ADMINISTRATIVE REVIEW FORM FOR UNANTICIPATED HOSPITALIZATION

Individual's Name: Jayden Smith
Date of Unanticipated Hospitalization: 6.17.25 (Date of UHS discovery)
Major Unusual Incident Number: If unknown-leave blank and IA will complete (2025-001-0001)
Date Form Initiated: 6.18.25
Name of Person Initiating Form: Chris Sharp
Title of Person Initiating the Form: Home Manager
Contact Information for Person Initiating Form: 614 111-1212 Email: sharphomes@gmail.com
Provider Name: Sharp Provider Group

PART 1 – TO BE COMPLETED BY THE INDIVIDUAL'S PROVIDER

DESCRIPTION – Indicate which situation applies.

- ■ Hospitals admission lasting 48 hours or longer due to one or more of the specified diagnoses (i.e. aspiration pneumonia, bowel obstruction, dehydration, medication error, seizures, or Sepsis.)
- □ Hospital re-admission lasting 48 hours or longer due to any diagnosis that is the same diagnosis as a prior hospital admission lasting 48 hours or longer within the past 30 calendar days.

HISTORY/ANTECEDENTS: Explain what led to the unanticipated hospitalization.

On June 15, 2025, Jayden was watching TV in the living room after dinner when he had a major seizure. He fell off the couch and onto the floor. Direct Support Professional (DSP) Antonio Marinez responded right away. He protected Jayden's head and turned him on his side to help prevent choking. The seizure was a grand mal seizure and lasted more than 2 minutes.

Antonio called 911, and the squad arrived within 10 minutes. Jayden had more seizures in the ambulance and again after arriving at the hospital emergency room. He was given IV seizure medication when he got to the hospital. Seizures like this are not common for Jayden. Because of this, he was admitted to the hospital. He stayed there for 3 days while doctors ran tests to figure out what caused the seizures. After getting the IV medication, Jayden did not have any more seizures. He was released from the hospital after 3 days and returned home. His seizure medication (Keppra) was increased when he was discharged.

Describe the medical history of the individual.

Jayden does have a history of seizures and takes seizure medication regularly. His seizures are usually well controlled and only last a few seconds. This episode was very unusual for him. The last grand mal seizure he had was over 5 years ago.

Jayden is diagnosed with seizures, cerberal palsy, mild IDD, and scoliosis.

Have there been recent similar illnesses?

No recent seizures. Earlier in the week, Jayden had been diagnosed with a urinary tract infection (UTI). He seemed to be recovering well from it when the seizures happened.

If so, please describe the illness and date or the occurrence,

Urinary Track infection (UTI) diagnosed and treated on 6.10.25

What was the health of the individual in the 72 hours leading up to the hospitalization?

He was eating well and appeared healthy—when the seizures happened. No change in sleep or other behaviors.

Did the individual complain of feeling unwell or deviate from routine (e.g., change in behavior, eating, sleeping, or bathroom habits)?

Not other than the UTI.

SYMPTOMS AND RESPONSE - What were the individual's symptoms (e.g., fever, rash, bloody stool, or trouble breathing) and over what length of time?

He began seizing soon after dinner on 6.15.25.

What actions did the provider take to address the symptoms?

Sharp Homes was monitoring Jayden and he was receiving treatment for a UTI. After the seizure, Antonio responded immediately. He protected Jayden's head with a pillow and gently turned him on his side to help prevent choking or aspiration during the seizure. He called 911 and he received medical attention right away.

PART 2 – TO BE COMPLETED BY THE INVESTIGATIVE AGENT IN COLLABORATION WITH THE INDIVIDUAL'S TEAM

DETAILS OF HOSPITALIZATION

Date of Admission: 6.15.25

Date of Discharge: 6.18.25

WHEN UNANTICIPATED HOSPITALIZATION IS BASED ON A HOSPITAL ADMISSION LASTING 48 HOURS OR LONGER DUE TO ONE OR MORE OF THE FOLLOWING DIAGNOSES

Indicate which apply:

- □ Aspiration Pneumonia
- □ Bowel Obstruction
- □ Dehydration
- □ Medical Error
- ■ Seizure
- □ Sepsis

WHEN UNANTICIPATED HOSPITALIZATION IS BASED ON A HOSPITAL RE-ADMISSION LASTING 48 HOURS OR LONGER DUE TO ANY DIAGNOSIS THAT IS THE SAME DIAGNOSIS AS A PRIOR HOSPITAL ADMISSION LASTING 48 HOURS OR LONGER WITHIN THE PAST 30 CALENDAR DAYS

Indicate the diagnosis of the hospitalizations:

Not Applicable

Provide the dates of the prior hospital admission and discharge:

Jayden was hospitalized for seizures July 15, 2023.

No other previous hospitalizations to note.

DISCHARGE SUMMARY – Attach discharged summary. See attached

FOLLOW-UP APPOINTMENT/CHANGES TO MEDICATION/CONTINUING CARE – List the changes and the continuing needs of the individual.

Jayden has an appointment with his neurologist on 8/2/2025 for a follow up (Responsible: Chris Sharp)

His Keppra was increased to 750 mg per day post seizure. His provider picked up the medications on 6/18/2025 and made a change to his medication records.

The person responsible for these changes. Chris Sharp, Home Manager

Confirm follow-up appointments have been made. Neurology appointments has been confirmed for 8/2/2025

CAUSES AND CONTRIBUTING FACTORS

- □ Medication change
- □ Medication error
- □ Aspiration due to improper diet texture
- □ Refusal to follow diet
- □ Insufficient fluid intake
- ■ Chronic medical diagnosis that places individual at higher risk
- □ Refusal of staff assistance
- □ Lack of health care coordination
- □ Failure to monitor input/output of fluids
- □ Failure to follow bowel protocol
- □ Failure to provide timely medical care
- □ Failure to monitor urination and/or bowel movements
- ■ Other: Previous UTI diagnosis may have contributed

ADMINISTRATIVE REVIEW SUMMARY AND CONCLUSION

Jayden had a grand mal seizure at his home on June 15, 2025, shortly after dinner. Staff immediately contacted 911, and Jayden was taken by ambulance to Mercy Hospital. During transport, Jayden continued to have seizures, and he experienced another one upon arriving at the emergency room. He was given IV Keppra to stop the seizures once he arrived. Jayden had been recovering from a urinary tract infection (UTI) that was diagnosed on June 10, 2025. Leading up to this seizure, he had been feeling much better and was eating and acting normally. This seizure event was unusual and unexpected. Jayden was admitted to the hospital and remained there for 3 days while doctors ran tests to determine the cause of the seizures. No official cause was found. After receiving IV seizure medication, Jayden did not experience any further seizures. He was discharged from the hospital on June 18, 2025, with a seizure diagnosis.Jayden's seizure medication, Keppra, was increased to 750 mg per day. He is scheduled to follow up with his neurologist on July 1, 2025. Any further medication changes will be monitored by his neurologist.

Follow-Up and Review: the Investigative Agent (IA) reviewed the hospital discharge summary and medication administration records and confirmed that Jayden received appropriate and timely medical care. The prevention plan developed by the team addresses the cause and contributing factors appropriately.

PREVENTION PLAN – Describe the prevention plan being implemented to address causes and contributing factors (e.g., environmental change, staff training, medication changes, or diet change).

Jayden was discharged on 6.18.25 with a seizure diagnosis.

1. His team is aware of this most recent hospitalization and the information will be reflected within his service plan.
2. Jayden has an appointment with his neurologist on 8/2/2025 for a follow up (Responsible: Chris Sharp)
3. His Keppra was increased to 750 mg per day post seizure. His provider picked up the medications on 6/18/2025 and made a change to his medication records. (Responsible: Sharp Homes)
4. Support staff were trained on 6/18/2025 the new medication regime and will be watching Jayden closely for any other seizure related symptoms. (Responsible: Chris Sharp)
5. Beginning, 6-18-2025, his provider will keep a log of seizure activity.
6. The provider will notify the neurologist immediately with any concerns (Responsible: Chris Sharp)

Name of Investigative Agent Completing Form: Kathy Tyson

Date Form Completed: 6.18.25