

COUNTY OF ORANGE, CA HEALTH CARE AGENCY EMERGENCY MEDICAL SERVICES AGENCY EMERGENCY INFORMATION FOR CHILDREN WITH SPECIAL NEEDS

NI							lastitada
Name	Jamie Do	е			pleted 9-1		Initials
Home Address_		l Ni	00				Initials
<u>_</u>		d, New Jersey 081	03	Revised			Initials
Emergency contacts			Birth date				
Name (relationship)/phone: 1. Lisa Doe (mother)/609-123-4567			Home phone 2.		/609-123-	4567	
Primary care phy				Phone			
Specialty physici		Dr. Mary Hart (card	liology)	Phone			609-123-7655
Specialty physici		<u>Dr. Wary Hart (card</u> Dr. William Johnso					
Anticipated Prim		Memorial Hospital	ir (riedrology)	rnone	009-125-0970	ı ax	009-123-7033
DNR form compl	-	•	no				
Diagnoses		yes		Allergies			
_	ion of areat	arteries (TGA)		Allergies 1.			
2. s/p Mustar		arteries (10/t)		 2			
3. s/p CVA, r	•			 3.			
4. s/p Pacem	_						
Synopsis	andi			· <u>-</u>			
	condition i	n which the aorta	originates from	n the right ventricle	and the pulmonar	y artery c	originates from the le
ventricle. Mustard	d repair use	s a baffle to divert	blood to the atr	ium such that vena	cava blood is direc	ted to the	mitral valve and bloc
from the pulmona	ry veins is	directed to the tric	uspid valve. As	a result, normal b	lood flow from the v	ena cava	through the lungs ar
	ripheral arte	eries is restored. J	amie's superior	vena cava (SVC) in	let to the atrium is a	lso obstru	cted, and SVC blood
back out to the pe							
		system to the infer	<u>ior vena cava fo</u>	return to the heart			
diverted through the	ne azygous :	system to the infer		return to the heart			
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Jamie is very knowledgeable about her problems; if you discuss anything in front of her, include her in the conversation.