# **View, Download, and Transmit Summary Document**

Patient	Lord Jan	nar D	Preferred Language	en			
Date of birth	June 13,	1986	Sex	Male			
Race	Black or African American		Ethnicity	Not Hispanic or Latino			
Contact info	Contact Primary Home:		Patient IDs	10010269 2.16.840.1.113883.3.3710.999.44.88800112344.7770000101 MM0000091205 2.16.840.1.113883.3.3710.3 MODMED 2.16.840.1.113883.3.3710.200.501 112344PAT000091334 2.16.840.1.113883.3.3710.200.500			
Document	ld	test-id-33	4244042 2.16	.840.1.113883.3.3710.0			
Document Created:	:	May 13, 2	2025, 17:43:39	9+0000			
Performer		Shuja Abl	bas, DPM				
Author		Shuja Abl	bas, DPM, IL	Avalon Park			
Contact in	fo	Work Place: 1660 Feehanville Dr Mount Prospect,IL600566023,US Tel (Work Place): 8473907666					
Encounter	· Id	17836961	2.16.840.1.1	13883.3.3710.999.44.88800112344.7770000111			
Encounter	Date Date	FromMay 9, 2025					
Encounter Participan		Leslie Kocinski					
Contact in	fo	1516 E 87 Chicago,I	Work Place: 1516 E 87th St Chicago,IL606196525,US Tel (Work Place): 8473907666				
Encounter Participan		Shuja Abl	Shuja Abbas, DPM				
Contact in	fo	1660 Fee Mount Pro	Nork Place: 1660 Feehanville Dr Mount Prospect,IL600566023,US Fel (Work Place): 8473907666				
Legal authentica	Legal Shuja authenticator		Shuja Abbas, DPM signed at May 13, 2025, 17:43:39 +0000				
1660 F Mount		1660 Fee Mount Pr	Nork Place: 1660 Feehanville Dr Mount Prospect,IL600566023,US Tel (Work Place): 8473907666				
Document IL A maintained by		IL Avalon	IL Avalon Park				
Contact info Work 1516 Chica							

# **Table of Contents**

# **Social History**

Code	Activity	Start Date	End Date
266919005 (SNOMED)	Never smoker		
Birth Sex	male		
Sexual orientation	Straight (Heterosexual)		
Gender identity	Identifies as Male		

# **Problems**

Problem	Code	Туре	Status	Date of Diagnosis	Date of Resolution
Acquired deformity of left foot (disorder)	774124003 (SNOMED)	Diagnosis	active	05/09 /2025	
Acquired deformity of right foot (disorder)	774123009 (SNOMED)	Diagnosis	active	05/09 /2025	
Ingrowing nail (disorder)	400097005 (SNOMED)	Diagnosis	active	05/09 /2025	
Tarsal tunnel syndrome of right posterior tibial nerve (disorder)	290521000119100 (SNOMED)	Diagnosis	active	05/09 /2025	
Tarsal tunnel syndrome (disorder)	47374004 (SNOMED)	Diagnosis	active	05/08 /2025	
Tarsal tunnel syndrome of bilateral posterior tibial nerves (disorder)	16206901000119103 (SNOMED)	Diagnosis	active	02/20 /2024	
Foot pain (finding)	47933007 (SNOMED)	Diagnosis	active	02/20 /2024	
Foot pain (finding)	47933007 (SNOMED)	Diagnosis	active	02/20 /2024	
Anxiety disorder (disorder)	197480006 (SNOMED)	Problem	active		
Chronic pain (finding)	82423001 (SNOMED)	Problem	active		
Depressive disorder (disorder)	35489007 (SNOMED)	Problem	active		
Gastroesophageal reflux disease (disorder)	235595009 (SNOMED)	Problem	active		
Chronic low back pain (finding)	278860009 (SNOMED)	Problem	active		
Complex regional pain syndrome (disorder)	128200000 (SNOMED)	Problem	active		
Peripheral nerve disease (disorder)	302226006 (SNOMED)	Problem	active		
Plantar fasciitis	202882003	Problem	active		

(disorder)	(SNOMED)			
Primary gout (disorder)	24595009 (SNOMED)	Problem	active	
Recurrent falls (finding)	279992002 (SNOMED)	Problem	active	
Sciatica (disorder)	23056005 (SNOMED)	Problem	active	
Ulcer (morphologic abnormality)	56208002 (SNOMED)	Problem	active	

### **Allergies**

Substance	RxNorm	Reaction(s)	Severity	Status	Start Date
No Known Allergies	N/A	N/A	N/A	N/A	N/A

#### **Medications**

No data

#### Instructions

- Care of congenital foot deformities is usually conservative as the majority of patients outgrow the condition with age. The condition can be observed most of the time if it is painless, however, some patients benefit from stretching with physical therapy, orthotics, and shoewear modifications. Surgery is reserved for patients who have a tight heel cord that does not respond to conservative management, or for patients that develop a rigid foot. Surgery may also be used to correct underlying causes of adult acquired deformities such as rheumatoid arthritis or posterior tibial tendon dysfunction.
- I counseled the patient regarding the following: Conservative and surgical management options were discussed with the patient with respect to risks, benefits, alternatives, and patient preference. The underlying etiology was reviewed and identified. Indications for onychocryptosis treatment included significant pain or infection such as it appears in this case. Counseling on proper footwear, such as wide toe box or open toe shoes, was encouraged and avoidance of high heeled or pointy shoes that are too narrow to prevent feet sliding toward the front of the shoe. Reviewed adequate nail cutting techniques, biomechanical factors, and encouraged the patient to keep a healthy BMI Expectations: Patients' risks and expectations were reviewed. Special conditions such as anticoagulation therapy, diabetes, hepatic disease, autoimmune disorders, cytokine inhibitor medications, HIV, oral retinoids, pregnancy and immunocompromised states were reviewed for possible complications in the future as such tend to delay healing or major disease. Expected duration of treatment cannot be determined at this time. Goals of care are to provide significant pain reduction, control infection locally, and provide the best cosmetic result possible. Patient education and instructions given including follow up appointment and what to do if condition worsens
- I counseled the patient regarding the following: Tarsal Tunnel Syndrome Care: Treatment for this condition depends on the particular cause of increased pressure on the tibial nerve. NSAIDS, activity modification, orthotics, and steroid injections can decrease the pain and discomfort associated with this condition. Surgery is warranted when significant symptoms do not respond to conservative management. Expectations: Tarsal tunnel syndrome is caused by compression of the tibial nerve in the tarsal tunnel. The tunnel is a space through which the tibial nerve travels behind the medial malleolus, a bony prominence on the inside of the ankle. Tarsal tunnel syndrome may result from trauma (i.e., ankle sprain), prior surgery, a soft tissue mass, a bony overgrowth, swelling, infection, or inadequate blood supply. Anything that causes abnormal presure on the nerve in the trsal tunnel may lead to symptoms. Patients may experience pain, tingling, numbness, or weakness in the foot. There may be particular findings of numbness and pain in the ankle and bottom of the foot, which may radiate upward toward the calf. There may be difficulty walking due to the lack of normal sensation and foot weakness. The diagnosis is made primarily on history and clinical evaluation. An electrodiagnostic study that measures how fast nerve impulses travel along the tibial nerve can be helpful as well. After surgery the majority of patients will have near complete symptom relief. Recovery may take several months. Contact office if: there is increased pain, loss of sensation, or progressive weakness of the foot.

#### **Results**

# **History of Procedures**

Code	Site	Date Diagnosed	Status
Durable medical equipment case management (procedure)		05/08/2025	
Durable medical equipment case management (procedure)		02/20/2024	
History of operative procedure on foot (situation)			
Documentation of past medical history (procedure)			

# Vital Signs

Vital Sign	Measurement	Date Recorded
Body Height	68.0 in	Fri May 09 14:06:57 UTC 2025
Body Weight	240.0 lbs	Fri May 09 14:06:57 UTC 2025
Body Mass Index	36.5 kg/m2	Fri May 09 14:06:57 UTC 2025

# **Plan of Treatment**

No data

# **History of Past Illness**

Problem	Code	Туре	Status	Date of Diagnosis	Date of Resolution
Complex regional pain syndrome (disorder) Legs and Arms	128200000	FINDING			
Plantar fasciitis (disorder)	202882003	FINDING			
Sciatica (disorder) chronic and persist	23056005	FINDING			
Primary gout (disorder) lower extremities and right shine	24595009	FINDING			
Chronic low back pain (finding) Sacroillitis and Bilateral Acute Sciatica	278860009	FINDING			
Recurrent falls (finding) ankle in stability	279992002	FINDING			
Peripheral nerve disease (disorder) burning clawing sensations stemming from nerve pain in feet	302226006	FINDING			
Ulcer (morphologic abnormality) stress induced/ H Pylori, b12 deficiency	56208002	FINDING			
Anxiety disorder (disorder)	197480006	FINDING			
Gastroesophageal reflux disease (disorder)	235595009	FINDING			
Depressive disorder (disorder)	35489007	FINDING			
Chronic pain (finding)	82423001	FINDING			

# **General Status**

### **Assessments**

1.Pronation Foot, Bilateral Counseling - Pes Planus Additional Notes 2.Onychocryptosis Counseling - Onychocryptosis OTC Medication Management 3.Tarsal Tunnel Syndrome, Right Counseling - Tarsal Tunnel Syndrome

### **Immunizations**

No data

# **Functional Status**

No data

#### **Mental Status**

No data

#### **Encounters**

Service provided at IL Avalon Park, 1516 E 87th St, Chicago, IL 606196525. Office phone number is 8473907666.

Encounter Diagnosis	Location	Date / Time	Туре
Pronation Foot, Bilateral (M21.6X2,M21.6X1) Onychocryptosis (L60.0) Tarsal Tunnel Syndrome, Right (G57.51)	IL Avalon Park	05/09 /2025 13: 50:00 UTC	99213

# **Reason for Referral**

No data

#### Goals

No data

### **Medical Equipment**

No data

### **Health Concerns**

No data

### **Consultation Notes**

No data

# **Laboratory Narrative**

No data

# **Pathology Narrative**

No data

# **Imaging Narrative**

No data

### **Procedure Notes**

No data

# **Progress Notes**

No data

### **Care Team**

Care Team Member Name	Role	Identifier	location	Telecom
Leslie Kocinski	Receptionist		1516 E 87th St, Chicago, IL 606196525, US	8473907666
Shuja Abbas, DPM	Doctor	1891375598	1660 Feehanville Dr, Mount Prospect, IL 600566023, US	8473907666

# **History And Physical Notes**

No data