# Admission and Coding Information

For use of this form, see AR 40-400; the proponent agency is OTSG

| 1. Reporting MTF | 2. MTF Local | | | |
|---|---|---|---|---|
| [redacted] b(2)-2 | IZ | | | |
| 3. Register Number | Name (Last, First, MI) | | 4. Pay Grade | 5. Sex |
| [redacted] | [redacted] b(2)-2 | | FGN | M |
| 6. DoB (YYYYMMDD) | 7. Age at Admission | 8. Race | 9. Ethnicity | Religion |
| 1969-05-20 | 34Y | X | 9 | MUSLIM |
| 10. Length of Service | ETS | 11. FMP | 12. Social Security Number | |
| | | 99 | [redacted] | |
| Organization (Active Duty Only) | | 13. Marital Status | Hour of Admission | Branch / Corps: |
| | | | 17:38 | |
| 14. Flying Status | 15. Beneficiary Category | | 16. Zip Code of Residence: | |
| | K78-PRISONER OF WAR/INTERNEES | | | |
| 17. Unit Location | 18. MOS | | 19. Trauma | Prev. Admission |
| | | | BC | NO |
| 20. Source of Admission | Ward: | | Name / Relationship of Emergency Addressee | |
| Direct from ER b(2)-2 | ICU1 | | Address of Emergency Addressee | |
| Name and Location of Medical Treatment Facility: 0580 [redacted] No Install Provided | | | Telephone Number of Emergency Addressee | |
| 21. Type of Disposition | 22. MTF Transferred To | | 23. Date of Disposition (YYYYMMDD) | |
| EXPIRED | | | 2003-10-30 | |
| 24. Clinic Svc - Admitting | 25. MTF Transferred From | | 26. Date this Admission (YYYYMMDD) | |
| ABA - GENERAL SURGERY | | | 2003-10-30 | |
| 27. Location of Occurrence | 28. MTF of Initial Admission | | 29. Date of Initial Admission | |
| IZ | | | 2003-10-30 | |

FOR LOCAL USE

Type Patient (Inpatient / Outpatient): Inpatient

Admission Diagnosis Narrative: MULTI GSW TO R THIGH

Procedure Narrative(s):

Cause of Injury Narrative: GUNFIGHT WITH OTHER IRAQIS

[redacted] b(2)-2 [redacted]

ning Officer (S[redacted] Admitting Clerk

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MEDCOM - 22448

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# INPATIENT TREATMENT RECORD COVER SHEET

For use of this form, see AR 40-400, the proponent agency is OTSG

| 1. Register Nbr | 2. Name | | | | | 3. Grade | Admission Remarks |
|---|---|---|---|---|---|---|---|
| [redacted] | NoFirstNameGiven | | | | | FGN | |
| 4. Sex | 5. Age | 6. Race | 7. Religion | 8. LnthOfSvc | 9. ETS | 10. PrevAdm | |
| M | b(4)-4 | X | MUSLIM | | | NO | |
| 11. FMP | 12. SSN | 13. Organization | | | | 14. Ward | |
| 99 | [redacted] | | | | | ICU1 | |
| 15. FlyStatus | 17. Dept / Ben | 18. BranchCorps | 19. UIC / ZIP | 20. Type Case | | | |
| NO | K78-PRISONER OF WAR/INTER | | | BC | | | |
| 21. Source of Admission | 22. Hour Of Adm: | 23. Clinic Service | | | | | |
| Direct from ER | 19:30 | AAJ - NEUROLOGY | | | | | |
| 24. Name/Relation of Emergency Addressee | 25. Type Disp | 26. Date of Disp | | | | | |
| | EXPIRED | 2003-10-30 | | | | | |
| 27a. Address of Emergency Addressee | 27b. Telephone No | 28. Date This Adm: | AdmittingOfficer: | | | | |
| | | 2003-10-30 | [redacted] b(6)-2 | | | | |
| 29. ReportingMTF | | 30. Date Init Adm | 32. Units Blood Components | | | | |
| [redacted] b(2)-2 | | 2003-10-30 | | | | | |

31. Selected Administrative Data

Marital Status: Z DoB:

In/Out Patient: Inpatient MOS:

33. Cause Of Injury: SHOOTOUT WITH 134TH AR.

34. Diagnosis / Operations and Special Procedures:

GSW TO HEAD OPEN SKULL FX.

NONE.

35. Total Days This Facility

| Absent Sick Days | Other Days | ConLv / Coop Care Days | Supplemental Care | Bed Days | Total Sick Days |
|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 1 | 1 |

35. Total Days This Facility

| Absent Sick Days | Other Days | ConLv / Coop Care Days | Supplemental Care | Bed Days | Total Sick Days |
|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 1 | 1 |

Signature of Attending Medical Officer [redacted]

Signature of PAD or Medical Records Officer b(6)-2 MAJ [redacted]

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