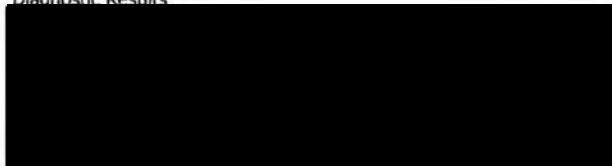
Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368

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	02/20/20 02:58:00
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	02/20/20 02:58:00
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	02/20/20 02:58:00
	02/20/20 02:58:00

	Date/Time
	02/20/20 02:58:00
	02/20/20 02:58:00
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	Date/Time
	02/20/20 02:58:00

Diagnostic Results



Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D61873
10/26/59 A304-214

Page 2 of 4

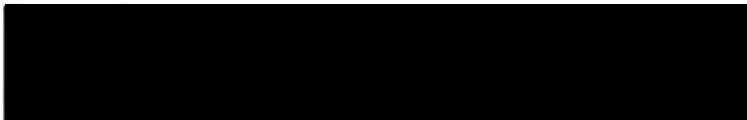
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

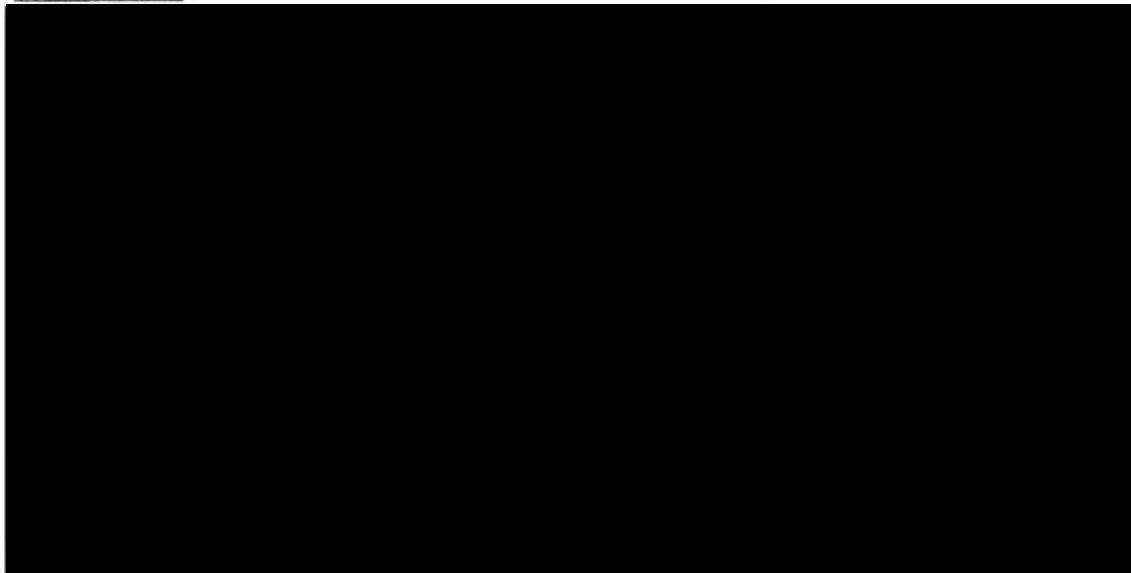
* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368



Assessment/Plan



Signature Line

Ali, Saiyed MD RES

[Electronically Signed on: 02/20/2020 16:40 PST]

Gill, Amandeep S MD MD

[Verified on: 02/20/2020 16:40 PST]

Gill, Amandeep S MD MD

Completed Action List:

- * Perform by Ali, Saiyed MD on February 20, 2020 7:53 PST
- * Modify by Ali, Saiyed MD on February 20, 2020 10:56 PST
- * Modify by Gill, Amandeep S MD on February 20, 2020 16:40 PST
- * Review by Gill, Amandeep S MD on February 20, 2020 16:40 PST Requested by Ali, Saiyed

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186:
FIN: 10282275111480004D6186:

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

MD on February 20, 2020 10:56 PST

* Sign by Gill, Amandeep S MD on February 20, 2020 16:40 PST

* VERIFY by Gill, Amandeep S MD on February 20, 2020 16:40 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D6186/3
10/26/59 A304-214

Page 4 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

Result type:	Progress Note-Physician
Result Date:	February 19, 2020 10:18 PST
Result Status:	Auth (Verified)
Result Title/Subject:	[REDACTED]
Performed By/Author:	Goldberg, Marcy NP on February 19, 2020 10:19 PST
Verified By:	Gill, Amandeep S MD on February 19, 2020 14:12 PST
Encounter info:	30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

[REDACTED]

Review of laboratory states from January 27, 2020:

(01/27/2020 08:22 PST CT [REDACTED])

Laboratory studies from February 14, 2020:

IMPRESSION [REDACTED]

(02/14/2020 13:07 PST [REDACTED])

Pertinent laboratory studies February 18, 2020:

Pertinent laboratory studies February 19, 2020:

Review of Systems

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61873
10/26/59 A304-214

Page 1 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE [REDACTED]

[REDACTED]

Objective

Vitals & Measurements

[REDACTED]

Physical Exam

[REDACTED]

Lab Results
Last 1 Week

Chemistry

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/19/20 05:26:00
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		02/19/20 05:26:00
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		02/14/20 11:49:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

[REDACTED]	02/19/20 05:26:00
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	02/14/20 11:49:00
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	02/14/20 18:51:00
	02/14/20 18:51:00
	02/15/20 05:04:00
	02/14/20 11:49:00
	02/14/20 11:49:00
	02/18/20 12:28:00

Hematology

Event Name	Event Result	Date/Time
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		02/18/20 05:34:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186:
FIN: 10282275111480004D6186:

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

[REDACTED]	02/18/20 05:34:00
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	02/18/20 12:28:00
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	02/18/20 12:28:00

[REDACTED]	Date/Time
	02/14/20 11:49:00
	02/14/20 11:49:00
	02/19/20 05:26:00

Urinalysis

Event Name	Event Result	Date/Time
[REDACTED]		02/14/20 20:51:00
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		02/14/20 20:51:00
		02/14/20 20:51:00
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		02/14/20 20:51:00
		02/14/20 20:51:00
		02/14/20 20:51:00

All Other Results

Event Name	Event Result	Date/Time
[REDACTED]		02/14/20 11:49:00
		02/14/20 20:51:00
		02/14/20 20:51:00
		02/14/20 20:51:00
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		02/14/20 20:51:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D6186⁶
10/26/59 A304-214

Page 4 of 6

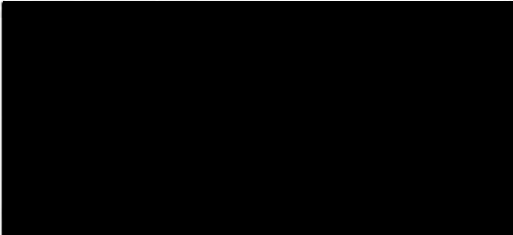
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

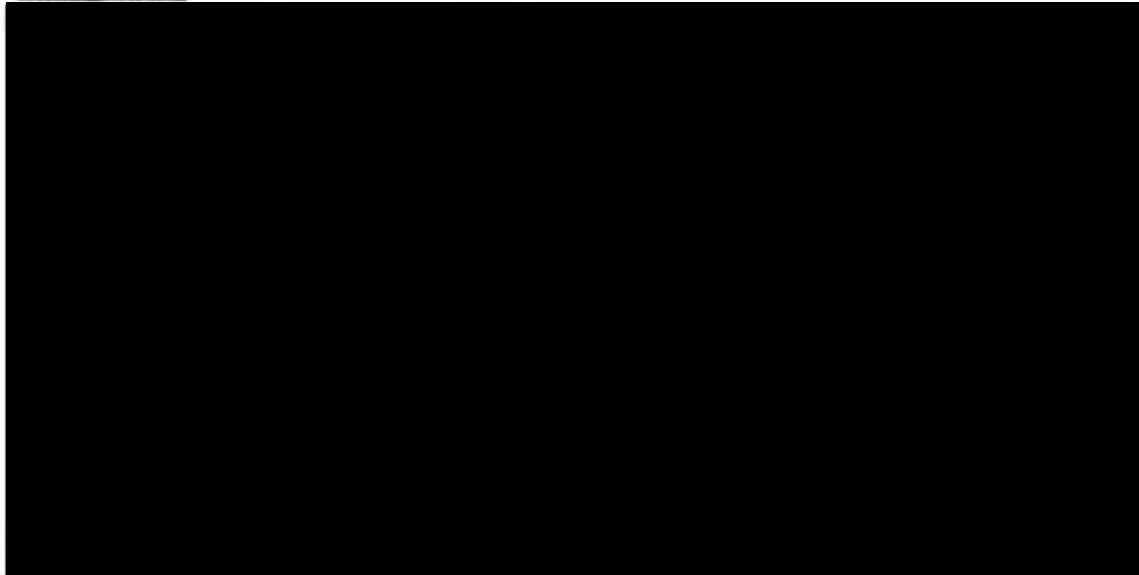
* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - 12549368

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	02/18/20 12:28:00
	02/18/20 12:28:00
	02/18/20 12:28:00
	02/18/20 12:28:00

Assessment/Plan



Signature Line

[Electronically Signed on: 02/19/2020 15:29 PST]

Goldberg, Marcy NP

[Electronically Signed on: 02/19/2020 14:12 PST]

Gill, Amandeep S MD MD

[Verified on: 02/19/2020 14:12 PST]

Gill, Amandeep S MD MD

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 5 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Final Report *

HUNT, JOE - [REDACTED]

Completed Action List:

- * Perform by Goldberg, Marcy NP on February 19, 2020 10:19 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 10:22 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 10:27 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 10:29 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 10:30 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 10:39 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 11:31 PST
- * Modify by Goldberg, Marcy NP on February 19, 2020 11:36 PST
- * Modify by Gill, Amandeep S MD on February 19, 2020 14:12 PST
- * Review by Gill, Amandeep S MD on February 19, 2020 14:12 PST Requested by Goldberg, Marcy NP on February 19, 2020 11:17 PST
- * Sign by Gill, Amandeep S MD on February 19, 2020 14:12 PST
- * VERIFY by Gill, Amandeep S MD on February 19, 2020 14:12 PST
- * Sign by Goldberg, Marcy NP on February 19, 2020 15:29 PST Requested by Goldberg, Marcy NP on February 19, 2020 10:19 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 6 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

Progress Note-Physician
* Preliminary Report *

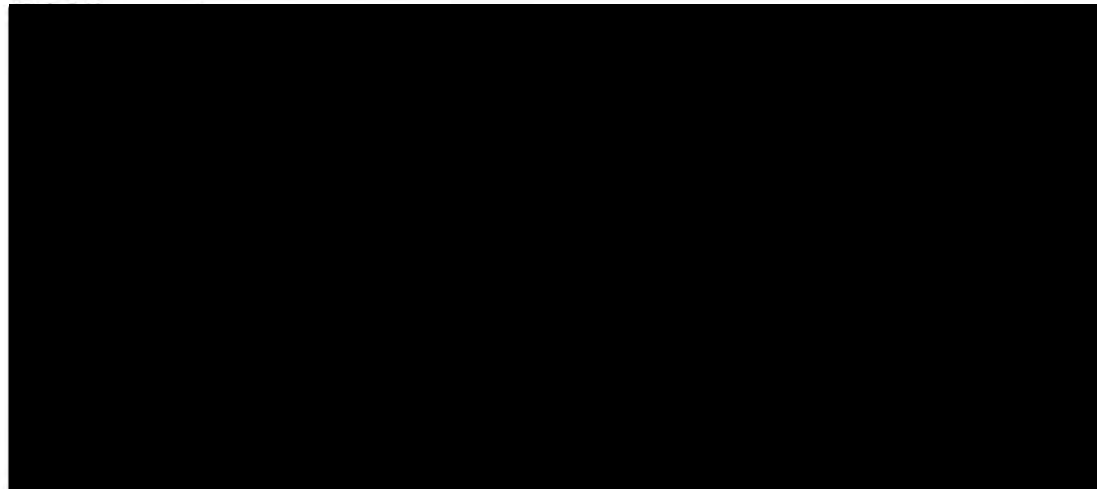
Result type:
Result Date:
Result Status:
Result Title/Subject:
Performed By/Author:
Encounter info:

HUNT, JOE

60 Years Male

Review of Systems
Negative except as above

Objective



* This column has not completed the indicated time period.

Physical Exam

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 5

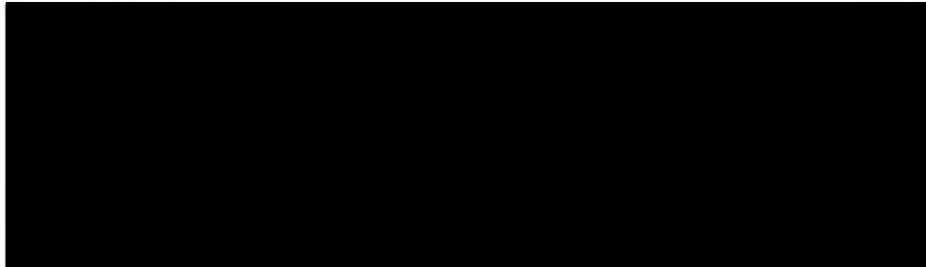
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186:
FIN: 10282275111480004D6186:

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - [REDACTED]



Lab Results
Last 24 Hours

Chemistry

[REDACTED]	Date/Time
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/18/20 12:28:00
	02/18/20 12:28:00
	02/19/20 05:26:00
	02/18/20 12:28:00
	02/18/20 12:28:00
	02/18/20 12:28:00

Hematology

[REDACTED]	Date/Time
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
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	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00

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Printed on: 2/21/2020 9:20 PST

HUNT, JOE D6186^b
10/26/59 A304-214

Page 2 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186;
FIN: 10282275111480004D6186;

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - [REDACTED]

[REDACTED]	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/19/20 05:26:00
	02/18/20 12:28:00
	02/18/20 12:28:00
	02/18/20 12:28:00

Coagulation

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/19/20 05:26:00

All Other Results

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00
	[REDACTED]	02/18/20 12:28:00

Diagnostic Results

[REDACTED]

Assessment/Plan

[REDACTED]

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Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - [REDACTED]

[REDACTED]

[REDACTED]

RECOMMENDATIONS:

[REDACTED]

[REDACTED]

Signature Line

[Electronically Signed on: 02/19/2020 17:05 PST]

Lee, Sun Yong MD RES

[Electronically Signed on: 02/19/2020 17:06 PST]

Lee, Sun Yong MD RES

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 4 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186:
FIN: 10282275111480004D6186:

* Auth (Verified) *

Progress Note-Physician
* Preliminary Report *

HUNT, JOE - 12549368

Dharawat, Ramesh N MD MD

Completed Action List:

- * Perform by Lee, Sun Yong MD on February 19, 2020 7:28 PST
- * Modify by Lee, Sun Yong MD on February 19, 2020 10:36 PST
- * Modify by Lee, Sun Yong MD on February 19, 2020 17:05 PST
- * Sign by Lee, Sun Yong MD on February 19, 2020 17:05 PST Requested by Lee, Sun Yong MD on February 19, 2020 7:28 PST
- * Modify by Lee, Sun Yong MD on February 19, 2020 17:06 PST
- * Sign by Lee, Sun Yong MD on February 19, 2020 17:06 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 5 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186
FIN: 10282275111480004D6186

* Auth (Verified) *

Operative Report - Surgeon/Physician
* Final Report *

HUNT, JOE - [REDACTED]

Result type:	Operative Report - Surgeon/Physician
Result Date:	February 19, 2020 14:04 PST
Result Status:	Auth (Verified)
Result Title/Subject:	Cardiac cath report
Performed By/Author:	Dharawat, Ramesh N MD on February 19, 2020 14:10 PST
Verified By:	Dharawat, Ramesh N MD on February 19, 2020 14:10 PST
Encounter info:	30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

[REDACTED]

returned to medical floor for further observation.

RESULTS:

[REDACTED]

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D6186
10/26/59 A304-214

Page 1 of 2

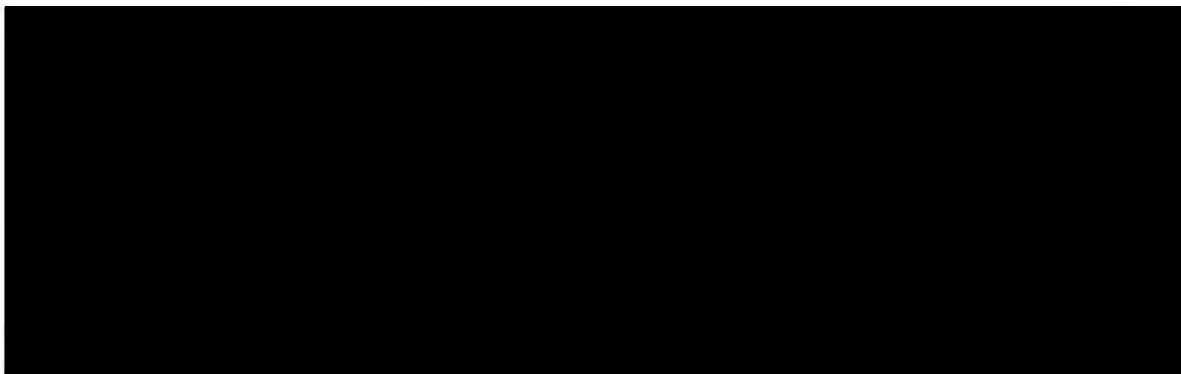
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186:
FIN: 10282275111480004D6186:

* Auth (Verified) *

Operative Report - Surgeon/Physician
* Final Report *

HUNT, JOE - [REDACTED]



Signature Line

[Electronically Signed on: 02/19/2020 14:10 PST]

Dharawat, Ramesh N MD MD

[Verified on: 02/19/2020 14:10 PST]

Dharawat, Ramesh N MD MD

Completed Action List:

- * Perform by Dharawat, Ramesh N MD on February 19, 2020 14:10 PST
- * Sign by Dharawat, Ramesh N MD on February 19, 2020 14:10 PST
- * VERIFY by Dharawat, Ramesh N MD on February 19, 2020 14:10 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:19 PST

HUNT, JOE D6186
10/26/59 A304-214

Page 2 of 2

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186
FIN: 10282275111480004D6186

* Auth (Verified) *



San Joaquin General Hospital / A Division of San Joaquin County Health Care Services

Name **JOE HUNT**
Patient ID [REDACTED]
Examination 2/19/2020 13:23:56
DOB 10/26/1959 Age 60 Years Sex Male
Height 6'5" Weight [REDACTED]

FINAL REPORT

Case Times

Time	Call for Patient	Patient Arrived	Patient Prep	Physician called	Physician arrived	Procedure Start	Patient Leave
14:00	13:15	13:20	13:40	13:40	13:42	13:46	14:35

Personnel

Name	Function	Additional Personnel
Dr. Ramesh Dharawat	[REDACTED]	
Monica Wunderlich RN	Monitoring Person	
Joseph Ratto RN	Scrub Assistant	
Erika Cortez	Radiologic Technologist	

Procedure Comments

Time Comments

13:26

13:47

13:49

13:53

13:55

13:58

13:59

14:03

History and Indications

History Indications <Comment>
Other [REDACTED]

Procedure

CPT Code
93545/93510/93556

HUNT, JOE D6186
Post Office Box 1020 • Stockton, California 95201 • (209) 468-6000
10/26/99 A504-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *

Name **JOE HUNT**
Patient ID [REDACTED]
Examination 2/19/2020 13:23:56
DOB 10/26/1959 Age 60 Years Sex Male
Height 6'5" Weight [REDACTED]

Transport

Patient Sent To	Transported Via	PT Accompanied by	Equlpt used in transport
CMS	[REDACTED]	Joseph Ratto RN	

Nursing Notes

Time	Comments
13:32	[REDACTED]
14:03	[REDACTED]

HUNT, JOE D6186
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

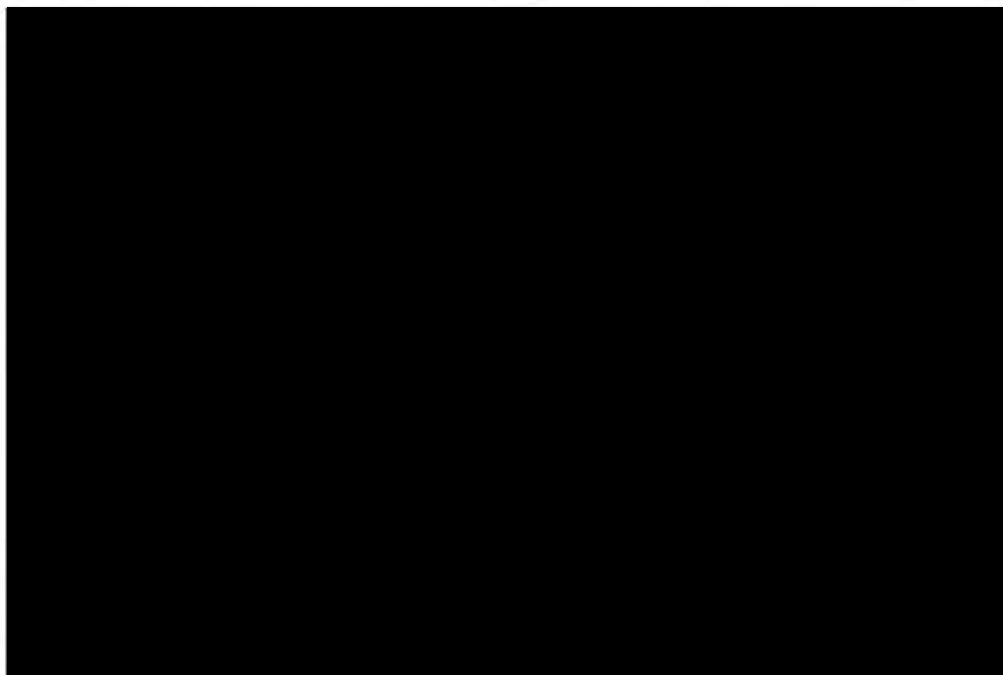
FIN: [REDACTED]

* Auth (Verified) *

Name **JOE HUNT**
Patient ID [REDACTED]
Examination 2/19/2020 13:23:56
DOB 10/26/1959
Height 6'5"

Age 60 Years
Weight [REDACTED]

Sex Male



HUNT, JOE D6186^b
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

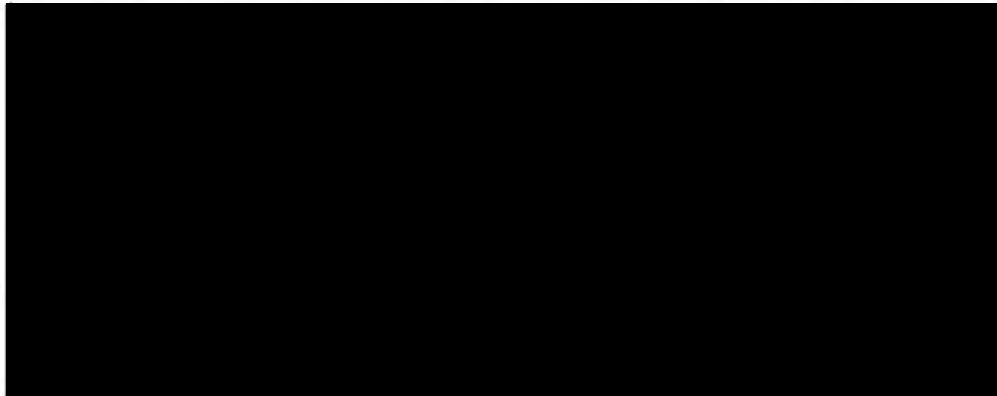
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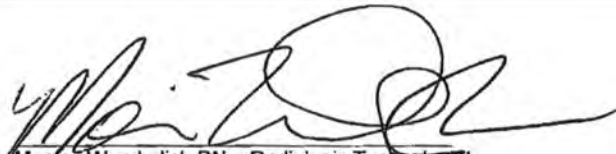
* Auth (Verified) *

Name JOE HUNT
Patient ID [REDACTED]
Examination 2/19/2020 13:23:56
DOB 10/26/1959
Height 6'5"

Age 60 Years
Weight [REDACTED]

Sex Male




Monica Wunderlich RN, Radiologic Technologist

HUNT, JOE D6186⁶
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

FIN [REDACTED]

* Auth (Verified) *

Name JOE HUNT
Patient ID [REDACTED]
Examination 2/19/2020 13:23:56
DOB 10/26/1959
Height 6'5"

Age 60 Years
Weight

Sex Male



HUNT, JOE D6186^b
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61865

* Auth (Verified) *

Name JOE HUNT
Patient ID [REDACTED]
Examination 2/19/2020 13:23:56
DOB 10/26/1959
Height 6'5"

Age 60 Years
Weight [REDACTED]

Sex Male

CHARGEABLE ITEMS

Procedure

CPT Code

HUNT, JOE D61873
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *



Study: Coronary Diagnosti...

Date: 2/19/2020

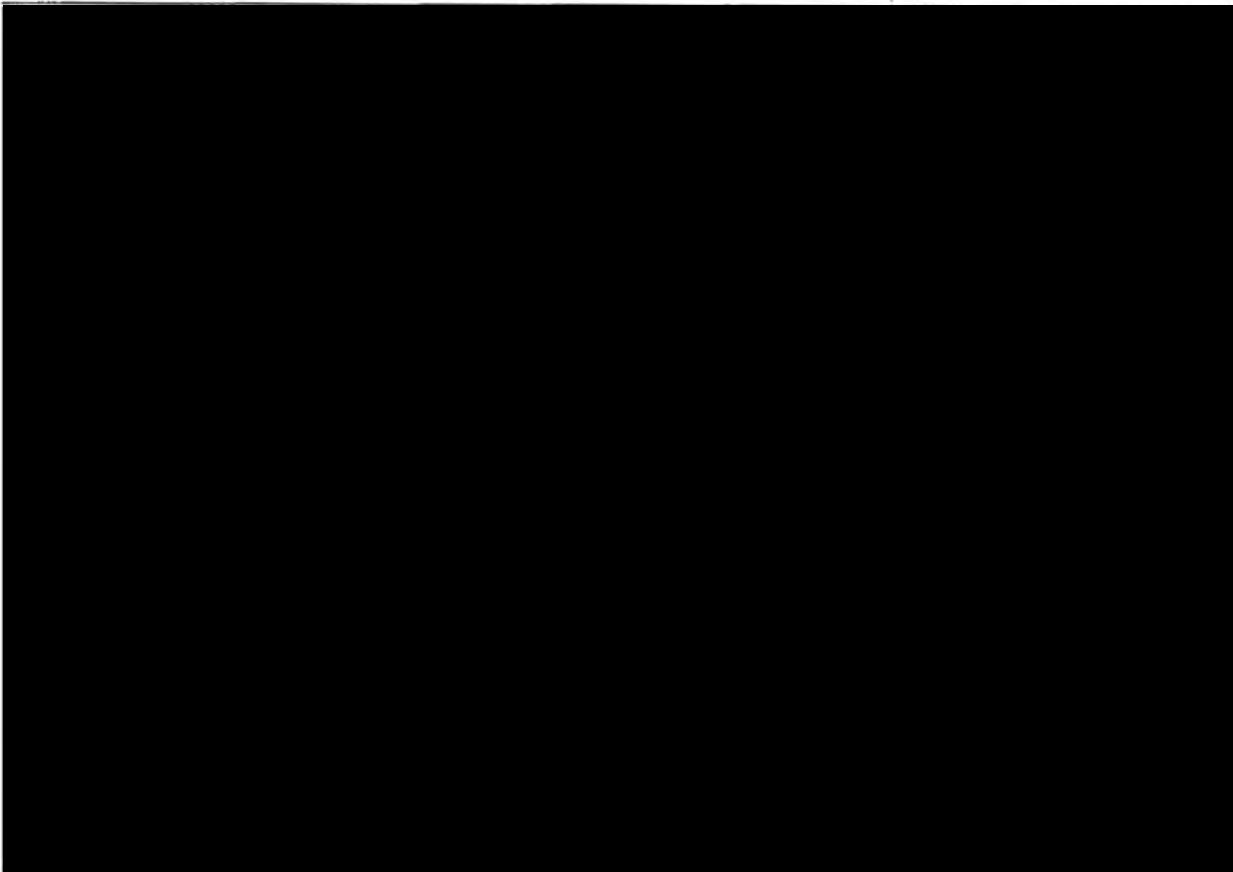
HUNT, JOE D61873
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *



Study: Coronary Diagnosti...

Date: 2/19/2020

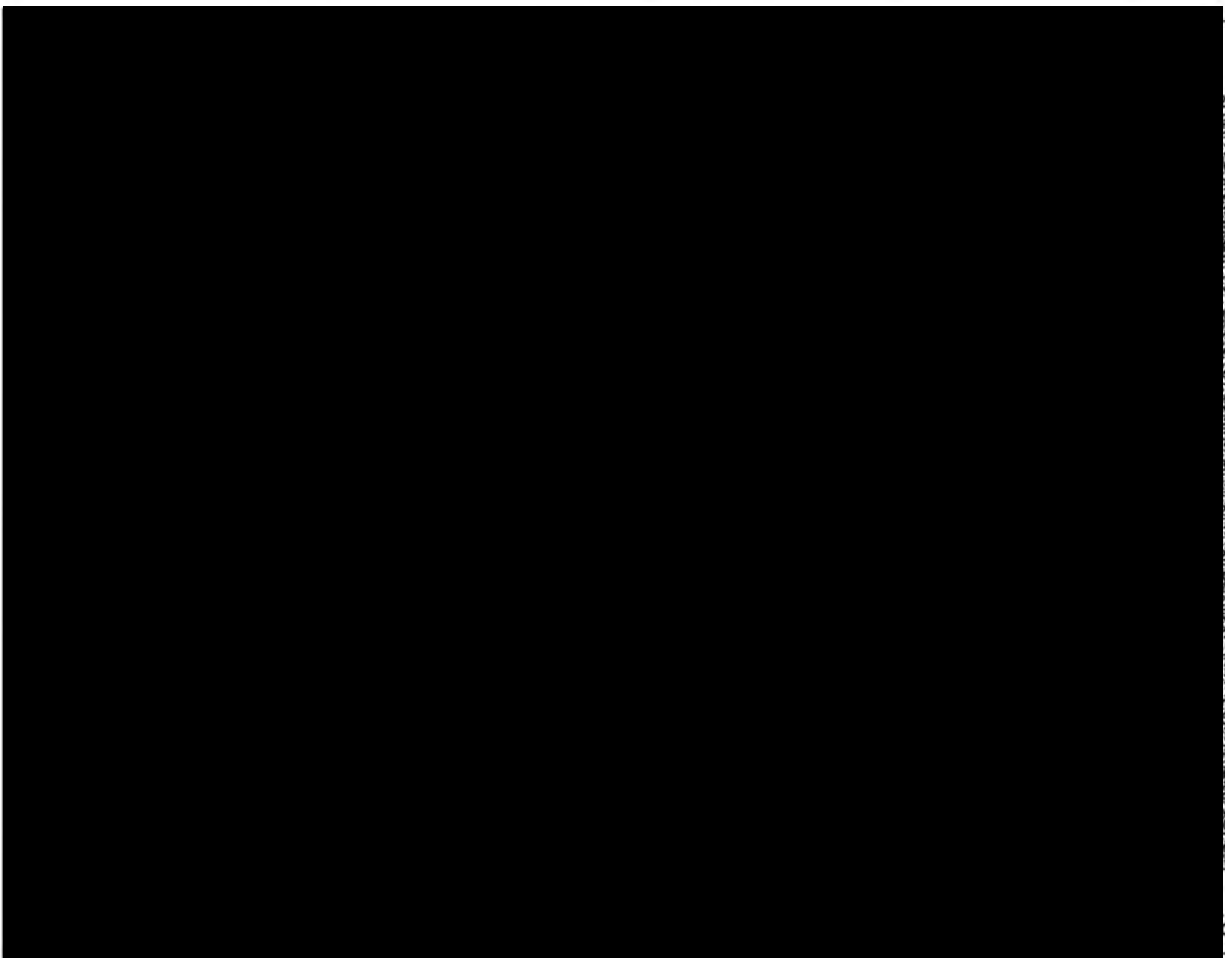
HUNT, JOE D6186
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *

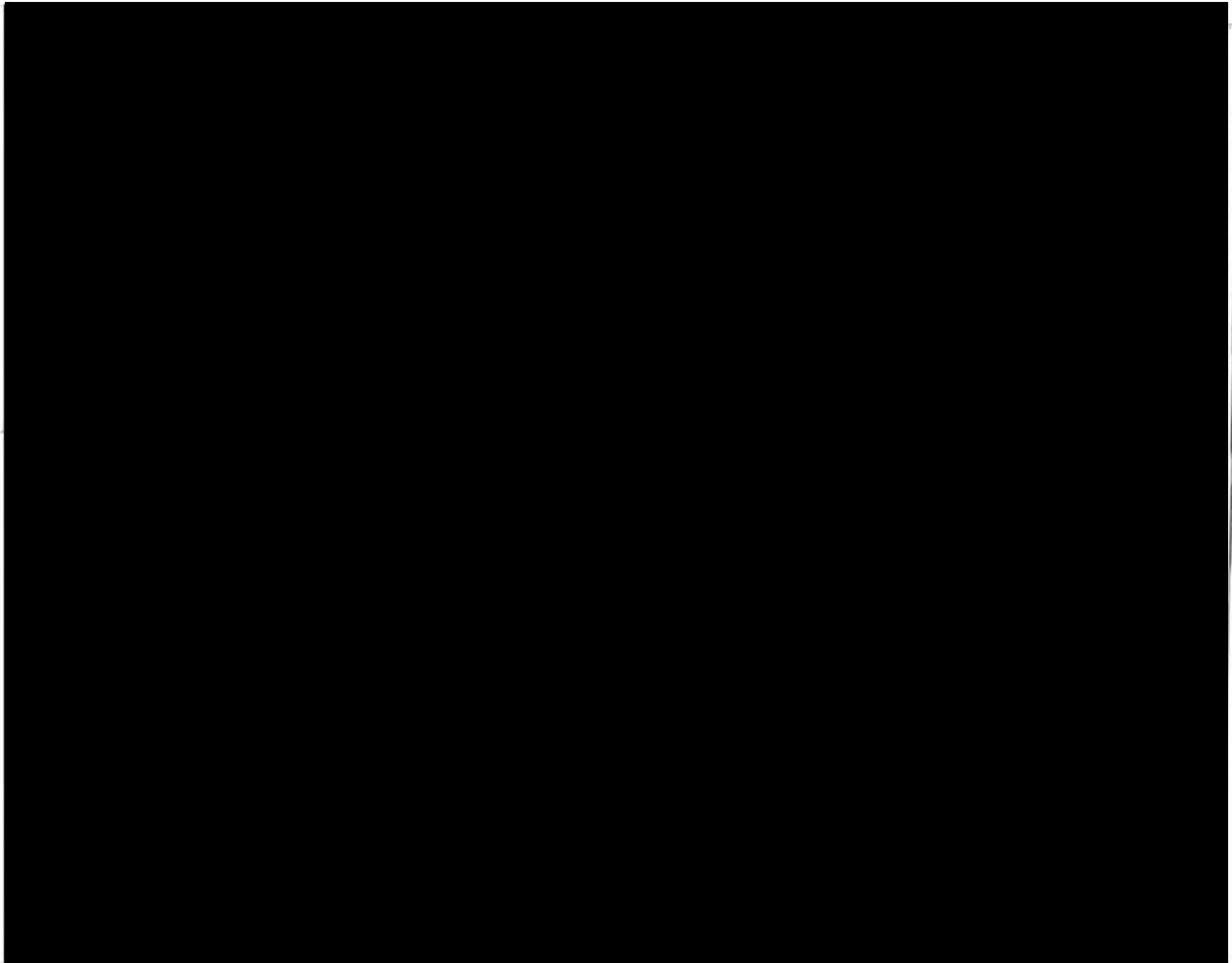


HUNT, JOE D61873
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61865

* Auth (Verified) *



6
HUNT, JOE D61873
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST

Page 1

HUNT, JOE D61873
10/26/59 A304-214

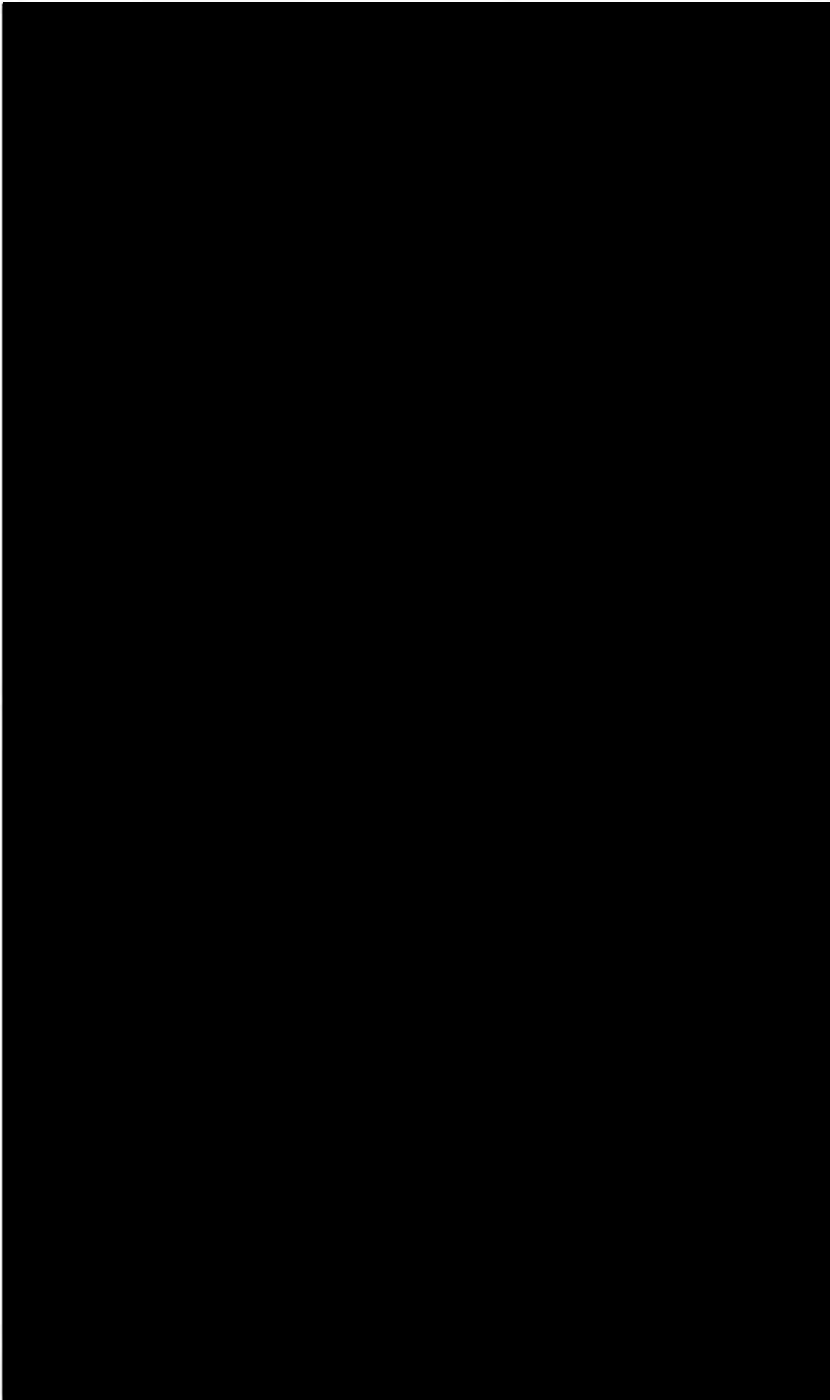
Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61862

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST



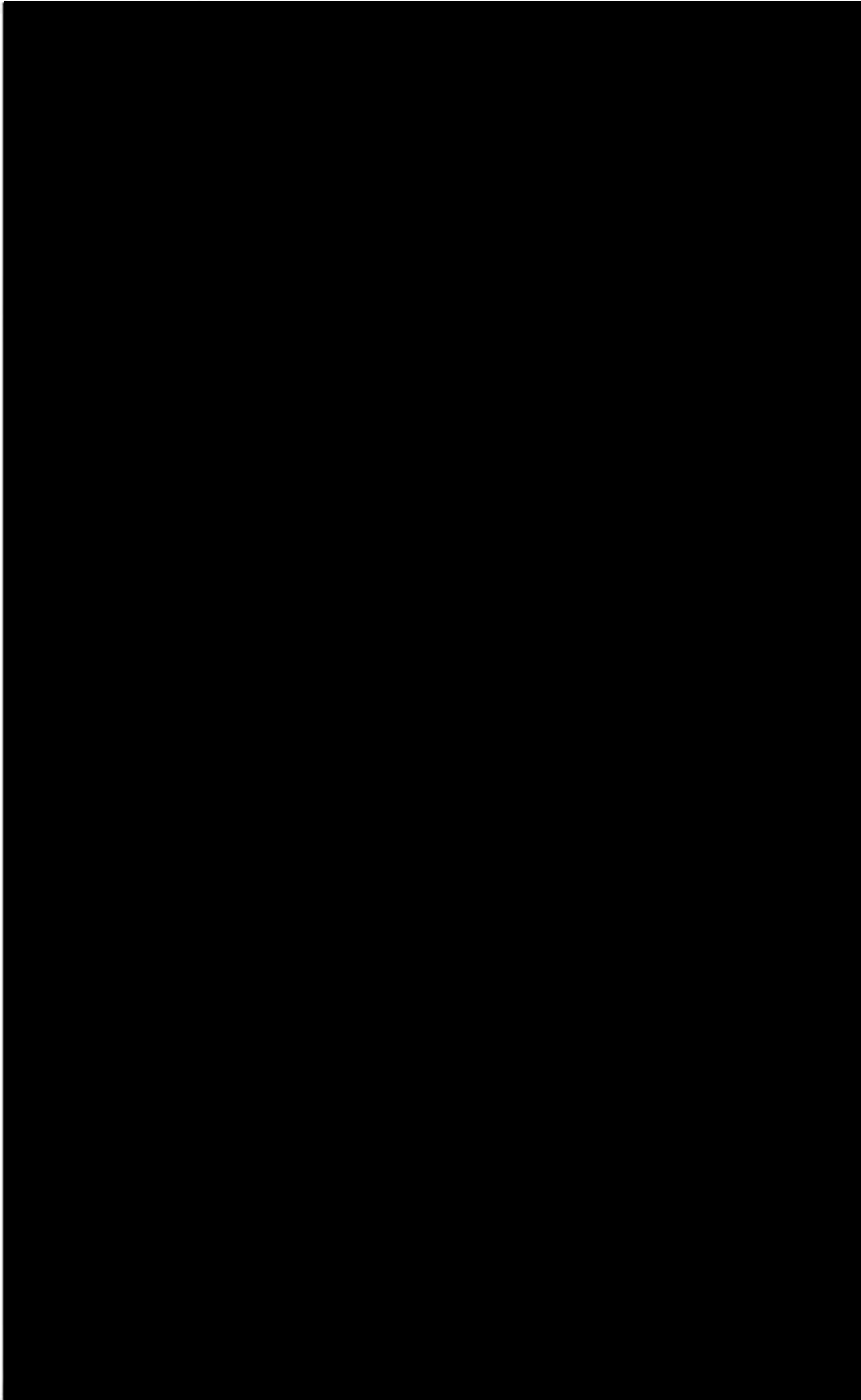
Page 2
HUNT, JOE D61862
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST



Page 3
HUNT, JOE D61873
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61862

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST

HUNT, JOE D61862
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST

Page 5

HUNT, JOE D61863
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST

Page 6

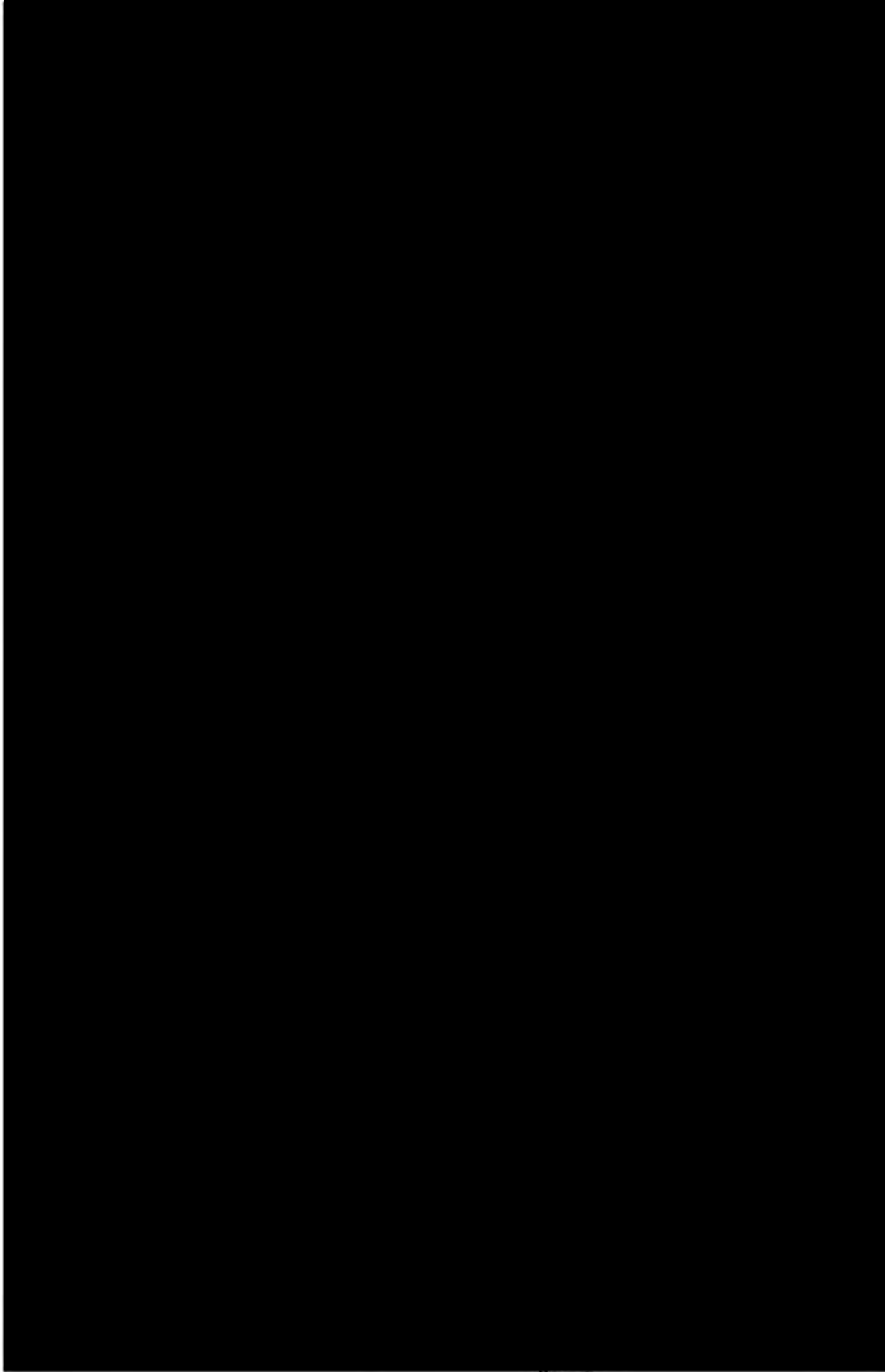
HUNT, JOE D61863
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *



Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST

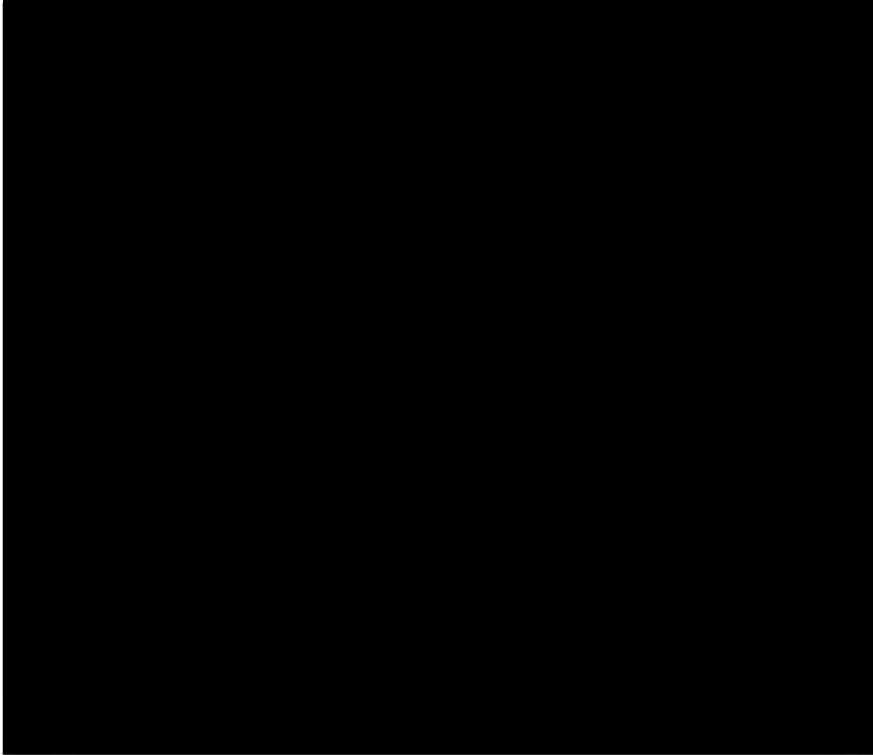
Page 7

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61865

* Auth (Verified) *



Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:23 PST

Page 8
HUNT, JOE D61873
10/26/59 A304-214

* Auth (Verified) *



San Joaquin General Hospital
500 W. Hospital Road
French Camp, CA 95231
(209) 468-6000

HUNT, JOE
DOB: 10/26/1959 60 Y M

CONSENT TO SURGERY OR SPECIAL PROCEDURE

1. Your practitioner(s) has (have) recommended the following operation or procedure: _____

Upon your authorization and consent, this operation or procedure, together with any different or further procedures which, in the opinion of the practitioner(s) performing the procedure, may be indicated due to any emergency, will be performed on you. The operations or procedures will be performed by the practitioner named below (or in the event the practitioner is unable to perform or complete the procedure, a qualified substitute practitioner), together with associates and assistants, including anesthesiologists, pathologists, and radiologists from the medical staff of San Joaquin General Hospital to whom the practitioner(s) performing the procedure may assign designated responsibilities.

2. Name of the practitioner(s) performing the procedure or administering the medical treatment: _____

3. All operations or procedures carry the risk of unsuccessful results, complications, injury, or even death, from both known and unforeseen causes, and no guarantee is made as to result or cure. You have the right to be informed of:

- The nature of the operation or procedure, including other care, treatment or medications;
- Potential benefits, risks or side effects of the operation or procedure, including potential problems that might occur during recuperation;
- The likelihood of achieving treatment goals;
- Reasonable alternatives and the relevant risks, benefits and side effects related to such alternatives, including the possible results of not receiving care or treatment; and
- Any independent medical research or significant economic interests your practitioner may have related to the performance of the proposed operation or procedure.

Except in cases of emergency, operations or procedures are not performed until you have had the opportunity to receive this information and have given your consent. You have the right to give or refuse consent to any proposed operation or procedure at any time prior to its performance.

4. By your signature following, you authorize the pathologist to use his/her discretion in the disposition or use of any body part, organ, or tissue removed from your person during the operation or procedure set forth above, subject to the following conditions (if any): _____

Your signature on this form indicates that:

- you have read and understand the information provided on the form;
- your practitioner has adequately explained to you the operation or procedure set forth above, along with the risks, benefits, alternatives and the other information described in this form;

* Auth (Verified) *

- you have had a chance to ask your practitioner(s) questions;
- you have received all of the information you desire concerning the operation or procedure, and;
- you authorize and consent to the performance of the operation or procedure.

Date: 2/14/2020 Time: 1452 AM PM

Signature: [Signature]
(patient/parent/conservator/guardian)

If signed by other than patient, indicate name and relationship:

Witness: [Redacted]

PHYSICIAN CERTIFICATION OF INFORMED CONSENT:

I, the undersigned physician, hereby certify that I have discussed the procedure described in this consent form with this patient (or the patient's legal representative), including:

- The risks and benefits of the procedure;
- Any adverse reactions that may reasonably be expected to occur;
- Any alternative efficacious methods of treatment that may be medically viable;
- The potential problems that may occur during recuperation; and
- Any research or economic interest I may have regarding this treatment.

I understand that I am responsible for filling in all blanks in paragraphs 1 and 2 above. I further certify that the patient was encouraged to ask questions and that all questions were answered. (If the patient is limited English language proficient A, B or C must be checked)
A. ☐ Language Line accessed in the patient's or legal representative's primary language which is _____

(identify interpreter and language)

B. ☐ Interpreter services provided by: _____ in _____
(print name and title) (language)

Date: 2-14-2020 Time: 1452 AM / PM

Signature: [Redacted] [Redacted]
(physician) (print)

C. ☐ MEDICAL INTERPRETER'S STATEMENT:

I have accurately and completely read the foregoing document to _____
(patient or patient's legal representative) in the patient's or legal representative's primary language
(identify language). He/she understood all of the terms and conditions and acknowledged his/her agreement by signing the document in my presence.

Date: _____ Time: _____ AM / PM

Signature: _____ Name: _____
(interpreter) (print)

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *

02/14/2020 12:30 PM

AMR

→ San Joaquin General Hospital

pg 2 of 10



AMERICAN MEDICAL RESPONSE - SAN JOAQUIN
PATIENT CARE REPORT

HUNT, JOE
DOB: 10/26/1959 (60 YEARS)
SEX: MALE
DOB: 02/14/2020

SERVICE MODEL: AGENCY AMR	DISPATCH INFORMATION	TIMES
FROM: 7707 S AUSTIN RD STOCKTON, CA 95215 (LAW/CORRECTIONAL FACILITY) TO: SAN JOAQUIN GENERAL HOSPITAL 500 W HOSPITAL RD FRENCH CAMP, CA 95201 (HOSPITAL - ED) ROOM/DEPT: HOSPITAL-EMERGENCY DEPARTMENT DESTINATION DECISION: PATIENT/FAMILY REQUEST	CALLER: CHCF - STOCKTON (CHCF) ZONE: SJ X-8 CSV_2 URBAN UNIT: 8121 RESPONSE MODE: DOWNGRADED, NO LTS/SIREN TRANSPORT MODE: NO LIGHTS AND SIREN ALS ASSESSMENT: AMR PARAMEDIC DISPOSITION: TRANSPORTED - TO HOSPITAL ER/ED NATURE OF CALL: ALS TRANSPORT	CALL RECEIVED: 10:19:37 DISPATCHED: 10:19:58 ENROUTE: 10:20:13 AT SCENE: 10:30:10 AT PT SIDE: 10:37:00 TRANSPORT: 10:51:03 ARRIVAL: 11:20:00 TRANSFER OF CARE: 11:45:00 AVAILABLE: 12:00:00 SCENE MILES: 0.0 DESTINATION MILES: 9.0 TOTAL MILES: 9.0

PATIENT DEMOGRAPHICS

NAME: HUNT, JOE
ADDRESS: 7707 S AUSTIN RD
CITY, STATE ZIP: STOCKTON, CA 95215
PHONE:
CELL PHONE:

DOB: 10/26/1959
AGE: 60 YEARS
GENDER: MALE
ETHNICITY: CAUCASIAN

INSURANCE: CA STATE PRISON SACRAMENTO POLICY: D61863 GROUP: CHCF

RESPONSIBLE PARTY: HUNT, JOE
PHONE:

NARRATIVE

NARRATIVE

Impression

HISTORY OF PRESENT ILLNESS

MEDICAL HISTORY

DCS: 02/14/2020, Patient: Joe Hunt, Case #: 07419881, Page: 1 of 3

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61865

* Auth (Verified) *

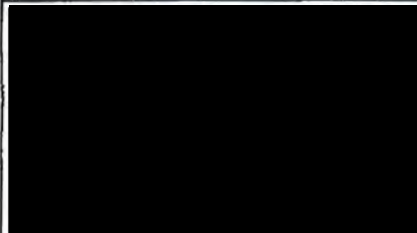
02/14/2020 12:30 PM

AMR

→ San Joaquin General Hospital

pg 3 of 10

PHYSICAL FINDINGS



TREATMENTS

PTA	TIME	CAREGIVER	PROCEDURE
		WOOD, KRISTOPHER/AMR	
	10:37:00	DAGUE, MATTHEW/AMR	
	10:44:00	DAGUE, MATTHEW/AMR	
	10:44:00	DAGUE, MATTHEW/AMR	
	10:44:00	DAGUE, MATTHEW/AMR	
	10:46:00	DAGUE, MATTHEW/AMR	
	11:22:00	DAGUE, MATTHEW/AMR	
	11:22:00	DAGUE, MATTHEW/AMR	

RUN COMPLETION



DELAY REASONS

PCR ID: 2020021410521358601

DEVICE: WSTKMED625

PRINTED: 2/14/2020 13:30:00

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61865

* Auth (Verified) *

02/14/2020 12:30 PM

AMR

→ San Joaquin General Hospital

pg 4 of 10



AMERICAN MEDICAL RESPONSE - SAN JOAQUIN
PRE-HOSPITAL CARE REPORT SIGNATURES

CASE#: 07419891

UNIT ID: 8121

DATE: 02/14/2020

AMERICAN MEDICAL RESPONSE - SAN JOAQUIN CREW MEMBERS

CREW 1
NAME: WOOD, KRISTOPHER, AMR
NUMBER: P18901
CERTIFICATION: PARAMEDIC

CREW 2
NAME: NESWICK, TAYLOR, AMR
NUMBER: E099712
CERTIFICATION: EMT

CREW 3
NAME: DAGUE, MATTHEW, AMR
NUMBER: P40676
CERTIFICATION: PARAMEDIC

DEVICE: WSTK0MEDS25

PRINTED: 2/14/2020 13:30:00

DOS: 02/14/2020, Patient: Joe Hunt, [REDACTED]

Page 3 of 3

HUNT, JOE D61865
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

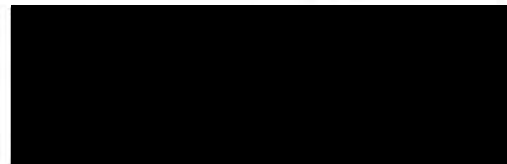
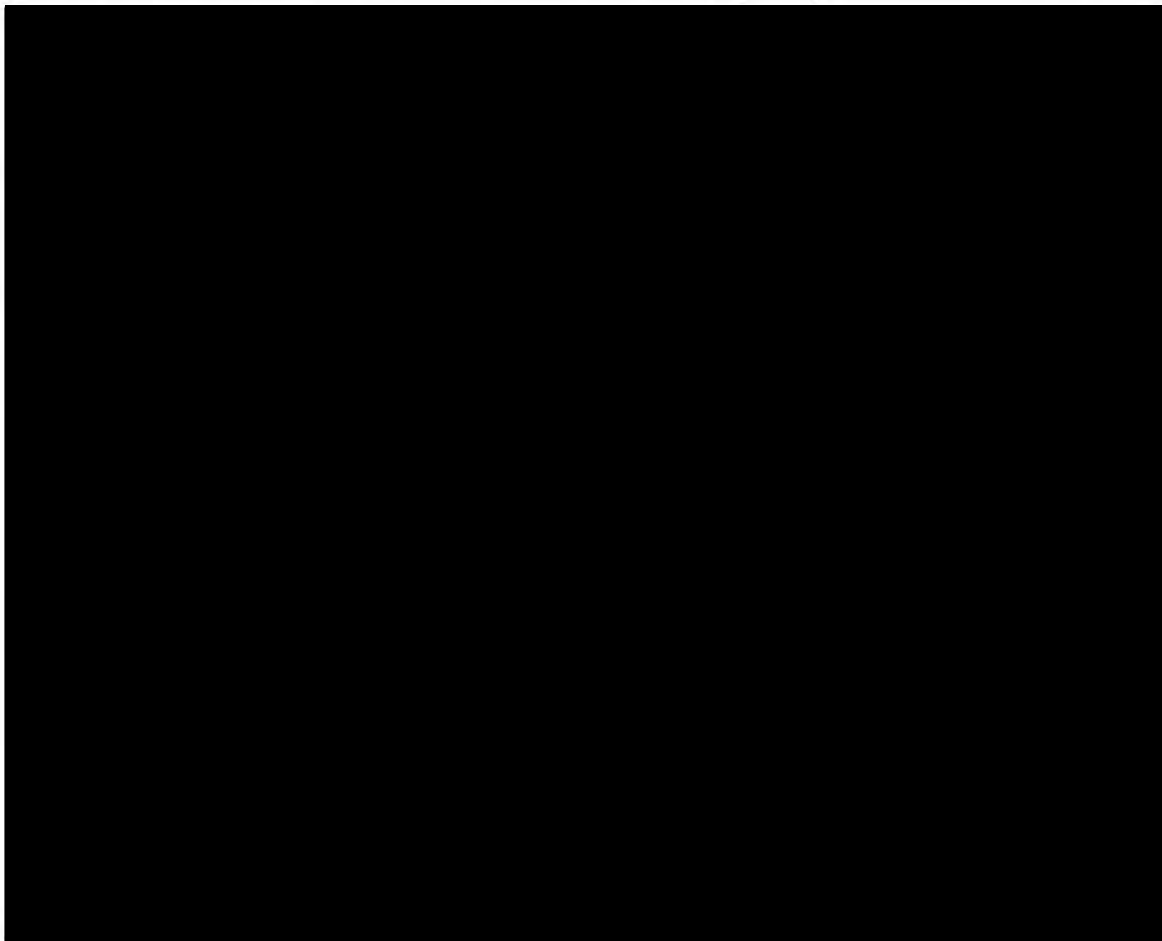
* Auth (Verified) *

02/14/2020 12:30 PM

AMR

→ San Joaquin General Hospital

pg 5 of 10



DOS: 02/14/2020, Patient: Joe Hunt, [REDACTED] Page 1 of 5

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

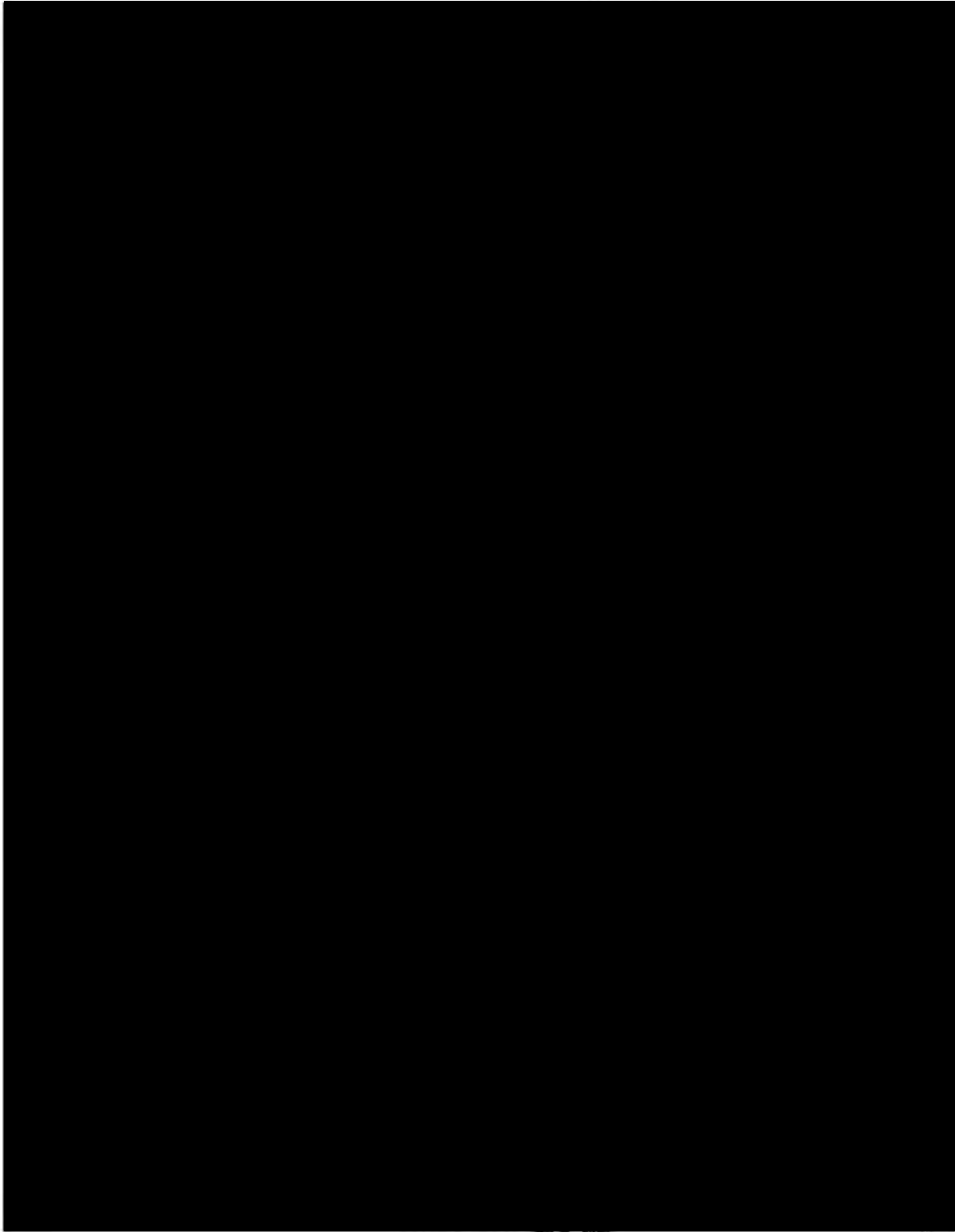
* Auth (Verified) *

02/14/2020 12:30 PM

AMR

→ San Joaquin General Hospital

pg 6 of 10



10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

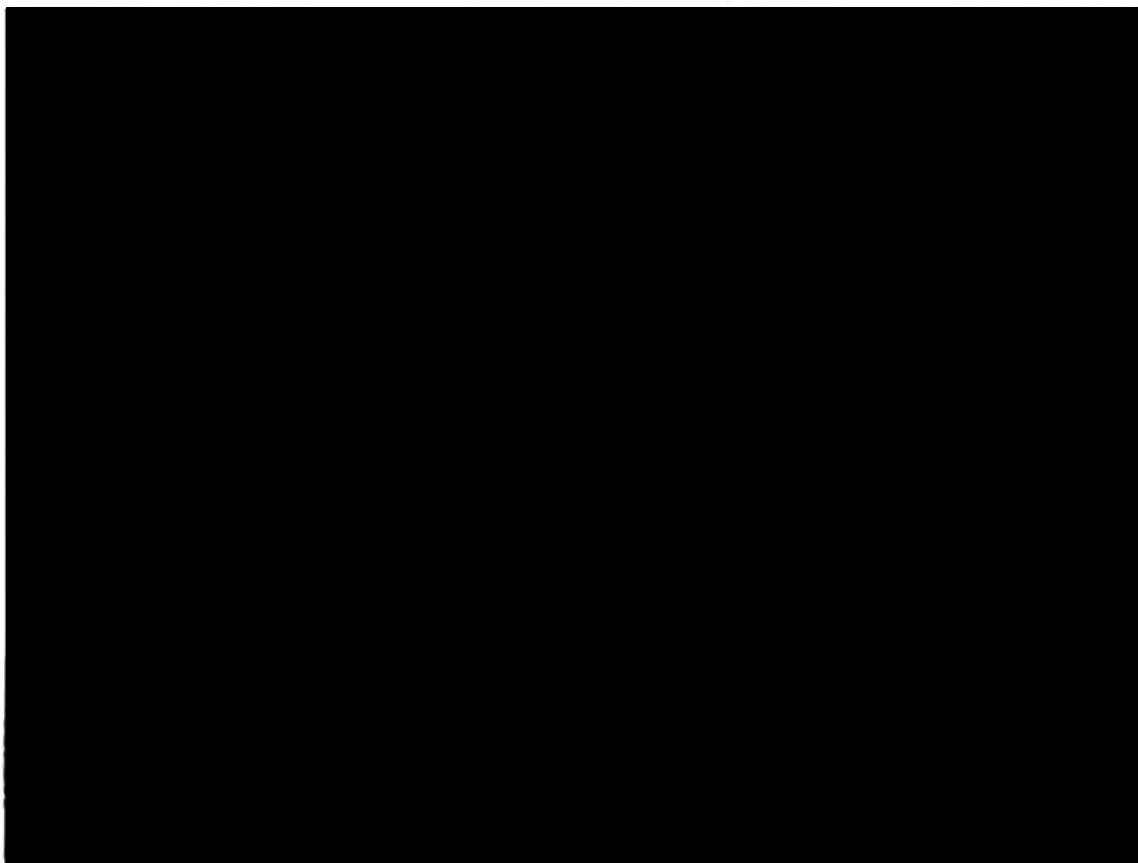
* Auth (Verified) *

02/14/2020 12:30 PM

AMR

→ San Joaquin General Hospital

pg 7 of 10



DOS: 02/14/2020, Patient: Joe Hunt,

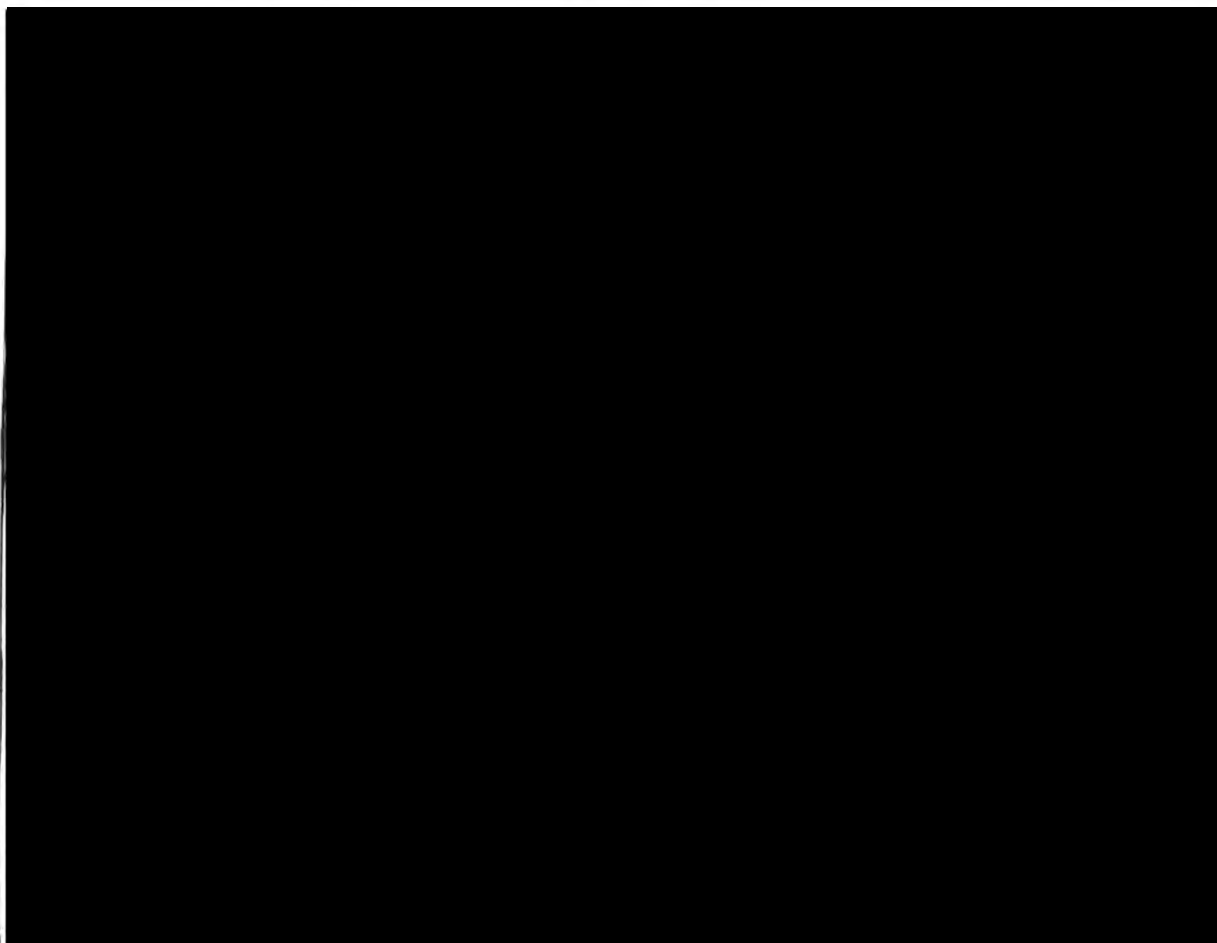
Page 3 of 6

HUNT, JOE D61873
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *



DOS: 02/14/2020, Patient: Joe Hunt, [REDACTED] Page 4 of 6

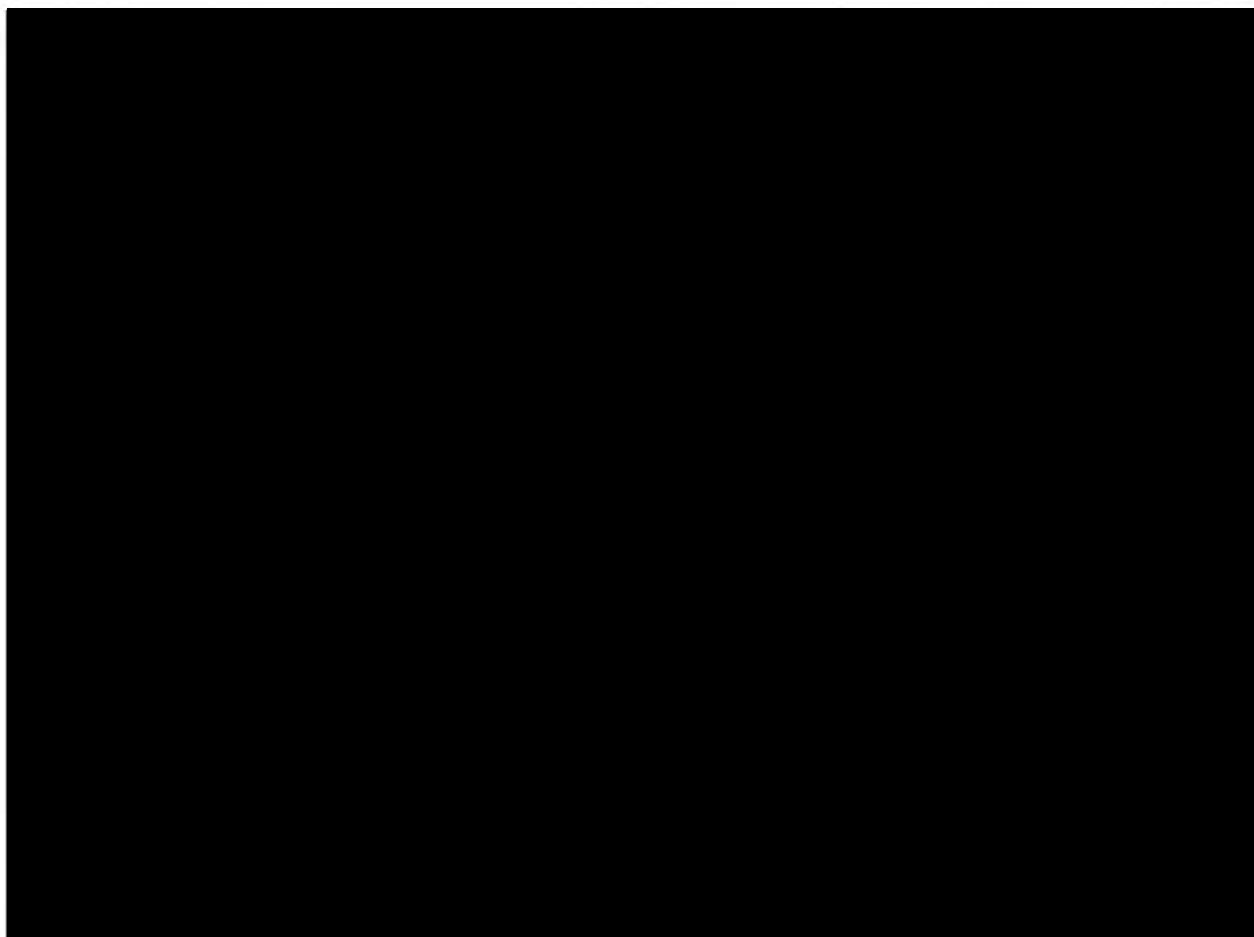
HUNT, JOE D61873
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D6186

* Auth (Verified) *

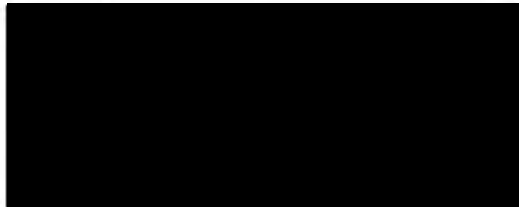
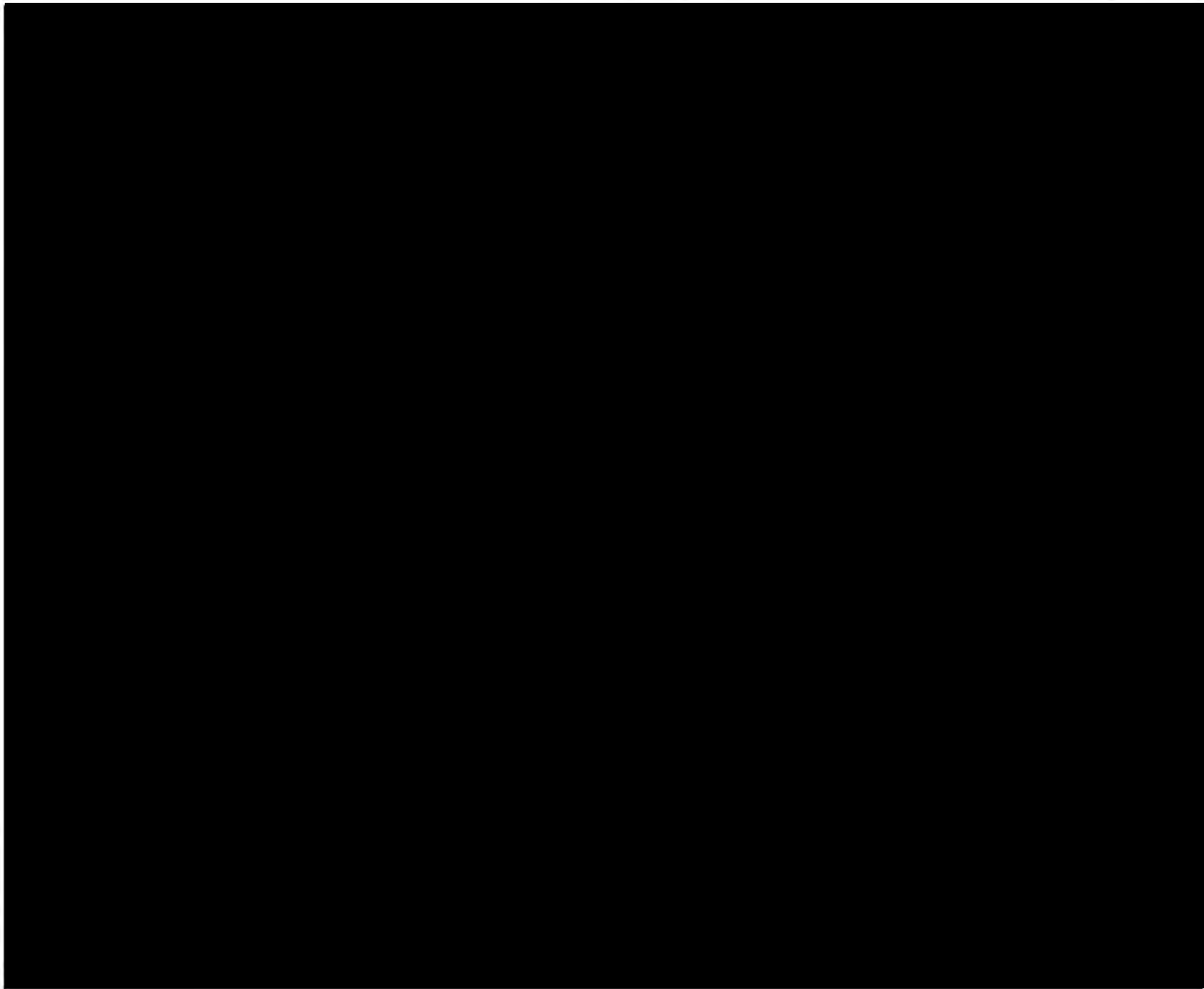


DCS: 02/14/2020, Patient: Joe Hunt, [REDACTED], Page 5 of 5 HUNT, JOE D61873
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *



DOS: 02/14/2020, Patient: Joe Hunt,

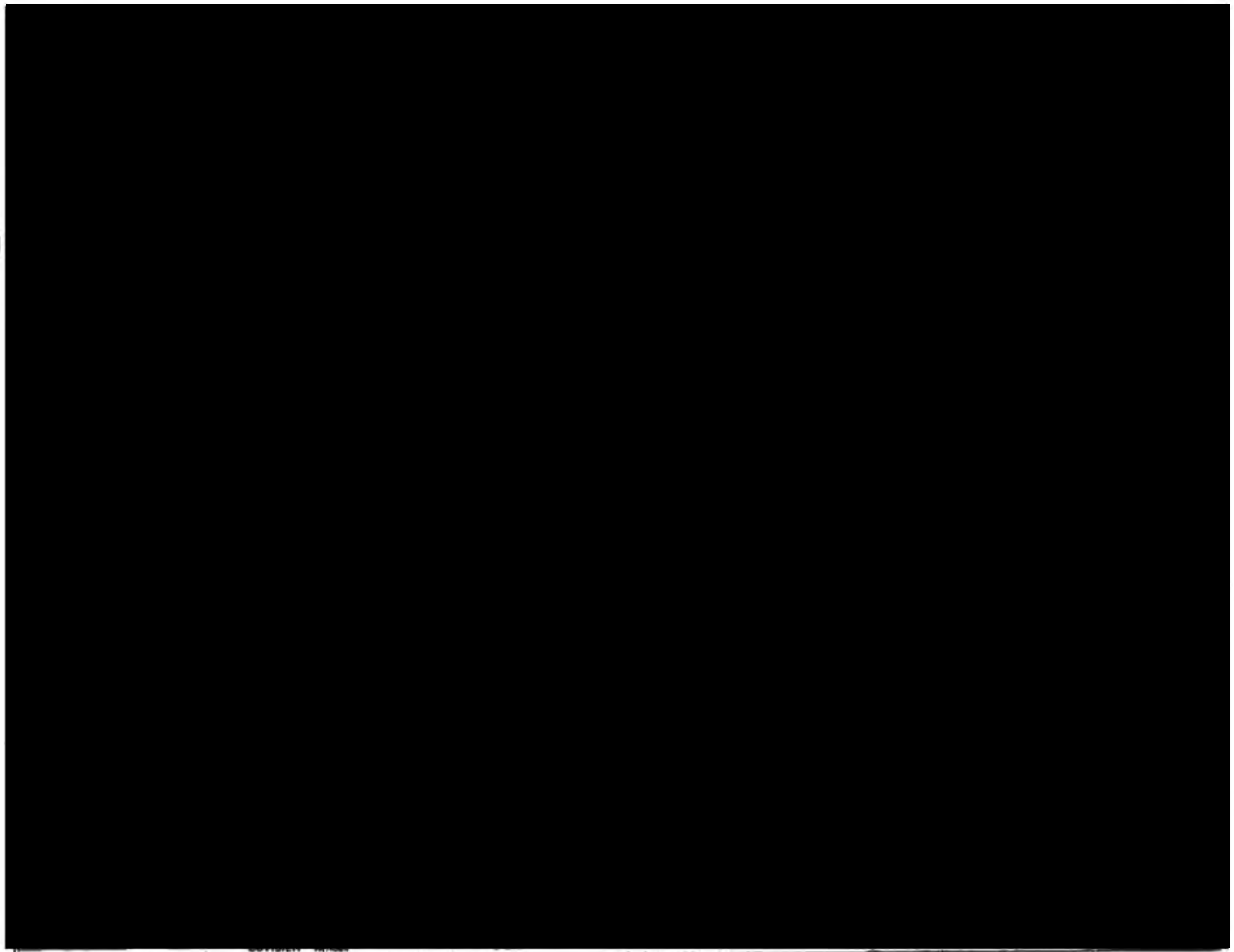
Page 6 of 6

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

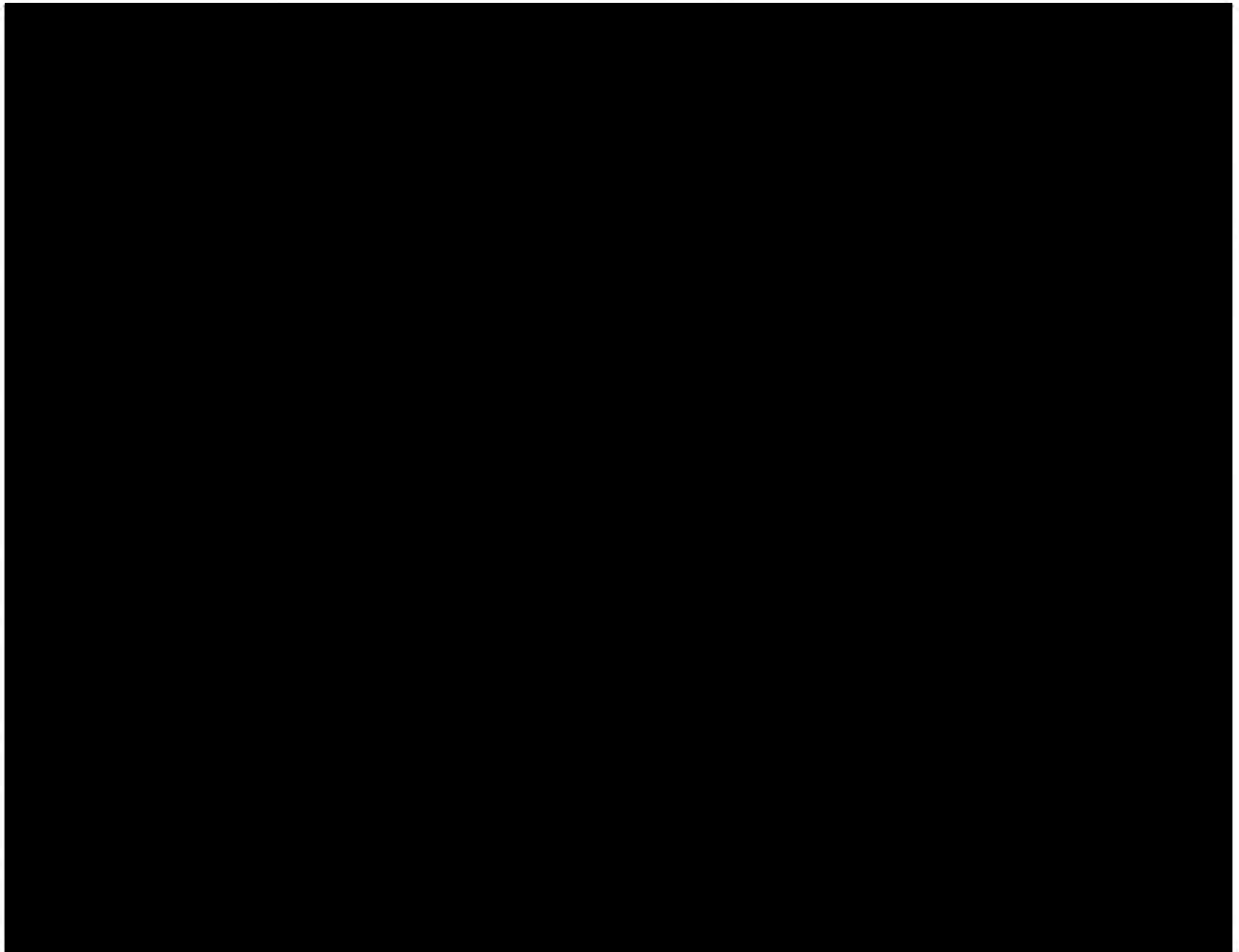


HUNT, JOE D618⁶3
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61865

* Auth (Verified) *



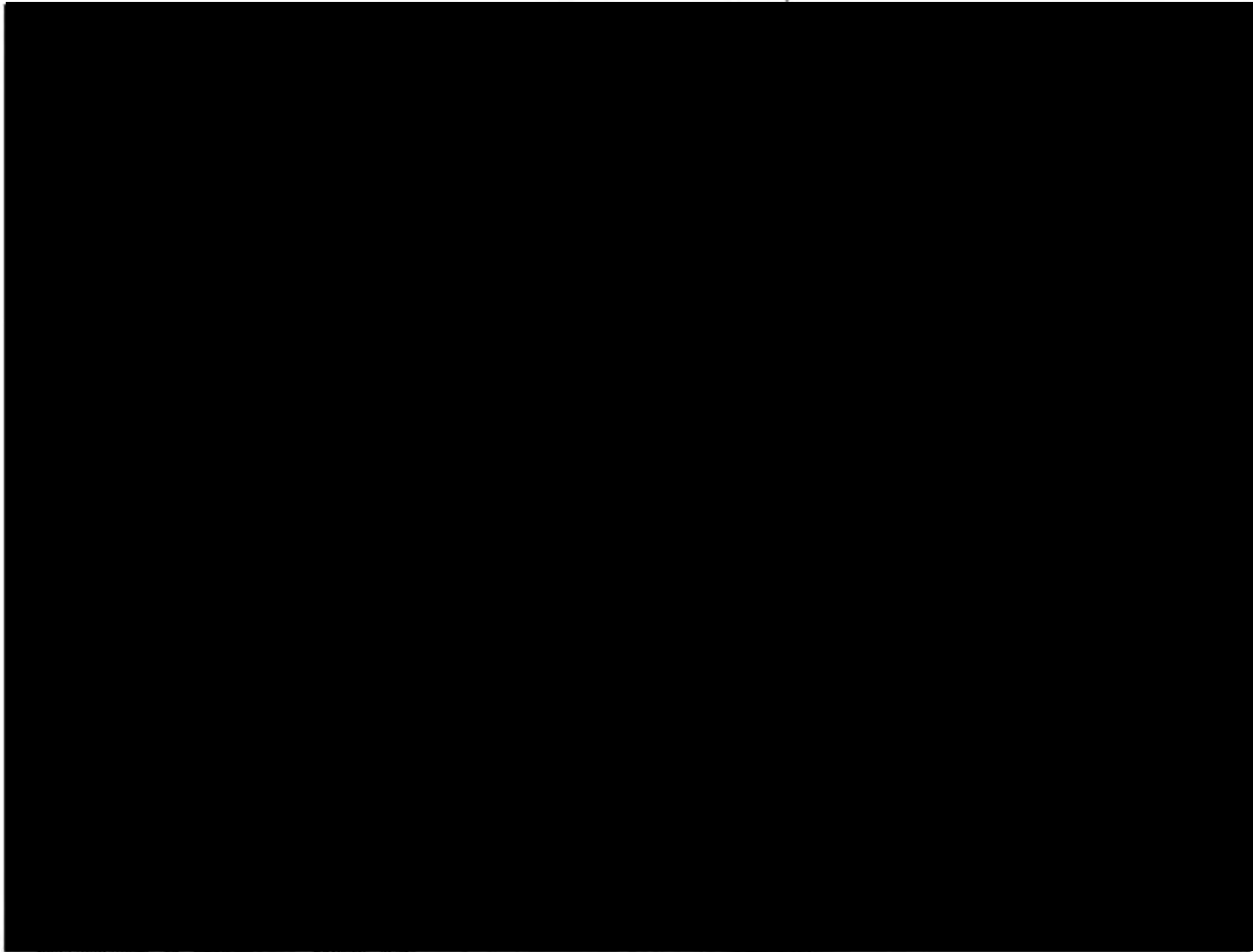
HUNT, JOE D61865
10/26/59 A304-214

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *



HUNT, JOE D618⁶3
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Inpatient Patient Summary

HUNT, JOE - [REDACTED]

Result type: Inpatient Patient Summary
Result Date: February 20, 2020 19:38 PST
Result Status: Modified
Result Title/Subject: Inpatient Patient Summary
Performed By/Author: Lee, Maly on February 20, 2020 19:38 PST
Verified By: Lee, Maly on February 20, 2020 19:38 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

Inpatient Patient Summary (Verified)

San Joaquin General Hospital

500 W Hospital Road

French Camp, CA 95231

(209) 468-6000

Patient Discharge Instructions

Name: HUNT, JOE

DOB: 10/26/1959 [REDACTED]

Patient Address: CHCF STOCKTON CA 95215

Primary Care Provider:

Name: CHCF, Physician

Phone:

Comment:

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:18 PST

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Inpatient Patient Summary

HUNT, JOE - [REDACTED]

HUNT, JOE has been given the following list of follow-up instructions, prescriptions, and patient education materials:

Diet & Activity

Patient Activity Level: As Tolerated

Patient Diet: Prudent AHA Diet

Patient Activity Restrictions: Do not use alcohol, Do not smoke or use tobacco products

Allergies

[REDACTED]

Follow-up Instructions

With:

Address:

When:

Follow-up with your specialist

Comments:

[REDACTED]

With:

Address:

When:

Follow-up with your specialist

Comments:

Follow up in [REDACTED] 1 month

Prescriptions

[REDACTED]

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:18 PST

HUNT, JOE D61863
10/26/59 A304-214

P [REDACTED]

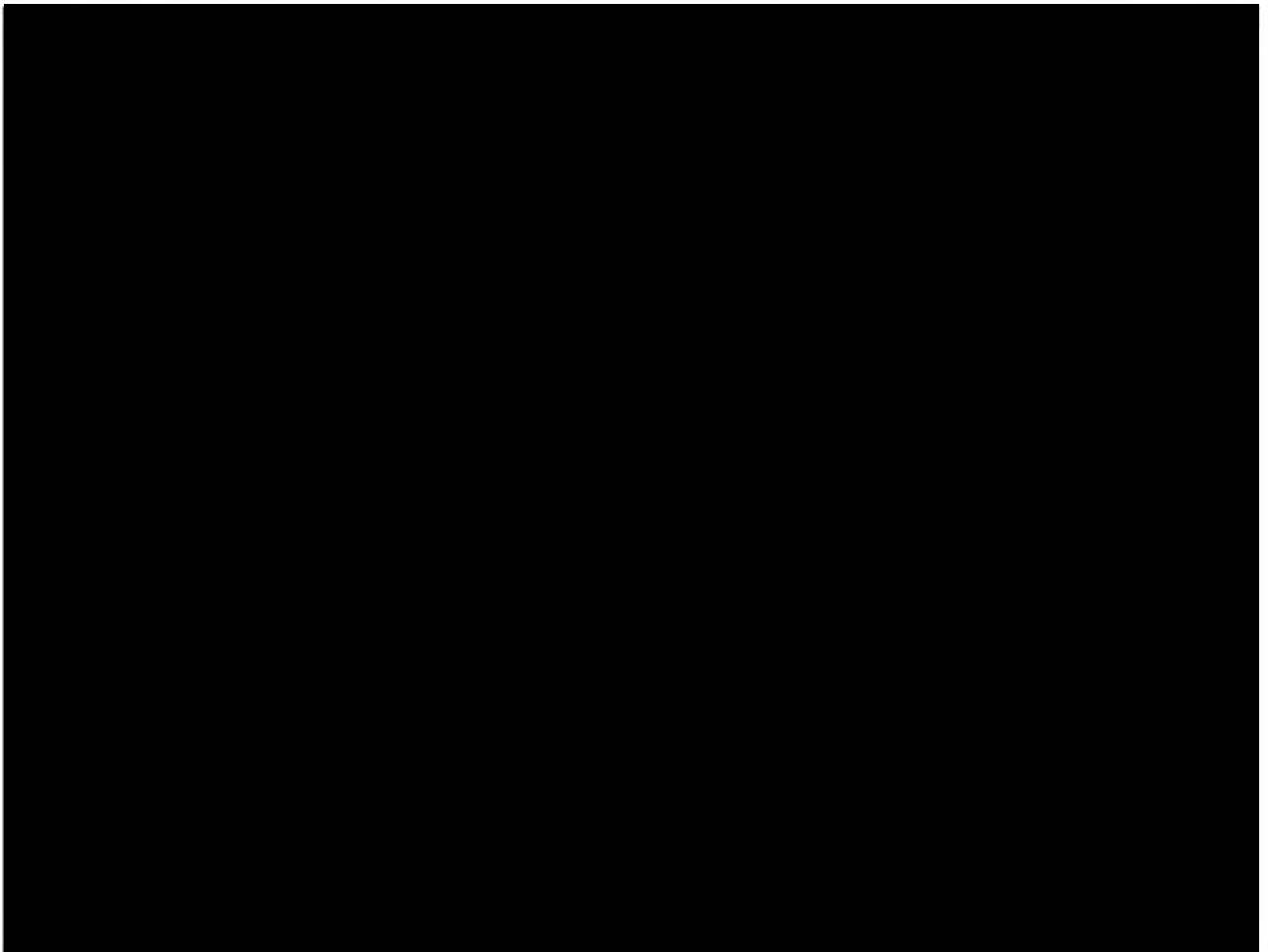
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Inpatient Patient Summary

HUNT, JOE -



Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:18 PST

HUNT, JOE D61863
10/26/59 A304-214

P

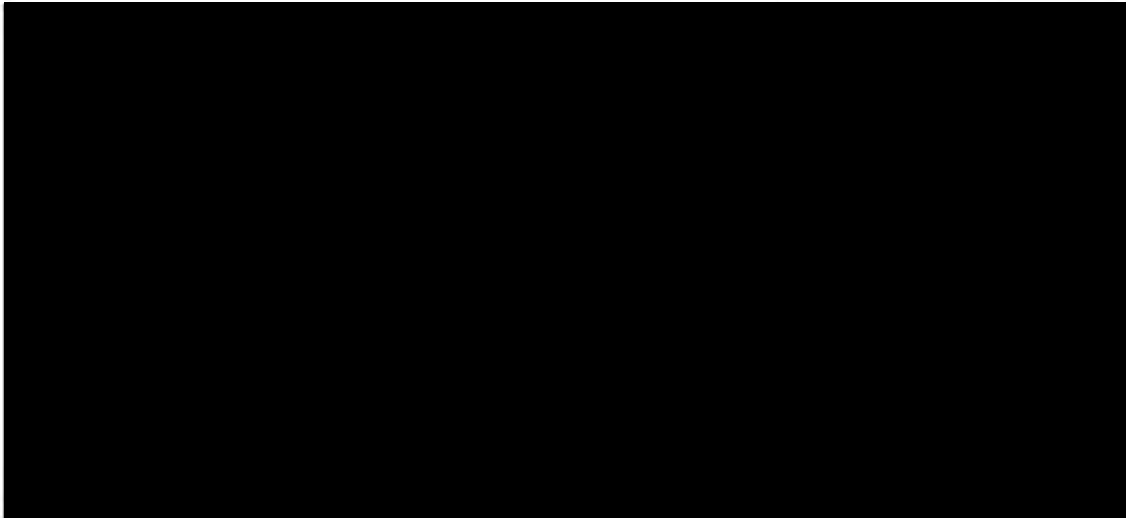
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Inpatient Patient Summary

HUNT, JOE -



Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:18 PST

HUNT, JOE D61863
10/26/59 A304-214

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	2/18/2020 13:13 PST
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (2/18/2020 13:14 PST)
Sign Information:	Saipher, Marshall NP (2/18/2020 13:14 PST)
Authentication Information:	Saipher, Marshall NP (2/18/2020 13:14 PST)

IP scheduled today to discuss [REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note

HUNT, JOE - [REDACTED]

* Preliminary Report *

Cardiology Consultation

Result type: Consultation/Specialist Note
Result Date: February 18, 2020 11:42 PST
Result Status: Unauth
Result Title/Subject: [REDACTED] Consult Note
Performed By/Author: Del Valle Hernandez, Jonathan MD on February 18, 2020 11:42 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Preliminary Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959

MRN: [REDACTED]

Registration Date: 02/14/2020

Primary Care Physician: CHCF, Physician

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 6

MRN: D61863

HUNT, JOE -

Living situation Detention Center., -
02/14/2020

Immunizations

Lab Results
Last 24 Hours

Event Name	Event Result	Date/Time
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
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		05:34:00
		02/18/20
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		02/18/20
		12:28:00
		02/18/20
		12:28:00
		02/18/20
		05:34:00
		02/18/20
		12:28:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61873
10/26/59 A304-214

Page 2 of 6

Facility: CHCF

MRN: D61863

HUNT, JOE - [REDACTED]

[illegible]

[illegible]

HUNT, JOE D618⁶3
10/26/59 A304-214

110

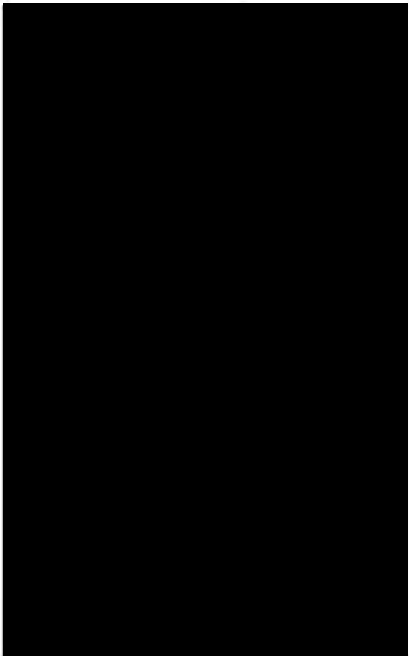
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note
* Preliminary Report *

HUNT, JOE -



Event Name	Event Result	Date/Time

All Other
Results

Event Name	Event Result	Date/Time
		02/18/20
		2:28:00
		02/18/20
		2:28:00
		02/18/20
		2:28:00
		02/18/20
		2:28:00
		02/18/20
		2:28:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note
* Preliminary Report *

HUNT, JOE -

		02/18/20
		12:28:00

Intake / Output

This visit (24 hour
periods starting
at 07:00 PST)

	02/18/20	02/17/20	02/16/20
	*		



* This column has not completed the
indicated time period.

[1] XR Chest 1 View Portable; Nikpour, Arian M MD 02/14/2020 13:07 PST

Signature Line

[Electronically Signed on: 02/18/2020 16:54 PST]

Del Valle Hernandez, Jonathan MD RES

[Electronically Signed on: 02/18/2020 17:47 PST]

Del Valle Hernandez, Jonathan MD RES

[Electronically Signed on: 02/18/2020 17:59 PST]

Del Valle Hernandez, Jonathan MD RES

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 5 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note
* Preliminary Report *

HUNT, JOE -

[Electronically Signed on: 02/19/2020 11:59 PST]

Del Valle Hernandez, Jonathan MD RES

Dharawat, Ramesh N MD MD

Completed Action List:

- * Perform by Del Valle Hernandez, Jonathan MD on February 18, 2020 11:42 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 18, 2020 15:42 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 18, 2020 16:41 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 18, 2020 16:47 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 18, 2020 16:54 PST
- * Sign by Del Valle Hernandez, Jonathan MD on February 18, 2020 16:54 PST Requested by
Del Valle Hernandez, Jonathan MD on February 18, 2020 11:42 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 18, 2020 17:47 PST
- * Sign by Del Valle Hernandez, Jonathan MD on February 18, 2020 17:47 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 18, 2020 17:59 PST
- * Sign by Del Valle Hernandez, Jonathan MD on February 18, 2020 17:59 PST
- * Modify by Del Valle Hernandez, Jonathan MD on February 19, 2020 11:59 PST
- * Sign by Del Valle Hernandez, Jonathan MD on February 19, 2020 11:59 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 6 of 6



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Consultation Notes

Document Type: [REDACTED] Consultation
Document Subject: CHFF0000451
Service Date/Time: 2/18/2020 09:00 PST
Result Status: Auth (Verified)
Perform Information: Lata, Renu HRT I (2/21/2020 11:54 PST)
Sign Information: Saipher, Marshall NP (2/24/2020 10:07 PST); Lata, Renu HRT I (2/21/2020 11:54 PST)
Authentication Information: Lata, Renu HRT I (2/21/2020 11:54 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note

HUNT, JOE

* Final Report *

Result type: Consultation/Specialist Note
Result Date: February 18, 2020 9:00 PST
Result Status: Auth (Verified)
Result Title/Subject: Heme/Onc Consult Note
Performed By/Author: Mostamand, Mariam MD on February 18, 2020 9:01 PST
Verified By: Gill, Amandeep S MD on February 18, 2020 12:26 PST
Encounter info: 30419101, San Joaquin Hosp, Inpatient, 2/14/2020 - 2/20/2020

*** Final Report ***

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN:
Registration Date: 02/14/2020
Primary Care Physician: CHCF, Physician

Chief Complaint

Reason for Consultation

Evaluation of

History of Present Illness

Pertinent laboratory studies February 18, 2020:

Laboratory studies from February 14, 2020:

Review of laboratory states from January 27, 2020:

Problem List/Past Medical History

Historical
No qualifying data

Medications

Allergies

Social History

Alcohol
Never, - 01/27/2020
Electronic Cigarette/Vaping

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

Consultation/Specialist Note
* Final Report *

HUNT, JOE - [REDACTED]

(02/14/2020 13:07 PST [REDACTED])

IMPRESSION [REDACTED]

Review of Systems

[REDACTED]

Physical Exam

[REDACTED]

Assessment/Plan

[REDACTED]

Electronic Cigarette Use: Never., -
01/27/2020
Home/Environment
Living situation Detention Center., -
02/14/2020

Family History

No family history of malignancy.

Immunizations

Vaccine	Date	Status
[REDACTED]	02/14/2020	Given

Lab Results

Last 24 Hours

Chemistry

Event Name	Event Result	Date/Time
[REDACTED]	[REDACTED]	02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
[REDACTED]	[REDACTED]	02/18/20
		05:34:00
[REDACTED]	[REDACTED]	02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00

Printed by: Montecino, Mary C.
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note
* Final Report *

HUNT, JOE -

02/17/20
14:34:00

Hematology

Event Name	Event Result	Date/Time
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
		05:34:00
		02/18/20
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		02/18/20
		05:34:00

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 5

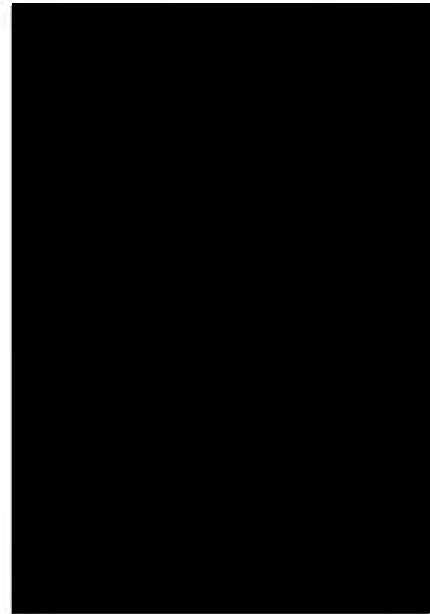
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note
* Final Report *

HUNT, JOE - [REDACTED]



Signature Line

[Electronically Signed on: 02/18/2020 11:13 PST]

Mostamand, Mariam MD RES

[Electronically Signed on: 02/18/2020 12:26 PST]

Gill, Amandeep S MD MD

[Verified on: 02/18/2020 12:26 PST]

Gill, Amandeep S MD MD

Completed Action List:

- * Perform by Mostamand, Mariam MD on February 18, 2020 9:01 PST
- * Modify by Mostamand, Mariam MD on February 18, 2020 11:13 PST
- * Sign by Mostamand, Mariam MD on February 18, 2020 11:13 PST Requested by Mostamand, Mariam MD on February 18, 2020 9:01 PST
- * Modify by Gill, Amandeep S MD on February 18, 2020 12:26 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 4 of 5

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Consultation/Specialist Note
* Final Report *

HUNT, JOE -

* Sign by Gill, Amandeep S MD on February 18, 2020 12:26 PST Requested by Mostamand,
Mariam MD on February 18, 2020 11:13 PST
* VERIFY by Gill, Amandeep S MD on February 18, 2020 12:26 PST

Printed by: Montecino, Mary C
Printed on: 2/21/2020 9:20 PST

HUNT, JOE D618⁶73
10/26/59 A304-214

Page 5 of 5



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Assessment Forms

First Medical Responder-DCT Entered On: 2/14/2020 11:37 PST
Performed On: 2/14/2020 11:36 PST by Trull, Steve LVN

Patient Encounter Information

ENCTR Information : Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, FIN:
[REDACTED] Facility: CHCF, Encounter Type: Institutional Encounter

Trull, Steve LVN - 2/14/2020 11:36 PST

Incident/Subjective Data

Fr-Date and Time of Incident : 2/14/2020 09:32 PST
Fr-Location of Incident : CHCF--PWC
FR- Alarm Activation : Yes
FR- Time of Alarm Activation : 09:45 PST
FR- Alarm Activation Method : Radio
Fr-Time BLS staff on scene : 10:18 PST
FR- Name of First Responder : SEMS nursing team
Fr-Time Clinical staff notified : 09:45 PST
FR- HCFR Called By : Marshall Saipher, NP-C
Fr-FR Notified TTA/Clinic Time : 09:45 PST
FR who Notified TTA/Clinic : Marshall Saipher, NP-C
Fr-Nurse who Received the Call : Nandy, Mousumi P&S
Fr-Time Clinical staff arrived : 10:18 PST
Fr-Time clinical staff departed : 10:20 PST
Fr-Time PCP notified : 09:32 PST
Fr-chief complaint : Other: [REDACTED]
Mechanism of Injury : Other: [REDACTED]
Fr-Past Medical History : Yes
Additional Comments Problem History : [REDACTED]
MAT Program Participant : No

Saipher, Marshall NP - 2/14/2020 12:27 PST

Report Request ID: 27398303

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged
information intended for the recipient only.

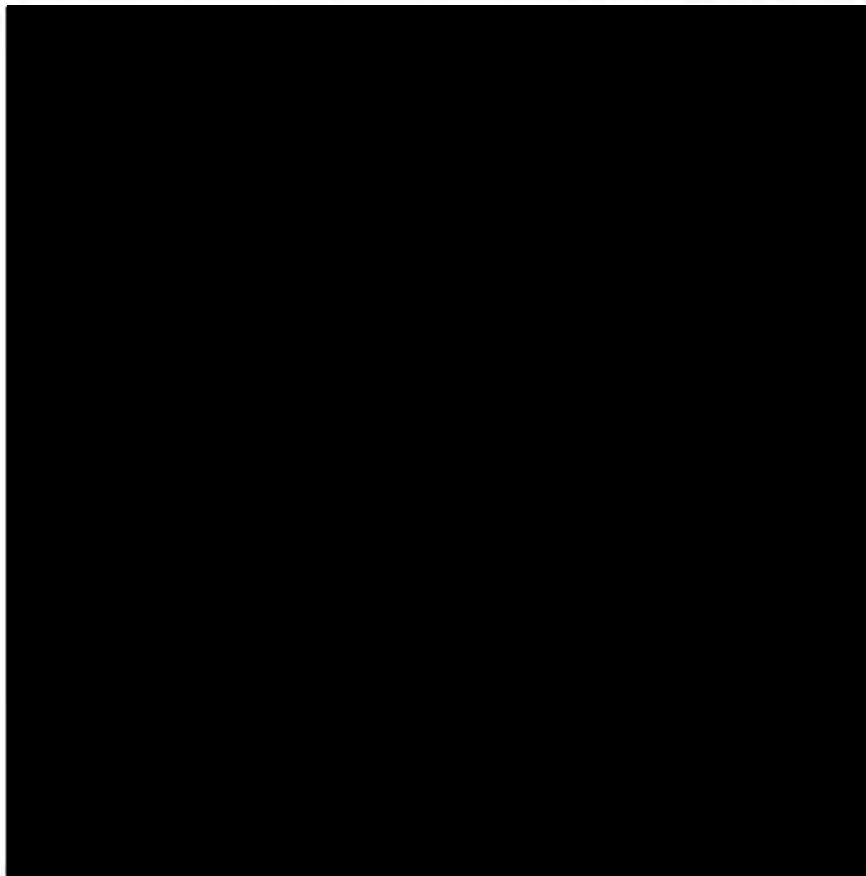
CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms



Saipher, Marshall NP - 2/14/2020 12:27 PST

Saipher, Marshall NP - 2/14/2020 12:27 PST

Saipher, Marshall NP - 2/14/2020 12:27 PST

Saipher, Marshall NP - 2/14/2020 12:27 PST

Report Request ID: 27398303

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863

PID #: [REDACTED]

Referring:

Progress Notes

Document Type:	Progress Note-Nurse
Document Subject:	medical emergency
Service Date/Time:	2/14/2020 11:13 PST
Result Status:	Auth (Verified)
Perform Information:	Ngan, Maria RN (2/14/2020 11:48 PST)
Sign Information:	Ngan, Maria RN (2/14/2020 12:57 PST)
Authentication Information:	Ngan, Maria RN (2/14/2020 12:57 PST); Ngan, Maria RN (2/14/2020 12:57 PST)

Electronically Signed on 02/14/2020 12:57 PM PST

Ngan, Maria RN, RN

Modified by: Ngan, Maria RN, RN on 02/14/2020 12:57 PM PST

Report Request ID: 27398304

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type: Progress Note-Nurse
Document Subject: Emergency Response/TTA RN Summary
Service Date/Time: 2/14/2020 11:08 PST
Result Status: Auth (Verified)
Perform Information: Ngan, Maria RN (2/14/2020 11:12 PST)
Sign Information: Ngan, Maria RN (2/14/2020 11:12 PST)
Authentication Information: Ngan, Maria RN (2/14/2020 11:12 PST)

Reason for Visit/Chief Complaint

Fr-chief complaint: [REDACTED] 02/14/20 10:58:00)

Prior to Arrival at TTA

No qualifying data available.

Vital Signs

Last Recorded Vital Signs:

Incident Timeline

TTA-Arrival Time of Patient: 02/14/20 10:24:00
Mode of Arrival on Unit: Gurney
Provider Notification Details: 1014-NP Saipher
called SEMS that pt has palpitation
EMS Called Time: 02/14/20 10:16:00
EMS Times:
No qualifying data available.

Date/Time

10:58

10:58

10:58

10:58

10:58

10:58

10:58

10:58

10:58

10:58

Systems Assessment

Report Request ID: 27398305

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged
information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: HUNT, JOE

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes

[REDACTED]

[REDACTED]

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, FIN: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Report Request ID: 27398305

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes

Electronically Signed on 02/14/2020 11:12 AM PST

Ngan, Maria RN, RN

Report Request ID: 27398305

Print Date/Time: 3/9/2020 11:32 PDT

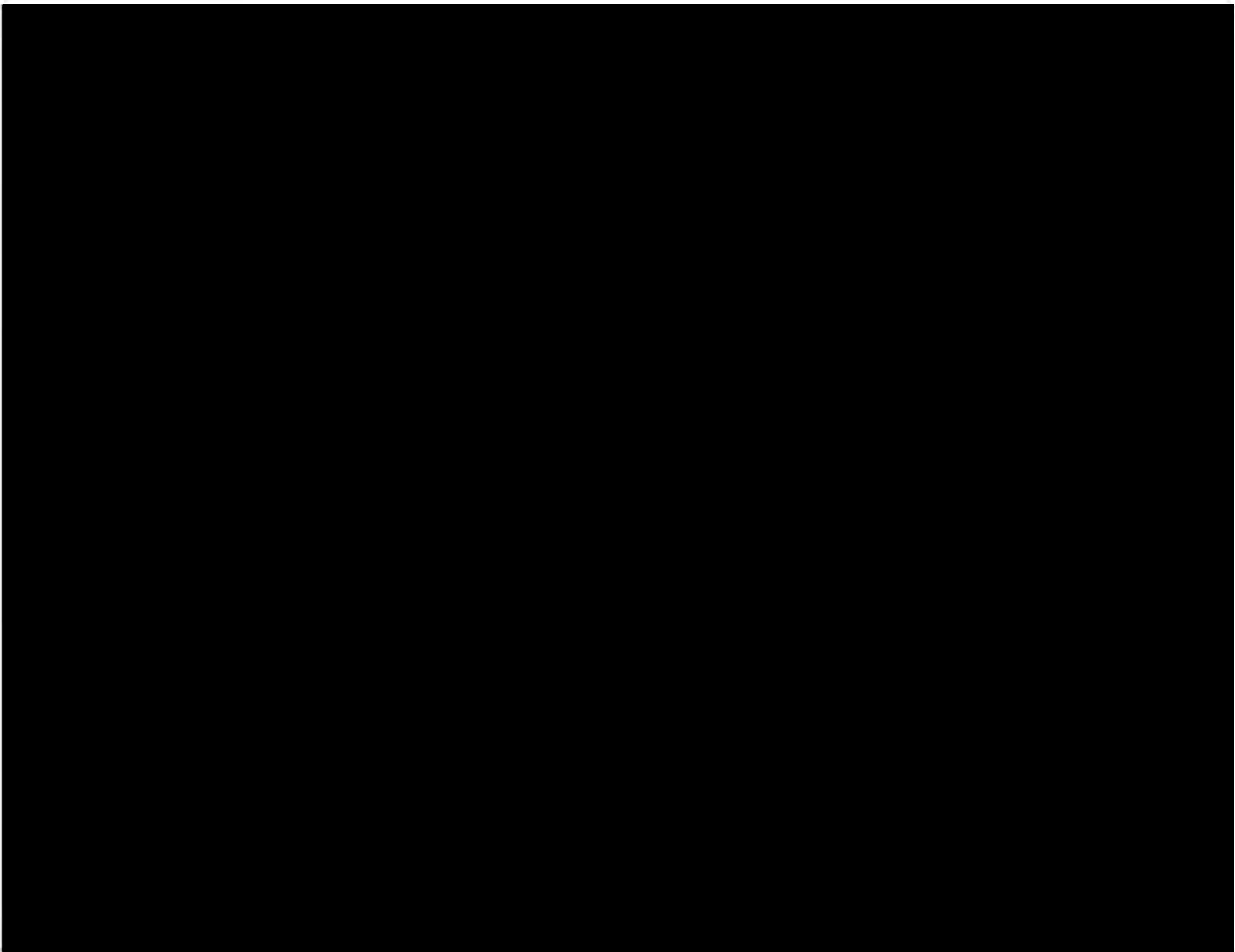
WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863



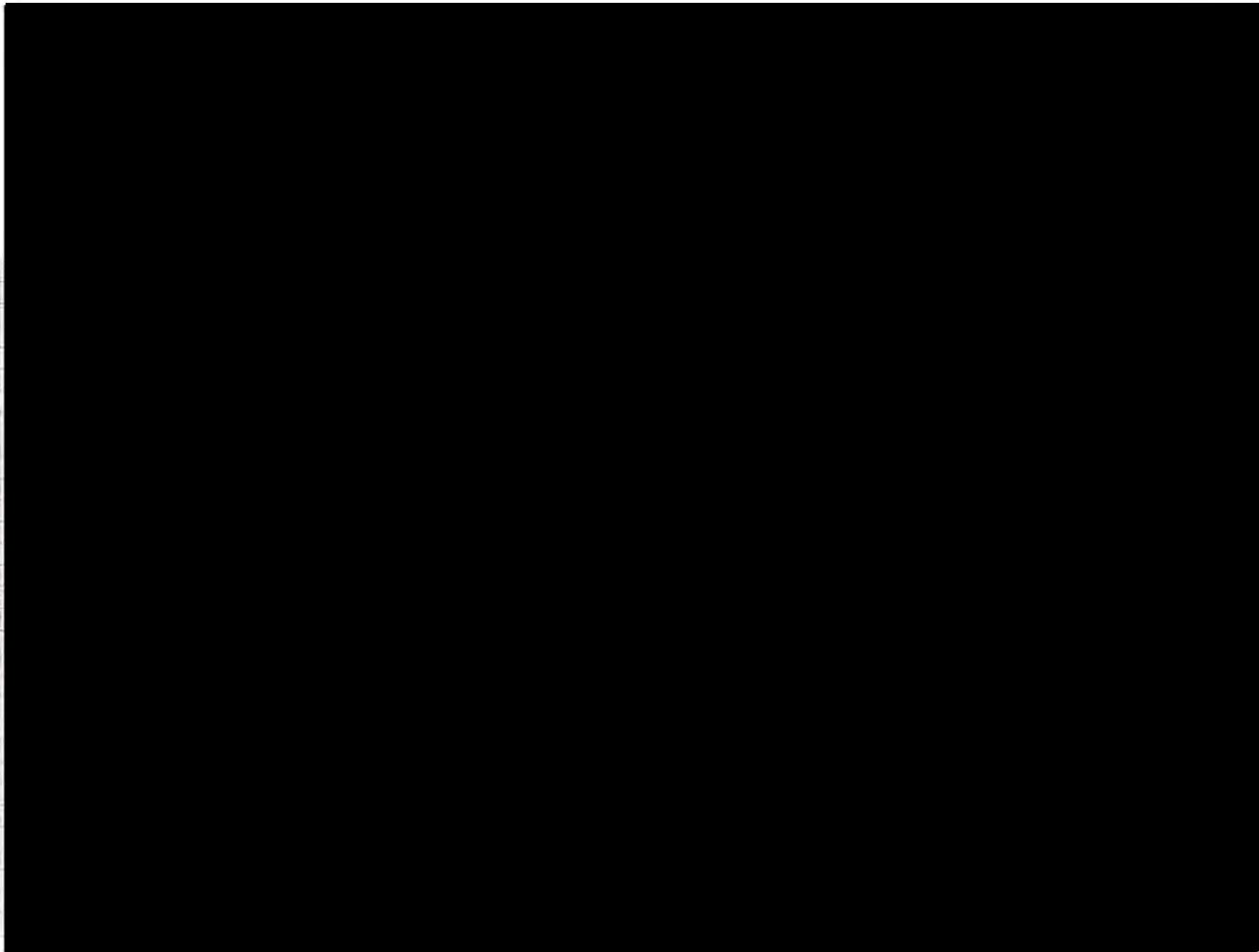
* Auth (Verified) *



Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
[Redacted]

* Auth (Verified) *





CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	Dysuria, Tachycardia
Service Date/Time:	2/14/2020 09:32 PST
Result Status:	Modified
Perform Information:	Saipher, Marshall NP (2/14/2020 12:26 PST); Saipher, Marshall NP (2/14/2020 09:39 PST)
Sign Information:	Saipher, Marshall NP (2/14/2020 12:26 PST); Saipher, Marshall NP (2/14/2020 10:38 PST)
Authentication Information:	Saipher, Marshall NP (2/14/2020 12:26 PST); Saipher, Marshall NP (2/14/2020 10:38 PST); Saipher, Marshall NP (2/14/2020 10:38 PST); Saipher, Marshall NP (2/14/2020 09:56 PST)

Review of Systems

As above.

Objective

Report Request ID: 27398308

Print Date/Time: 3/9/2020 11:32 PDT

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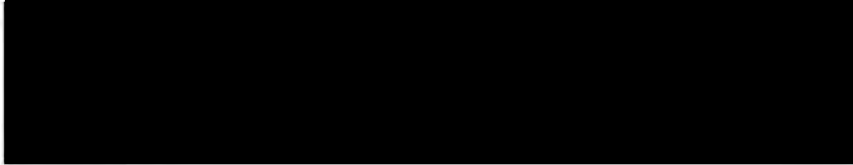
CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes



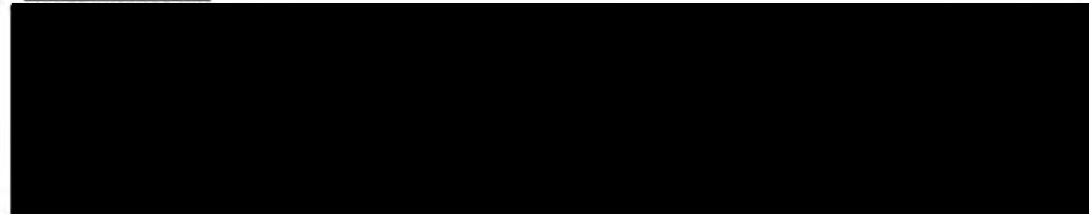
Lab Results

no recent labs on file

Diagnostic Results

02/14/20"

Assessment/Plan



Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Report Request ID: 27398308

Print Date/Time: 3/9/2020 11:32 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Respiratory Therapy Progress Note
Document Subject:	Routine Respiratory Evaluation
Service Date/Time:	2/13/2020 13:00 PST
Result Status:	Auth (Verified)
Perform Information:	Salsedo, Boyd RCP (2/13/2020 15:44 PST)
Sign Information:	Salsedo, Boyd RCP (2/13/2020 15:44 PST)
Authentication Information:	Salsedo, Boyd RCP (2/13/2020 15:44 PST)

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Electronically Signed on 02/13/2020 03:44 PM PST

Salsedo, Boyd RCP, RCP

Reviewed by: Saipher, Marshall NP, NP

Report Request ID: 27398309

Print Date/Time: 3/9/2020 11:32 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Assessment Forms

Nursing Face-to-Face / 7362 Entered On: 2/10/2020 12:01 PST
Performed On: 2/10/2020 11:44 PST by Kaur, Sarbjit RN

Patient Encounter Information

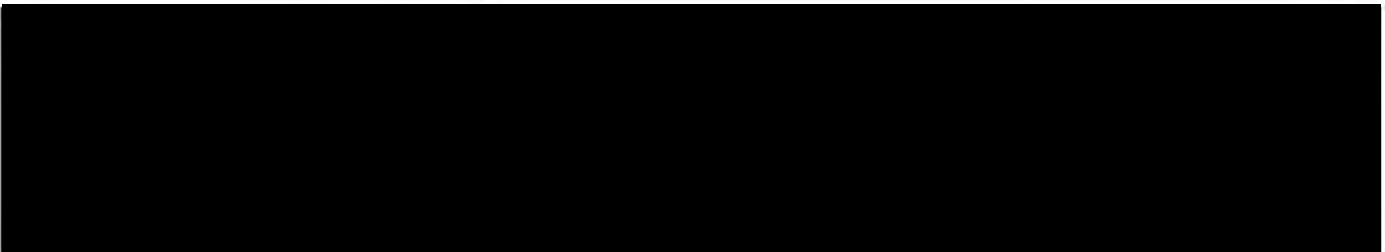
ENCTR Information : Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/[REDACTED]
[REDACTED] Facility: CHCF, Encounter Type: Institutional Encounter

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Subjective

Arrival to Clinic : 2/10/2020 11:44 PST
Mode of Arrival : Ambulatory
Appointment Type : Initial

Kaur, Sarbjit RN - 2/10/2020 11:44 PST



Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged
information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

General

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Allergies/Medications

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST
(As Of: 2/10/2020 12:01:43 PST)

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms

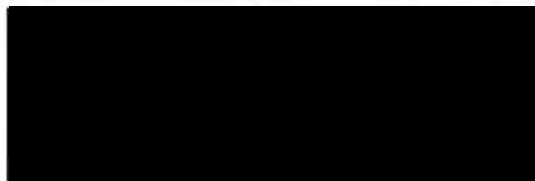
	Kaur, Sarbjit RN - 2/10/2020 11:44 PST
--	----------------------------------------------



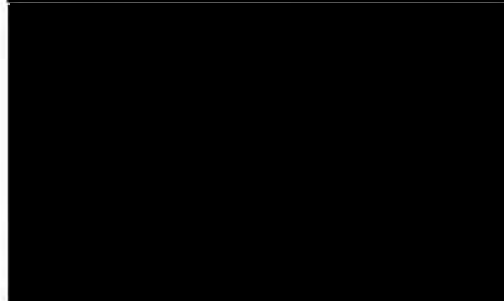
None

None

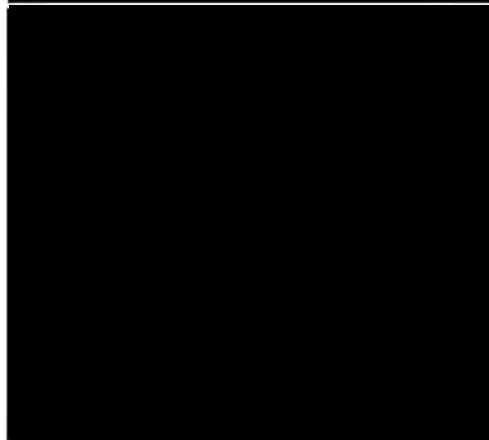
Kaur, Sarbjit RN -
2/10/2020 11:44
PST



Kaur, Sarbjit RN - 2/10/2020 11:44 PST



Kaur, Sarbjit RN - 2/10/2020 11:44 PST



Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

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CHCF - California Health Care Facility - Stockton

Patient: HUNT, JOE

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

(As Of: 2/10/2020 12:01:43 PST)

Diagnosis/Problem

[REDACTED]

Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

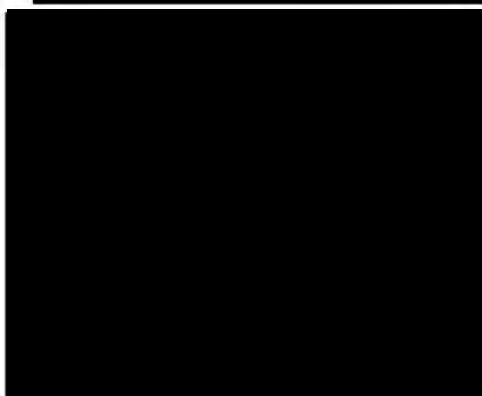
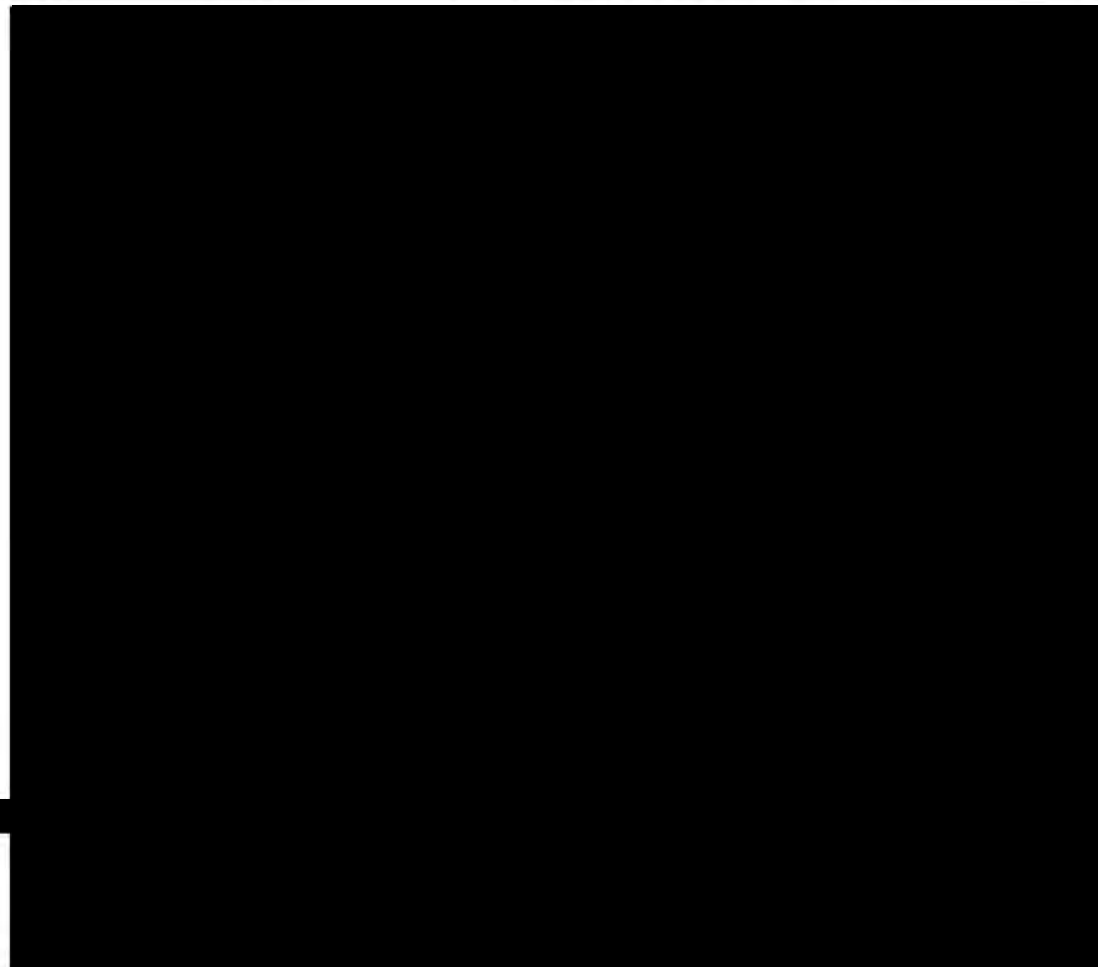
CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms



Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

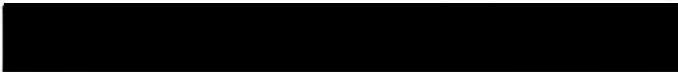
CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Assessment Forms



Kaur, Sarbjit RN - 2/10/2020 11:44 PST



Released Time : 2/10/2020 11:58 PST

Kaur, Sarbjit RN - 2/10/2020 11:44 PST

Report Request ID: 27398310

Print Date/Time: 3/9/2020 11:32 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	1/30/2020 11:00 PST
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (2/13/2020 15:28 PST)
Sign Information:	Saipher, Marshall NP (2/13/2020 15:38 PST)
Authentication Information:	Saipher, Marshall NP (2/13/2020 15:38 PST); Saipher, Marshall NP (2/13/2020 15:38 PST); Saipher, Marshall NP (2/13/2020 15:35 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	Free Text Note
Service Date/Time:	1/29/2020 10:07 PST
Result Status:	Auth (Verified)
Perform Information:	Greenberg, Adam P&S (1/29/2020 10:08 PST)
Sign Information:	Greenberg, Adam P&S (1/29/2020 10:08 PST)
Authentication Information:	Greenberg, Adam P&S (1/29/2020 10:08 PST)

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	TTA Progress Note
Document Subject:	ED Note
Service Date/Time:	1/27/2020 04:45 PST
Result Status:	Auth (Verified)
Perform Information:	Lehil, Bhupinder Physician & Surgeon (1/27/2020 04:53 PST)
Sign Information:	Lehil, Bhupinder Physician & Surgeon (1/27/2020 04:53 PST)
Authentication Information:	Lehil, Bhupinder Physician & Surgeon (1/27/2020 04:53 PST)

Chief Complaint

History of Present Illness

[REDACTED]

Report Request ID: 27398314

Print Date/Time: 3/9/2020 11:32 PDT

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CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes

[REDACTED]

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Report Request ID: 27398314

Print Date/Time: 3/9/2020 11:32 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-Nurse
Document Subject:	[REDACTED]
Service Date/Time:	1/27/2020 04:20 PST
Result Status:	Auth (Verified)
Perform Information:	Grey, Stacey RN (1/27/2020 04:36 PST)
Sign Information:	Grey, Stacey RN (1/27/2020 04:36 PST)
Authentication Information:	Grey, Stacey RN (1/27/2020 04:36 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, FIN: 10282275111480004D61863, Facility: CHCF, Encounter Type: Institutional Encounter
At approximately 0405 a medical emergency alarm was activated in PWC. Upon arriving at the unit at 0416, the inmate was noted to be lying on a day room table. He was able to sit up and explain that about 1 hour prior, he woke up "sweating profusely," and in a lot of pain in his left anterior hip. Able to ambulate with custody to cart and brought to SEMS for further evaluation.

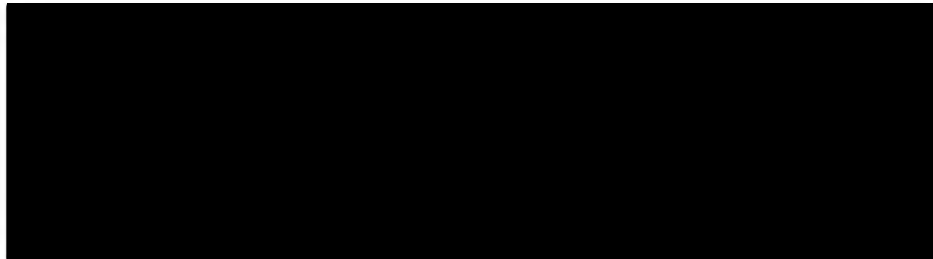
Electronically Signed on 01/27/2020 04:36 AM PST

Grey, Stacey RN, RN

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

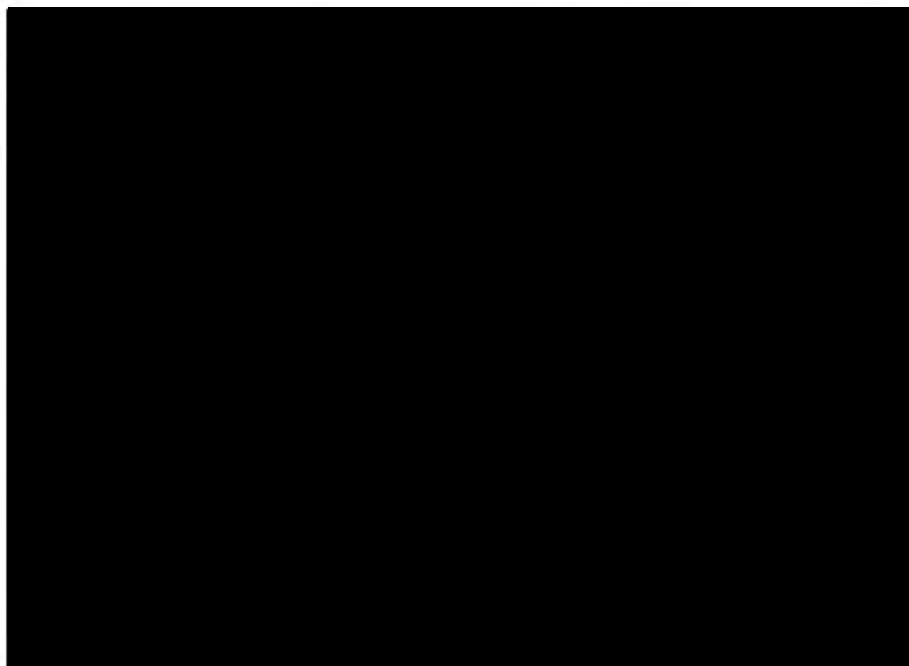


* Preliminary Report *

HUNT, JOE

60 Years Male

DOB: 10/26/1959
MRN: [REDACTED]
Registration Date: 01/27/2020
Primary Care Physician: CHCF, Physician



Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

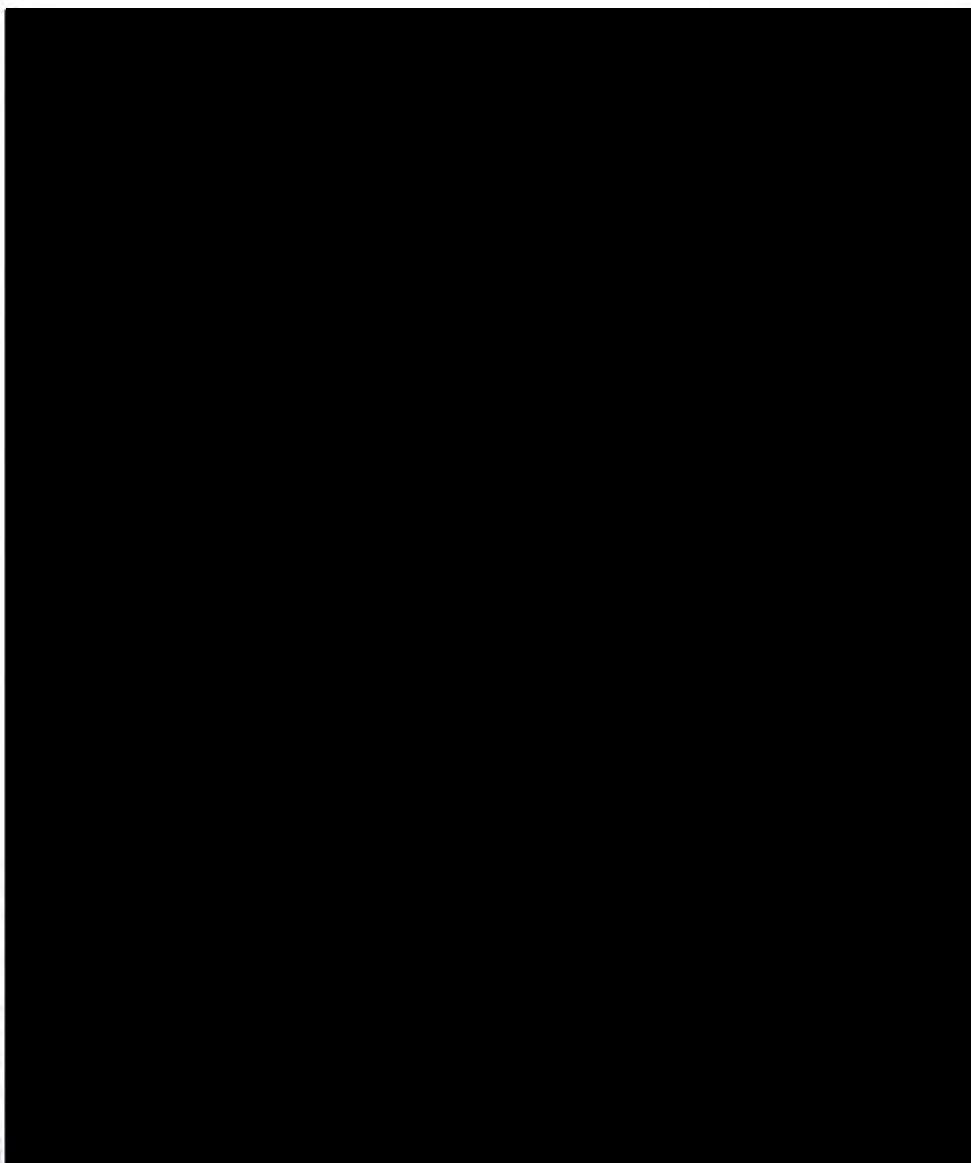
HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *



Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *

ED Note - Physician
* Preliminary Report *



Diagnostic Results

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 3 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

ED Note - Physician
* Preliminary Report *



[1] CT Abdomen/Pelvis w/o Contrast; Sandhu, Barjinder S MD 01/27/2020 08:22 PST

Signature Line

Koo, Ralph A MD

Completed Action List:

- * Perform by Koo, Ralph A MD on January 27, 2020 7:32 PST
- * Review by Ochoa Castellanos, Stephanie on January 27, 2020 7:32 PST
- * Modify by Ochoa Castellanos, Stephanie on January 27, 2020 7:39 PST
- * Modify by Ochoa Castellanos, Stephanie on January 27, 2020 8:23 PST
- * Modify by Ochoa Castellanos, Stephanie on January 27, 2020 8:25 PST
- * Modify by Ochoa Castellanos, Stephanie on January 27, 2020 9:46 PST
- * Modify by Ochoa Castellanos, Stephanie on January 27, 2020 9:47 PST
- * Modify by Ochoa Castellanos, Stephanie on January 27, 2020 9:50 PST

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 4 of 4

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

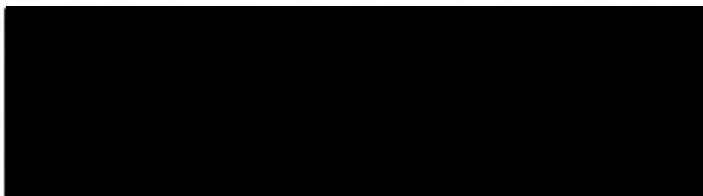
Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863

* Auth (Verified) *

ED Patient Summary
* Final Report *

HUNT, JOE - [REDACTED]



* Final Report *

ED Patient Summary (Verified)

**San Joaquin General Hospital
Emergency Department**

500 W Hospital Rd, French Camp, CA
(209) 468-6000

Patient Information

Name: HUNT, JOE Age: 60 Years Date of Birth: 10/26/1959

[REDACTED]

[REDACTED]

Arrival Time: 1/27/2020 07:26:54

Comment:

Provider Information:

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:51 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 1

[REDACTED]

HUNT, JOE - [REDACTED]

* Final Report *

Result type: CT Abdomen/Pelvis w/o Contrast
Result Date: January 27, 2020 8:22 PST
Result Status: Auth (Verified)
Result Title/Subject: [REDACTED]
Performed By/Author: Sandhu, Barjinder S MD on January 27, 2020 8:22 PST
Verified By: Sandhu, Barjinder S MD on January 27, 2020 8:22 PST
Encounter info: 30406467, San Joaquin Hosp, Emergency, 1/27/2020 - 1/27/2020

* Final Report *

Reason For Exam

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 2

[REDACTED]
* Final Report *

HUNT, JOE - [REDACTED]

[REDACTED]
Dictating Radiologist: Barjinder S Sandhu, MD
Dictation Date: 1/27/2020 8:15 AM

Electronically Signed By, Barjinder S Sandhu, MD
Date: 1/27/2020 8:19 AM

Thank you for this referral.

CT ABD/PELVIS W/O CONTRAST
This document has an image

Completed Action List:

- * VERIFY by Sandhu, Barjinder S MD on January 27, 2020 8:22 PST
- * Order by Koo, Ralph A MD on January 27, 2020 8:22 PST
- * Review by Koo, Ralph A MD on January 27, 2020 8:33 PST

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:52 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 2

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

[REDACTED]

* Auth (Verified) *

ED Patient Summary
* Final Report *

HUNT, JOE - [REDACTED]

[REDACTED]

Follow-up Instructions:

With:	Address:	When:
-------	----------	-------

Follow up with primary care
provider

With:	Address:	When:
-------	----------	-------

Physician CHCF

Patient Education Materials:

[REDACTED]

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:51 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 2 of 6

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

[Redacted]

* Auth (Verified) *

ED Patient Summary
* Final Report *

HUNT, JOE - [Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Comment:

Printed by: Montecino, Mary C
Printed on: 1/27/2020 11:51 PST

HUNT, JOE D61863
10/26/59 A304-214

Page 1 of 1



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

Outpatient Progress Note

[REDACTED]
1/14/2020 12:30 PST
Auth (Verified)
Saipher, Marshall NP (1/14/2020 12:47 PST)
Saipher, Marshall NP (1/14/2020 16:11 PST)
Saipher, Marshall NP (1/14/2020 16:11 PST); Saipher, Marshall
NP (1/14/2020 16:11 PST)

Objective

Report Request ID: 27398317

Print Date/Time: 3/9/2020 11:33 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged
information intended for the recipient only.

CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Report Request ID: 27398317

Print Date/Time: 3/9/2020 11:33 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-Nurse
Document Subject:	
Service Date/Time:	1/12/2020 09:37 PST
Result Status:	Auth (Verified)
Perform Information:	Ngan, Maria RN (1/12/2020 09:39 PST)
Sign Information:	Ngan, Maria RN (1/12/2020 09:55 PST)
Authentication Information:	Ngan, Maria RN (1/12/2020 09:55 PST); Ngan, Maria RN (1/12/2020 09:55 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Electronically Signed on 01/12/2020 09:55 AM PST

Ngan, Maria RN, RN

Modified by: Ngan, Maria RN, RN on 01/12/2020 09:55 AM PST

Report Request ID: 27398318

Print Date/Time: 3/9/2020 11:33 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

Outpatient Progress Note

[REDACTED]
1/6/2020 13:36 PST
Auth (Verified)
Saipher, Marshall NP (1/6/2020 13:42 PST)
Saipher, Marshall NP (1/6/2020 13:42 PST)
Saipher, Marshall NP (1/6/2020 13:42 PST)

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	12/28/2019 15:00 PST
Result Status:	Auth (Verified)
Perform Information:	Neumann, Paula LVN (12/28/2019 15:21 PST)
Sign Information:	Neumann, Paula LVN (12/28/2019 15:21 PST)
Authentication Information:	Neumann, Paula LVN (12/28/2019 15:21 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED] Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	12/28/2019 13:08 PST
Result Status:	Auth (Verified)
Perform Information:	Leasure, Chelsea LVN (12/28/2019 13:09 PST)
Sign Information:	Leasure, Chelsea LVN (12/28/2019 13:09 PST)
Authentication Information:	Leasure, Chelsea LVN (12/28/2019 13:09 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

Outpatient Progress Note
[REDACTED]
12/9/2019 10:52 PST
Auth (Verified)
Saipher, Marshall NP (12/9/2019 10:53 PST)
Saipher, Marshall NP (12/9/2019 17:15 PST)
Saipher, Marshall NP (12/9/2019 17:15 PST); Saipher, Marshall
NP (12/9/2019 17:15 PST); Saipher, Marshall NP (12/9/2019
17:10 PST); Saipher, Marshall NP (12/9/2019 11:05 PST);
Saipher, Marshall NP (12/9/2019 11:03 PST)

Review of Systems

As above.

Objective

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter
Type: Institutional Encounter

Report Request ID: 27398322

Print Date/Time: 3/9/2020 11:33 PDT

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CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	11/19/2019 18:33 PST
Result Status:	Auth (Verified)
Perform Information:	Singh, Rajeni LVN (11/19/2019 18:45 PST)
Sign Information:	Singh, Rajeni LVN (11/19/2019 18:45 PST)
Authentication Information:	Singh, Rajeni LVN (11/19/2019 18:45 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

[REDACTED]



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	LVN Follow Up
Service Date/Time:	11/18/2019 18:00 PST
Result Status:	Auth (Verified)
Perform Information:	Kamson, Oluwadamilola LVN (11/18/2019 20:28 PST)
Sign Information:	Kamson, Oluwadamilola LVN (11/18/2019 20:28 PST)
Authentication Information:	Kamson, Oluwadamilola LVN (11/18/2019 20:28 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

[REDACTED]

[REDACTED]

[REDACTED]



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	11/18/2019 09:35 PST
Result Status:	Auth (Verified)
Perform Information:	Kunwar, Subash LVN (11/18/2019 09:39 PST)
Sign Information:	Kunwar, Subash LVN (11/18/2019 09:39 PST)
Authentication Information:	Kunwar, Subash LVN (11/18/2019 09:39 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED] Facility: CHCF, Encounter Type: Institutional Encounter

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *

STATE OF CALIFORNIA
REFUSAL OF EXAMINATION AND/OR TREATMENT
CDCR 7225 (Rev. 03/19)

DEPARTMENT OF CORRECTIONS AND REHABILITATION

PAGE 1 OF 1

PATIENT NAME (TYPE OR PRINT CLEARLY)	CDCR NUMBER	INSTITUTION
Hunt, Joe	D61863	CHCF

Having been fully informed of the risks and possible consequences involved in refusal of the examination and/or treatment in the manner and time prescribed for me, I nevertheless refuse to accept such examination and/or treatment. I agree to hold the Department of Corrections and Rehabilitation, the staff of the medical department and the institution free of any responsibility for injury or complications that may result from my refusal of this examination and/or treatment, specifically:

Describe the examination and/or treatment refused as well as the risks and benefit of the intervention:

PATIENT SIGNATURE <i>Joe Hunt</i>	DATE 11/18/19	<input type="checkbox"/> PATIENT REFUSES TO SIGN	DATE
WITNESS			
NAME OF WITNESS (PRINT/TYPE) S. Kunkin LYN		NAME OF WITNESS (PRINT/TYPE)	
WITNESS SIGNATURE <i>S. Kunkin</i>	DATE 11/18/19	WITNESS SIGNATURE	DATE

1. Disability Code: <input type="checkbox"/> TABE score ≤ 4.0 <input type="checkbox"/> DPH <input type="checkbox"/> DPV <input type="checkbox"/> LD <input type="checkbox"/> DPS <input type="checkbox"/> DNH <input type="checkbox"/> DDP <input type="checkbox"/> Not Applicable	2. Accommodation: <input type="checkbox"/> Additional time <input type="checkbox"/> Equipment <input type="checkbox"/> SLI <input type="checkbox"/> Louder <input type="checkbox"/> Slower <input checked="" type="checkbox"/> Basic <input type="checkbox"/> Transcribe <input type="checkbox"/> Other*	3. Effective Communication: <input checked="" type="checkbox"/> Patient asked questions <input checked="" type="checkbox"/> Patient summed information Please check one: <input type="checkbox"/> Not reached* <input type="checkbox"/> Reached *See chrono/notes	CDCR #: D61863 Last Name: Hunt First Name: Joe DOB: 10/26/1959 MI:
4. Comments:			

Unauthorized collection, creation, use, disclosure, modification or destruction of personally identifiable information and/or protected health information may subject individuals to civil liability under applicable federal and state law.



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	11/17/2019 20:15 PST
Result Status:	Auth (Verified)
Perform Information:	Neumann, Paula LVN (11/23/2019 05:55 PST)
Sign Information:	Neumann, Paula LVN (11/23/2019 05:55 PST)
Authentication Information:	Neumann, Paula LVN (11/23/2019 05:55 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	11/16/2019 20:00 PST
Result Status:	Auth (Verified)
Perform Information:	Neumann, Paula LVN (11/23/2019 05:54 PST)
Sign Information:	Neumann, Paula LVN (11/23/2019 05:54 PST)
Authentication Information:	Neumann, Paula LVN (11/23/2019 05:54 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	LVN Follow up
Service Date/Time:	11/15/2019 18:39 PST
Result Status:	Auth (Verified)
Perform Information:	Kamson, Oluwadamilola LVN (11/15/2019 18:40 PST)
Sign Information:	Kamson, Oluwadamilola LVN (11/15/2019 18:40 PST)
Authentication Information:	Kamson, Oluwadamilola LVN (11/15/2019 18:40 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	LVN Follow Up
Service Date/Time:	11/14/2019 15:59 PST
Result Status:	Auth (Verified)
Perform Information:	Kamson, Oluwadamilola LVN (11/14/2019 15:59 PST)
Sign Information:	Kamson, Oluwadamilola LVN (11/14/2019 15:59 PST)
Authentication Information:	Kamson, Oluwadamilola LVN (11/14/2019 15:59 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED] Facility: CHCF, Encounter Type: Institutional Encounter

[REDACTED]

[REDACTED]

[REDACTED]



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	LVN Follow Up
Service Date/Time:	11/13/2019 18:33 PST
Result Status:	Auth (Verified)
Perform Information:	Kamson,Oluwadamilola LVN (11/13/2019 18:36 PST)
Sign Information:	Kamson,Oluwadamilola LVN (11/13/2019 18:36 PST)
Authentication Information:	Kamson,Oluwadamilola LVN (11/13/2019 18:36 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note-LVN
Document Subject:	[REDACTED]
Service Date/Time:	11/12/2019 17:05 PST
Result Status:	Auth (Verified)
Perform Information:	Singh, Rajeni LVN (11/12/2019 17:13 PST)
Sign Information:	Singh, Rajeni LVN (11/12/2019 17:13 PST)
Authentication Information:	Singh, Rajeni LVN (11/12/2019 17:13 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

[REDACTED]



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Progress Note - RN
Document Subject:	[REDACTED]
Service Date/Time:	11/12/2019 10:12 PST
Result Status:	Auth (Verified)
Perform Information:	Montalbano, Bernadette RN (11/12/2019 10:19 PST)
Sign Information:	Montalbano, Bernadette RN (11/12/2019 10:19 PST)
Authentication Information:	Montalbano, Bernadette RN (11/12/2019 10:19 PST); Montalbano, Bernadette RN (11/12/2019 10:19 PST)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton
7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	10/29/2019 09:20 PDT
Result Status:	Modified
Perform Information:	Saipher, Marshall NP (10/29/2019 18:08 PDT); Saipher, Marshall NP (10/29/2019 18:07 PDT)
Sign Information:	Saipher, Marshall NP (10/29/2019 18:08 PDT); Saipher, Marshall NP (10/29/2019 18:07 PDT)
Authentication Information:	Saipher, Marshall NP (10/29/2019 18:08 PDT); Saipher, Marshall NP (10/29/2019 18:07 PDT)

Addendum by Saipher, Marshall NP on October 29, 2019 18:07:36 PDT
corrected encounter time

[REDACTED]

[REDACTED]

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	10/24/2019 13:10 PDT
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (10/24/2019 13:11 PDT)
Sign Information:	Saipher, Marshall NP (10/24/2019 13:11 PDT)
Authentication Information:	Saipher, Marshall NP (10/24/2019 13:11 PDT)

[REDACTED]

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Assessment Forms

[REDACTED]
Performed On: 10/22/2019 18:44 PDT by Kamson, Oluwadamilola LVN

Patient Encounter Information

[REDACTED]

Kamson, Oluwadamilola LVN - 10/22/2019 18:44 PDT

[REDACTED]

Kamson, Oluwadamilola LVN - 10/22/2019 18:44 PDT

Report Request ID: 27398336

Print Date/Time: 3/9/2020 11:33 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged
information intended for the recipient only.

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *

Consultation/Specialist Note
* Preliminary Report *

Outpatient Medical

D61863
HUNT, JOE -

OCT 18 2019

Clinic

4/18/20

A304

Result type: Consultation/Specialist Note
Result Date: October 18, 2019 0:00 PDT
Result Status: Unauth
Result Title/Subject: Consultation
Performed By/Author: Dharawat, Ramesh N MD on October 18, 2019 12:32 PDT
Encounter info: 30343920, San Joaquin Hosp, Clinic Outpatient, 10/18/2019 -
Contributor system: SJGH_CA_MMODAL

*** Preliminary Report ***

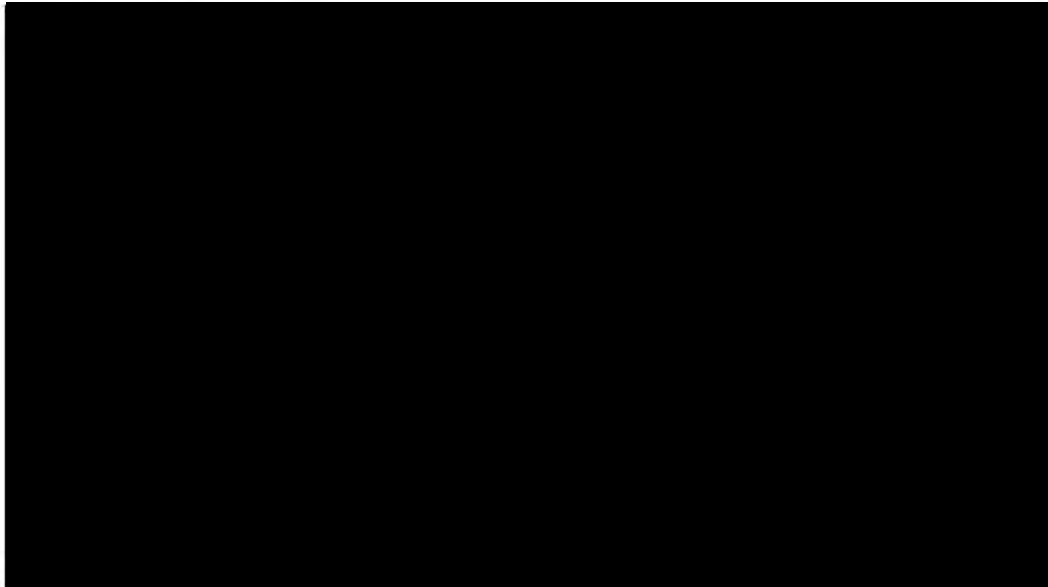
Consultation

DATE OF CONSULTATION: 10/18/2019

CONSULTING PHYSICIAN: Ramesh N Dharawat, MD

REFERRING PHYSICIAN: Physician CHCF

REASON FOR CONSULT:



Printed by: MedicalRecords IM
Printed on: 10/18/2019 13:46 PDT

Page 1 of 2

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *

Consultation/Specialist Note
* Preliminary Report *

Outpatient Medical

D6863

OCT 18 2019

HUNT, JOE -

Clinic

IMPRESSION:

Ramesh N Dharawat, MD

D: 10/18/2019 12:32
T: 10/18/2019 01:15

Completed Action List:

- * Perform by Dharawat, Ramesh N MD on October 18, 2019 12:32 PDT
- * Transcribe by on October 18, 2019 13:15 PDT

Printed by: MedicalRecords IM
Printed on: 10/18/2019 13:46 PDT

Page 2 of 2



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	10/10/2019 09:58 PDT
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (10/10/2019 10:08 PDT)
Sign Information:	Saipher, Marshall NP (10/17/2019 07:50 PDT)
Authentication Information:	Saipher, Marshall NP (10/17/2019 07:50 PDT); Saipher, Marshall NP (10/17/2019 07:50 PDT); Saipher, Marshall NP (10/10/2019 10:31 PDT)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED] Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

Progress Note-LVN
[REDACTED]
10/4/2019 07:53 PDT
Auth (Verified)
Blanson, Elizabeth LVN (10/4/2019 07:53 PDT)
Blanson, Elizabeth LVN (10/4/2019 07:53 PDT)
Blanson, Elizabeth LVN (10/4/2019 07:53 PDT)

[REDACTED]



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:
Document Subject:
Service Date/Time:
Result Status:
Perform Information:
Sign Information:
Authentication Information:

Outpatient Progress Note

[REDACTED]
10/3/2019 10:59 PDT
Auth (Verified)
Saipher, Marshall NP (10/3/2019 11:01 PDT)
Saipher, Marshall NP (10/3/2019 11:15 PDT)
Saipher, Marshall NP (10/3/2019 11:15 PDT); Saipher, Marshall
NP (10/3/2019 11:15 PDT); Saipher, Marshall NP (10/3/2019
11:05 PDT); Saipher, Marshall NP (10/3/2019 11:03 PDT);
Saipher, Marshall NP (10/3/2019 11:02 PDT)

Chief Complaint

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Report Request ID: 27398340

Print Date/Time: 3/9/2020 11:33 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged
information intended for the recipient only.

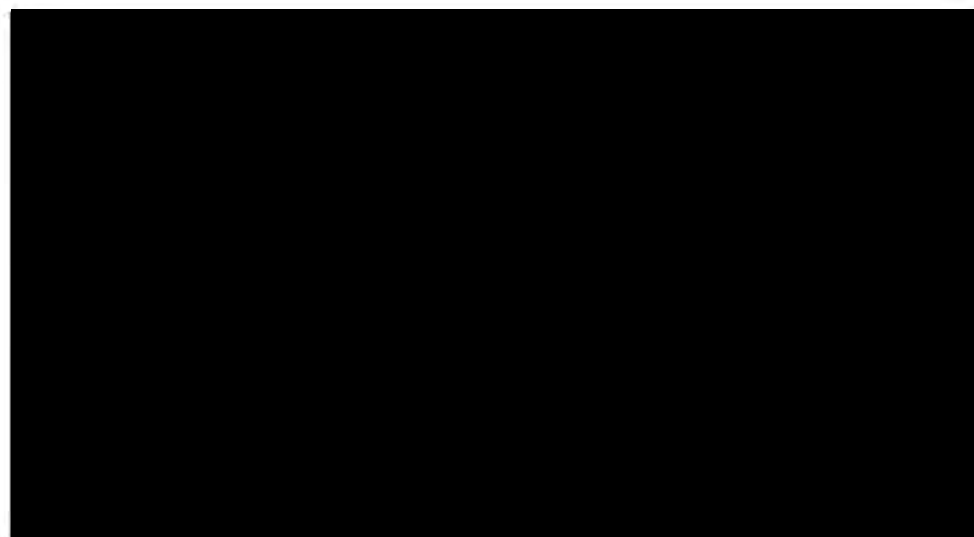
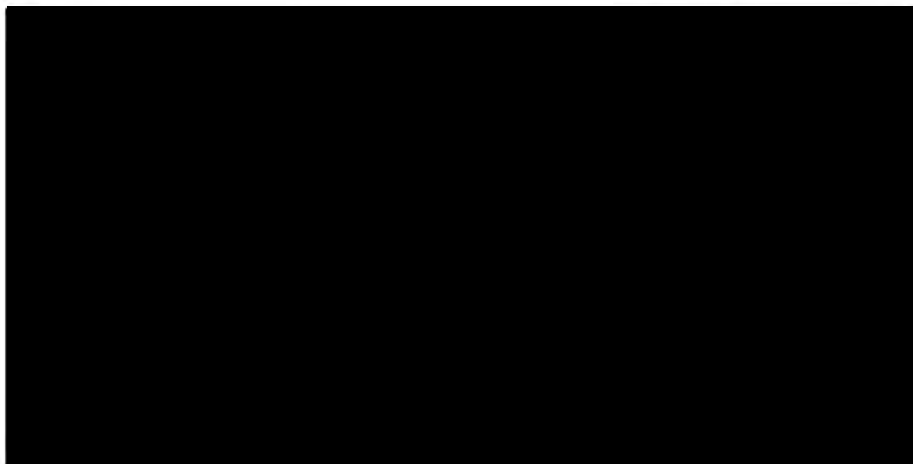
CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes



Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Report Request ID: 27398340


Print Date/Time: 3/9/2020 11:33 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *

Oct. 18. 2019 8:19AM WEST COAST SKIN & CANCER CENTER


RAO DERMATOLOGY

West Coast Skin and Cancer Medical Center
7055 North Fresno St. Suite 310
Fresno, CA 93720
T (559) 446-0285
F (559) 446-1646
www.raodermatology.com
CLIA# 05D1009831

REPORT

Name:	Joe Hunt	Gender:	Male	Accession:	
MRN/ID:	123547	Age:	59 Years	Service:	10-02-2019
DOB:	10-26-1959			Received:	08-25-2016
				Reported:	10-08-2019
Physician:	Naureen Tareen, MD				
Phone:		Fax:			



Electronically signed by:
Babar K Rao, MD


10/18/19 - There is no further tx required for this area.

Joe Hunt 10-02-2019

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *

 **RAO DERMATOLOGY**

Patient: Joe Hunt
DOB: 10-26-1959

ID: 123547
DOS: 10-02-2019

**609 N. Dooty St.
Hanford, CA 93230
T (559) 582-2422
F (559) 582-2444
www.raodermatology.com**

59 year(s) years old Male patient, Joe Hunt was seen on 10-02-2019 as a followup patient

History of Present Illness
Provided Medical Records Reviewed.

Medical Hx

Surgical Hx

Family Hx

Social Hx

Allergies

Review Of System

Skin

General

10-2-2019

HIPAA Privacy Policy: Information contained within this document is confidential and private which can not be distributed without prior consent from patient.
User: naureen (35031) Patient id: 123547

1/4



[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

_____ & Plan

2/4

*** Auth (Verified) ***



609 N. Douty St.
Hanford, CA 93230
T (559) 582-2422
F (559) 582-2444
www.raodermatology.com

[illegible]

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]

[illegible]

609 N. Douty St.

www.raodermatology.com

Signed by: NAUREEN TAREEN, MD on 10-02-2019

4/4



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	9/26/2019 11:49 PDT
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (9/26/2019 12:00 PDT)
Sign Information:	Saipher, Marshall NP (9/26/2019 12:00 PDT)
Authentication Information:	Saipher, Marshall NP (9/26/2019 12:00 PDT)

Objective

Report Request ID: 27398343

Print Date/Time: 3/9/2020 11:33 PDT

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CHCF - California Health Care Facility - Stockton

Patient: **HUNT, JOE**

DOB/Age/Sex: 10/26/1959 / 60 years / Male

CDCR: D61863

Progress Notes

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863 [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Report Request ID: 27398343

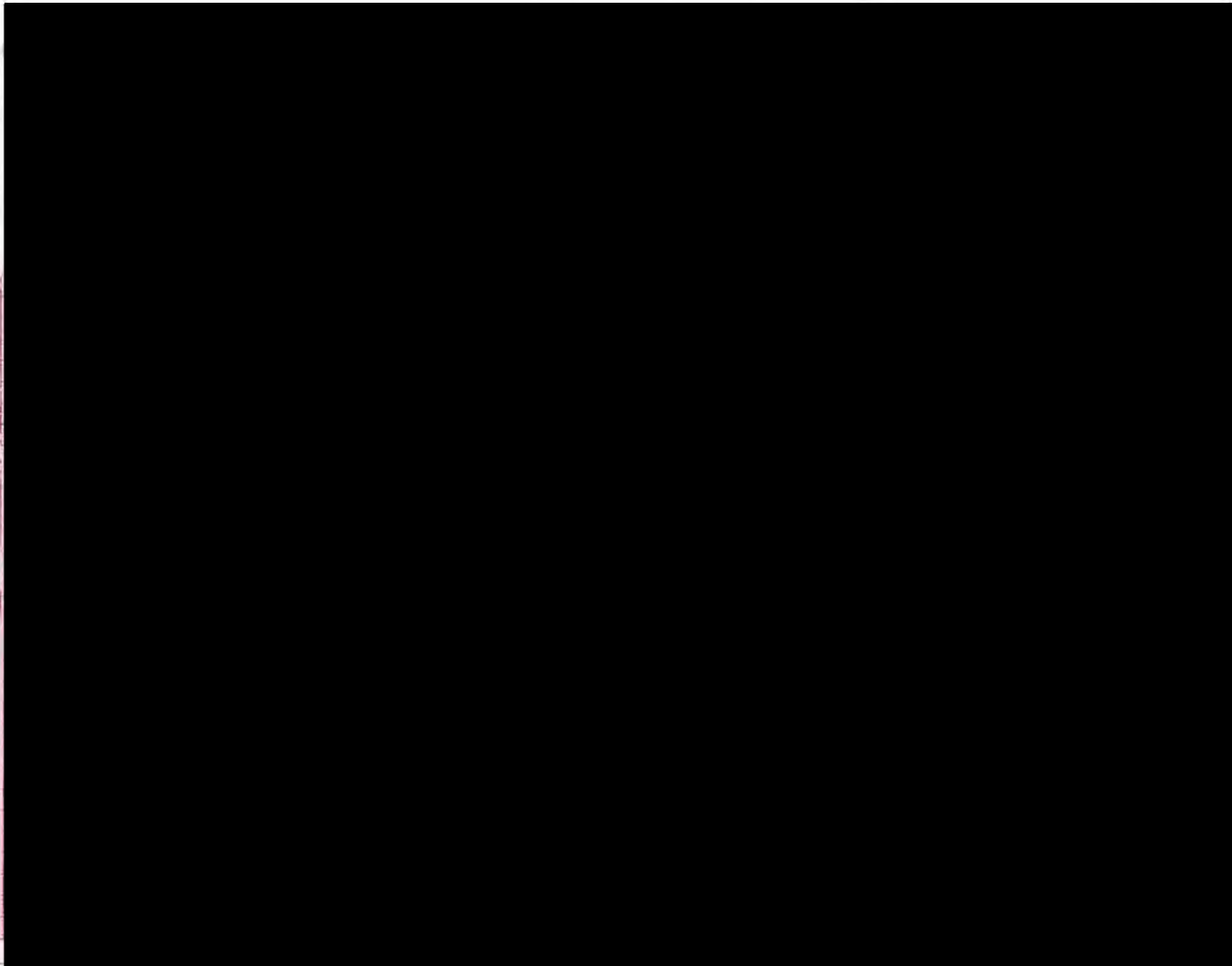
Print Date/Time: 3/9/2020 11:33 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

[REDACTED]

* Auth (Verified) *





CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

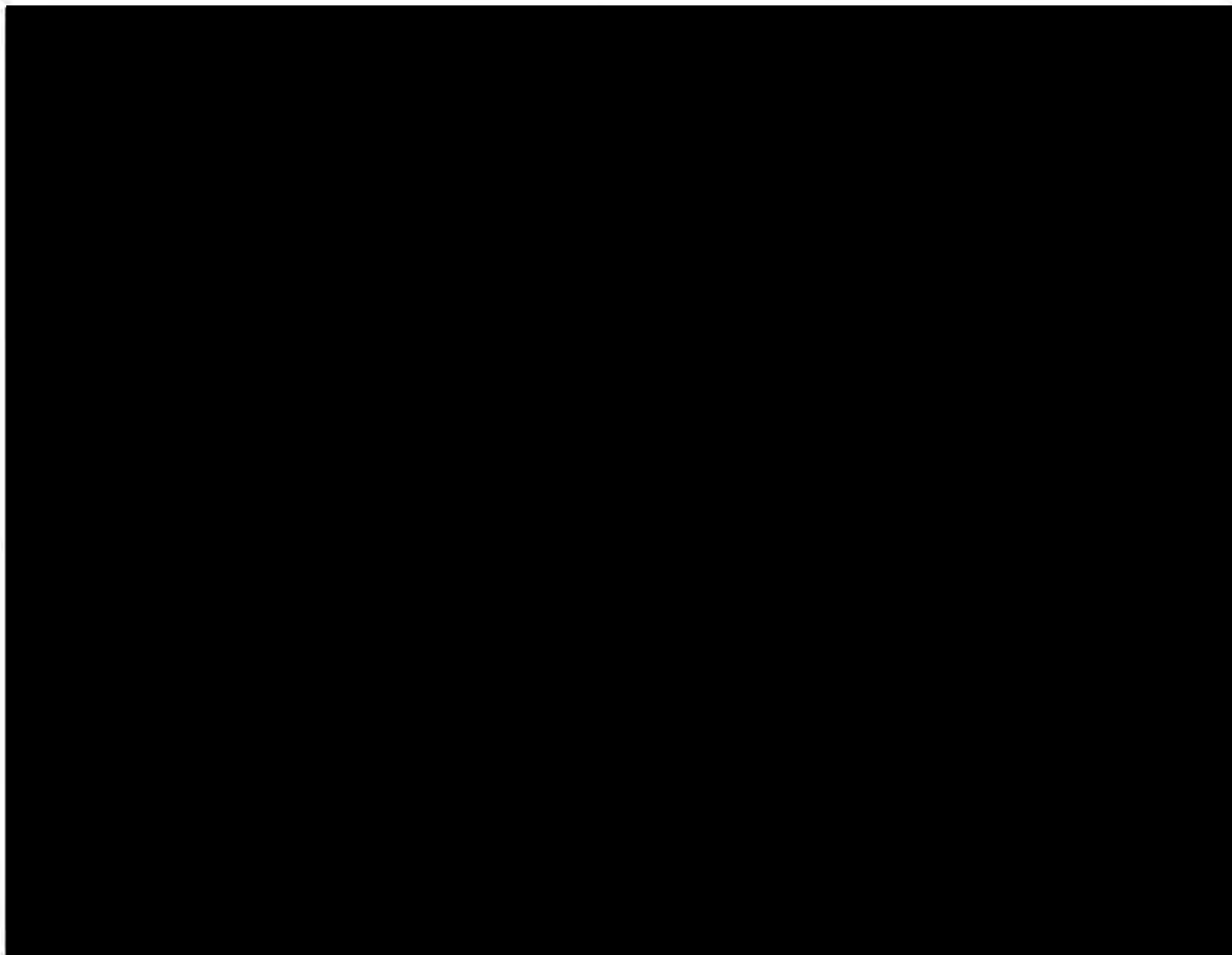
Document Type:	Progress Note-LVN
Document Subject:	LVN Follow Up
Service Date/Time:	9/17/2019 16:24 PDT
Result Status:	Auth (Verified)
Perform Information:	Kamson, Oluwadamilola LVN (9/17/2019 16:25 PDT)
Sign Information:	Kamson, Oluwadamilola LVN (9/17/2019 16:25 PDT)
Authentication Information:	Kamson, Oluwadamilola LVN (9/17/2019 16:25 PDT)

[REDACTED]

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

[REDACTED]

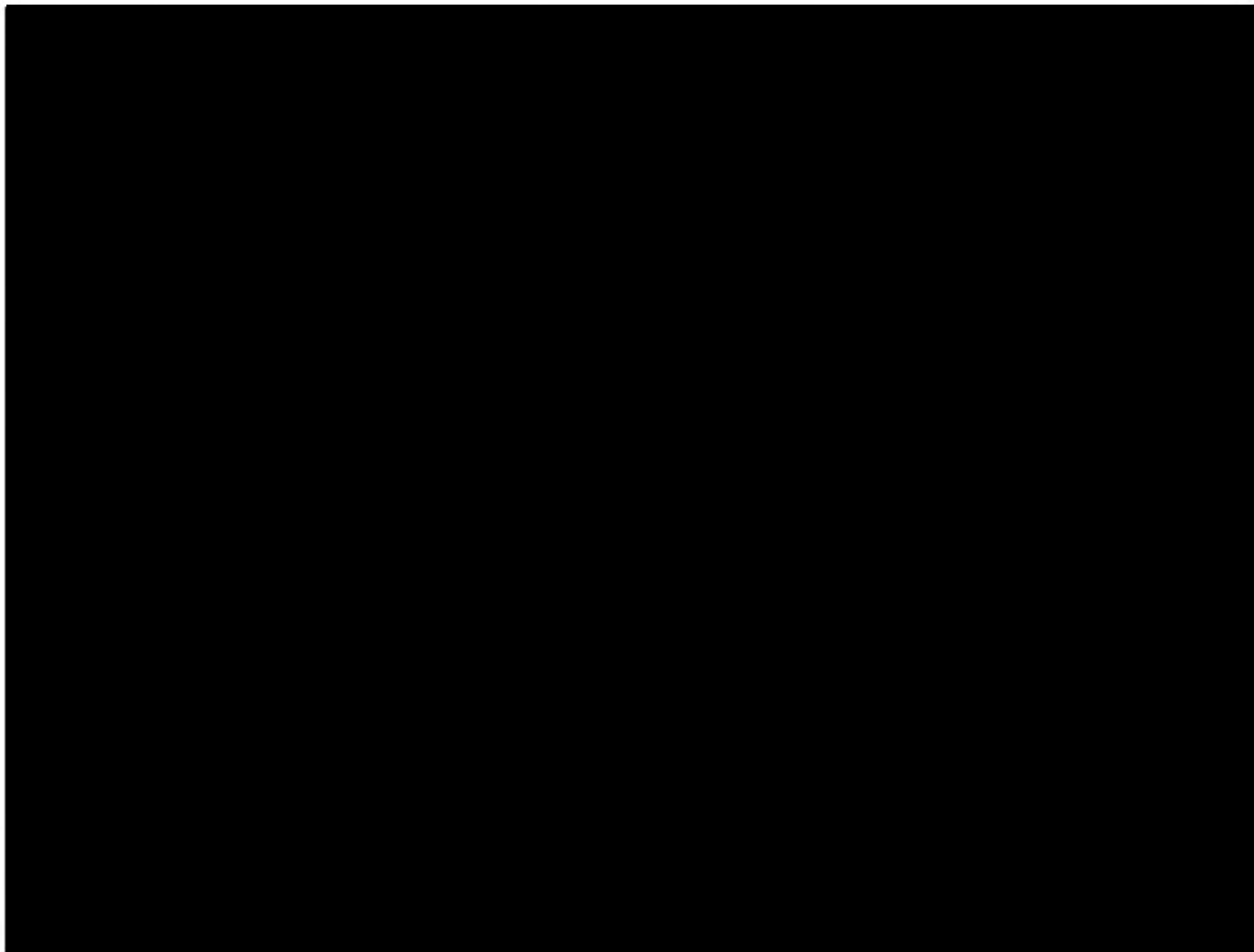
* Auth (Verified) *



Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

[REDACTED]

* Auth (Verified) *





CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	[REDACTED]
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (9/12/2019 13:52 PDT)
Sign Information:	Saipher, Marshall NP (9/12/2019 13:58 PDT)
Authentication Information:	Saipher, Marshall NP (9/12/2019 13:58 PDT); Saipher, Marshall NP (9/12/2019 13:58 PDT)

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 60 years Male
Encounter Date: 12/7/2017
Attending: Saipher, Marshall NP

CDCR #: D61863
PID #: [REDACTED]
Referring:

Progress Notes

Document Type:	Outpatient Progress Note
Document Subject:	[REDACTED]
Service Date/Time:	9/9/2019 14:39 PDT
Result Status:	Auth (Verified)
Perform Information:	Saipher, Marshall NP (9/9/2019 14:40 PDT)
Sign Information:	Saipher, Marshall NP (9/9/2019 14:40 PDT)
Authentication Information:	Saipher, Marshall NP (9/9/2019 14:40 PDT)

[REDACTED]

Encounter Info: Patient Name: JOE HUNT, DOB: 10/26/1959, CDCR: D61863, [REDACTED], Facility: CHCF, Encounter Type: Institutional Encounter

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

CHCF - California Health Care Facility - Stockton

7707 Austin Rd
P.O. Box 32050
Stockton, CA 95215-

Patient: HUNT, JOE
DOB/Age/Sex: 10/26/1959 59 years Male
Patient Race: White
Encounter Date: 12/7/2017
Attending: Akintola, Omoniyi PA

Language: English
CDCR #: D61863
PID #: [REDACTED]
Referring: [REDACTED]

AM-111

Request for Service

Request for Services (RFS) Entered On: 8/22/2019 14:41 PDT
Performed On: 8/22/2019 14:39 PDT by Caasi, Daniel RN

RECEIVED

AUG 27 2019

OFFSITE

Caasi, Daniel RN - 8/22/2019 14:39 PDT

Caasi, Daniel RN - 8/26/2019 17:28 PDT

Caasi, Daniel RN at 8/22/2019 14:39 PDT

Caasi, Daniel RN - 8/22/2019 14:39 PDT

Singh, Rachandeep CP&S - 8/23/2019 9:45 PDT

Problem List

Problem List Reviewed : Yes

Problem : [REDACTED]

Health examination of prisoner

Caasi, Daniel RN - 8/22/2019 14:39 PDT

Legend: c=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Result Comment, i=Interp Data, *=Performing Lab

Report Request ID: 21366581

Print Date/Time: 8/26/2019 17:29 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.

Rao

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *

CHCF - California Health Care Facility - Stockton

Patient: HUNT, JOE

DOB/Age/Sex: 10/26/1959 / 59 years / Male

CDCR: D61863

AK-111

Request for Service

Singh, Rachandeep CP&S - 8/23/2019 9:45 PDT

Offsite/Consultant Note

Include Note for Offsite/Consultation Provider : Yes

Thank you for providing care to our patient. : In the interest of patient continuity, could you please provide preliminary instructions for future care while your final consultation/report is being generated?

Any Medication Changes : X

X

xx

Requested Diagnostic Imaging and/or Lab Testing :

X

X

xx

Other Specialty Services Requested/Required :

X

X

xx

Date of Service : X

Sept 09/06/19 8/1300

Consultant Printed Name : X

RAKHEEN TAREEN, MD

Consultant Signature : X

RAKHEEN TAREEN, MD

Singh, Rachandeep CP&S - 8/23/2019 9:45 PDT

Legend: c=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Result Comment, i=Interp Data, *=Performing Lab

Report Request ID: 21366581

Print Date/Time: 8/26/2019 17:29 PDT

WARNING: This report contains confidential, proprietary, and/or legally privileged information intended for the recipient only.



DOB: 10-26-1959

DLR 63 AY-214
889 N. Doudy St.

869 N. Doudy St.

Hanford, CA 93230

T (559) 582-2422

F (559) 582-2444

www.raodermatology.com

ID: 123547

DOS: 09-06-2019

History of Present Illness

[REDACTED]

(b) (7)(C), (b) (7)(D)

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

11/11/2014

*** Auth (Verified) ***

 RAD DERMATOLOGY	061806 AY-214	609 N. Douty St. Hanford, CA 93230 T (559) 582-2422 F (559) 582-2444 www.raodermatology.com
<div style="background-color: black; height: 30px; width: 100%;"></div>		
<div style="background-color: black; height: 20px; width: 100%;"></div>		
Examination		
<div style="background-color: black; height: 70px; width: 100%;"></div>		
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Assessment & Plan		

Facility: CHCF

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

MRN: D61863
FIN: 10282275111480004D61863

* Auth (Verified) *



D61863 A4114

609 N. Douty St.
Hanford, CA 93230
T (559) 582-2422
F (559) 582-2444

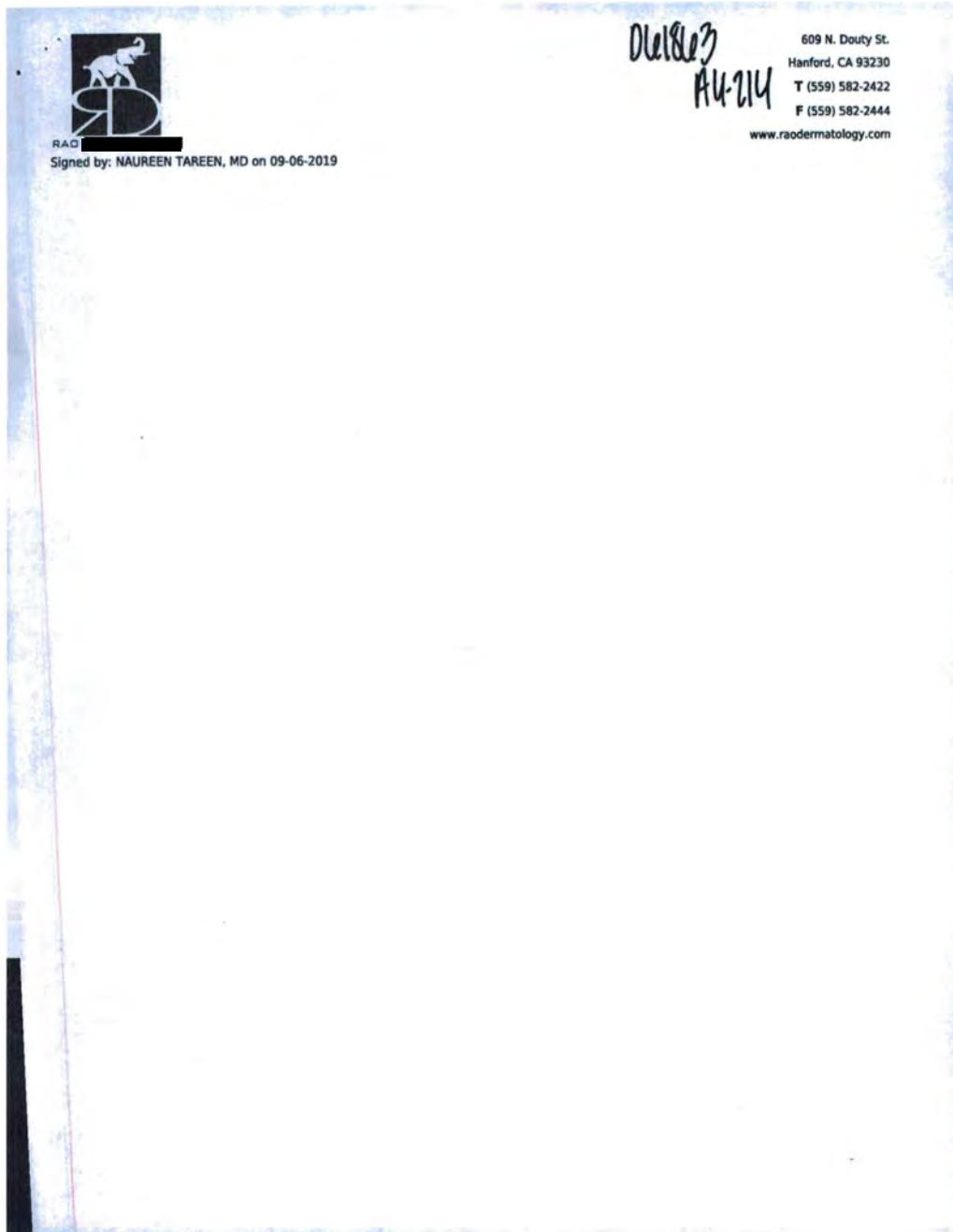


Follow up: after 4 Weeks for Biopsy with NAUREEN TAREEN, MD

N. Tareen

Patient Name: HUNT, JOE
Date of Birth: 10/26/1959

* Auth (Verified) *



DECLARATION OF JOE HUNT

I, Joseph Hunt, Declare as follows:

1. I was the defendant in People v. Joe Hunt, Case A090435, Los Angeles County.

2. I mailed a habeas petition under Penal Code section 1473(b) to the L.A. Superior Court on January 5, 2017. The Court misplaced the petition, but litigation commenced in 2017 with the Court requesting informal briefing.

3. The petition was denied on October 5, 2018.

4. It was my intention to refile the habeas petition with the Court of Appeal. However, I found myself struggling physically. I did not at the time understand why. I felt exhausted. Going up a staircase or walking for a couple minutes was proving challenging. If I attempted to sit up straight for a minute, I would feel tired and want to lay down. I asked for help and was diagnosed with heart maladies. The primary care doctor ordered additional tests but they were not performed.

5. At the same time, I found that my mental powers had diminished. I found it difficult to respond to letters, tedious to read books, and disconcerting to think at length about anything. Even the idea of doing research or pushing through the prison-related procedural steps to get a large set of documents copied seemed repellant.

6. Emotionally, I felt utterly overwhelmed. The thought of doing any sustained work seemed a bridge too far -- as the expression goes. I became apathetic. My communication with my family and my wife became infrequent. Sleeping, watching T.V., and sitting on a bench on the yard seemed all that I was capable of coping with.

7. Under the burden of these physical, mental, and emotional constraints, I was not proactive about anything -- including obtaining medical help. I made a few feeble attempts to obtain medical care but filed no grievances or habeas petitions challenging their indifference to my plight. My primary care doctor, as I mentioned, ordered additional tests, but someone higher up in the prison medical system overruled him.

8. In February of 2020, I was taken by ambulance to the San Joaquin Hospital as a Code 1 emergency. [REDACTED] for at least several days, possibly longer. Its condition allowed me no rest, no sleep. When this came to the attention of the Doctor, they rushed me to the hospital. There, they checked my [REDACTED]

Declaration of Joe Hunt

Page Two

and determined that it was [REDACTED]. I was told that the

[REDACTED]
The Doctors at the Hospital found my condition so alarming that they administered [REDACTED]
[REDACTED]

9. After a week in the hospital, my [REDACTED]
[REDACTED]

10. I have a long record in the California Court System for meeting every deadline set by procedural law and precedent. That record dates all the way back to 1988. I filed a federal habeas petition in June of 1998 and prosecuted it in propria personam for nearly 10 years. I then turned it over to an attorney. The case concluded in 2017. Between 1996 and 2004, I filed several habeas petitions in the Superior Court. In every instance, I asked the Court of Appeal and the Supreme Court to review the decisions of the lower courts either by filing habeas petitions or petitions for review in those venues. I never once failed to seek review of a petition denied in Superior Court.

11. While in prison, I filed habeas petitions that resulted in 16 convictions being over turned. Up until 2017, I kept abreast of every case bearing on California procedural law that was published. I am highly conversant with the procedural rules governing post-conviction remedies both in California and in the Federal Court System.

12. Even now, I am not recovered. I do not have a tenth of the energy and drive, mentally or emotionally, that I once had. Under the circumstances, my family and I decided that we should refer all extant litigational opportunities to Tracy Lum, Attorney.

13. After I returned from the Hospital, I went through a period of slow recovery. Although my last [REDACTED] was in April of 2020 (my primary care doctor has ordered several times that I be given regular [REDACTED] but my appoint^{ments} keep getting canceled without explanation),

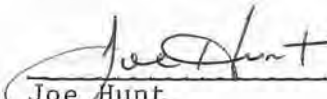
Declaration of Joe Hunt
Page Three

I feel like I have been getting stronger in the last couple months. I am able to walk for 30 minutes at a time, and I have even felt good enough to play handball on occasion. It was during this resurgence in strength that it came to me that I should attempt to avail myself of any remaining remedies on the two habeas petitions that I had filed back in 2017.

14. I am well aware that a substantial interval has elapsed after the denials in Superior Court. However, as I recall, claims of actual innocence are considered exempt from most of the procedural rules and the equal protection claim of the second petition presents purely a legal question, one upon which the real party in interest will suffer no prejudice as a result of the passage of time. Further, I am informed that the Court of Appeal has only recently made rulings on the underlying question of law, and that the matter is now ripe for review in the California Supreme Court. Moreover, I am quite certain that I was the first California prisoner to seek relief on the aspect of the youthful offender law that excludes life-without prisoners by alledging a violation of the Equal Protection Clause of the 14th Amendment. At least part of the Superior Court's ruling has been overturned by these subsequent decisions of the Court of Appeal.

I declare under penalty of perjury that the facts alledged herein on personal knowledge are true to the best of my recollection, knowledge, information and belief.

Executed under California Law on March 20, 2021.



Joe Hunt