PenRad Technologies, Inc.





10580 Wayzata Boulevard, Suite 200 Minnetonka, MN 55305 Phone: 763.475.3388 e-mail: penrad@penrad.com

Name Exam ID	Jones, Phil 97350	Med Rec No. 108		
Exam Dat	9/22/2010	Date of Birth 4/11 Referred By Jack	•	Admission Outpatient
Risk Factors Alcohol Abuse CABG	2	V. S. History AAA aneurys PTA; renal o	m repair	Room # Prior Exam: Limited: No
Medications	1	Reason for Study		
Outpatient Assessment				
				Pediatric or Developmentally Delayed
Pain Ratin	Ig: O 0 No Pain	C 2 4 Little Medium	6 8 A Lot Very Bad	0 10 Worst
If a numeric Location: Descriptic Duration:	c value other than zero: Left Calf n:		What makes it better: What makes it worse:	
Falling Ris	ik: 🗸 Y 🗌 N		Domestic Vi	olence Screening:
Is patient Has patie	t using any ambulatory de ent had a fall in the last 6 ion: If yes to any of the			concern suspected? Y V N name of Social Worker:
Education	:			
PerfA		PerfVenousDisease	ExtCarotidDisease	VisceralVenousDisease
		Sign and Symptoms	Signs and Symptoms	Sign and Symptoms
	sk Factors terventions	Risk Factors	✓ Risk Factors ✓ Interventions	Risk Factors Interventions
	agnostic Testing	Diagnostic Testing	 Diagnostic Testing 	 Diagnostic Testing
Barriers t	o Education: 🗸 Y] N	Dorvioro to F	ducation Intonvontion:
_	nguage 🗌 Culture		Barriers to Ed	ducation Intervention: nlets
	sability V Emotio			
	aring Religio			/Family Member Assistance
		of Education Other	Other	· · ·

Phil White, M.D.

Performed By: Transcribed: **Jack Johnson, RVT** 9/22/2010

Report Prepared by PenVasc Vascular Database