INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY

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April 25, 2024 at 9:54:19 AM PDT
Memorial Hermann PAGES REMOTE CSID DURATION **STATUS** Memorial Hermann Received

4/25/2024 11:48:27 AM CDT PAGE 1/010 Fax Server

TRISTAR (Business Fax) To:

562-506-0355 Fax Number:

> Ana.Medrano@memorialhermann.org From:

NOTES: SECURE: LEMUS HILDA

Confidentiality Notice.

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Date and time of transmission: Thursday, April 25, 2024 11:47:42 AM

Number of pages including this cover sheet: 10

Good morning,

Please see auth request:

Claim Number: 231105003 DOI: 05/15/2024

Patient Name: LEMUS, HILDA Patient DOB: 11/27/1967

ORDERING DOC: DR. MICHAEL GREASER---NPI# 1811156979--5420 West Loop South 2400 Bellaire, TX 77401

MEMORIAL HERMANN Memorial City Hospital- TAX ID# 741152597—925 GESSNER RD STE 200, HOUSTON, TX

77024

CPT CODE: 20606 US GUIDED STEROID INJECTION JOINT LEFT PETINEURAL CSI

DX CODE: G57.32

ANA MEDRANO EZ CERT TEAM-PAR III Menorial Hernann Phone: 832-658-6410

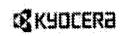
Fax: 713-512-6041

Lemus, Hilda (MR # 4732360)

Nodia Information

7 of 7 pages printed

Send Result Report



3/010 Fax Server

MFP

ECOSYS M2640idw

Firmware Version: 255,2000,002,505,2028,03.18

Acta No. 126725 Total Time: 2702-37

Page: 088

Complete

Georgeent:

G0C03571500246415114539

UT*Physicians		Michael Greaser MD 5420 W Loop South, Ste 2400 Bellairo, TX 7740 Tel: (713) 486-3550 Fax: (713) 393-1473 www.Michael Greaser MD: com		
7. P.	Imaging	Order Form		
M.Routing Read STAT Read Work Comp				
Date: A/12/2024		Diagnosis: Becones County		
Patient Name: Farner 4(1)44		ICD 9: 6-53-32		
DOB: 11/27/19UF	· · · · · · · · · · · · · · · · · · ·		***************************************	
MRN: 47373(00		Phone #: 6/32 - 6/4 - 09 2-3		
		Celi#:		
Laterality: Right Left	☐ Bilateral	MH	<u>us</u>	
	☐ Footw/ ☐ Footw/ ☐ Footw/ ☐ Anklew	MRI contrust (78780) contrast (73718) / contrast (73722) /o contrast (73723)	☐ Venous Doppler Lower Extremity (#3971) ☐ Arterial Doppler Lower	
CT Scan Foot (73708) Ankle/Hindfcot (73708) Other:	☐ Footw/ ☐ Footw/ ☐ Ankle w ☐ Ankle w	MRI contrast (73730) contrast (73718) / contrast (73722) / contrast (73723) contrast (73723)	☐ Venous Doppler Lower Extremity (#3971) ☐ Arterial Doppler Lower	
CT Scan Poot (73708) Ankle/Hindfcot (73700)	☐ Footw/ ☐ Footw/ ☐ Ankle w ☐ Ankle w	MRI contrust (73730) contrast (73718) / contrast (73723) /o contrast (73723) contrast (73720) contrast (73726)	☐ Venous Doppler Lower Extremity (93971) ☐ Arterial Doppler Lower Extremity w/ ABI (93922	

Memorial Hermann

Lemus, Hilda (MR # 4732360)

UT*Physicians		Michael Greaser MD 5420 W Loop South, Ste 2400 Bellaire, TX 77401 Tel: (713) 486-3550 Fax: (713) 383-1473 www.MichaelGreaserMD.com		
······································	Imaging C	rder Form		
Koutine Read STAT Read [#: 71/5 245(2/1/2/1	
Date: 4/12/1024		Diagnosis peroned neuerts		
Patient Name: Lemma +(1) \@		ICD 9: 6-53.32		
DOB: 11/27/19L17				
MBN: 47373(6C)		Phone #: 632 614 0923		
		Cell#:		
Laterality: Right Left	□ Bilateral			
CT Scan	hannananananananananananananananananana	IRI	US	
□ Foot(73700)	☐ Foot w/ cor		Venous Doppler Lower	
C Ankle/Hindfoot (73700)	☐ Foot w/o contrast (73718)		Extremity (93971)	
Ci Other:	☐ Ankle w/ contrast (73722)		☐ Arterial Doppler Lower	
. And the consesses of the consesses and the constitution of the consesses	☐ Ankle w/o contrast (73723)		Extremity w/ ABI (93922)	
Nuclear Medicine	☐ Leg w/ contrast (73720)		Other	
D Bone Scan - Whole Body	C Leg w/o contrast (73718)		Other	
(78305)	☐ Knee w/ contrast (73722) ☐ Knee w/o contrast (73721) ☐ Other:			
☐ Bone Scan - Limited (78300) ☐				
Fluoro Guided Injec	tion		S Guided Injection	
O Starold - Joint Block Worksna' Companieshi Worksna'		☐ Steroid - Tendon Sheath Injection		
W _b	Veight Bearing	Rays Non Weight B	earing	
☐ Foot 2-views	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ot (Met Heads)	☐ Tib-Fib 2-views	
[] Foot 3-views	CI Ankle 2-views		Knee 2-views	
C Heel 2-views	[] Ankle 3-views		☐ Knee 3-view w/ merchant	
C Lateral foot	Flatfoot series		☐ Femus 2-view	
☐ Sesamoid axial view	☐ Mortise ankle, 3 views		CI Hip 2-view CI AP Peivis	
Signature: CUCLINGE	L foot LP	* . * ***	reases MD (NPI 181156979) mith, NP-C (NPI 1932509799)	

Lemus, Hilda (MR # 4732360)



Hilda Lemus

56 y.o. female (DO8: 11/27/1967)



4/12/2024

Visit Type - Xr < 15 Minutes

Provider

Referring

ring Claire Nicole Nesmith, NP

Location

III Physicians Orthopedics at Memorial Hermann | Rockets

Onhopedic Hospital

18

Patient Demographics

1212 Wilson Or

Rosenberg TX 77471-2282

Emergency Contacts

No Contact (Other) - 000-000-0000

DED X

Khalici M Chaudhary

Language Spanish

Phone 832-514-0927

...

Guarantor

LH09052023LAMAR CISO

Relation Self

008 11/27/1967

Address 1212 WILSON DR

- Bosenberg, TX 77471-2232

Home 832-614-0927

WORK

Mobile 852-614-0927

Employed at LAMAR CISO (Full Time)

1887

Coverages

TRISTAR RISK MANAGEMENT/WCI

Subscriber LAMAR ISD

Relation Employee

506 10 7 643 762 139

Group # 10009052023

- No Secondary Coverage -

Cug Phone # (832)710-4444

Sechistrilage

Relation

Sept 113 #

Strong #



- Madacai Harand, #4737360 - Hospfall Account # - Contact Smini #168577851

- Regist \$5, 2008



Lemus, Hilda (MR # 4732360)

Worker's Compensation Insurance Verification Form

UT Physician Orthopaedic Department

Today's date: 9/13/2023

Doctor To See: GREASER

MRN # 4732360

Patient's Name; HILDA LEMUS:

Social Security Number: 213-9-

Referring Provider, PREMIER CARE thate of Birth, 11/27/1967

Compensable Injury (List All): LEFT FOOT

Date of injury: 9/5/2013

Reasonable & Necessary approved for eval and treat: 🖾 Y 🛄 N

Spoke With at insurance Company, TERRY CHERRY Disputes On File, NO

Employer, LAMAR ISD

PHONE NUMBER: (832) 223-6375 FAX NUMBER:

Address: 3911 AVE 1

CBy ROSENBERG State TX

21P: 77471

injury Verified By:

BWC 71 Police? ZI YES [] NO

Does carrier require a form other than DWC 73 for work status?

TYES

33 80

Insurance Company: TRISTAR

Address: P.O. BOX 2805

City: CLINTON

Susp. A

218: 52733

Adjuster TERRY CHERRY PHONE NUMBER: (489) 784-9045 EXT.

TX Dept of Ins. DWC Issued Claim #: 231105003 | Carrier Claim #: SAME FAX #: (361) 857-0125 CLAIMS FAX #:

is injury pending Doctor Visit? No

Pre-Certification: DME over \$500, SX, PT/OT, EMG, repeat MRI need precent TMC FOR PRE ACTH

Phone Number for Pre-Certification: (714) 565-7640 Fax Number for Pre-Certification: (562) 506-0355

Network? NO NETWORK

Current Treating Doctor PREMIER CARE

Verified By: GPUERTO Date: 69/15/2823

Lemus, Hilda (MR # 4732360)

4/15/24, 11/41 AM

Lensus, Hilos (MRN: 4732350) DOS: 11/27/1967 Enocumer Date: 04/12/224

Lemus, Hilda

MRN 4732360

7/010



Claire Nicole Nesmith, NP Nurse Practitioner Specially Orthopaedic Surgery Progress Notes Signed

Entrélantes Dete: 4/12/2024

UT ORTHOPAEDIC SURGERY FOOT AND ANKLE SERVICE MICHAEL GREASER, MD CLAIRE NESMITH, NP-C

Subjective:

Date of Visit: 4/12/2024

Chief Complaint: Follow-up hasted left fifth metatarsal base fracture; zone 1, sustained on 9/5/2023, left peroneal neuritis:

HPI:

Hilda Lemus is a 56 y.o. year old female who presents for follow-up of the above diagnosis. Since her last clinic visit, she completed the Medral Dosepak and has been taking her gabapentin for the left peroneal neuritis. She states that while she was taking the medication, her symptoms did improve, but upon completion her pain has now returned. She states the pain starts in her left low back and runs all the way down the leg towards the foot. She states most of her pain is centered around the outer aspect of the left knee. She states that the prolonged standing she has to do at work significantly worsens her pain. She states that when the pain is really bad, it causes some numbness about the lower leg. She denies any new injuries or falls and is here today for reevaluation and discussion of her treatment options moving forward.

Allergies:

Allergies

Naproxen

Reactions

Anaphylaxis

Tramadol

Cither

Outpatient Meds:

Current Outpatient Medications:

- gabapentin (Neurontie) 300 MG capsule. Taxe 1 capsule (300 mg total) by mouth in the morning and 1 capsule (300 mg total) at noon and 1 capsule (300 mg total) in the evening. Disp. 90 capsule. Rft. 0
- Teverthyroxine (Synthroid, Levoxy)) 50 MCG tablet, Take 1 tablet every day by grainoute before means for 90 days. Disp: . Rft.
- methylPREDNISolone (MEDROL, PAX.) 4 MG tablets. Follow schedule on package instructions. Disp. 21tablet, RR: 0

Lornus, Hilde (MRN 4732362) Phinted by Dansels Alvanado, MA (513539) at 4755/2024 31,43 AM

1.3

Lemus, Hilda (MR # 4732360)

41500 1501 AM

Lemma, Hilde (MPN 4732300) DOB: 11/27/1987 Environment Date: 04/12/2024

Review of Systems:

10 point review of systems reviewed with the patient and otherwise negative unless stated in the HPI.

Objective:

Vital Signs:

There were no vitals taken for this visit.

Physical Exam:

General: Alert and oriented, No acute distress.

Skin: Normal for ethnicity, no bruising or discoloration, warm dry, intact.

MSK: The patient arrives ambulatory with a steady gait in a pair of close toed shoes. Neutral foot alignment upon standing with no noted deformity or swelling. There is no tenderness at the base of the fifth metatarsal nor with metatarsal stressing. She is sensitive to palpation diffusely along the peroneal nerve distribution with a positive Tinel's at the proximal fibular head. She also does have reproducible pain along the sciatic nerve distribution with single limb rise. Dorsiflexion and resisted eversion remain intact but reproduces pain. No noted laxity in anterior drawer test. No other tenderness noted to the forefoot, midfoot, or hindfoot with palpation or manipulation. Sensation is intact to light touch at superficial peroneal, deep peroneal, tibial, sural, and saphenous nerves. 2+ dorsalis pedis, 2+ posterior tibialis.

Radiographs:

3 view weightbearing x-ray of the left foot reveals a well-healed lifth metalarsal base fracture. Joint spaces are overall well-preserved.

Procedures:

Procedures

Assessment

impression:

Hilda was seen today for pain.

Diagnoses and all orders for this visit:

Closed displaced fracture of fifth metatarsal bone of left foot with routine healing, subsequent encounter (Primary)

- XR foot 3+ views left. Future

Peroneal neuritis, left

 gatiapentin (Neurontin) 300 MG capsule; Take 1 capsule (300 mg total) by mouth in the morning and 1 capsule (300 mg total) at noon and 1 capsule (300 mg total) in the evening.

Acute left-sided low back pain with left-sided sciatica

Plan

Plan: The images, pathophysiology and plan of care were extensively discussed with the patient today via the language line interpreter computer. She did have a positive response to the Medrol Dosepak and gabapentin given to her during her last clinic visit for peroneal neuritis. I explained that she is likely having

Carrage, Hilda (ANAN 6732360) Printed by Clasicla Alvaredo, MA [613539] or 4752024 11:41 AM

289

9/010

Lemus, Hilda (MR # 4732360)

4/15/24, 11(4) AM

Lemus, Hilds (MRN 4732360) 0/08: 11/27/1967 Encounter Date: 04/19/2034

this irritation of the peroneal nerve along with low back pain with radiculopathy from the prolonged use of a boot after her injury. This boot causes an uneven gait mechanics which can exacerbate the symptoms she is experiencing. Today I extensively discussed treatment options and I recommend initiating formal physical therapy where they can work on range of motion, strengthening exercises and gait mechanics. I explained that they will have to work both on the left lumbar back pain with radiculopathy and peroneal neuritis. We also discussed a diagnostic and therapeutic perineural steroid injection around the common fibular nerve at the location of the proximal fibular head. I explained that this will be diagnostic and therapeutic in nature especially given she is now 7 months out from her injury. I recommend at least 4 to 6 weeks of physical therapy prior to reavaluation. She can continue with activities as tolerated by her symptoms. All questions were answered and they are in agreement with the plan of care.

I sperit >30 minutes in taking care of this patient including obtaining history, performing physical example reviewing prior charts and test results, documentation, counseling and co-ordination of care.

Electronically signed by Claire Nicole Newson, NP at 47.572024, 1645, AM

Office Visit on 4/12/2024 Access the rest with partients

Orders Placed

XR foot 3+ views left (Resulted 4/12/2024)

Medication Changes

au et 4/15/2024 10,45 akt

Siems

Visit Diagnoses

Primary: Closed displaced fracture of fifth metatarsal bone of left foot with routine healing, subsequent encounter

Peronesi neuritis, left (387,33)

Acute left-sided low back pain with left-sided sciatica 1454.47

Lemps, Hide (MRN 4732363) Printed by Daniela Alvarado, MA (513539) at 4/15/3924 11/41 AM

383

Chart Review Routing History

No routing history on file.

Lemus, Hilda (MR # 4732360)

Document Information

Physician Letter: Correspondence US GUIDED CSI ORDER- MHOSH 04/15/2024 00:00

Attached To: Hilda Lemus

Source Information

Daniela Alvarado, MA | Utp Ortho - Mhosh Plaza