



*NOTE: I recommend you request the inpatient and the emergency department records separately (list of ER records on page 2 of this document).*

### **APPLICATION FOR SUBPOENA DUCES TECUM**

- A. Any and all medical records of **<patient name and date of birth>**, from the date of his/her initial hospitalization on **<admit date>** until the present, including but not limited to:

For Inpatient Admission(s)

1. All admission notes;
2. All History and physicals;
3. All Consulting physician reports;
4. All nursing notes and flowsheets
5. All Operative/Procedure report(s);
6. All Radiology report(s), including CT's, MRI's, Ultrasounds, and Xrays **and all associated images**;
7. All Physician order sheets;
8. **All Medication Administration Records or flowsheets/log(s) of all drugs administered, including both PRN and scheduled drugs:**
  - a. name of drug(s);
  - b. date and time administered;
  - c. name and identification of personnel who administered said drug.
9. All Medical Progress Notes
10. All EKG Reports
11. All EEG Reports
12. All Laboratory/diagnostic test(s);
13. All Urine and serum Toxicology Report(s)
14. Any and all summaries of Medical History / Treatment from other disciplines, such as occupational, physical and speech therapists, mental health, social work, and case management.
15. Discharge Summary
16. Transfer Summary
17. Interim Summary



For Emergency Department/Trauma Services:

1. Admission History and Physical
2. Registration Forms, including face sheet
3. Triage Nursing Notes
4. All nursing notes and flowsheets
5. All Operative/Procedure report(s);
6. All physician summaries
7. All consulting physician reports
8. All Physician order sheets;
9. **All Medication Administration Records or flowsheets/log(s) of all drugs administered, including both PRN and scheduled drugs:**
  - a. name of drug(s);
  - b. date and time administered;
  - c. name and identification of personnel who administered said drug.
10. All Medical Progress Notes
11. All EKG Reports
12. All EEG Reports
13. All Laboratory/diagnostic test(s);
14. All Urine and serum Toxicology Report(s)
15. Any and all summaries of Medical History / Treatment
16. Discharge Summary
17. Transfer Summary
18. Interim Summary