



birth name: Richard Wilhelm Neubauer
 This is my Declaration of will, certificate documented!

I Hereby, birth name, Richard Wilhelm Neubauer 07/17/1977 birth data, with Diabetic type 1, in frame of harassment and ongoing violence against my Person as here described and defined with this my only one communication possibility

For female Nurse, that here described not to be touch from female Nurse, not at all, Not to talk with them if there don't where nothing on there had, to honor God, in frame of my Religion, here as known and defined as Celibate(not engaging in or characterized by sexual intercourse, leading a celibate life, Because he regarded sex outside marriage as sinful, he remained celibate all his life.—, Faith McNulty, He pursued her avidly, writing her as many as three letters a day and even offering a celibate marriage to appease her fear of sex.—, Ruth Franklin I'd been celibate for so long, what was another year without sex?—, Sue Grafton)

What the touching will be as sexual harassment interpret, please no LGBTQ shit, in frame of my religion and believe, as known you in duty and I in right, Please hereby for refill of Novolog, and Lantus as known 30 units per day, Novolog as much as I eat and what, Talk also just with Male Dr. if there is no Head coverage for female.

This is a description of rules of my Religion and need for my treatment, there is, no money, Universal Human Rights

The right to live! You can this declared it Tax revenue!

Can you read?

All other rights and agreements here <https://king3richardthe3.wixsite.com/grandmaster-templar>

If you refuse to treat me and don't recognize my rights as here described, is an automatically an agreement of paying of all bills result from this your decision.

birth name: Richard W. Belmont
 Neubauer

KE TO ACCEDOSSES

X-RAY and M.R.I. was refused to give to me

NEUBAUER

George Washington University Hospital
900 23rd Street, NW
Washington, DC 20037
<http://www.gwhospital.com/>
(202) 715-4000

Name: NEUBAUER, RICHARD WILHELM

Age: 46 Years Date of Birth: 7/17/1977

MRN: GWU5096694 FIN: GWU0000145094033 Arrival Time: 12/17/2023 17:40:00

Diagnosis: Hyperglycemia

Emergency Department Care Team:

Provider: ED MD, Staff Physician

The Emergency Department physician has reviewed the information that you have provided concerning medications that have been prescribed previously and found there to be no conflict with any therapy recommended by the Emergency Department physicians. Unless instructed by the Emergency Department physician to discontinue specific medications, you should continue medications prescribed by your regular doctor and follow-up with your doctor or with the physician/facility recommended by the ED as appropriate.

If you plan on operating a motor vehicle or using any dangerous equipment within the next several hours, please check with your physician or nurse to make sure that none of the medicines that you received in the Emergency Department could interfere with your performance of these tasks.

The physicians and staff of the GW Hospital encourage you to lead a healthy lifestyle. If you smoke, we strongly urge you to quit. Contact your local American Lung Association for additional information.

If you don't have a Primary Care Physician (PCP) or need a Specialist, one may have been assigned for follow up. If you would like assistance contacting them, or to explore other Physicians that better fit your needs, please call the Referral and Registration Center, (888) 449-3627 to be put in touch with a different PCP.

Allergies:

No Known Allergies

Vaccination/Immunologic Information

Prescriptions Given to Patient/Caregiver(s):

What	How Much	When	Instructions	Next Dose
insulin glargine (Basaglar KwikPen 100 units/mL subcutaneous solution)	30 units Subcutaneous	at Bedtime		

Patient Name: NEUBAUER, RICHARD

WILHELM

MRN: GWU5096694

FIN: GWU0000145094033

12/18/2023 09:11:06

Prescription Printed				
insulin lispro (Insulin Lispro KwikPen 100 units/mL injectable solution) Prescription Printed	15 units Subcutaneous	3 Times a Day Before Meals		
Non-Formulary Medication (BD PEN NEEDL 32GX4MM MIS) Prescription Printed			Instructions: SubCutaneous Once	

Medication Special Considerations:

Patient Education Materials Provided:

Hyperglycemia (High Blood Sugar)

Comment:

Follow-up Instructions:

With:

Address:

When:

Fam md No pcp, IMD

901 23RD ST NW
WASHINGTON, DC 200370000
(999)999-9999 Business (1)

Within Next
Available
Appointment

Comments:

You were evaluated in the ED for acute hyperglycemia (high blood sugar). You were appropriately treated with fluids +/- insulin and appropriate therapies, your lab work was reassuring and trended to confirm better control of blood sugars and you were therefore safe to discharge home with close outpatient follow-up.

Please make an appointment with your primary care physician as soon as possible to further manage your symptoms and care. If you do not have a PCP, please refer to the information provided here in your discharge instructions to establish care with a new physician provider.

Please continue to take your diabetes and other medications as prescribed, check your blood sugars regularly, adhere to your diabetes diet as best as possible, and discuss any further changes to your regimen with your primary care provider and/or endocrinological specialist.

Please return to the ED if you experience new or worsening inability to control your blood sugar on your current medication regimen, dizziness/fainting, unintended weight loss with or without increased appetite, increased urination with or without pain/bleeding, increased thirst despite increased fluid intake, significant abdominal pain, nausea/vomiting, inability to tolerate food/liquids by mouth, fevers, chills, or any other symptoms which should be immediately

evaluated by a physician..

Thank you for choosing George Washington University Hospital to evaluate and manage your condition. It was a pleasure providing medical care and we hope you stay happy, healthy, and safe!

High Blood Sugar (Hyperglycemia)

Too much sugar (glucose) in your blood is called high blood sugar (hyperglycemia). This can lead to 2 dangerous conditions called ketoacidosis and hyperosmolar hyperglycemic state. In severe cases, these can lead to fluid loss (dehydration) and coma.

Talk with your healthcare provider about what blood sugar range is normal for you. Work with your provider to make a plan for treating high blood sugar.

Possible causes of high blood sugar

- Having a poor treatment plan for diabetes
- Being sick
- Being under stress
- Taking certain medicines, such as steroids
- Eating too much food, especially carbohydrates
- Being less active than normal
- Not taking enough diabetes medicine

Symptoms of high blood sugar

High blood sugar may not cause symptoms. If you do have symptoms, they may include:

- Thirst, dry mouth
- Frequent need to pee
- Feeling tired or drowsy
- Upset stomach (nausea) and vomiting
- Belly (abdominal) pain
- Itchy, dry skin
- Blurry vision

- Fast breathing and breath that smells fruity
- Weakness
- Dizziness
- Wounds or skin infections that don't heal
- Unexplained weight loss if high blood sugar lasts for more than a few days

What to do

If you have symptoms of high blood sugar or think it might be high, check your blood sugar. If your blood sugar is high, do the following unless told otherwise by your provider:

- Take your diabetes medicines as prescribed. Doses of medicines such as insulin can be increased slightly if blood sugars stay high. But your provider must approve this. Don't adjust doses by yourself.
- Check your blood sugar more often, or as directed by your healthcare provider.
- Drink plenty of sugar-free, caffeine-free liquids such as water. Don't drink fruit juice.
- Follow your sick-day plan for taking medicine.
- Check your blood or urine for ketones as directed by your healthcare provider. If you have ketones, don't exercise. This may make your blood sugar higher.
- Call your provider if your blood sugar and ketones don't go back to your target range.



When you have hyperglycemia, drink plenty of water or other sugar-free, caffeine-free liquids.

Preventing high blood sugar

To help keep your blood sugar from getting too high:

- Control stress.
- When you're ill, follow your sick-day plan.
- Follow your meal plan. Eat only the amount of food on your meal plan.
- Stick to your exercise plan.
- Take your insulin or diabetes medicines as directed by your healthcare team. Also test your blood sugar as directed. If the plan isn't working for you, discuss it with your healthcare provider.

Other things to do

- Carry a medical ID card or a compact USB drive. Or wear a medical alert bracelet or necklace. It should say that you have diabetes. It should also say what to do in case you pass out or go into a coma.
- Make sure family, friends, and coworkers know the signs of high blood sugar. Tell them what to do if your blood sugar gets very high and you can't help yourself.
- Talk with your healthcare team about other things you can do to prevent high blood sugar.

When to call your healthcare provider

Call your healthcare provider right away if you have any of the following:

- Blood sugar that stays high even after treatment
- Symptoms of high blood sugar that don't get better
- Moderate or large amounts of ketones
- Confusion
- Shortness of breath or fast breathing
- Breath that smells fruity
- Vomiting or unable to eat or drink

© 2000-2023 The StayWell Company, LLC. All rights reserved. This information is not intended as a substitute for professional medical care. Always follow your healthcare professional's instructions.

Major Tests and Procedures:

The following procedures and tests were performed during your ED visit.

Laboratory or Other Results This Visit (last charted value for your 12/17/2023 visit)

Blood Gases

12/17/2023 6:47 PM

POC Lactate: 1.20 mmol/L

POC pH: 7.410 pH units -- Normal range between (7.350 and 7.450)

Ven Total CO2: 25 mmol/L -- Normal range between (25 and 29)

Ven HCO3: 24 mmol/L -- Normal range between (24 and 28)

Ven pH: 7.409 -- Normal range between (7.320 and 7.420)

Ven pO2: 75 mmHg -- Normal range between (25 and 40)

POC pCO2: 37.2 mmHg -- Normal range between (35.0 and 45.0)

POC pO2: 71 mmHg -- Normal range between (80 and 105)

POC Total CO2: 25 mmol/L -- Normal range between (23 and 27)

POC Bicarb: 24 mmol/L -- Normal range between (22 and 26)

POC BE: -1 mmol/L

POC O2 Sat: 94 % -- Normal range between (95 and 98)

Pt Temp: 37.0 DegC
Ven pCO₂: 38.7 mmHg -- Normal range between (41.0 and 51.0)
Ven ABE: 0.1 mmol/L
%O₂ Sat Ven: 95.0 % -- Normal range between (40.0 and 70.0)
Hgb-BG-Ven: 14.7 gm/dL -- Normal range between (14.0 and 18.0)
O₂ Content Ven: 09 VOL %
Ven Lactate: 1.7 mmol/L -- Normal range between (0.0 and 1.9)
Ven Std Base Excess: -0.1 mmol/L
Ven Std Bicarb Content: 24.4 mmol/L -- Normal range between (24.0 and 29.0)

Hematology

12/17/2023 6:47 PM

NRBC %: 0.00 %
Hct: 39.4 % -- Normal range between (42.0 and 52.0)
Hgb: 14.4 gm/dL -- Normal range between (14.0 and 18.0)
MCH: 31.4 pg -- Normal range between (25.4 and 34.6)
MCHC: 36.5 gm/dL -- Normal range between (33.0 and 37.0)
MCV: 85.8 Femtoliters -- Normal range between (80.0 and 100.0)
MPV: 10.6 Femtoliters -- Normal range between (7.2 and 11.1)
RBC: 4.59 x10⁶/mcL -- Normal range between (4.70 and 6.10)
WBC: 6.23 x10³/mcL -- Normal range between (4.80 and 10.80)
Plt: 222 x10³/mcL -- Normal range between (130 and 400)
Eos # Auto: 0.04 x10³/mcL -- Normal range between (0.00 and 0.65)
Immature Grans %: 0.2 % -- Normal range between (0.1 and 0.3)
RDW-CV: 11.5 % -- Normal range between (11.5 and 14.5)
Mono % Auto: 6 % -- Normal range between (4 and 9)
Lymph # Auto: 1.93 x10³/mcL -- Normal range between (1.00 and 4.80)
Immature Grans # Auto: 0.01 x10³/mcL -- Normal range between (0.01 and 0.03)
Neut % Auto: 62 % -- Normal range between (40 and 65)
Lymph % Auto: 31 % -- Normal range between (21 and 44)
Eos % Auto: 1 % -- Normal range between (0 and 5)
Baso % Auto: 0 % -- Normal range between (0 and 2)
Neut # Auto: 3.87 x10³/mcL -- Normal range between (1.80 and 7.00)
Mono # Auto: 0.35 x10³/mcL -- Normal range between (0.20 and 1.00)
Baso # Auto: 0.03 x10³/mcL -- Normal range between (0.00 and 0.20)
NRBC #: 0.00 x10³/mcL
CBC with Diff: CBC with Diff

Urinalysis

12/17/2023 9:54 PM

Ur Clarity: Clear
Ur Bacteria: None Seen
UR Glucose: >=1000 mg/dL
Ur Ketones: 15 mg/dL
Ur Nitrite: Negative

Ur Protein: Negative mg/dL
Ur RBC: 0 /HPF -- Normal range between (0 and 2)
Ur WBC: 1 /HPF -- Normal range between (0 and 4)
Ur Squam Epithelial: 0 /HPF -- Normal range between (0 and 4)
Ur Mucous: None Seen
Ur Hyal Cast: 0-2/LPF /LPF
Ur Color: Yellow
Ur Leuk Est: Negative
Ur Bili: Negative
Ur Blood: Negative mg/L
Ur Urobilinogen: 0.2 Ehrh units/dL
Ur Spec Grav: 1.037 -- Normal range between (1.003 and 1.035)
Ur pH: 6.5

Chemistry

12/18/2023 4:32 AM

POC Glucose: 279 mg/dL -- Normal range between (75 and 110)

12/18/2023 3:48 AM

MAR Glucose Result: 394

12/17/2023 8:47 PM

Estimated Creatinine Clearance: 135.35 mL/min

12/17/2023 6:47 PM

Creatinine: 0.7 mg/dL -- Normal range between (0.8 and 1.5)

Anion Gap: 12 mmol/L

BUN/Creat Ratio: 30

CO2: 20.0 mmol/L -- Normal range between (22.0 and 30.0)

Glucose Level: 677 mg/dL -- Normal range between (75 and 110)

Lactic Acid Lvl: 1.3 mmol/L

BUN: 21 mg/dL -- Normal range between (10 and 20)

Chloride: 93 mmol/L -- Normal range between (95 and 105)

Calcium: 9.5 mg/dL -- Normal range between (8.5 and 10.5)

Ethanol: <10 mg/dL

Potassium: 5.1 mmol/L -- Normal range between (3.5 and 5.0)

Sodium: 125 mmol/L -- Normal range between (135 and 145)

eGFR Pediatric: Not Reported

eGFR Cr: 115 mL/min/1.73m²

Pending Results

No Pending Results

Stay Connected

Managing your health is important. That's why we've made it easier than ever to stay connected and on top of your health needs. Our advanced patient portal allows you to:

- › View test results
 - › Manage prescriptions
 - › Access education
 - › And more
- SIGN-UP OR LOGIN TODAY!**



Common Emergency Awareness Tips

IS IT A STROKE?	Be FAST and Check for these signs:
BALANCE	Does the person have a sudden loss of balance?
EYES	Does the person have trouble seeing out of one of both eyes?
FACE	Does the face look uneven?
ARM	Does one arm drift down?
SPEECH	Does their speech sound strange?
TIME	Call 9-1-1 at any sign of stroke?

Heart Attack Signs

•**Chest discomfort:** Most heart attacks involve discomfort in the center of the chest and lasts more than a few minutes, or goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness or pain.

- **Discomfort in upper body:** Symptoms can include pain or discomfort in one or both arms, back, neck, jaw or stomach.
- **Shortness of breath:** With or without discomfort.
- **Other signs:** Breaking out in a cold sweat, nausea, or lightheaded.
- Remember, **MINUTES DO MATTER** If you experience any of these heart attack warning signs, call **9-1-1** to get immediate medical attention!

National Suicide Prevention Hotline. Help is Available. Speak with Someone Today.
1-800-273-8255

If you or someone you know is a victim of human trafficking, call now. Get help.
1-888-373-7888

