

**URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT
- OFFICER ROBERT JONES**

FRIDAY, JANUARY 20, 2022

<p>Martinsville Police Department ATTN: Officer Robert Jones P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5300 Fax: 276-403-5306</p>	
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To Officer Robert Jones,

You said in Federal Court under oath that the hospital did lab work and other stuff when you said under oath I was “medically and psychologically cleared”. You said that under penalty of perjury.

Let me fax to you documents which prove that is not true. Dr. Brant Hinchman gave you the wrong impression when he released me.

My medical record said DELETED FROM THE CHART. They never did the lab work or they did the lab work and was covered up aka DELETED FROM THE CHART. See for yourself from my medical records.

I am also faxing to your attention, Billing records. The billing records prove that I was given an electrolyte in the hospital. So that meant I may have been dehydrated.

If I was medically cleared then why were lab tests ordered then deleted from the chart saying correction deleted from the chart???

If I was medically cleared then why did you ignore witness Pete Compton who found out that my home was subject to carbon monoxide gas before my arrest because of metal tin placed on the chimney???

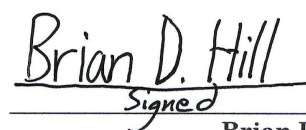
If I was medically cleared then why did you not even know that I was type 1 brittle diabetic at the time of my arrest when that is very important to know that??? Did you know type 1 diabetics can have diabetic seizures and I could have had a diabetic seizure in your squad car on the way to jail because Dr. Brant Hinchman never told you before my arrest???

If I was medically cleared then why did you not even know that I had Obsessive Compulsive Disorder (OCD) as has been documented for many years???

If I was medically cleared then why did you not even know what was in my medical records and why did you assume that lab work was done at the hospital when in reality it was deleted from the chart in my medical records which is a cover up??? lab work isn't there because deleted from chart???

Please tell me and tell the Qanons and the patriots how I was medically and psychologically cleared on September 21, 2018 when lab tests were ordered then deleted from the chart. Tell me how I was medically cleared when you don't even know whether I was intoxicated or not. You don't even know that do you?????? You don't know if I was even intoxicated because you don't even know if lab work was done or not done or covered up?

God bless you. Where We Go One We Go All.


Signed

Brian D. Hill

God bless you,
Brian D. Hill

Ally of Q, Former news reporter of U.S.W.G.O. Alternative News
310 Forest Street, Apartment 2
Martinsville, Virginia 24112
(276) 790-3505

JusticeForUSWGO.NL or JusticeForUSWGO.wordpress.com

U.S.W.G.O.

To Whom This May Concern:

On January 30, 2019 I went to the house at 310 Forest St., Martinsville, Va 24112 to measure and give a price for a Chimney cover. Roberta Hill and her parents: Ken & Stella Forinash escorted me to Apt 1 to show me the fireplace which had a small amount of white residue inside, no damage to the ceiling and wall around the fireplace. They then escorted me downstairs to Apt 2 where parts of the ceiling above the fireplace had fallen and there was a lot of damage in the remaining ceiling below the hearth of the fireplace in apt 1 located above apt 2 and a lot of damage along the wall in apt 2 above and on both sides of the fireplace as well as a lot of white residue inside of the fireplace. After this, we went down another flight of stairs to the basement where the gas boiler heater and the gas hot water heater were located to show me that there would be 3 holes in the chimney.

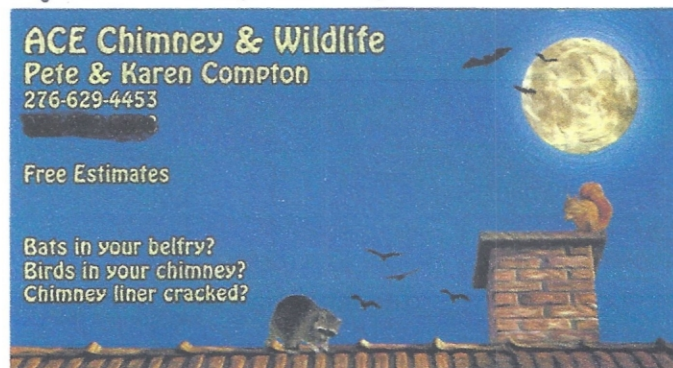
I then went outside and got my ladder to measure the chimney. This was when I found out that all 3 holes were covered with tin. Knowing that the gas boiler heater & gas hot water heater needed to be vented at all times, I immediately removed the tin covering the hole so carbon monoxide would no longer go through the house. Ms Hill had informed me that she had called a chimney sweep in Rocky Mount, VA in October, 2017 to clean the chimney and to put screen on all holes after the family spotted birds going into their fireplace the year before. In my 25 years of doing this type of work, this was the first time I have ever seen tin covering holes where it is important to vent gas heaters. I showed the family the tin I had just removed and had them to climb my ladder to look at the chimney. We then went back in the house, and I informed them that the white residue inside both fireplaces was from the gas that had no other place to escape and informed them that they had been exposed to carbon monoxide poisoning, but now that the tin had been removed, there should no longer be any problems. I returned to the house on February 4, 2019 and installed a stainless steel multifaceted chimney cap vented with screen on all 4 sides. GA
FA

Signed as a witness on this date: Kenneth R. Forinash 6-13-19

Pete Compton # 6-13-19

Pete Compton ACE Chimney & Wildlife; Bassett, VA

Phone 276-629-4453



Sovah Health Martinsville

320 Hospital Drive
Martinsville, VA 24112
276-666-7237

7806761243

**Emergency Department
Instructions for:**

Hill, Brian D

Arrival Date:

Friday, September 21, 2018

Thank you for choosing **Sovah Health Martinsville** for your care today. The examination and treatment you have received in the Emergency Department today have been rendered on an emergency basis only and are not intended to be a substitute for an effort to provide complete medical care. You should contact your follow-up physician as it is important that you let him or her check you and report any new or remaining problems since it is impossible to recognize and treat all elements of an injury or illness in a single emergency care center visit.

Care provided by: Hinchman, Brant, DO

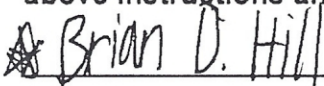
Diagnosis: Abrasion, right knee; Abrasion of unspecified front wall of thorax

DISCHARGE INSTRUCTIONS	FORMS
VIS, Tetanus, Diphtheria (Td) - CDC Abrasion, Easy-to-Read Knee Pain, Easy-to-Read	Medication Reconciliation
FOLLOW UP INSTRUCTIONS	PRESCRIPTIONS
Private Physician When: Tomorrow; Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care Emergency Department When: As needed; Reason: Fever > 102 F, Trouble breathing, Worsening of condition	None
SPECIAL NOTES	
None	

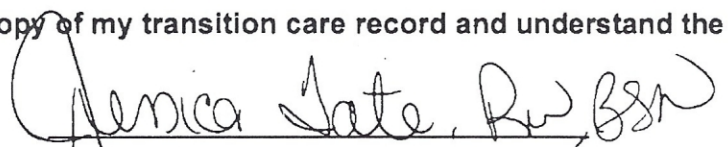
National Hopeline Network: 1-800-784-2433

If you received a narcotic or sedative medication during your Emergency Department stay you should not drive, drink alcohol or operate heavy machinery for the next 8 hours as this medication can cause drowsiness, dizziness, and decrease your response time to events.

I hereby acknowledge that I have received a copy of my transition care record and understand the above instructions and prescriptions.



Brian Hill



ED Physician or Nurse
09/21/2018 04:52

EMERGENCY DEPARTMENT RECORD

Physician Documentation
Sovah Health Martinsville
Name: Brian Hill

Age: 28 yrs

Sex: Male

DOB: 05/26/1990

MRN: MM00370912

Arrival Date: 09/21/2018

Time: 04:04

Account#: MM7806761243

Bed ER 9

Private MD:

ED Physician Hinchman, Brant

HPI:

09/21

04:40 This 28 yrs old White Male presents to ER via Law Enforcement with complaints of Knee Pain. bdh

09/21

04:48 28-year-old male with diabetes and autism presents for evaluation after complaining of right knee pain and scrapes and abrasions. bdh
Patient was apparently taking pictures of himself in the nude across town this evening and when police attempted apprehend him brain through Briar patch. Patient does report scratches and abrasions to the right knee but no pain on range of motion. Unknown last tetanus..

Historical:

- Allergies: Ranitidine;

- PMHx: autism; Diabetes - IDDM; OCD;

- Exposure Risk/Travel Screening:: Patient has not been out of the country in last 30 days. Have you been in contact with anyone who is ill that has traveled outside of the country in the last 30 days? No.

- Social history:: Tobacco Status: The patient states he/she has never used tobacco. The patient/guardian denies using alcohol, street drugs, The patient's primary language is English. The patient's preferred language is English.

- Family history:: No immediate family members are acutely ill.

- Sepsis Screening:: Sepsis screening negative at this time.

- Suicide Risk Screen:: Have you been feeling depressed in the last couple of weeks? No Have you been feeling hopeless to the extent that you would want to end your life? No Have you attempted suicide or had a plan to attempt within the last 12 months? No.

- Abuse Screen:: Patient verbally denies physical, verbal and emotional abuse/neglect.

- Tuberculosis screening:: No symptoms or risk factors identified.

- The history from nurses notes was reviewed: and my personal history differs from that reported to nursing.

ROS:

09/21

04:49 All other systems are negative, except as documented below. bdh

Constitutional: Negative for chills, fever. Respiratory: Negative for

FOLLOW UP INSTRUCTIONS

Private Physician

When: Tomorrow

Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care

Emergency Department

When: As needed

Reason: Fever > 102 F, Trouble breathing, Worsening of condition

→ 806761243

Brian Hill
MRN: MM00370912
ACCT: MM7806761243

MRN # MM00370912

X-RAYS and LAB TESTS:

If you had x-rays today they were read by the emergency physician. Your x-rays will also be read by a radiologist within 24 hours. If you had a culture done it will take 24 to 72 hours to get the results. If there is a change in the x-ray diagnosis or a positive culture, we will contact you. Please verify your current phone number prior to discharge at the check out desk.

MEDICATIONS:

If you received a prescription for medication(s) today, it is important that when you fill this you let the pharmacist know all the other medications that you are on and any allergies you might have. It is also important that you notify your follow-up physician of all your medications including the prescriptions you may receive today.

TESTS AND PROCEDURES

Labs

None

Rad

None

Procedures

None

Other

Call ERT, IV saline lock

Chart Copy

7806761234

cough, dyspnea on exertion, shortness of breath. MS/extremity:
Positive for pain, Negative for decreased range of motion,
paresthesias, swelling, tenderness, tingling. Skin: Positive for
abrasion(s), Negative for rash, swelling.

Exam:

09/21

04:49 Constitutional: This is a well developed, well nourished patient who bdh
is awake, alert, and in no acute distress. Head/Face: Normocephalic,
atraumatic. Eyes: Pupils equal round and reactive to light,
extra-ocular motions intact. Lids and lashes normal. Conjunctiva
and sclera are non-icteric and not injected. Cornea within normal
limits. Periorbital areas with no swelling, redness, or edema. ENT:
Oropharynx with no redness, swelling, or masses, exudates, or
evidence of obstruction, uvula midline. Mucous membranes moist. No
meningismus. Neck: Supple, full range of motion without nuchal
rigidity, or vertebral point tenderness. No Meningismus. No JVD
Cardiovascular: Regular rate and rhythm with a normal S1 and S2. No
gallops, murmurs, or rubs. No JVD. No pulse deficits. Respiratory:
Lungs have equal breath sounds bilaterally, clear to auscultation and
percussion. No rales, rhonchi or wheezes noted. No increased work
of breathing, no retractions or nasal flaring. Abdomen/GI: Soft,
non-tender, with normal bowel sounds. No distension or tympany. No
guarding or rebound. No pulsatile mass. Back: No spinal
tenderness. No costovertebral tenderness. Full range of motion.
Skin: Multiple superficial abrasions to the groin and abdomen
without fluctuance or tenderness. MS/ Extremity: Pulses equal, no
cyanosis. Neurovascular intact. Full, normal range of motion. No
peripheral edema, tenderness. Abrasion to right knee but nontender,
no deformity or swelling. Ambulating without difficulty. Neuro:
Awake and alert, GCS 15, oriented to person, place, time, and
situation. Cranial nerves II-XII grossly intact. Psych: Awake,
alert, with orientation to person, place and time. Behavior, mood,
and affect are within normal limits.

Vital Signs:

09/21

04:09 BP 124 / 86; Pulse 119; Resp 19; Temp 98; Pulse Ox 98% ; Weight 99.79 jt
kg; Height 6 ft. 0 in. (182.88 cm); Pain 0/10;

09/21

05:01 BP 119 / 80; Pulse 106; Resp 16; Temp 98.2; Pulse Ox 99% ; Pain 0/10; jt
09/21

04:09 Body Mass Index 29.84 (99.79 kg, 182.88 cm) jt

MDM:

09/21

04:04 MSE Initiated by Provider. bdh

09/21

04:50 Differential diagnosis: fracture, sprain, penetrating trauma, et al. bdh

ED course: Cleared from a psychiatric standpoint by Behavioral
Health. Patient will be discharged to jail. No new complaints.. Data
reviewed: vital signs, nurses notes. Counseling: I had a detailed

discussion with the patient and/or guardian regarding: the historical
points, exam findings, and any diagnostic results supporting the

discharge/admit diagnosis, the need for outpatient follow up, to return to the emergency department if symptoms worsen or persist or if there are any questions or concerns that arise at home.

09/21
04:16 Order name: Call ERT; Complete Time: 04:25 bdh
09/21
04:16 Order name: IV saline lock; Complete Time: 04:36 bdh
09/21
04:29 Order name: Other: NO suicidal homicidal risk; Complete Time: 05:03 bdh

Dispensed Medications:

Discontinued: NS 0.9% 1000 ml IV at 999 mL/hr once
09/21
04:36 Drug: Tetanus-Diphtheria Toxoid Adult 0.5 ml {Manufacturer: Grifols Therapeutics. Exp: 09/27/2020. Lot #: A112A. } Route: IM; Site: right deltoid; lb1
09/21
05:04 Follow up: Response: No adverse reaction lb1
09/21
04:36 Drug: NS 0.9% 1000 ml Route: IV; Rate: 999 mL/hr; Site: right arm; Delivery: Primary tubing; lb1
09/21
05:11 Follow up: IV Status: Completed infusion dr

Disposition:

09/21
04:52 Electronically signed by Hinchman, Brant, DO at 04:52 on 09/21/2018. bdh
Chart complete.

Disposition:

09/21/18 04:52 Discharged to Jail/Police. Impression: Abrasion, right knee, Abrasion of unspecified front wall of thorax.

- Condition is Stable.
- Discharge Instructions: VIS, Tetanus, Diphtheria (Td) - CDC, Abrasion, Easy-to-Read, Knee Pain, Easy-to-Read.

- Medication Reconciliation form.
- Follow up: Private Physician; When: Tomorrow; Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care. Follow up: Emergency Department; When: As needed; Reason: Fever > 102 F, Trouble breathing, Worsening of condition.
- Problem is new.
- Symptoms have improved.

Order Results:

There are currently no results for this order.

Signatures:

Dispatcher MedHost		EDMS
Tate, Jessica, RN	RN	jt
Hinchman, Brant, DO	DO	bdh

Ramey, Nicole nmr
Bouldin, Lauren, RN RN lbl
Reynolds, Daniel R RN dr

Corrections: (The following items were deleted from the chart)

09/21
04:48 09/21 04:16 COMPREHENSIVE METABOLIC PANEL+LAB ordered. EDMS EDMS
09/21
04:48 09/21 04:16 COMPLETE BLD COUNT W/AUTO DIFF+LAB ordered. EDMS EDMS
09/21
04:49 09/21 04:16 CPK, TOTAL+LAB ordered. EDMS EDMS
09/21
04:50 09/21 04:16 ALCOHOL, ETHYL+LAB ordered. EDMS EDMS
09/21
04:50 09/21 04:16 STAT OVERDOSE PANEL+LAB ordered. EDMS EDMS
09/21
04:52 09/21 04:52 09/21/2018 04:52 Discharged to Jail/Police. Impression: bdh
Abrasion, right knee; Abrasion of unspecified front wall of thorax.
Condition is Stable. Discharge Instructions: Medication
Reconciliation. Follow up: Private Physician; When: Tomorrow; Reason:
Further diagnostic work-up, Recheck today's complaints, Continuance
of care. Follow up: Emergency Department; When: As needed; Reason:
Fever > 102 F, Trouble breathing, Worsening of condition. Problem is
new. Symptoms have improved. bdh
09/21
04:54 09/21 04:16 URINALYSIS W/REFLEX TO CULTURE+LAB ordered. EDMS EDMS

PATIENT NO: 7806761243 SOVAH HEALTH
 MED REC NO: 370912 320 HOSPITAL DR
 GUARANTOR NO:
 PATIENT: MARTINSVILLE
 HILL BRIAN D

BILLING DATE PAGE 1 02781
 07/14/22

VA 241121900 ADMITTED DISCHARGED
 09/21/18 09/21/18

PAY TO ADDRESS: SOVAH HEALTH
 PO BOX 742401
 ATLANTA
 GA 303742401

BILL TO:
 HILL BRIAN D
 310 FOREST ST
 APT 2
 MARTINSVILLE VA 24112

EMERGENCY FC=09
 INFORMATION BILL, SPECIFIED PERIOD OF TIME
 FROM 09/21/18 THRU 09/21/18

DATE OF SERVICE	BATCH REF	F DEPT S	PROC	NDC/CPT-4/ HCPCS	QTY	SERVICE DESCRIPTION	CHARGES	
258-IV SOLUTIONS								
092118	21B597	0715	170363	J7030	1	IV NAACL .9% 1000ML	157.00	
							SUBTOTAL:	157.00
260-IV THERAPY								
092118	23B781	0780	800397	96360	1	IV HYDRATION 1ST HR	585.00	
							SUBTOTAL:	585.00
270-MED SURG SUPPLY								
092118	22B696	0718	232334		1	SENSOR FETAL O2	130.00	
092118	22B696	0718	230760		1	CUFF B/P DISP	50.00	
092118	22B696	0718	232781		1	OXISENSOR DISP	198.00	
092118	22B696	0718	232295		1	TUBING HEPLOCK	32.00	
092118	22B696	0718	230633		1	CATH IV	66.00	
092118	22B696	0718	232137		1	TUBING SECONDARY	21.00	
							SUBTOTAL:	497.00
272-MED SURG SUPPLY/STERILE								
092118	22B696	0718	232646		1	KIT IV LATEX FREE	56.00	
							SUBTOTAL:	56.00
450-EMERG ROOM								
092118	22B696	0780	800388	9928525	1	ER VISIT LEVEL V	2555.00	
							SUBTOTAL:	2555.00

THANK YOU FOR CHOOSING SOVAH
 MARTINSVILLE FOR YOUR HEALTHCARE NEEDS

PATIENT NO:	7806761243	SOVAH HEALTH	BILLING DATE	PAGE	2	02781
MED REC NO:	370912	320 HOSPITAL DR	07/14/22			
GUARANTOR NO:						
PATIENT:		MARTINSVILLE	VA 241121900	ADMITTED		DISCHARGED
HILL BRIAN D				09/21/18		09/21/18

DATE OF SERVICE	BATCH REF	F DEPT S	PROC	NDC/CPT-4/ HCPCS	QTY	SERVICE DESCRIPTION	CHARGES
636-DRUGS/DETAIL CODE							
092118	21B597	0712	123638	90714	1	TET\DIPHTOXOID PF J	137.00
SUBTOTAL:							137.00
771-VACCINE ADMIN							
092118	23B781	0780	800230	90471	1	IMMUNIZATION ADMIN	120.00
SUBTOTAL:							120.00
TOTAL ANCILLARY CHARGES							4107.00
TOTAL CHARGES							4107.00
PAYMENTS							.00
ADJUSTMENTS							.00
BALANCE							4107.00

THANK YOU FOR CHOOSING SOVAH
MARTINSVILLE FOR YOUR HEALTHCARE NEEDS

PATIENT NO:	7806761243	SOVAH HEALTH	BILLING DATE	PAGE	3	02781
MED REC NO:	370912	320 HOSPITAL DR	07/14/22			
GUARANTOR NO:						
PATIENT:		MARTINSVILLE	VA 241121900	ADMITTED		DISCHARGED
HILL BRIAN D				09/21/18		09/21/18

DEPARTMENTAL CHARGE SUMMARY

DEPT	DESCRIPTION	AMOUNT
0712	PHARMACY	137.00
0715	IV SOLUTIONS - ADMIN	157.00
0718	MEDICAL SERVICES	553.00
0780	EMERGENCY SERVICES	3,260.00

REVENUE CHARGE SUMMARY

REV CD	DESCRIPTION	BILLABLE	NON-BILLABLE	TOTAL
0258	IV SOLUTIONS	157.00	.00	157.00
0260	IV THERAPY	585.00	.00	585.00
0270	MED SURG SUPPLY	497.00	.00	497.00
0272	MED SURG SUPPLY/STERILE	56.00	.00	56.00
0450	EMERG ROOM	2,555.00	.00	2,555.00
0636	DRUGS/DETAIL CODE	137.00	.00	137.00
0771	VACCINE ADMIN	120.00	.00	120.00

TOTAL CHARGES: 4,107.00

TOTAL PAYMENTS: .00

TOTAL ADJUST: .00

SOVAH HEALTH		SOVAH HEALTH		3a PAT. CNTL #	7806761243	4 TYPE OF BILL	0131
320 HOSPITAL DR		PO BOX 742401		b. MED. REC. #	000000370912		
MARTINSVILLE VA 241121900		ATLANTA		GA30374	5 FED. TAX NO.	6 STATEMENT COVERS PERIOD FROM	7 THRU
8042673700					20-2028539	092118	092118

8 PATIENT NAME	a	9 PATIENT ADDRESS	a	B10 FOREST ST, APT 2			
b	HILL, BRIAN D.		b	MARTINSVILLE		c	VA
d	24112		e				

10 BIRTHDATE	11 SEX	12 DATE	ADMISSION 13 HR	14 TYPE	15 SRC	16 DHR	17 STAT	18	19	20	21	CONDITION CODES				22	23	24	25	26	27	28	29 ACDT STATE	30
05261990	M			1	1		21																	

31 OCCURRENCE CODE	32 OCCURRENCE DATE	33 OCCURRENCE CODE	34 OCCURRENCE DATE	35 OCCURRENCE CODE	36 OCCURRENCE DATE	37 OCCURRENCE CODE	38 OCCURRENCE DATE
11	092118	A1	052690				

39 CODE	VALUE CODES AMOUNT	40 CODE	VALUE CODES AMOUNT	41 CODE	VALUE CODES AMOUNT
a	A3		410700		
b					
c					
d					

38 VIRGINIA PREM ELITE PLUSZ
PO BOX 4369
RICHMOND, VA 23220

42 REV CD	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
1	0450 ER VISIT LEVEL V	99285 25	092118	1	385000		
2	0636 N449281021588ML1	90714	092118	1	13700		
3	0771 IMMUNIZATION ADMIN	90471	092118	1	12000		
4							
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0001 PAGE 001 OF 001 CREATION DATE 092618 TOTALS 410700

50 PAYER NAME	51 HEALTH PLAN ID	52 REL INFO	53 ASG BEN.	54 PRIOR PAYMENTS	55 EST. AMOUNT DUE	56 NPI	57 OTHER PRV ID
VIRGINIA PREM ELITE PLU		Y	Y	000		1154419737	

58 INSURED'S NAME	59 P.REL	60 INSURED'S UNIQUE ID	61 GROUP NAME	62 INSURANCE GROUP NO.
HILL, BRIAN D.	18	690024628015		

63 TREATMENT AUTHORIZATION CODES	64 DOCUMENT CONTROL NUMBER	65 EMPLOYER NAME

66 DX	S80211A	S20319A	F840	E119	F429	Z888	68
0							

69 ADMIT DX	70 PATIENT REASON DX	M25562	S80211A	71 PPS CODE	72 ECI	73
74 PRINCIPAL PROCEDURE CODE	75 OTHER PROCEDURE CODE	76 ATTENDING NPI	77 OPERATING NPI	78 OTHER NPI	79 OTHER NPI	80 REMARKS
		154673895				B3282N00000X

80 REMARKS	81 CC a	82 LAST	83 FIRST
	B1W	INCHMAN	BRANT
	U		

Billing Provider National Provider Identifier (NPI)	Billing Provider Name	Servicing Provider National Provider Identifier (NPI)	Servicing Provider Name	Claim Number	Legacy Claim Number	Service From Date	Service Through Date	Paid Date	Primary Diagnosis Code	Primary Diagnosis Name	Claim Line	Pro- cedure Code	Procedure Name	NDC	Drug Brand Name	Billed Amount	Paid Amount	Claim Enc Code
1033143466	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$1,838.00	\$171.86	Total
1033143466	EDNA E EKUBAN-GORDON , MD	1033143466	EDNA E EKUBAN-GORDON , MD	T1804160138747BCPEPO	2018106923412601	11/19/2017	11/19/2017	3/23/2018	S0181XA	Laceration w/o foreign body of oth part	1	99285	EMERGENCY DEPT VISIT			\$1,450.00	\$122.22	Y
1033143466	EDNA E EKUBAN-GORDON , MD	1033143466	EDNA E EKUBAN-GORDON , MD	T1804160138748BCPEPO	2018106923412701	11/19/2017	11/19/2017	3/23/2018	S0181XA	Laceration w/o foreign body of oth part	1	12013	RPR F/E/E/N/L/M 2.6-5.0 CM			\$388.00	\$49.64	Y
1386720183	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$9,123.62	\$760.23	Total
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	1	96361	HYDRATE IV INFUSION ADD-ON			\$9,123.62	\$760.23	Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	2	80053	COMPREHEN METABOLIC PANEL					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	3	82962	GLUCOSE, BLOOD BY GLUCOSE MONITORIN					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	4	84443	ASSAY THYROID STIM HORMONE					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	5	85025	COMPLETE CBC W/AUTO DIFF WBC					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	6	71010	CHEST X-RAY 1 VIEW FRONTAL					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	7	70450	CT HEAD/BRAIN W/O DYE					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	8	12002	RPR S/N/AX/GEN/TRNK2.6-7.5CM					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	9	96374	THER/PROPH/DIAG INJ IV PUSH					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	10	99284	EMERGENCY DEPT VISIT					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	11	93005	ELECTROCARDIOGRAM TRACING					Y

Billing Provider National Provider Identifier (NPI)	Billing Provider Name	Servicing Provider National Provider Identifier (NPI)	Servicing Provider Name	Claim Number	Legacy Claim Number	Service From Date	Service Through Date	Paid Date	Primary Diagnosis Code	Primary Diagnosis Name	Claim Line	Procedure Code	Procedure Name	NDC	Drug Brand Name	Billed Amount	Paid Amount	Claim Enc Code								
1417262056	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$50.85	\$50.85	Total								
1417262056	PUBLIC PARTNERSHIPS, LLC	1417262056	PUBLIC PARTNERSHIPS, LLC	T1803140066 260BCPEPO	20180739 25265501	11/19/2017	11/19/2017	3/9/2018	Z139	Encounter for screening, unspecified	1	S5150	UNSKILLED RESPITE CARE, NOT HOSPICE			\$50.85	\$50.85	Y								
1891728564	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$173.00	\$44.25	Total								
1891728564	MAROON B KHOURY	1891728564	MAROON B KHOURY	T1804160243 055BCPEPO	20181069 33785201	11/19/2017	11/19/2017	3/28/2018	S0990XA	Unspecified injury of head, initial enco	1	70450	CT HEAD/BRAIN W/O DYE			\$143.00	\$36.48	Y								
1891728564	MAROON B KHOURY	1891728564	MAROON B KHOURY	T1804160243 056BCPEPO	20181069 33785301	11/19/2017	11/19/2017	3/28/2018	R0789	Other chest pain	1	71010	CHEST X-RAY 1 VIEW FRONTAL			\$30.00	\$7.77	Y								
1154419737	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$4,107.00	\$183.27	Total								
1154419737	Danville Regional Medical LLC dba Sovah Health-Dan	1154419737	Danville Regional Medical LLC dba Sovah Health-Dan	T2006260460 549BCPEIR	20201789 34474401	9/21/2018	9/21/2018	2/19/2019	S80211A	Abrasion, right knee, initial encounter	1	99285	EMERGENCY DEPT VISIT			\$4,107.00	\$183.27	Y								
1154419737	Danville Regional Medical LLC dba Sovah Health-Dan	1154419737	Danville Regional Medical LLC dba Sovah Health-Dan	T2006260460 549BCPEIR	20201789 34474401	9/21/2018	9/21/2018	2/19/2019	S80211A	Abrasion, right knee, initial encounter	2	90714	TD VACC NO PRESV 7 YRS+ IM	49281021588	TENIVAC 5-2/0.5ML SYRINGE			Y								
1154419737	Danville Regional Medical LLC dba Sovah Health-Dan	1154419737	Danville Regional Medical LLC dba Sovah Health-Dan	T2006260460 549BCPEIR	20201789 34474401	9/21/2018	9/21/2018	2/19/2019	S80211A	Abrasion, right knee, initial encounter	3	90471	IMMUNIZATION ADMIN					Y								
1184674129	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$512.10	\$140.10	Total								
1184674129	MARTINSVILLE CITY PUBLIC SCHOOLS	1184674129	MARTINSVILLE CITY PUBLIC SCHOOLS	T1903260234 915BCPEPO	20190859 26883002	9/21/2018	9/21/2018	10/9/2018	S83104A	Unspecified dislocation of right knee, i	1	A0429	AMBULANCE SERVICE, BASIC LIFE SUPPO			\$512.10	\$140.10	Y								
1184674129	MARTINSVILLE CITY PUBLIC SCHOOLS	1184674129	MARTINSVILLE CITY PUBLIC SCHOOLS	T1903260234 915BCPEPO	20190859 26883002	9/21/2018	9/21/2018	10/9/2018	S83104A	Unspecified dislocation of right knee, i	2	A0425	GROUND MILEAGE, PER STATUTE MILE					Y								
1427005008	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$874.00	\$82.90	Total								
1427005008	EMERGENCY COVERAGE CORPORATION	1154673895	BRANT D HINCHMAN , DO	T1811160170 283BCPEPO	20183209 20497302	9/21/2018	9/21/2018	10/5/2018	S80211A	Abrasion, right knee, initial encounter	1	99284	EMERGENCY DEPT VISIT			\$874.00	\$82.90	Y								
1427005008	EMERGENCY COVERAGE CORPORATION	1154673895	BRANT D HINCHMAN , DO	T1811160170 283BCPEPO	20183209 20497302	9/21/2018	9/21/2018	10/5/2018	S80211A	Abrasion, right knee, initial encounter	2	99053	MED SERV 10PM-8AM 24 HR FAC					Y								
Claim Enc Code= Encounter Claim through Managed Care (Yes or No)																							GRAND TOTALS	\$33,357.14	\$2,866.92	
NDC=National Drug Code																										



delirium

(deh-LEER-ee-um)

A mental state in which a person is confused and has reduced awareness of their surroundings. The person may also be anxious, agitated, or have less energy than usual and be tired or depressed. Delirium can also cause hallucinations and changes in attention span, mood or behavior, judgement, muscle control, and sleeping patterns. The symptoms of delirium usually occur suddenly, last a short time, and may come and go. It may be caused by infection, dehydration, abnormal levels of some electrolytes, organ failure, medicines, or serious illness, such as advanced cancer.

More Information

[Delirium](#)

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Starts with Contains