

PUBLIC, JOE V JOES TRUCKING
CATEGORY 3 - FULL SUMMARY

<u>Date / Page</u>	<u>Doctor / Facility</u>	<u>Comment</u>
2/19/1988 5	J Creek MD - Seguin, TX (Update #2)	OFFICE NOTE: J Creek MD TELEPHONE CONTACT: Patient tested positive for hepatitis A. Notified family of their need for Gamma-globulin injections (immune booster) .
2/23/1988 6	J Creek MD - Seguin, TX	OFFICE NOTE: J Creek MD PHYSICIAN: James Creek, MD. HISTORY: Feeling better, less fatigued, nausea decreased. EXAM: Abdomen soft, mild tenderness over left upper abdomen, bowel sounds active. ASSESSMENT: Acute hepatitis A. PLAN: Prescribed Fioricet (mild pain medication); return in 3 weeks for hepatitis profile and HIV test..
3/14/1988 7	J Creek MD - Seguin, TX	OFFICE NOTE: J Creek MD PHYSICIAN: J. Creek, MD. HISTORY: Feels much better; no jaundice, no nausea. EXAM: Abdomen exam is normal. ASSESSMENT: Acute hepatitis A. PLAN: Follow up in 3 weeks.
6/12/1989 10 to 12	J Creek MD - Seguin, TX (Update #1)	EMERGENCY ROOM RECORDS: Local Hospital of Texas PHYSICIAN NOTES: Complains of headache onset at work last night; weakness. EXAM: Right side weakness, moderate to severe headache, oriented times 3. CT report shows subarachnoid hemorrhage (bleeding within the skull, causing pressure to be exerted on the brain); IMPRESSION: Subarachnoid hemorrhage. PLAN: Transfer to University Medical Branch via Life Flight Helicopter. Duplicated - Page 224 University Medical Branch - San Antonio, TX
6/12/1989 224	University Medical Branch - San Antonio, TX Vol II of II	EMERGENCY ROOM RECORDS: University Medical Branch PHYSICIAN NOTES: Onset last night at work with headache and weakness. He was transferred from an outside facility after an MRI showed a subarachnoid hemorrhage. History of hypertension and diabetes. EXAM: Alert and oriented, right side weakness, speech mildly slurred. IMPRESSION: Subarachnoid hemorrhage. PLAN: Admit to neurosurgery, neuro monitoring, blood pressure control, continue any home medications. Duplicated - Page 10 J Creek MD - Seguin, TX

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6/12/1989 2	University Medical Branch - San Antonio, TX Vol I of II	LAB RESULT: University Medical Branch URINALYSIS: Positive for ketones (by-products of protein breakdown, could be present from patient's vomiting).
6/13/1989 3	University Medical Branch - San Antonio, TX Vol I of II	CEREBRAL ANGIOGRAM: University Medical Branch RADIOLOGIST: James Block, MD. DIAGNOSIS: Small persistent irregularity of the left anterior cerebral artery; most likely represents a small aneurysm.
6/13/1989 14	University Medical Branch - San Antonio, TX Vol I of II	PROGRESS NOTE: University Medical Branch PHYSICIAN: Alfred Pitcher, MD. Much improved today; negative cerebral angiogram, will continue to monitor..
6/13/1989 15	University Medical Branch - San Antonio, TX Vol I of II	PROGRESS NOTE: University Medical Branch PHYSICIAN: Alfred Pitcher, MD. Cerebral arteriogram preformed, showed a possible aneurysm on the left.
6/13/1989 15	University Medical Branch - San Antonio, TX Vol I of II	PROGRESS NOTE: University Medical Branch PHYSICIAN: Alfred Pitcher, MD. Lumbar puncture was very bloody (definite indication of intracranial bleeding); headache is relieved.
6/15/1989 17	University Medical Branch - San Antonio, TX Vol I of II	PROGRESS NOTE: University Medical Branch PHYSICIAN: Alfred Pitcher, MD. Stable increased intracranial pressure; lumbar drain in place(used to relieve intracranial pressure by removing excess spinal fluid); repeat cerebral angiogram today.
6/15/1989 18	University Medical Branch - San Antonio, TX Vol I of II	PROGRESS NOTE: University Medical Branch PHYSICIAN: Alfred Pitcher, MD. Lumbar drain at L4-5; good fluid return.
6/16/1989 5	University Medical Branch - San Antonio, TX Vol I of II	X-RAY - CHEST: University Medical Branch RADIOLOGIST: Robin Velez, MD. IMPRESSION: Lungs are clear; left central venous line noted; no pneumothorax or pleural fluid noted.
6/16/1989 203 to 204	University Medical Branch - San Antonio, TX Vol II of II	OPERATIVE REPORT: University Medical Branch OPERATIVE REPORT: Calvin Perez, MD. PROCEDURE: Left craniotomy (incision into the skull) and exploration for aneurysm. PREOPERATIVE DIAGNOSIS: Left internal carotid aneurysm. POSTOPERATIVE DIAGNOSIS: Subarachnoid hemorrhage, <u>NO ANEURYSM FOUND.</u> Duplicated - Page 17 J Creek MD - Seguin, TX
6/17/1989 4	University Medical Branch - San Antonio, TX Vol I of II	CT SCAN OF HEAD: University Medical Branch (THREE CT SCANS DATED 6/17/89 AND 6/19/89): Post status craniotomy for subarachnoid hemorrhage; shows post operative craniotomy changes; diffuse cerebral edema (swelling); subarachnoid hemorrhage.

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		Two studies done 6/19/89 show marked progression of diffuse cerebral edema; placement of ventriculostomy (drain placed to assist in decreasing pressure); decreased attenuation (dilution of contrast material) of left middle cerebral artery may represent an involving infarction (stoppage of blood supply).
		Last study on 6/19/89 shows diffuse cerebral edema; ventricles smaller in size; infarct once again demonstrated.
6/17/1989 55	University Medical Branch - San Antonio, TX Vol I of II	X-RAY REPORT: University Medical Branch RADIOLOGIST: Jan Wiggins, MD. CHEST X-RAY: Lungs clear; numerous tubes and lines in place. SKULL X-RAY: Post operative craniotomy changes seen; ventriculostomy tube in place.
6/19/1989 56	University Medical Branch - San Antonio, TX Vol I of II	X-RAY - CHEST: University Medical Branch Area of consolidation (area of white on x-ray that represents a mass, usually fluid) has developed in right lower lung; pneumonia or aspiration (fluid taken into lungs by breathing); Swan-Ganz and endotracheal tube in place.
6/19/1989 1	University Medical Branch - San Antonio, TX Vol I of II	CAROTID ARTERIOGRAM: University Medical Branch RADIOLOGIST: Robert Brown, MD. IMPRESSION: Brain death 6/19/89; no intracranial blood flow by way of the internal carotids or the vertebral system is identified.
6/20/1989 211	University Medical Branch - San Antonio, TX Vol II of II	OPERATIVE REPORT: University Medical Branch SURGEON: Mitchell Greenfield, MD. PRE AND POSTOPERATIVE DIAGNOSIS: Brain death, cadaver organ donation. OPERATION: Removal of heart, liver, pancreas, both kidneys, spleen, and lymph nodes for transplantation. Duplicated - Page 15 J Creek MD - Seguin, TX
6/20/1989 61	University Medical Branch - San Antonio, TX Vol I of II	ECHOCARDIOGRAM REPORT: University Medical Branch Limited study; mitral valve prolapsed; normal left ventricle; other chambers normal.
6/20/1989 11	University Medical Branch - San Antonio, TX Vol I of II	DEATH CERTIFICATE: University Medical Branch CAUSE OF DEATH: Increased intracranial pressure from subarachnoid hemorrhage. Duplicated - Page 9 J Creek MD - Seguin, TX

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