

Vital Signs Medical Associates

450 East Main Street #4
Middletown, NY, 10940-2578
Tel: (845)381-5109
Fax: (845)531-4882

Fax

From: Vital Signs Medical Associates

Fax: (845)531-4882

Phone: (845)381-5109

To: (845)333-9009

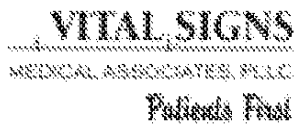
Date: 11/01/2019 16:14:01

Re: EMR documents for patient BERNADETTE STEINKAMP

Comments:

Patient: BERNADETTE STEINKAMP
DOB: 04/27/1955
Sex: female
Practice: Vital Signs Medical Associates

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Vital Signs Medical Associates
450 East Main Street #4, Middletown, NY 10940-2578
Tel: (845)381-5109 Fax: (845)531-4882

Alexander Fruchter, MD

Steinkamp, Bernadette

DOB: 04/27/1955, Female
Note No.29599488, Date: Oct 02, 2019

Printed 11:54 AM Oct 2 2019, User Location: Vital Signs Medical Associates

HPI

Complaint: WOUND RIGHT LATERAL MALLEOLUS

HPI: 64 year-old female-
WAS WRITTEN FOR DOXY BY DR LAINJO.
WILL HOLD OFF AND CONTINUE BAG BALM ONLY.
POOR HEALING D/T SYSTEMIC SCLEROSIS

Review of System

General: denies fevers, chills, anorexia, fatigue, sleep problems, malaise, weight change
Eyes: denies eye pain, change in vision, blurring, diplopia, irritation, discharge, photophobia
ENT: no PND, rhinitis, epistaxis, head congestion or ear pain, no ST
Cardiovascular: denies chest pain, palpitations, PND, orthopnea
Respiratory: denies cough, dyspnea, hemoptysis, wheezing, asthma, tuberculosis, COPD
Gastrointestinal: denies change in bowel habits, abdominal pain, hematochezia, nausea or vomiting
Genitourinary: denies nocturia, hematuria, frequency, urgency, incontinence
Musculoskeletal: SCLERODERMA WITH DIGITAL ULCERS++
Skin: MULTIPLE ULCERS OF DIGITS AND CELLULITIS BETTER 10/15/16
Neurologic: denies stroke, weakness, paresthesias, seizures, syncope, tremors, vertigo
Psychiatric: denies history of depression, suicidal ideation
Endocrine: denies history of diabetes, denies thyroid disease
HemeLymphatic: denies history of anemia, cancer
Allergic/Immunologic: denies hay fever, persistent infections, HIV exposure

HISTORIES & HABITS

Medical History: DIFFUSION CAPACITY (DLCO) 82% 4/16
DIGITAL ULCERS
SCLERODERMA
Surgery History: No Surgery History on Record
Family History: No Significant Family History
Immunization History: Unknown Immunization History
Tobacco: Patient does not smoke.
Alcohol: Patient does not drink alcohol.
Drug: The Patient does not use drugs.

VITAL SIGNS**Weight:** 121 lb 0.00 oz / 54.89 kg **Pulse Rate:** 62 Beats per Minute **BP:** 144 /70**PHYSICAL EXAM**General:**General:** UNDERWEIGHTEye:**Pupils:** equal, round, reactive to light and accommodationENT:**Otoscopic:** TM's clear, intact and translucent, EOM's intact 4/8/18Neck:**Neck:** No JVD, No lymphadenopathy, No thyromegaly; Trachea is midline; No bruit auscultatedBreast:**Inspection:** DeferredRespiratory:**Auscultation:** CRACKLES AT RIGHT BASE+++/ 8/4/18**Effort:** normal chest configuration; Good air entry auscultated bilaterally; Normal percussive tone bilaterally; No adventitious breath soundsCardiovascular:**Auscultation:** No gallup, rub or murmur auscultated; Regulated rate and rhythm**Palpation:** PMI 5th intercostal space, L midclavicular line**Femoral pulses:** deferred**Pedal pulses:** deferred**Peripheral circulation:** no cyanosis, clubbing, edemaGastrointestinal:**Palpation:** Bowel sounds are present and normoactive; No rebound tenderness**Liver/Spleen:** No organomegaly or tenderness detected**Hernias:** no hernias noted**Rectal:** deferredSkin:**Inspection:** ULCERS OF DIGITS NOTED ++ 2/8/18Neurologic:**Cranial nerves:** No focal abnormalities detectedMSE:**Orientation:** Alert and oriented to name, place and timeGU:**External genitalia:** DeferredLymph:**Neck:** no cervical adenopathy**Axillae:** no axillary adenopathy**Groin:** no inguinal adenopathy**Nodes:** No lymphangitis notedMSK:**Head and neck:** NORMAL**Spine, rib, pelvis:** LEFT FLANK PAIN++**RUE:** NECROTIC/ ISCHEMIC KNUCKLES-SUPERFICIAL ULCERS WITH INFECTION 10/1/15/ PALLOR OF THE DIGITS - HEALED ULCERS DISTALLY 8/23/17**LUE:** ###**RLE:** ###**LLE:** +2 edema

CURRENT MEDICATIONS

Cuprimine 250 mg capsule (Take 1 capsule(s) by oral route , 4 times per day)
Kadian 80 mg capsule,extended release (Take 2 capsule(s) by oral route , 2 times per day , for 30 days)
Plaquenil 200 mg tablet (Take 1 tablet(s) by oral route , 1 time per day)
Neurontin 300 mg capsule (Take 3 capsule(s) by oral route , 3 times per day)
Vitamin (once per day)
magnesium 250 mg tablet (2 , every 1 hour)
hydrocodone 10 mg-acetaminophen 325 mg tablet (Take 1-2 tablet(s) by oral route , every 4-6 hours)
Imitrex
folic acid 1 mg tablet (Take 1 tablet(s) by oral route , 1 time per day , for 90 days)
Vitamin D2 50,000 unit capsule (Take 1 capsule(s) by oral route , 1 time per week , for 90 days)
azithromycin 500 mg tablet (Take 1 tablet(s) by oral route , 1 time per day , for 3 days)
Eucrisa 2 % topical ointment (Apply by topical route , 2 times per day)
Astelin 137 mcg (0.1 %) nasal spray aerosol (Spray 2 spray(s) by intranasal route , 2 times per day)
Breo Ellipta 100 mcg-25 mcg/dose powder for inhalation
Eucrisa 2 % topical ointment

ALLERGIES

Penicillins
Terramycin
Avelox
Ketek
Biaxin
Nucynta
colchicine
amlodipine -- SWELLING OF LES
prazosin

ASSESSMENT & PLAN

Back pain (unchanged)
Plan: POST FALL AS ABOVE

SIGNATURE

This note has been electronically signed by Alexander Fruchter, MD on 11:54 AM Oct 2 2019.



If required, you can add an addendum to it.

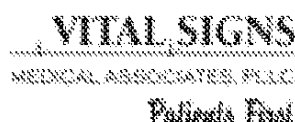
If required, you can add a patient annotation to it.

ADDENDUM

Eucrisa bid as per Dr.Fruchter, samples provided. Will recheck wound in 10 days. Encouraged to call with any questions or concerns should they arise before then. Jeanette McDevitt,LPN (by Alexander Fruchter on 12:35 PM Oct 11 2019)

Send Note

Print & Sign (Requires)

**Vital Signs Medical Associates**

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Tel: (845)381-5109 Fax: (845)531-4882

Alexander Fruchter, MD

Steinkamp, Bernadette

DOB: 04/27/1955, Female

Note No.29545329, Date: Sep 25, 2019

Printed 1:16 PM Sep 25 2019, User Location: Vital Signs Medical Associates

HPI**Complaint:** POST FALL.**HPI:** 64 year old female- SEEN AFTER FALLING AT WALMART IN THE MAIN AISLE IN THE DAIRY DEPARTMENT.

HAD FALLEN -SLIPPED ON A PUDDLE OF WATER-ON HER BACK .

SOME OTHER CUSTOMER ALSO FELL.

IN ANY CASE, DID NOT HIT HER HEAD (I FELL RIGHT ON MY BUTT-SITTING).

PAIN NOW IN THE LEFT FLANK REGION.

NO RADIATION NOW BUT WAS RADIATING UP HER BACK ON LEFT SIDE.

Review of System**General:** denies fevers, chills, anorexia, fatigue, sleep problems, malaise, weight change**Eyes:** denies eye pain, change in vision, blurring, diplopia, irritation, discharge, photophobia**ENT:** no PND, rhinitis, epistaxis, head congestion or ear pain, no ST**Cardiovascular:** denies chest pain, palpitations, PND, orthopnea**Respiratory:** denies cough, dyspnea, hemoptysis, wheezing, asthma, tuberculosis, COPD**Gastrointestinal:** denies change in bowel habits, abdominal pain, hematochezia, nausea or vomiting**Genitourinary:** denies nocturia, hematuria, frequency, urgency, incontinence**Musculoskeletal:** SCLERODERMA WITH DIGITAL ULCERS++**Skin:** MULTIPLE ULCERS OF DIGITS AND CELLULITIS BETTER 10/15/16**Neurologic:** denies stroke, weakness, paresthesias, seizures, syncope, tremors, vertigo**Psychiatric:** denies history of depression, suicidal ideation**Endocrine:** denies history of diabetes, denies thyroid disease**HemeLymphatic:** denies history of anemia, cancer**Allergic/Immunologic:** denies hay fever, persistent infections, HIV exposure**HISTORIES & HABITS****Medical History:** DIFFUSION CAPACITY (DLCO) 82% 4/16

DIGITAL ULCERS

SCLERODERMA

Surgery History: No Surgery History on Record**Family History:** No Significant Family History**Immunization History:** Unknown Immunization History**Tobacco:** Patient does not smoke.**Alcohol:** Patient does not drink alcohol.**Drug:** The Patient does not use drugs.

VITAL SIGNS

Weight: 120 lb 0.00 oz / 54.43 kg **Pulse Rate:** 68 Beats per Minute **BP:** 140 /78 **Pulse Oximetry:** 95 O2 Saturation (%)

PHYSICAL EXAMGeneral:

General: UNDERWEIGHT

Eye:

Pupils: equal, round, reactive to light and accommodation

ENT:

Otoscopic: TM's clear, intact and transluscent, EOM's intact 4/8/18

Neck:

Neck: No JVD, No lymphadenopathy, No thyromegaly; Trachea is midline; No bruit auscultated

Breast:

Inspection: Deferred

Respiratory:

Auscultation: CRACKLES AT RIGHT BASE +/+ 8/4/16

Effort: normal chest configuration; Good air entry auscultated bilaterally; Normal percussive tone bilaterally; No adventitious breath sounds

Cardiovascular:

Auscultation: No gallup, rub or murmur auscultated; Regulated rate and rhythm

Palpation: PMI 5th intercostal space, L midclavicular line

Femoral pulses: deferred

Pedal pulses: deferred

Peripheral circulation: no cyanosis, clubbing, edema

Gastrointestinal:

Palpation: Bowel sounds are present and normoactive; No rebound tenderness

Liver/Spleen: No organomegaly or tenderness detected

Hernias: no hernias noted

Rectal: deferred

Skin:

Inspection: ULCERS OF DIGITS NOTED +/- 2/8/18

Neurologic:

Cranial nerves: No focal abnormalities detected

MSE:

Orientation: Alert and oriented to name, place and time

GU:

External genitalia: Deferred

Lymph:

Neck: no cervical adenopathy

Axillae: no axillary adenopathy

Groin: no inguinal adenopathy

Nodes: No lymphangitis noted

MSK:

Head and neck: NORMAL

Spine, rib, pelvis: LEFT FLANK PAIN++

RUE: NECROTIC/ISCHEMIC KNUCKLES-SUPERFICIAL ULCERS WITH INFECTION 10/1/18/ PALLOR OF THE DIGITS - HEALED ULCERS DISTALLY 5/23/17

LUE: ###

RLE: ###

LLE: +2 edema

CURRENT MEDICATIONS

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Vitamin (once per day)
magnesium 250 mg tablet (2 , every 1 hour)
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Imitrex
folic acid 1 mg tablet (Take 1 tablet(s) by oral route , 1 time per day , for 90 days)
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ALLERGIES

Penicillins
Terramycin
Avelox
Ketek
Biaxin
Nucynta
colchicine
amlodipine -- SWELLING OF LES
prazosin

ASSESSMENT & PLAN

Back pain (new)
Plan: POST FALL AS ABOVE

SIGNATURE

This note has been electronically signed by Alexander Fruchter, MD on 1:16 PM Sep 25 2019.



If required, you can [add an addendum](#) to it.

If required, you can [add a patient annotation](#) to it.

Send Note

Print & Sign (Print only)

VITAL SIGNS
MEDICAL ASSOCIATES, P.L.L.C.
Patients First

Vital Signs Medical Associates
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Tel: (845)381-5109 Fax: (845)531-4882

Alexander Fruchter, MD

Steinkamp, Bernadette
DOB: 04/27/1955, Female
Note No.29452545, Date: Sep 13, 2019

Printed 11:35 AM Sep 13 2019, User Location: Vital Signs Medical Associates

HPI

Complaint: ULCER// SS-- SEE PHOTO++

HPI: 64 year old female-
seen with the right lateral malleolar ulcer- see the photo..
SHE WAS SEEN BY DR FRADLIS WHO RESTARTED THE MTX.

IS ON 4 TABS WEEKLY.

WILL CONTINUE BAG BALM AND WILL ADD LIDOCAINE GEL AT NIGHT AS THE WOUND PAIN WAKES
HER AT NIGHT.

Review of System

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VITAL SIGNS**Weight:** 120 lb 0.00 oz / 54.43 kg **BP:** 130 /80**PHYSICAL EXAM**General:**General:** *UNDERWEIGHT*Eye:**Pupils:** equal, round, reactive to light and accommodationENT:**Otoscopy:** *TM's clear, intact and translucent, EOM's intact 4/5/18*Neck:**Neck:** No JVD, No lymphadenopathy, No thyromegaly; Trachea is midline; No bruit auscultatedBreast:**Inspection:** DeferredRespiratory:**Auscultation:** *CRACKLES AT RIGHT BASE ++ 8/4/18***Effort:** normal chest configuration; Good air entry auscultated bilaterally; Normal percussive tone bilaterally; No adventitious breath soundsCardiovascular:**Auscultation:** No gallup, rub or murmur auscultated; Regulated rate and rhythm**Palpation:** PMI 5th intercostal space, L midclavicular line**Femoral pulses:** deferred**Pedal pulses:** deferred**Peripheral circulation:** no cyanosis, clubbing, edemaGastrointestinal:**Palpation:** Bowel sounds are present and normoactive; No rebound tenderness**Liver/Spleen:** No organomegaly or tenderness detected**Hernias:** no hernias noted**Rectal:** deferredSkin:**Inspection:** *ULCERS OF DIGITS NOTED ++ 2/8/18*Neurologic:**Cranial nerves:** *No focal abnormalities detected*MSE:**Orientation:** Alert and oriented to name, place and timeGU:**External genitalia:** DeferredLymph:**Neck:** no cervical adenopathy**Axillae:** no axillary adenopathy**Groin:** no inguinal adenopathy**Nodes:** No lymphangitis notedMSK:**Head and neck:** *Normal muscle tone; Normal and symmetrical muscle strength; No atrophy detected***RUE:** *NECROTIC/ISCHEMIC KNUCKLES-SUPERFICIAL ULCERS WITH INFECTION 10/1/15/ PALLOR OF THE DIGITS - HEALED ULCERS DISTALLY 5/23/17***LUE:** ###**RLE:** ###**LLE:** *+2 edema*

PRESCRIPTIONS

torsemide 5 mg tablet, Take 1 tablet(s) by oral route , 1 time per day , for 90 days , 90 Tablet &refills: 3

lidocaine 4 % topical gel, APPLY gel by Transdermal route , once per day , for 90 days , 60 Gram &refills: 2

CURRENT MEDICATIONS

Cuprimine 250 mg capsule (Take 1 capsule(s) by oral route , 4 times per day)

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Plaquenil 200 mg tablet (Take 1 tablet(s) by oral route , 1 time per day)

Neurontin 300 mg capsule (Take 3 capsule(s) by oral route , 3 times per day)

Vitamin (once per day)

magnesium 250 mg tablet (2 , every 1 hour)

hydrocodone 10 mg-acetaminophen 325 mg tablet (Take 1-2 tablet(s) by oral route , every 4-6 hours)

Imitrex

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Breo Ellipta 100 mcg-25 mcg/dose powder for inhalation

Eucrisa 2 % topical ointment

ALLERGIES

Penicillins

Terramycin

Avelox

Ketek

Biaxin

Nucynta

colchicine

amlodipine -- SWELLING OF LES

prazosin

ASSESSMENT & PLAN**Progressive systemic sclerosis (deteriorated)**

Plan: WITH DIGITAL ULCERS, CELLULITIS- ADD DOXY 10/1/15

Has been on amlodipine with questionable improvement.

Was started on methotrexate March 9 and is currently on her fourth week of treatment, taking 4 tablets of methotrexate. 4/6/16

diffusion capacity ordered today.

Cellulitis, unspecified (unchanged)

Plan: right leg- only on eucrisa as of today 5/21/19

Raynaud's syndrome without gangrene (recurring acute)

Plan: AMLO FAILED D/T EDEMA

NOTHING HELPED-AMLO-VIAGRA-

ADD PRAZOSIN 1 MG TID

SAMPLED EUCRISA

Edema, unspecified (new)

Plan: TORSEMIDE 5 MG BUT CAN REDUCE TO QOD IF TOO VIGOROUS

SIGNATURE

This note has been electronically signed by Alexander Fruchter, MD on 11:35 AM Sep 13 2019.



If required, you can [add an addendum](#) to it.

If required, you can [add a patient annotation](#) to it.