

EXHIBIT 2

Pat: **HOFER, STEPHANIE** MRN: **4169857** DOB: **07/18/1972** 32y
Registration Date/Time: **04/26/2005 03:21 PM** Provider: **Dana Stearns**

** Sign

ED Note

ROS

General: Negative
Constitutional: No major weight loss or gain, fatigue, fever, chills.
Head/Eyes: No visual changes, lesions, headaches
ENT/Neck: No hearing loss, tinnitus, vertigo, rhinorrhea, hoarseness, difficulty swallowing, oral lesions, stiffness
Chest/Respiratory: No coughing, wheezing, dyspnea
Cardiovascular: No chest pain, palpitations, PND, orthopnea
GI/Abdominal: No pain, nausea, vomiting, diarrhea, melena, bleeding, heartburn
Musculoskeletal/Extr/Back: See HPI
Skin: See HPI
Neuro: No loss of awareness, seizures, paralysis, paraesthesias, no syncope, tremors
Psych: No depression, anxiety, unusual stress

ED ATTENDING PHYSICIAN NOTE

Date/Time of Encounter: 4/26 ↓
HPI: 32 f arrives c/o r index finger lac dominant hand occurred 7d pta with sig bleeding and since then noted numbness sensory loss from lacon lat aspect of digit extending to tip ipsilateral side bleeding occurring now only when she manipulates the wound no redness red streaking from the wound no fc
ROS: see above
Vitals: See Nursing Notes
PE: ↓ r index finger lac with min bleeding distal subjective and objective decreased discrimination and numbness lateral aspect distal phalanx compared to medial aspect
Medical Decision Making
ED Course: old wound likely damaging neurovascular bundle ipsilaterally unablw to repair primarily but will refer to hand svc for possible need for nerve repair attempt but less likely possible given length of time out from injury; defer to hand svc to booster prn local wound care second intention and po abx rx
Condition on Discharge: ↓ Stable
Diagnoses: ↓ Right Index Finger Lac , Digital Nerve Injury

This note has been electronically signed by Dana Stearns, MD 5/2/2005 12:33:10 PM

Massachusetts General Hospital
Emergency Department Record

Pat: **HOFER, STEPHANIE** MRN: **4169857** DOB: **07/18/1972** 32y
Registration Date/Time: **04/26/2005 03:21 PM** Provider: **Dana Stearns**

** Sign

Clinical staff documenting in the ED note include:

Attending/Nurse Dana Stearns, MD
Practitioner(s):

Pat: **HOFER, STEPHANIE**

MRN: **4169857**

DOB: **07/18/1972** 32y

Sex: **F**

Registration Date/Time: **04/26/2005 03:21 PM**

Provider: **JOHN, M.D. KWON**

PCP notified by MD: No - Other explanation

Benefits Assigned: Y

Discharge Note Date/Time: 04/26/2005 16:36

Discharge Status: Discharged

Condition on Discharge: Stable

Patient States Complaint: R INDEX FINGER LAC

Diagnosis: right index finger laceration

Standardized Discharge Instructions: The patient was given printed instructions for wound care (English).

Treatment Rendered: examination, tetanus up to date

Discharge Medications: keflex x 3 days

Follow Up Service: It is recommended that you receive follow-up care in the Plastic Surgery Hand Clinic if your wound does not improve. To schedule an appt., please call (617)726-2760 between 8a.m. & 4:30p.m. Monday- Friday. If you have a managed care plan, check with your PCP before making this appt.

Disposition, Follow up & Instruction to Patient: Please call your PCP or report to EW if you have any nausea, vomiting, fever, increased pain/redness/drainage from wound, you can take Advil or Tylenol as needed, please take entire course of antibiotics, please keep the wound clean and dry

Please call your primary care physician during normal business hours to report this Emergency Department visit.

I hereby acknowledge receipt of patient instructions. I understand that further diagnosis and treatment may be required and I have had emergency treatment only and I may be released before all medical problems are known and treated. I will arrange for any follow-up care as instructed.

Patient Signature:

Stephanie Hofer

Date:

4/26/05

Provider Signature:

John Kwon

Date:

4/26/05

S: 17 pm

This report was created by **JOHN, M.D. KWON, MD**

For additional information regarding this visit please call 617-724-4100.

PCP Name: **FRASER, ROBERT** PCP #: 45463 PCP Phone: 978-534-4241 PCP Fax: 978-534-3705

416 98 57

MORER, STEPHANIE

NIMP

MASSACHUSETTS GENERAL HOSPITAL
EMERGENCY SERVICES
NURSING NOTE

NAME P.C.P.

Time	Initials	BP	HR	Rhythm	PVC	RR	Temp	PUPILS		Eye Opening	Verbal Response	Motor	RCP R 205163				DATE	WEIGHT
								R	L				Arm	Leg	Arm	Leg		
1670																		

cut (Index Finger) Knife 4/19 ←
 1 1/2 cm + deep. Swollen, sore - MH
 1715 d/c home by MD only - MH

DV? Y ___ N ___

IF YES, REFERRALS MADE:

NSG INTERVENTIONS

- EKG
- IMMOBILIZATION
- COLD PACK
- SLING
- ELEVATION
- DRESSING
- ACE
- CRUTCHES/CANE
- WOUND PREP
- SPONGE BATH
- PELVIC EXAM
- UA
- C & S
- UA DIP
- PHLEBOTOMY
- IV: SITE ___ Ga ___
- PSYCH CNS REFERRAL
- SW REFERRAL
- VISITING NURSE REF.
- CRUTCH WALKING
- BACK PAIN
- BURN CARE
- PNEUMONIA
- URI
- HYPERTENSION
- THERMOMETER USE
- FEVER
- UTI
- GASTROENTERITIS
- PO HYDRATION
- OTITIS
- BRONCHIOLITIS
- CROUP
- ASTHMA
- CONJUNCTIVITIS
- MEDICATION USE
- SEE POST-HOSP PLAN

TEACHING

- WOUND CARE
- HEAD INJURY
- SPRAINS/STRAINS
- CAST CARE

EVALUATION

- RETURN DEMONSTRATION
- RETURN VERBALIZATION

MD ONLY

TIME	TREATMENT / MEDICATION ORDERS	MD ORDERED BY	ADMINISTRATION RECORD	ALLERGIES:																																				
	Td 0.5 cc IM		<table border="1"> <tr><td>Time</td><td>Init</td><td></td><td></td></tr> <tr><td>Dose</td><td></td><td></td><td></td></tr> <tr><td>Site</td><td></td><td></td><td></td></tr> <tr><td>Time</td><td>Init</td><td></td><td></td></tr> <tr><td>Dose</td><td></td><td></td><td></td></tr> <tr><td>Site</td><td></td><td></td><td></td></tr> <tr><td>Time</td><td>Init</td><td></td><td></td></tr> <tr><td>Dose</td><td></td><td></td><td></td></tr> <tr><td>Site</td><td></td><td></td><td></td></tr> </table>	Time	Init			Dose				Site				Time	Init			Dose				Site				Time	Init			Dose				Site				<p>Injection Site</p> <p>B - Right Deltoid C - Left Deltoid D - Right Gluteal E - Left Gluteal R - Right Thigh G - Left Thigh A - Abdomen</p> <p>Reason medication not given</p> <p>N - Nauseated NPO V - Vomiting H - Hold R - Refused T - Off Unit</p>
Time	Init																																							
Dose																																								
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DISPOSITION: DISCHARGED HEP LOCK DC'D

TRANSFERRED TO _____

TIME: 1715

VIA: W/C STRETCHER AMBULATORY

ACCOMPANIED BY: TRANSPORT FAMILY SELF

HOUSE OFFICER RN EMTS

CONDITION ON DISPOSITION: Stable

DISCHARGE NURSE: Mary Daniel

SIGNATURES - Include Full Name and License



ES1
3

EMERGENCY DEPARTMENT TRIAGE/DISCHARGE RECORD

Unit Number 4169857 MGH Staff

Last Name Hofer

First Name Stephanie

Date of Birth 7/18/72 Age: 32

Date 6/15/05 Triage Time 1506 Treatment Area mimp Service ems

Chief Complaint @ index finger laceration

Arrived via: _____ Accompanying Individuals Y N Allergies _____ NKDA PCP/Referring MD: Referral Attached

TRIAGE/PREHOSPITAL NOTES

See Trauma Sheet S- Sustained lac to @ index finger knife last week. m.i.d. today referred to mwll → ED. RepuAs ↓ sensation ^{bilateral} medial aspect and dorsal tip of finger. motor is intact. O- old lac, swelling around site. A- old index finger laceration & parathesia. P- EMS eval

PMFH/Meds with patient Y N

Last Td 10/15/04 LMP

SIGNATURE [Signature]

RN Anticoagulated Y N

NS/ANP Consult Y N

Radiology Y N

TIME	BP 1	PULSE 1	BP 2	PULSE 2	RESP	TEMP	PUPILS	WEIGHT
		A/R		A/R				
	<u>120/11</u>	<u>A/R 93</u>		<u>A/R</u>	<u>16</u>	<u>97.2</u>		
		A/R		A/R		<u>TA</u>		
		A/R		A/R				

MASSACHUSETTS GENERAL HOSPITAL EMERGENCY DEPARTMENT 617-724-4100

Date _____

INSTRUCTIONS TO PATIENT: _____

Medications: _____

Discharge & Follow-Up: _____

I hereby acknowledge receipt of patient instructions. I understand that further diagnosis and treatment may be required and I have had emergency treatment only and I may be released before all medical problems are known and treated. I will arrange for any follow-up care as instructed.

SIGNATURE

PRINT/SIGNATURE



Partners HealthCare System, Inc.
 MASSACHUSETTS GENERAL HOSPITAL
 A Teaching Affiliate of Harvard Medical School
 55 Fruit Street, Boston, Massachusetts 02114

DISCHARGE REPORTS

From 01/01/1995 through 04/11/2006

HOFER, STEPHANIE

MRN: 4169857

Sex: F

DOB: 7/18/1972 Age: 33y

4/26/2005

ED Discharge Summary

Accession # 492120

Unsigned

ED DISCHARGE NOTIFICATION/SUMMARY

HOFER,STEPHANIE MRN: 4169857 Age: 32y

REGISTRATION DATE: 04/26/2005 03:21 PM Provider: JOHN,M.D. KWON

PRELIMINARY REPORT

PCP notified by MD: No - Other explanation

Benefits Assigned: Y

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PCP Name: FRASER, ROBERT Provider Number: 45463

This report was created by KWON,JOHN,M.D. 04/26/2005 05:15 PM

3/20/2004

ED Discharge Summary

Accession # 408298

Unsigned

ED DISCHARGE NOTIFICATION

HOFER,STEPHANIE MRN: 4169857 Age: 31y

REGISTRATION DATE: 03/20/2004 01:00 AM

PRELIMINARY REPORT

This is to notify you that your patient, HOFER,STEPHANIE arrived in the Emergency Department at Massachusetts General Hospital on 03/20/2004 01:00 AM. The patient presented with a chief complaint of LEG INJURY.