CHRONOLOGY INTELLIGENCE - RN-VERIFIED

RN-Verified Evidence Chronology

Every published material event is traceable to the supplied record and reviewed under a defined nurse-verification protocol.

FICTITIOUS MATTER	DEFINED SCOPE
M.L. Treatment Sequence Review	One emergency-to-inpatient episode - March 14-16, 2025 - supplied record set through July 24, 2026
RELEASE	**REVIEW ACCOUNTABILITY**
Version 2.1 - Demonstration	RN reviewer: Jordan Ellis, RN (fictitious) QA reviewer: Morgan Lee, RN (fictitious)

RN-VERIFIED EVENTS	SOURCE-TRACEABLE	CONFLICTS PRESERVED	SCOPE DEFINED	ATTORNEY-READY

FICTIONAL DEMONSTRATION SAMPLE

This sample demonstrates structure and controls only. It does not concern a real patient, facility, attorney, expert, or legal matter.

DEFINED ACCOUNTABILITY

What RN-Verified Means

RN verification means that, before a material event is published in the client-facing chronology, a registered nurse checks the event against the supplied source record, confirms or corrects the date, time, provider attribution, event description, and source location, and identifies unresolved conflicts, ambiguities, unsupported statements, or suspected missing-source concerns.

Material event

A material event is selected for publication because it is relevant to the defined episode, date range, review purpose, or attorney question. It does not mean that every line from every supplied page is reproduced in the chronology.

Controlled technology use

Technology may assist with document inventory, OCR, deduplication, date extraction, and preliminary event organization. Technology-generated content remains unverified until reviewed under the defined RN process. A source link alone is not sufficient; the cited source must actually support the published event.

Verification status key

STATUS	WHAT IT COMMUNICATES
Technology Extracted	Internal proposed content. Not yet RN verified and not final client-facing fact.
RN Verified	Published material event checked against the supplied source under the defined protocol.
QA Verified	The applicable version-specific independent QA control was completed.
Source Conflict	Supplied sources disagree. The conflict remains visible.
Ambiguous	The source does not support only one responsible interpretation.
Unsupported	The proposed statement is not supported by the supplied record set.
Suspected Missing Source	The supplied record references material that was not located.
Expert Review Required	The question extends beyond factual verification into specialty opinion.

Scope limitation

Verification is performed within the agreed record set, date range, purpose, and written scope. It does not guarantee that the supplied records are complete and does not determine negligence, liability, standard of care, causation, damages, case value, legal deadlines, or expert opinion.

SOURCE CONTROL

Record Manifest and Missing-Source Review

The source manifest defines what was supplied, what was used, the page or Bates system, and the supplemental-record cutoff for this release.

SOURCE ID	DOCUMENT / FACILITY	DATE RANGE	PAGES	STATUS
ED-001	Emergency Department record - Bayview Regional	03/14-03/15/25	SAMPLE-0001-0059	Included
NURS-001	Nursing notes and flowsheets - Bayview Regional	03/14-03/15/25	SAMPLE-0060-0112	Included
IMG-001	CT abdomen/pelvis report	03/14/25	SAMPLE-0134-0141	Included
MAR-001	Medication administration record	03/14-03/16/25	SAMPLE-0149-0168	Partial
OR-001	Operative report	03/16/25	SAMPLE-0201-0222	Included

Missing-record list

PRIORITY	SUSPECTED MISSING SOURCE	WHY IT MATTERS	RECOMMENDED REQUEST
High	Native medication order and administration audit history	May clarify the order-to-administration sequence and conflicting documented times.	Request native order history, barcode scan data, and edit metadata.
High	Complete provider communication log	The supplied notes reference notification without the underlying communication record.	Request communication log, secure messages, and addenda.
Moderate	Complete EMS production	Arrival history references prehospital findings not included in the supplied set.	Request run sheet, rhythm strips, medication log, and transfer-of-care record.

Supplemental-record cutoff

This release includes records supplied through July 24, 2026. Later records require a written supplemental scope and may change event, conflict, or missing-source status.

PUBLISHED MATERIAL EVENTS

RN-Verified Evidence Chronology

Documented facts are stated neutrally. Nurse verification observations, unresolved questions, and matters reserved for counsel or experts remain separately labeled.

DATE / TIME	PROVIDER / FACILITY	PUBLISHED MATERIAL EVENT	SOURCE	STATUS
03/14/25 14:08	Triage RN Bayview Regional ED	Triage documents fever, tachycardia, abdominal pain, and confusion. No clinical conclusion is stated here.	ED-001 SAMPLE-0004	RN Verified
03/14/25 14:24 / 14:42	ED RN / MAR Bayview Regional ED	Two supplied sources document different antibiotic administration times. The MAR lists 14:42; a nursing narrative lists 14:24. Both remain visible pending native audit data.	MAR-001 SAMPLE-0154 NURS-001 SAMPLE-0087	Source Conflict
03/14/25 16:10	Radiologist Bayview Imaging	CT report documents findings concerning for perforated diverticulitis. Interpretation beyond the report wording is reserved for a qualified expert.	IMG-001 SAMPLE-0139	RN Verified
03/15/25 02:18	ICU receiving RN Bayview Regional	ICU note documents transfer, hypotension, and vasopressor initiation. The exact provider-notification time is not located in the supplied set.	NURS-001 SAMPLE-0109	Missing Source
03/16/25 07:35	Surgeon Bayview Regional OR	Operative report documents exploratory laparotomy and resection. This chronology does not decide whether earlier care met a standard of care.	OR-001 SAMPLE-0208	RN Verified

Separation of roles

Documented facts appear in the event column. RN corrections and verification statuses address source integrity. Unresolved factual questions remain in the register. Negligence, liability, standard of care, causation, damages, case value, and expert opinion remain reserved for counsel and qualified experts.

CORE DELIVERABLE

Ambiguity & Conflict Register

Unresolved record problems remain visible. The RN reviewer does not choose one version without explanation when the supplied record does not responsibly support that choice.

ACR-004	UNRESOLVED - SOURCE CONFLICT
EVENT / ISSUE	Medication administration time - 03/14/25
SOURCES	Source A: MAR-001, SAMPLE-0154 - 14:42 Source B: NURS-001, SAMPLE-0087 - 14:24
CONFLICT OR AMBIGUITY	Two supplied sources document different administration times.
RN REVIEW NOTE	The MAR and nursing narrative are internally readable; neither source explains the discrepancy. The published event preserves both times.
RECOMMENDED CLARIFICATION	Request the native MAR order history, barcode scan data, and edit metadata.
RESOLUTION SOURCE	Not resolved

ACR-005	UNRESOLVED - SUSPECTED MISSING SOURCE
EVENT / ISSUE	Provider notification after CT result
SOURCES	Source A: NURS-001, SAMPLE-0098 references provider notification Source B: communication source not located
CONFLICT OR AMBIGUITY	A narrative states the provider was notified, but the underlying message, call log, or audit record is not in the supplied set.
RN REVIEW NOTE	The chronology publishes the documented statement and separately identifies the missing source concern.
RECOMMENDED CLARIFICATION	Request secure messages, call logs, addenda, and relevant audit data.
RESOLUTION SOURCE	Not resolved

ACR-006	RESOLVED - SUPPLEMENTAL SOURCE
EVENT / ISSUE	Operative procedure description - 03/16/25
SOURCES	Source A: preliminary surgical note Source B: signed operative report OR-001
CONFLICT OR AMBIGUITY	The preliminary note and final signed report used different abbreviated procedure descriptions.
RN REVIEW NOTE	The later signed operative report supplies the complete procedure description. Both versions remain indexed.
RECOMMENDED CLARIFICATION	No further request recommended for this issue.
RESOLUTION SOURCE	OR-001, SAMPLE-0201-0222

CONTROLLED RELEASE

Verification Release Certificate

Release version 2.1 - Fictitious demonstration

DEFINED RECORD SET	VERIFICATION COUNTS
Five indexed source groups Supplemental-record cutoff: July 24, 2026 Date window: March 14-16, 2025	126 published material events RN verified 3 Ambiguity & Conflict Register entries 2 unresolved missing-source concerns
RN REVIEWER	**QA REVIEWER**
Jordan Ellis, RN Fictitious demonstration reviewer Verification date: July 29, 2026	Morgan Lee, RN Fictitious demonstration QA reviewer QA date: July 30, 2026

Verification statement

Within the written demonstration scope, each event designated material for publication was checked against the supplied source record for date, time when documented, provider attribution, event description, and source location. Corrections, unresolved conflicts, ambiguities, unsupported statements, and suspected missing-source concerns remain visible in the chronology or register.

Release limitation

This verification is limited to the supplied record set, date range, purpose, and written scope. It does not guarantee that the records supplied are complete. Critical Timeline is not a law firm and does not provide legal advice, diagnose or recommend treatment, determine negligence, liability, standard of care, causation, damages, case value, or legal deadlines, replace a qualified retained expert, or guarantee an outcome.

Jordan Ellis, RN (fictitious)

RN verification reviewer - July 29, 2026

Morgan Lee, RN (fictitious)

QA reviewer - July 30, 2026

Fictitious sample boundary

This document demonstrates the structure of an RN-Verified Evidence Chronology. It does not state or imply any conclusion about a real patient, facility, attorney, expert, or case.